

Re-Contextualizing Mindfulness Meditation: Integrating Traditional Buddhist and Contemporary Approaches to Healing and Well-Being

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Abstract

Mindfulness meditation has become increasingly popular in the west as an intervention for a number of medical and emotional disorders. From its onset it has been presented as a secular form of Buddhist meditation in order to widen its accessibility. Within the Buddhist spiritual tradition, mindfulness is considered as one of several key practices that are deemed to be integral to the cessation of suffering and psychic pain, and the cultivation of unconditional emotional health and well-being, sometimes termed nirvana or enlightenment. This article argues that modern mindfulness meditation may show more robust clinical outcomes and benefits if it is re-contextualized by integrating the key elements of the Buddhist path to well-being, each of which addresses different aspects of human functioning and which holistically can profoundly transform the personality.

Keywords: mindfulness meditation, Buddhist mindfulness, Buddhist psychology, eight-fold path, mental health

Introduction

Twenty-five centuries ago in what is modern Nepal, Siddhartha Gautama, after many years of self-examination, reflection, and contemplation, awoke from the 'mirage' of distorted and destructive beliefs about his own identity, the nature of his mind, and of the phenomenal world. He had undergone a radical metamorphosis. He emerged from the limitations of his conditioned personality as

Siddhartha Gautama and realized the state of empty Being, the Buddha ('Awakened Mind'). Hence began a religious tradition, unlike any other, that emphasized the psycho-spiritual transformation of the self as the path to liberation. In the ensuing centuries, Buddhism spread from the Indian sub-continent to become the dominant religious tradition in a number of South and East-Asian countries. Much more recently, within the past few decades, Buddhism has spread throughout Europe and North America as well (Laumakis, 2008; Lopez, 2002; Seager, 2012; Schumann, 1989; Williams, 2000).

Growing Popularity of Secular Mindfulness Meditation

One of the benefits of the expansion of Buddhism to the West has been an explosive growth of interest in meditative practices among the public at large accompanied by a corresponding scientific interest in Mindfulness Meditation. Popularized by the work of Jon Kabat-Zinn (1990, 2003), this most well known aspect of Buddhism has received intense research interest. Within the last few decades, hundreds of studies have demonstrated that Mindfulness Meditation could significantly enhance physical and mental well-being, alleviating dysphoric emotions, improving quality of life, and reducing disability in a wide range of mental and physical disorders (e.g., Chiesa & Serretti, 2011; Siegel, Germer, & Olendzki, 2009). In addition to showing benefits on mental and physical well-being, extraordinary claims for Mindfulness Meditation are also often made (e.g., modifying the structure of the brain, slowing down cellular aging, increasing longevity, improving the academic and social performance of children; Meiklejohn, Phillips, Freedman, et al., 2012). No doubt we are in a 'Mindful Revolution' with a growing commodification of mindfulness through an ever increasing number of books, treatment manuals, websites and apps that outline, step-by-step, methods to practice mindfulness meditation. Mindfulness-based interventions are now offered throughout healthcare and educational systems throughout the world and are widely available to the public (Chiesa, 2010; Grossman, Niemann, Schmidt, & Walach, 2004).

The fact that the majority of research studies are clinical in nature, with the goal of ameliorating physical and mental distress, has influenced how secular Mindfulness Meditation is conceptualized and commodified. That is, it has become a method, approach, or technique to treat clinical forms of suffering. Not surprisingly, secular

Mindfulness Meditation is increasingly becoming referred to as an 'intervention,' 'treatment,' or 'therapy.' In its evolution into what is essentially a clinical tool, it has been purged of any elements that would associate it with its traditional roots in the Buddhist teachings (Kabat-Zinn, 1990).

This article will not address the significant and troubling methodological limitations (e.g., lack of adequate control groups, poor internal validity, short follow-up, small samples, high attrition rate), conceptual confusion (e.g., how to define and measure mindfulness), and arguable empirical efficacy (e.g., lack of evidence for the majority of clinical disorders, only modest effect for mindfulness in controlled trials) of secular Mindfulness Meditation (Bishop, Lau, Shapiro, et al., 2004; Baer, 2011; Chiesa, 2013). Rather, this article will point out the striking differences between secular Mindfulness Meditation and traditional Buddhist Mindfulness teachings, which, beyond sharing the term mindfulness, share little else. Mindfulness meditation has always been associated with the path to enlightenment, nirvana, unbounded bliss, and happiness, ever since Siddhartha sat under the pipal tree and 'awoke' as the Buddha. The traditional teachings on meditation are situated within a context of radical transformation of personality and character. There is little doubt that within some (but not necessarily all) Buddhisms, meditation is considered the most important pathway to personal and spiritual growth, arguably the central soteriological Buddhist praxis that can potentially lead to the final overcoming of suffering, that is, psychic and emotional distress (Thera, 1973; Wallace, 1999).

The mindfulness practices that are developing in Western culture have been challenged to adapt to the Western context but yet retain some of the promise and potential that is explicitly associated with the Buddhist mindfulness tradition. Secular mindfulness practices have required the elimination from traditional mindfulness any semblance of its comprehensive bio-psycho-social-ethical (i.e., Buddhist) context in order to make it adaptable or acceptable to a cultural (i.e., secular and modern) context far removed from its source (Monteiro, Musten, & Compson, 2015; Rapgay & Bystrisky, 2009). In and of itself this adaptation to a novel cultural context is not necessarily problematic. In the same way that Buddhism as a religion has adapted to every culture it has spread, fusing with local traditions and practices, there is no reason to expect that a similar

adaptation should not be made to mindfulness as it takes root in Western culture. Mindfulness Meditation has increasingly become, some might argue, reduced to a cognitive technique, focused primarily on the regulation of attention and accompanied by certain attitudes (e.g., nonjudgmental, acceptance, presence, openness). Thus, the issue has less to do with the adaptation of mindfulness but rather, given the radical re-conceptualization that has characterized secular mindfulness, it has to do with whether such interventions can be expected to yield outcomes that resemble at all what has been attributed to the traditional Buddhist healing meditative traditions. Or, does the de-contextualization of this traditional Asian healing practice diminish what can be expected? Does the secularization of Buddhist mindfulness, essentially its re-casting as a cognitive technique, require that the projections and expectations for secular mindfulness meditation be made more modest, especially as mindfulness interventions are tested with increasingly difficult clinical populations (e.g., psychosis, addiction, trauma)?

Limitations of Secular Mindfulness Meditation

What has often been left out of the discussion of the power of mindfulness is that the extraordinary benefits attributed to Mindfulness Meditation can only be realized if attention is paid to every aspect of the human experience, every level of functioning, and not simply the ‘cognitive’ one that modern or secular Mindfulness Meditation seems to privilege. This is the key point on which secular Mindfulness Meditation and the traditional, cultural, contextual, spiritual Mindfulness Meditation described in Buddhism differ sharply. For example, and as will be discussed in greater detail below, the greatest benefits of mindfulness can only be realized within an interpersonal context, in the relationship between oneself and others, and not simply in the self-regulation of attention or other cognitive, purely intrapsychic, processes. These kinds of discrepancies are indicative of the challenges of integrating traditional healing practices outside of its natural cultural matrix in a way that preserves its integrity and efficacy.

The traditional and secular approaches to meditation differ not only in their understanding of the nature of psychosocial health and happiness but also the means to achieve it. If one examines the most popular secular approaches to Mindfulness Meditation, such as

Mindfulness-based Stress Reduction (MBSR) and any of its many adaptations (Chiesa & Malinowski, 2011), one observes that the main practice can be described as essentially (usually) sitting down, engaging in mind-calming techniques through breath awareness, and then observing the natural flow of conscious mental content such as thoughts, feelings and sensations. One is encouraged to refrain from judging or otherwise engaging such content but rather noting how they arise and subside (Segal, Williams, & Teasdale, 2002). Gentle yoga, breathing awareness, and body scanning often accompany this core mindfulness practice. Content related to the needs of a specific clinical group (e.g., anxiety, chronic pain, trauma) might also be included. Nonetheless, the core mindfulness practice can be seen to be highly cognitive in the sense that the focus is on the conscious mind and the ongoing flow of cognitive events (e.g., thoughts, feelings, sensations, perceptions, fantasies). Most mindfulness-interventions are composed of 8 sessions (and often fewer) with a one-day retreat between Sessions 6 and 7. Participants are asked to practice mindfulness on most days in between sessions. This eight-week program is the basic paradigm that has been evaluated in most studies and believed to lead clinically significant reductions in distress and suffering as measured by symptom severity. The variables that may mediate these outcomes are not well known at present although there is a growing literature on a number of mechanisms, biological and psychological, of Mindfulness Meditation (Kok, Waugh, Fredrickson, 2013; Sauer, Walach, Schmidt, Hinterberger, Lynch, Bussing, & Kohls, 2013; Shapiro, Carlson, Astin, & Freedman, 2006) as well as Buddhist analyses (Grabovac, Lau, & Willett, 2011).

The outcomes included in virtually every study of Mindfulness Meditation focus on medical, emotional, or psychological symptoms, in contrast to Traditional Mindfulness in which the focus is on developing deep and abiding states of happiness, well-being, compassion, loving-kindness, and equanimity. These types of variables are never assessed in clinical studies, reflective of the much more narrow and restricted scope of secular Mindfulness Meditation than that of Traditional Mindfulness. To understand why this is a serious problem which may threaten the long-term viability of Mindfulness Meditation as an intervention or adjunct in the treatment of mental and physical disorders, a basic understanding of Buddhism and Buddhist psychology may be helpful.

Although one of the world's major religions, Buddhism can also profitably be considered a psychology, a philosophy, and a way of life. Buddhist psychology (like much of psychotherapy) is mainly concerned with transformative self-knowledge, the understanding of the self, the nature of the mind, and healthy ethical and moral behavior as a means of achieving not only release from emotional suffering but also to maximize states of authentic happiness and well-being, equanimity, compassion, loving-kindness, and transcendence. Buddhist psychology complements what is often lacking in Western psychology and psychotherapy, which has generally ignored the higher aspects of human experience, relationality, and potential. Buddhist psychology and other Contemplative Psychologies (e.g., Yoga, Advaita) offer non-Western and non-Medical (i.e., non-reductionistic) approaches to mental health, happiness, and flourishing, but only when the traditional sources of the teachings are respected and preserved.

The Psychology of Buddhist Mindfulness Meditation

The Buddhist path to well-being is expressed in the 'four Noble Truths' (or Insights), the Buddha's analysis of the human condition and briefly summarized in Table 1. The first and second truths/insights were concerned with the cause of emotional suffering (our reflexive reaction to pain) which the Buddha situated primarily (but not only) within the mind. The first and second 'Noble Truths' describe the situation we find ourselves in presently, our existential condition. The first 'Noble Truth' simply claims that *there is suffering (or psychic pain)*, our natural state. The important insight of this first truth destroys denial and forces us to recognize and encounter the existential reality that human life is characterized by unavoidable dissatisfaction, insufficiency, frustration, stress, and lack. No experience can be ultimately satisfying, and even the greatest pleasures and joys have within them the source of their own dissatisfaction. The second 'Noble Truth' tells us that craving is the condition for suffering. This insight points to the creative power of our minds, for better or worse, and its natural tendency to project our need and fears, veiling our perceptions of others, events, and objects with conditioned, fabricated, and illusory meanings. The second 'Noble Truth' reveals the profound psychology of Buddhism in

Table 1*The Four 'Noble Truths'*

Truth	Brief Description
There is suffering, psychic pain	This insight destroys denial and forces us to recognize and encounter the existential truth that psychic pain and stress is inherent in the nature of phenomena.
Craving (projection) is the condition for suffering	This insight points to the power of our minds (projecting, idealizing, and obsessing) is the basis for our psychic suffering.
Suffering (psychic pain) ceases when we fully understand our minds	This insight shows the power of the mind to heal suffering and produce genuine, unconditional happiness and flourishing.
The path to end suffering (psychic pain) requires the transformation of the personality	This insight is the Buddha's path to emotional well being and harmony (i.e., the Eight-fold path) and addresses every level of human functioning.

situating our suffering, our tendency towards psychic pain, in the way our minds function, defensively distorting subjective experience. The first two 'Noble Truths' thus describe our natural state, the unenlightened mind, characterized by the agony of suffering, facilitated by the habitual tendency to distort and misunderstand what we encounter (Hanh, 1998; Laumakis, 2008).

It is the third and fourth 'Noble Truths'/Insights that describe the Buddhist path to solving the problem of suffering identified in the first two 'Noble Truths.' The third and fourth 'Noble Truths' describe our potential for enlightenment, for lasting and durable happiness, and how to realize it. The third 'Noble Truth' tells us that suffering (or psychic pain) can cease only when we have understood how our minds work. This insight clearly points to our potential to fully overcome suffering and is often equated with nirvana. The experience of the third 'Noble Truth' is authentic and durable

happiness and joy, unconditional and stable, not determined by the vicissitudes of life. The fourth ‘Noble Truth’ reveals that the way to end suffering (psychic pain) and achieve unconditional happiness is through the systematic transformation of the personality. The insight of the fourth Truth is the Buddha’s path to emotional well-being and harmony (i.e., the Eight-fold path; Hanh, 1998). The Buddha describes step-by-step how durable mental and psychic health is multi-dimensional, multi-determined, transforming every aspect of our functioning, both intrapsychically and interpersonally.

Table 2 summarizes the major focus of each of the eight paths. Each path can be described as consisting of a specific ‘wisdom’ or realization to be developed, cultivated, and nurtured. The Eight-Fold Path, the journey to well-being, is a ‘sensory/perceptual-cognitive-interpersonal-behavioral-societal-emotional-metacognitive-physiological’ radical transformation of the entire personality. One could view these ‘paths’ as levels of human functioning or aspects of our body-mind (i.e., *nama-rupa*). The Buddhist approach is holistic, integrative, and comprehensive, neither reductionist nor simplistic (which many modern models of health tend to be) but also neither prescriptive nor moralistic.

As Table 2 shows, the Eight-fold Path is based on *Ethics* (or interpersonal behavior), focused on harmony, balance, interconnectedness, and skillful means, *Wisdom* (or genuine discernment into the nature of mind), focused on understanding the nature of phenomenal experience, cause and effect, and skill in interacting with the outer world, and *Meditation* (or fearless encounter with one’s experience situated with deep equanimity) focused on cultivating deep states of calm and harmony. The Eight-fold Path stresses the development of skillful interpersonal behavior as essential to true and lasting happiness and wisdom. In secular mindfulness meditation, with its emphasis on the cognitive aspects of human functioning, much is ignored or excluded, thus limiting severely its potential.

It is also important to not be misled by the tendency to present the Eight-fold path in a linear fashion, traditionally beginning with Skillful View and terminating with Skillful Concentration. This presentation is primarily for pedagogical reasons. One might consider the eight paths forming a sphere or matrix in which each of the eight paths interact with all of the other paths simultaneously with no path

Table 2

<i>The Eight-Fold path</i>		
	Wisdom	Brief Description
<i>The Path of Wisdom</i>		
View	Sensory-perceptual	Understanding cause and effect (karma); all experience, including the self, is transient (impermanent) and conditioned (empty); understanding the nature of suffering, cause of suffering, and the solution to suffering.
Intention	Cognitive	Treating ourselves and others with kindness, compassion and empathy, free of envy or hate; sensory moderation and balance.
<i>The Path of Ethics</i>		
Speech	Interpersonal	Monitoring our speech and thought patterns to avoid causing harm to self/other through gossip, hateful, divisive speech.
Action	Behavioural	Not intentionally hurting other beings by lying, violence, stealing, sexual impropriety, losing control of our behaviour.
Livelihood	Societal	Earning a living ethically with minimal harm to ourselves, other beings, and the environment.
<i>The Path of Meditation</i>		
Effort	Emotional	Preventing negative emotions (anxiety, desire, aversion, depression, doubt) or coping with their onset to avoid harming self and other.
Mindfulness	Metacognitive	Relating to our mental life without confusion, aversion, or clinging, neither identifying with mental experience nor avoiding it.
Concentration	Physiological	Cultivate inner stillness, calm, mental clarity, focus, and thus reducing mental and physical stress.

being primary, the beginning or end. In the traditional presentation of the fourth Noble Paths, there is an understanding that our biopsychosocial being is the crucible within which authentic happiness can be cultivated, nurtured and realized, and that attending to each of the eight aspects of our existence is necessary (Laumakis, 2008).

As is obvious from Table 2, Right Mindfulness and Right Concentration form the basis of the most common types of Buddhist meditation in our culture, including the secular mindfulness-based programs. Sometimes they are referred to as vipassana or shamatha, insight or concentration, open or closed, meditative practices, respectively. The Western or scientific models of mindfulness focus primarily on these specific aspects of Buddhist spirituality and in a somewhat simplified and reductionist manner at that (i.e., reducing Right Concentration to the regulation of breathing, relaxation, or one-pointed focus; reducing Right Mindfulness to cognitive regulation and observation of thoughts and feelings). Such programs seem to exclude (or may assume they already exist) the other components of the Eight-fold path and thus ignore the other aspects of human functioning. Furthermore, the interconnectedness between Right Mindfulness and Right Concentration with the other elements of Buddhist wisdom is not made explicit in secular mindfulness approaches. Without including all of the elements of the Eight-fold path, the benefits of any one aspect, such as Mindfulness or Concentration, can only be modest.

It is not surprising then that a close reading of the empirical research reveals the benefits of Mindfulness Meditation to be much more modest than what we are led to believe from the media, research reviews, and non-critical summaries of the empirical literature. Apart from the serious methodological limitations of the majority of the research, which precludes any firm conclusion to be made about Mindfulness-based interventions at the present time, and even when the research is adequate, Mindfulness-based programs are generally as effective as the active treatments with which they are compared. That is, the better the research design, the less likely that mindfulness will show any unique advantage over other treatments (Kuyken, Hayes, Barrett, Byng, et al., 2015; Sundquist, Lilya, Palmer, Memon, Wang, Johansson, & Sundquist, 2015). While it is difficult to predict what the study outcomes would be if the entire Eight-fold

path were included within Mindfulness-based interventions, interventions that focus on only two of the eight paths (Mindfulness, Concentration) and in a relatively unsophisticated fashion compared to the traditional Buddhist description of these paths, are limited in their effectiveness.

Indeed, the Buddhist spiritual literature suggests mindfulness meditation can significantly contribute to our personal well-being when it is part of a comprehensive and holistic approach to mental health. Each of the eight paths or levels of functioning described in Table 2 addresses a specific aspect of human functioning that serves to ensure that any other aspect or path is not used inappropriately or ineffectively. Each path represents a type of wisdom that contributes to a deep and lasting transformation of the self that is traditionally expressed as nirvana in the Third 'Noble Truth.'

Conclusion

One of the potential long-term dangers of the de-contextualization of mindfulness is that Mindfulness Meditation will eventually lose the lustre or appeal that it currently possesses as the modest empirical outcomes accumulate. Traditional Buddhist teachers have often found such de-contextualization to be a questionable approach to making meditation accessible, and many researchers in the field are now coming to the same conclusion. Modifying the traditional Buddhist context of Mindfulness in the name of simplicity, or aesthetics or cultural concerns must then also be accompanied by lowered expectations of what meditation can offer. While secularizing mindfulness and removing it from the traditional Buddhist healing context may have been necessary to popularize it and make it accessible, the cost may be that what is left may not always be worth the considerable investment required to deliver high-quality mindfulness interventions. We are learning that without attending to one's total life context, the benefits of Mindfulness Meditation may be sub-optimal, especially when it is applied to wounded and traumatized people for which it is increasingly offered (e.g., Chadwick, 2014). Since Mindfulness Meditation is neither a positive nor negative practice in and of itself and can be used for harm or health outside of the proper traditional context, Mindfulness Meditation can in fact become a morally ambiguous practice as we

are witnessing when corporate and military interests invest in mindfulness.

Re-integrating or re-contextualizing mindfulness meditation, re-introducing the traditional elements that make meditation truly effective, by no means requires the adoption of Buddhism as a religion or in any way practicing Buddhism. As can be observed in the brief descriptions of the eight paths listed in Table 2, these are highly practical, common-sense, and psychological activities that, when practiced and realized, allow mindfulness meditation to fulfil its potential in genuinely alleviating suffering and enhancing human flourishing (Olendzki, 2007). This represents the challenge the mindfulness movement currently faces, to integrate properly and respectfully the insights developed 25 centuries ago in India to the 21st century consistent with both the Buddha's message and our modern needs.

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