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### **Abstract**

Mindfulness is arguably one of the fastest growing areas of psychological research. However, due to the rapidity at which mindfulness has been taken out of its traditional Buddhist setting and assimilated by allied psychological disciplines, operational issues have inevitably arisen. One such issue relates to concerns over whether the 'spiritual essence' of mindfulness has remained intact in its clinically-orientated Westernised form. Indeed, successive Westernised models of mindfulness have invariably failed to consider (i) the cooperating or mechanistic role of other meditative and spiritual-practice agents, and (ii) the fact that rather than a tool for treating psychological and/or somatic illness, mindfulness was traditionally practised to facilitate a realisation of a person's full human potential and capacity for unconditional wellbeing. This chapter aims to establish robust foundations for the ongoing integration of mindfulness into Western psychological domains. Following an explication of a traditional Buddhist construction of mindfulness and how this differs from contemporary psychological interpretations, a model and definition of mindfulness is proposed which, whilst still applicable to secular mindfulness interventional approaches, is more congruent with the traditional Buddhist understanding. The proposed model is deemed to be suitable for investigating and relating to mindfulness as part of a positive psychological framework, and it acknowledges the aspects of mindfulness that are traditionally understood to foster flourishing and enduring happiness.

Key Words: Mindfulness; Buddhism; Meditation; Wellbeing; Mindfulness-based Interventions; Meditation Awareness Training; Four Noble Truths, Noble Eightfold Path; Death Awareness; Concentration Meditation; Insight Meditation; Ānāpānasati Sutta Satipaṭṭhāna Sutta; Enlightenment; Spirituality

"Upon a heap of rubbish in the road-side ditch blooms a lotus, fragrant and pleasing. Even so, on the rubbish heap of blinded mortals the disciple of the Supremely Enlightened One shines in resplendent wisdom"

(Buddha, as cited in Buddharakkhita, 1986, p. 23 [Dhammapada, 4, 58-59]).

## Introduction

According to a nationally representative survey commissioned by the Mental Health Foundation (MHF), 80% of British adults believe that contemporary pressured lifestyles cause stress and/or illness and that their health could be improved by slowing down and learning to be more aware of the present moment (MHF, 2010). A separate national survey commissioned by the MHF in the same report found that 72% of General Practitioners in the United Kingdom believe that their patients could derive health benefits by practising mindfulness meditation (MHF, 2010). Such beliefs are likely to have been influenced by findings from the increasing number of empirical studies exploring the psychological and physical health benefits of mindfulness practice. Indeed, clinically-focussed empirical enquiry represents the primary focus of mindfulness research (Shonin, Van Gordon, & Griffiths, 2015), and a specific Mindfulness-Based Intervention (MBI) known as Mindfulness-Based Cognitive Therapy (Segal, Williams, & Teasdale, 2002) is now advocated by both the UK National Institute for Health and Care Excellence (NICE) and the American Psychiatric Association (APA) for the treatment of recurrent depression in adults (APA, 2010; NICE, 2009).

Despite, or perhaps due to, the growing popularity of mindfulness amongst healthcare stakeholders, an increasing number of researchers, clinicians, and Buddhist teachers/scholars have raised concerns over the rapidity at which Buddhist principles are being integrated into clinically-focussed mindfulness interventions (e.g., Carrette & King, 2005; Howells, Tennant, Day, & Elmer, 2010; McWilliams, 2011, 2014; Rosch, 2007; Shonin et al., 2014a; Singh et al., 2014a; Van Gordon, Shonin, Sumich, Sundin, & Griffiths, 2014a). One of the primary concerns raised by such authors is that mindfulness was originally practised within the context of spiritual development, in which unconditional wellbeing (i.e., the complete liberation from suffering) was the ultimate goal, and where principles such as ethical awareness, compassionate outlook, and right intention underlay and supported the mindfulness practitioner's development (see Shonin et al., 2014a). This is obviously different than the use of mindfulness in most contemporary MBIs where emphasis is placed more on relieving psychological and/or somatic distress.

This chapter briefly explicates a traditional Buddhist construction of mindfulness and then goes on to: (i) discuss how traditional Buddhist depictions of mindfulness differ from contemporary psychological interpretations, and (ii) propose a model and definition of mindfulness that, whilst still applicable to secular mindfulness interventional approaches, is more congruent with the traditional Buddhist understanding.

## Mindfulness in Buddhism

Mindfulness is the commonly accepted English translation of the Pali word *sati* and the Sanskrit word *smrti*. Based on their literal meaning, the terms *sati* and *smrti* have previously been defined as the process of 'remembering' or 'recollecting' past events (see, for example, Gethin's [2011] review of mindfulness definitions). However, from the Buddhist perspective, such translations are unsatisfactory and overlook the fact that both the Sanskrit root '*smr*' and

the Pali 'sati' can also denote 'intense thought' (Har, 1999), 'mental activity' (Rhys Davids, 1881), or 'intense cognition' (Shonin et al., 2014a). Therefore, the most widely accepted interpretation of sati and smrti (and therefore mindfulness) are that these terms imply the 'full retention of mind' or 'full awareness of mind' (and therefore mind objects) in the present-moment (i.e., rather than the recollection of previous events).

In its current form, Buddhism comprises a diverse range of different practice traditions and there exist slight (and in some cases major) differences in how these traditions interpret and practice the Buddha's teachings. Consequently, there are numerous constructions and interpretations of mindfulness within the wider collection of traditional and contemporary Buddhist works. However, the authenticity of the Buddha's teachings on mindfulness as recorded in the Pali Canon (the original collection of Buddhist scriptures comprising three categories or 'baskets' [Pali: pitaka] of teachings covering: (i) discipline [Vinaya Pitaka], (ii) discourses on spiritual practice [Sutta Pitaka], and (iii) philosophy/metaphysics [Abhidhamma Pitaka]) is accepted by all Buddhist traditions, and the Pali Canon serves as an authoritative source for anybody wishing to understand the principles and characteristics of mindfulness as embodied by the Buddhist model.

Although there are numerous references to mindfulness throughout the Buddhist Pali Canon, arguably the most important discourses include the Ānāpānasati Sutta (Majimma Nikāya [MN] 118), Satipaṭṭhāna Sutta (MN 10), Mahasatipaṭṭhāna Sutta (Dīgha Nikāya [DN] 22), and Kāyagatāsati Sutta (MN 119). The Ānāpānasati Sutta (literally the discourse on mindfulness of breathing in and out) outlines a meditative technique by which the breath is used to 'tie the mind' to the present moment whilst awareness is directed, in turn, to 16 different meditative focus points (Shonin et al., 2014a). These 16 focus points occur in groups of four (i.e. tetrads) and each tetrad corresponds to one of the following four frames of reference: (i) body, (ii) feelings, (iii) mind, and (iv) phenomena (or mind-objects).

As documented in the \$\bar{A}n\bar{a}p\bar{a}nasati Sutta\*, meditatively observing the breath whilst bringing awareness to each of these frames of reference was taught by the Buddha as a means of cultivating the \*Four Establishments of Mindfulness\*. Understanding and cultivating the \*Four Establishments of Mindfulness\* (which likewise correspond to the four reference frames of body, feelings, mind, and phenomena) is the subject of the \*Satipatth\bar{a}na Sutta\* (literally the discourse on the establishment of mindfulness) and the \*Mahasatipatth\bar{a}na Sutta\* (literally the great discourse on the establishment of mindfulness). Having followed the instructions recorded in the \*\bar{A}n\bar{a}p\bar{a}nasati Sutta\* of how to use the breath as an attentional referent, the \*Satipatth\bar{a}na Sutta\* and \*Mahasatipatth\bar{a}na Sutta\* provide in-depth instructions on the intricacies of mindfulness practice and the process by which mindfulness — when correctly practised — fulfils the requirements for cultivating the \*Seven Enlightenment Factors\* that lead to total knowledge and release:

"And how, Bhikkhus [monks], do the Four Foundations [i.e., Establishments] of Mindfulness, developed and cultivated, fulfil the Seven Enlightenment Factors? Bhikkhus, on whatever occasion a bhikkhu abides contemplating the body as a body, ardent, fully aware, and mindful, having put away covetousness and grief for the world — on that occasion unremitting mindfulness is established in him. On whatever occasion unremitting mindfulness is established in a bhikkhu — on that occasion the mindfulness enlightenment factor [the first of the Seven Factors of Enlightenment] is aroused in him, and he develops it, and by development, it comes to fulfilment in him" (Nanamoli & Bodhi, 2009, p. 485; MN 118).

In terms of their context within the wider body of teachings expounded by the Buddha, the aforementioned discourses on mindfulness comprise one aspect of the *Noble Eightfold Path* 

to enlightenment. The *Noble Eightfold Path* is the path referred to by the Buddha in the first (and arguably the most important) teaching that he gave after attaining enlightenment. The first teaching given by the Buddha is known as the *Discourse that Sets the Wheel of Dharma in Motion (Dhammacakkappavattana Sutta*, Saṃyutta Nikāya, 56:11) and it was also during this teaching that the Buddha expounded the *Four Noble Truths*. In their condensed form, the *Four Noble Truths* are that (i) suffering exists, (ii) there is a cause to suffering, (iii) there is cessation of suffering (i.e., liberation), and (iv) there is a path that leads to the cessation of suffering. The *Noble Eightfold Path*, of which 'right mindfulness' constitutes the seventh aspect, is the path referred to in the last of the *Four Noble Truths* outlined above (i.e., that there is path that leads to the cessation of suffering).

Thus, within the overall collection of the Buddhist teachings, mindfulness comprises part of the path that leads to the cessation of suffering. The cessation of suffering, which in Buddhism is basically what is implied by the term 'liberation', is the ultimate goal of the Buddhist path and is a state believed to be characterised by qualities or capabilities such as: (i) omniscience, (ii) deathlessness, (iii) dwelling in emptiness, (iv) unconditional blissful abiding, (iv) freedom to take rebirth in any realm according to the needs of beings, (v) great compassion, and (vi) command over animate and inanimate phenomena (Van Gordon, Shonin, & Griffiths, 2015).

As indicated by the above description of the ultimate goal of mindfulness and Buddhist practice, the Buddhist delineation of wellbeing and happiness is one that stops nothing short of total spiritual liberation. Any other form of wellbeing, such as the wellbeing associated with material gain, favourable renown, good health, and other transitory circumstances, is considered by Buddhism to expose individuals to circumstances where it is easy to succumb to attachment – the primary cause of suffering referred to in the second of the abovementioned *Four Noble Truths* (Van Gordon et al., 2015). Undertaking mindfulness (and other Buddhist

practices) with the firm objective to attain spiritual liberation (and of helping others to do the same) is deemed in Buddhism to be a prerequisite for effective spiritual development and is referred to as *right intention* (Van Gordon et al., 2014a).

Right intention is the second aspect of the *Noble Eightfold Path* and the present authors have made a point of referring to it above in order to highlight a key principle of the *Noble Eightfold Path* (and of Buddhist practice more generally). As explained by the Buddha in the *Mahācattārisaka Sutta* (*The Great Forty Sutta*; MN 117), although the *Noble Eightfold Path* comprises eight individual elements (of right view, right intention, right speech, right action, right livelihood, right effort, right mindfulness, and right concentration), these elements should be practised and embodied as a single path. Indeed, just like the individual strands of a rope that have limited utility on their own but have strength and functionality when woven together, Buddhism asserts that spiritual practice is most effective when all of the individual aspects of the path are implemented in unison (Van Gordon et al., 2015). In other words, all authentic Buddhist teachings take their place as part of a cohesive whole and isolating and/or exclusively focussing on just one minuscule facet of the Buddhist path – such as mindfulness – will inevitably yield a result that falls short of the intended goal of enduring unconditional wellbeing (i.e., wellbeing that is not reliant upon external factors and that does not abate with time).

# Differences between Contemporary and Traditional Perspectives of Mindfulness

Compared to teaching mindfulness in the traditional Buddhist setting, there are obviously a range of additional factors that need to be considered when attempting to introduce and teach mindfulness to clinical populations. Of course, this is not to say that there is inherently something wrong with introducing individuals to the mindfulness teachings in a manner and context fundamentally different than that employed for over 2,500 years by Buddhist practitioners and teachers. However, it does mean that there is a risk of aspects traditionally

deemed to be prerequisites for effective mindfulness practice being overlooked or underrepresented in contemporary mindfulness interventional approaches. Consequently, the remainder of this section discusses: (i) what the present authors deem to be the key differences between the manner in which mindfulness is constructed, practiced, and taught within Buddhist versus clinical settings, and (ii) the implications of these differences for mindfulness research and practice.

1. Differences relating to intention for practising mindfulness: In general, participants of MBIs choose or are referred to receive mindfulness training for the primary purposes of alleviating psychological/somatic distress, or, as is the case in certain occupation-focussed MBIs, for improving work effectiveness and professional skills more generally (Van Gordon et al., 2014b). As already referred to above (see discussion on 'right intention'), this is fundamentally different than the Buddhist approach where mindfulness is undertaken with the intention of attaining liberation from suffering and helping others to achieve the same. The right intention required for effective mindfulness practice has been described by Buddhist teachers in the following manner:

"It is because people don't have the right intention that their spiritual practice fails to bear fruit. Some people sit in meditation for hours each day and/or they diligently study the teachings for many decades. But right intention is something that comes from within – it can be learned but it is actually quite intuitive. You either really want to evolve spiritually or you don't. You're either willing to subdue your ego or you're not. It is quite simple. In a nutshell, right intention means that due to knowing all phenomena are impermanent and our time here

is limited, we are ready to work hard in order to leave suffering behind" (Shonin & Van Gordon, 2014a).

2. Differences relating to when to practice mindfulness: Although certain MBIs (e.g., MBSR and MBCT) have been shown to be effective in the treatment of various different health conditions, there is a tendency for MBIs to be developed for the purposes of treating specific mental and/or somatic illnesses or complaints (e.g., stress, depression, eating disorders, addiction disorders, childbirth- and parenting-related issues, etc.). Consequently, many of the mindfulness exercises utilised in MBIs are specifically focussed on cultivating mindfulness in response to specific symptoms (e.g., somatic pain, distressing emotions, mental craving, etc.) and/or whilst engaging in specific behaviours (e.g., eating, gambling, work, etc.). This represents a departure from the Buddhist approach where far fewer divisions are made in terms of the different types of situations that warrant the spiritual practitioner to engage a mindful attention set. Indeed, as explained in the Ānāpānasati Sutta, Buddhism teaches that there is basically just one type of mindfulness to be practised which should be maintained at all times and in whatever situation a person finds themselves:

"Again, bhikkhus, a bhikkhu is one who acts in full awareness when going forward and returning; who acts in full awareness when looking ahead and looking away; who acts in full awareness when flexing and extending his limbs; ... who acts in full awareness when eating, drinking, consuming food, and tasting; who acts in full awareness when defecating and urinating; who acts in full awareness when walking, standing, sitting, falling asleep, waking up, talking, and keeping silent" (Nanamoli & Bodhi, 2009, p. 147; MN 10).

3. Differences in the way importance is assigned to mindfulness practice: Buddhism teaches that the spiritual practitioner should strive to ensure that they are continuously aware of the present moment and should regard mindfulness practice not as an optional endeavour, but as a matter of life or death (Shonin et al., 2014a). However, at the same time as educating others in the principles and importance of mindfulness, the Buddha taught that spiritual practitioners should ensure that they do not become attached to their practice:

"He who clings to nothing of the past, present and future, who has no attachment and holds on to nothing – him do I call a holy man" (Dhammapada, 26, 421; Buddharakkhita, 1986, p. 165).

Remaining unattached to spiritual practice relates closely to the need to cultivate a 'right view' (the first aspect of the *Noble Eight Fold Path*) which basically refers to the ability to perceive and apprehend the absolute or 'empty' nature of reality. By realising that phenomena originate in dependence upon each other and that they (therefore) lack intrinsic existence, Buddhism asserts that spiritual practitioners avoid the trap of perceiving the world in dualistic terms (Dalai Lama & Berzin, 1997). In the context of mindfulness practice, a dualistic perception means to regard mindfulness as a 'subject' that is practiced by an 'object' (i.e., the self). Perceiving mindfulness practice in 'subject-object' terms creates a separation between the practitioner and the present moment that they are supposed to be observing. This is problematic from the Buddhist perspective where relating to mindfulness in a dualistic manner is understood

to distance the spiritual aspirant from the realisation that they are deeply interconnected with, and inseparable from, the 'here and now' (Shonin & Van Gordon, 2014b).

Due to teaching mindfulness in isolation of core Buddhist principles such as 'right view' and 'emptiness', there is inevitably a greater tendency in MBIs for participants to become attached to the need to regard the present moment (and mindfulness practice) as something separate from themselves. This scenario has previously been referred to as the difference between 'being aware of the present moment' (i.e., the approach advocated in MBIs) and the arguably more spiritually profound position advocated by Buddhism of simply 'being the present moment' (Shonin & Van Gordon, 2014b).

4. Differences relating to mindfulness teacher competencies: Some concerns have been raised by scholars in the academic literature regarding the credibility and competance of MBI program instructors (e.g., Shonin et al., 2014a, Van Gordon et al., 2014a). These concerns principally relate to the fact that – in some cases – MBI instructors can have as little as 12 months' mindfulness practice and teaching experience following completion of a single eight-week course (MHF, 2010). Although efforts are underway to disseminate best-practice and assessment guidelines for MBI teachers (see Crane et al., 2011; Crane et al., 2013), the relatively short training period followed by some MBI instructors constitutes a major departure from traditional Buddhist values and conventions concerning mindfulness teaching (Shonin et al., 2014a).

Within Buddhism, meditation teachers typically train for many decades before they are deemed to have acquired the necessary experience for effectively instructing and guiding others in meditation practice (Van Gordon et al., 2014a). However, it is important to emphasise that rather than years spent in training or being able to claim receipt of a recognised Buddhist practice lineage, arguably the most important factor that qualifies an individual to teach Buddhism and/or meditation is the extent to which they have accumulated authentic spiritual realisation:

"If a person has genuine spiritual realisation, they are authorised to transmit the spiritual teachings. All titles, held-lineages, endorsements, acclamations, life accomplishments, life mistakes, and years spent in training are irrelevant...If a person is without genuine spiritual realisation, they have no such authority. All titles, held-lineages, endorsements, acclamations, life accomplishments, life mistakes, and years spent in training are irrelevant...Ultimately, true authorisation to transmit the spiritual teachings comes from awaking to the timeless truth of emptiness. It seems that some form of spiritual guide is required to effectuate this awakening" (Shonin & Van Gordon, 2013).

According to the *Canki Sutta* (MN 95), the Buddha explained that in order to be considered authentic, a meditation and/or Dharma teacher's actions and behaviour must not in any way be influenced by greed, hatred, or delusion (Nanamoli & Bodhi, 2009). This also appears to be the position of the 15<sup>th</sup> century Tibetan Buddhist saint Tsong-kha-pa who used words such as 'thoroughly pacified', 'serene' and 'disciplined' to describe the qualities of a suitable meditation instructor (Tsong-Kha-pa, 2004). Thus, in relation to contemporary interventional mindfulness approaches, it is argued that Buddhism places much greater importance on the experience and effectiveness of the meditation teacher – particularly in terms of the extent to which they can impart an embodied authentic transmission of the mindfulness teachings.

- 5. Differences relating to the use of judgment and discernment: The following definition of mindfulness, formulated and introduced by Kabat-Zinn, is arguably the most commonly employed definition of mindfulness in the scientific literature. He defines mindfulness as "paying attention in a particular way: on purpose, in the present moment, and non-judgmentally" (1994, p.4). The term 'non-judgmental' was probably employed in this definition in order to refer to the need for the mindfulness practitioner to accept (i.e., rather than reject or ignore) present-moment experiences. However, it has been previously argued that 'non-judgemental' could also be interpreted as meaning that mindfulness requires an attitude of indifference or even unresponsiveness to life situations and events (Shonin et al., 2014a). Consequently, from the Buddhist perspective, assigning non-judgemental awareness as a key facet of mindfulness is unsatisfactory because it appears to contradict core Buddhist principles relating to the need for the spiritual practitioner to apply discernment during all of their interactions (i.e., in order to ensure that they respond with compassion, wisdom, and ethical awareness).
- 6. Differences in interpreting the meaning of concentration and insight meditation: As referred to above, 'right mindfulness' (Pali: sammā-sati), which appears as the seventh aspect of the Noble Eightfold Path, cannot be separated from, and is essential to the maintenance of, each of the other aspects of the Noble Eightfold Path. Nevertheless, the fact that in the Noble Eightfold Path mindfulness appears immediately prior to 'right concentration' (Pali: sammā-samādhi) is significant because it implies that mindfulness is actually distinct from meditative concentration. Indeed, the Buddhist teachings explain that meditative concentration is basically the process of resting awareness on a

given meditative object (e.g., the breath, a visualisation, or even the mind or present moment more generally) with the intention of effectively calming and introducing tranquillity into the mind (Shonin et al., 2014a).

However, the Buddhist teachings explain that because the tranquillity associated with meditative concentration can be so blissful and inviting, it can actually trigger a loss of meditative concentration (Dalai Lama & Berzin, 1997). Therefore, the purpose of mindfulness is essentially to watch over the concentrating mind and make attentional adjustments as required in order to ensure that meditative concentration remains at its optimum. The reason why Buddhism asserts that this is important is because meditative concentration is a prerequisite for the development of insight/wisdom and what is known as 'right view' (Pali: sammā-ditthi) (Nanamoli, 1997; Khyentse, 2007). Spiritual wisdom or right view is basically the ultimate goal of Buddhist meditation because unlike the bliss associated with meditative concentration that provides only temporary relief from Dukkha (the Buddhist and Pali equivalent of the terms suffering and unsatisfactoriness), spiritual wisdom (Pali: paññā) severs the causes of suffering at their roots (Shonin et al., 2014a).

Thus, mindfulness effectively regulates the breadth and intensity of meditative concentration and therefore plays a vital role in the cultivation of meditative insight. However, according to the Buddhist model and for the reasons already outlined, mindfulness itself is distinct from meditative concentration as well as the meditative insight that it yields. Consistent with the aforementioned literal meaning of the Pali word *sati*, mindfulness is the process of 'remembering' to keep concentration placed in and on the present moment (or another meditative object) such that there is a constant arising and extraction of spiritual wisdom as the meditator attends with awareness to their daily duties and activities. This represents a fundamental departure from the way

in which mindfulness is conceptualised in the contemporary scientific literature where, with differing degrees of frequency, mindfulness has been (incorrectly) described as either being a form of (i) concentrative meditation, (ii) insight meditation (also known as Vipassana mediation – vipassna translates from the Pali as clear seeing or superior seeing), or (iii) both concentrative and insight meditation (see Shonin et al., 2014a).

7. Differences relating to the integration of death awareness: Each of the (previously referred to) principle Buddhist suttas on mindfulness emphasise the importance of cultivating mindfulness of death and impermanence. For example, the satipaṭṭhāna sutta, mahasatipatthāna sutta, and kāyagatāsati sutta each contain the Nine Charnel Ground Contemplations (contemplations involving seeing oneself as a decaying corpse – an inevitable outcome for the body), and the  $13^{th}$  exercise of the  $\bar{a}n\bar{a}p\bar{a}nasati$  sutta is specifically concerned with cultivating an awareness of impermanence. Impermanence is known in Buddhism as a 'mark of existence' and Buddhism asserts that without exception, phenomena are subject to dissolution (Khyentse, 2007). The Buddha taught that by infusing their spiritual and meditative practice with the realisation that they and everything around them are transient occurrences, individuals can begin to intuit the ultimate nature of reality and weaken their attachment to the belief in an inherently existing self (Shonin, Van Gordon, & Griffiths, 2013). It is therefore argued that the vital role that impermanence and death awareness play in supporting and optimising mindful awareness is an additional factor that has been overlooked in the majority of clinically-focussed MBIs.

### An Alternative Model and Definition of Mindfulness

In this section, an alternative model of mindfulness is explicated that, whilst still appropriate for use in public healthcare contexts, is intended to lessen some of the disconnect between traditional Buddhist and contemporary-secular mindfulness interpretations. However, given that mindfulness is studied and utilised by individuals from a broad range of backgrounds (e.g., Buddhist teachers, Buddhist practitioners, clinicians, health service providers and practitioners, academics, etc.), it is unlikely that there will ever be a definition and model of mindfulness that meets with universal acceptance. Therefore, readers should understand that the definition and discussion that follows is provided in the vein of attempting to advance understanding and further debate concerning mindfulness and to work alongside (i.e., rather than substitute) existent theoretical and operational models.

The present authors recently proposed that mindfulness can be defined as: *The process of engaging a full, direct, and active awareness of experienced phenomena that is (i) spiritual in aspect and (ii) maintained from one moment to the next* (Shonin et al., 2014b). The principles and meaning of the key aspects of the proposed definition can be understood as follows:

1. Full awareness refers to the fact that mindfulness is all-embracing and requires the individual to be accepting of all physiological and psychological experiences. This is the passive aspect of mindfulness. However, implicit within the meaning of this term is that the mindfulness practitioner's awareness should extend beyond their immediate environment and keep in mind the fact that phenomena are (i) impermanent, (ii) absent of intrinsic existence, and (iii) a cause of suffering if they become the object of attachment. Thus, the term 'full awareness' also accounts for the encompassing aspect of mindfulness.

- 2. Direct awareness means that there should not be a gap or delay between the experiencing of phenomena and awareness of this experience. In other words, mindfulness is not concerned with the remembering of past events, but involves being intricately aware in real time of all psychological and somatic experience. Direct awareness also implies that there should not be any separation between the individual and the object or objects of their mindful attention. This is the insight aspect of mindfulness.
- 3. Active awareness refers to the fact that mindfulness requires and facilitates the capacity to respond with skill, compassion, and discernment in any given situation. In other words, mindfulness not only involves observing the present moment, but it requires an active participation in it. Active awareness is the compassionate and ethical aspect of mindfulness.
- 4. Experienced phenomena means that mindfulness does not require excessive effort or the need to 'find' things to be mindful of. It means that 'experience now' is taken as the object of mindful awareness. This includes awareness of physiological, psychological, and environmental phenomena. This is the effortless or spontaneous aspect of mindfulness.
- 5. Spiritual in aspect refers to the traditional Buddhist meditation literature where mindfulness is contextualised as a spiritual (but not necessarily a religious) practice. It also refers to the fact that (i) mindfulness involves one aspect of consciousness observing another aspect of consciousness, and (ii) mindfulness was traditionally intended to facilitate a realisation of a person's full human potential and capacity for unconditional wellbeing. This is the transpersonal aspect of mindfulness.

6. Maintained from one moment to the next means that the mindfulness practitioner should try to maintain an unbroken flow of present moment awareness throughout the day.
Maintained from one moment to the next is used in order to distinguish mindfulness from a practice that is only undertaken at certain times of day or during formal seated meditation practice. This is the enduring aspect of mindfulness.

Whilst it is unlikely that the above definition of mindfulness will meet with unanimous approval, the present authors believe that compared to existent delineations of mindfulness employed in the academic literature, it more accurately captures and embodies the Buddhist interpretation. It is probably fair to say this newer definition also accurately captures the meaning of mindfulness as it is utilised in what have been termed 'second generation' MBIs. The introduction and early-stage empirical evaluation of second generation MBIs – such as the eight-week secular intervention Meditation Awareness Training (MAT; Van Gordon et al., 2014a) – has occurred in recent years as a remedy to the apparent deficiency of spiritual and Buddhist foundations in the first generation of MBIs. According to Singh et al (2014), one of the primary purposes and achievements of first-generation MBIs (such as Mindfulness-Based Stress Reduction [Kabat-Zinn, 1990] and Mindfulness-Based Cognitive Therapy [Segal et al., 2002]) was to gain acceptance of the mindfulness construct within Western clinical and scientific domains. However, given the rapidity at which mindfulness has been integrated into Western research and public healthcare settings, it was perhaps inevitable that questions would arise regarding the extent to which this pioneering work accurately embodies the Buddhist construction of mindfulness and that alternative formulations and methods of practising mindfulness would be proposed accordingly.

### **Conclusions**

Scientific and public interest into the applications of mindfulness – particularly as a means of improving psychological wellbeing and mental health – has increased significantly over the last decade (Shonin et al., 2014a). However, as has been repeatedly emphasised in this chapter, the traditional Buddhist teachings explicate that mindfulness can only remain intact where it enters into a process of cross-fertilisation with various other meditative and spiritual practice agents (e.g., right view, right intention, right concentration, etc.). Therefore, in Westernised interventional approaches that treat mindfulness as a standalone spiritual or non-spiritual technique, it is questionable whether such interventions are in fact still working with and teaching a method that can be accurately described as 'mindfulness' in the traditional sense.

The intention of Western science to operationalise mindfulness as a means of alleviating human suffering is admirable. However, the rapidity at which this process is unfolding and the fact that in most instances mindfulness is taught to effectuate what (relative to the Buddhist approach) might be seen as short-term reductions in psychological/somatic pain, means that concerns and compatibility issues are inevitably going to arise. Indeed, from the traditional Buddhist perspective, unless an intervention targets suffering at its causes and therefore helps the individual to advance along the path towards enduring unconditional wellbeing (i.e., the complete and irreversible cessation of suffering), its utility becomes questionable (Van Gordon et al., 2015).

As discussed above, some academic scientists and Buddhist scholars have alleged or implied that contemporary Western psychological constructions of mindfulness reflect a superficial account of this 2,500-year-old contemplative practice. Consequently, the mindfulness research agenda appears to be undergoing a slight shift in direction with a greater number of researchers seeking to formulate and empirically evaluate mindfulness models and interventions that more closely align with the traditional Buddhist approach. However, perhaps of greater significance, concerns over the authenticity of Western models of mindfulness may

actually prompt the scientific and medical community to raise expectations in terms of the conceivable outcomes of psychological interventions. What is being referred to here is a scenario whereby empirical investigations into mindfulness focus on the extent to which it fosters wellbeing according to the intended meaning and implications of the term 'wellbeing' within Eastern contemplative systems. This is different than the current tendency to assess the utility of mindfulness according to Western parameters of wellbeing and suffering. More specifically, if a better understanding of the Buddhist model of wellbeing, suffering, and meditative/spiritual practice can make the total liberation of suffering (i.e., enlightenment) a more credible and acceptable notion within Western science, then the introduction of mindfulness to the West can undoubtedly be regarded as a success.

### References

American Psychiatric Association. (2010). American Psychiatric Association Practice Guideline for the Treatment of Patients with Major Depressive Disorder (3<sup>rd</sup> ed.). Arlington, VA: American Psychiatric Publishing.

Buddharakkhita (Trans.). (1986). *Dhammapada: A Practical Guide to Right Living*. Bangalore: Maha Bodhi Society.

- Carrette, J., & King, R. (2005). *Selling spirituality: The silent takeover of religion*. New York: Routledge.
- Crane, R. S., Kuyken, W., Williams, J. M., Hastings, R. P., Cooper, L., & Fennell, M. J. (2012).

  Competence in teaching mindfulness-based courses: Concepts, development and assessment. *Mindfulness*, 3, 76-84.
- Crane, R. S., Eames, C., Kuyken, W., Hastings, R. P., Williams, J. M. G, Bartley, T., ...

  Surawy, C. (2013). Development and validation of the Mindfulness-Based Interventions –

  Teaching Assessment Criteria (MBI:TAC). *Assessment*, 20, 681-688.
- Dalai Lama, & Berzin, A. (1997). *The Gelug/Kagyu Tradition of Mahamudra*. New York: Snow Lion Publications.
- Gethin, R. (2011). On some definitions of mindfulness. Contemporary Buddhism, 12, 263-279.
- Howells, K., Tennant, A., Day, A., & Elmer, R. (2010). Mindfulness in forensic mental health:

  Does it have a role? *Mindfulness*, 1, 4-9.
- Kabat-Zinn, J. (1994). Wherever you go, there you are: Mindfulness Meditation in Everyday Life. New York: Hyperion.
- Kabat-Zinn, J. (1990). Full Catastrophe Living: Using the wisdom of your body and mind to face stress, pain and illness. New York: Delacourt.
- Khyentse, D. (2007). The Heart of Compassion: The Thirty-seven Verses on the Practice of a Bodhisattva. Boston: Shambhala Publications.
- McWilliams, S. A. (2011). Contemplating a contemporary constructivist Buddhist psychology. *Journal of Constructivist Psychology*, 24, 268-276.
- McWilliams, S. A. (2014). Foundations of Mindfulness and Contemplation: Traditional and Contemporary Perspectives. *International Journal of Mental Health and Addiction, 12,* 116-128.
- Mental Health Foundation. (2010). Mindfulness Report. London: Author.

- Nanamoli, B., & Bodhi, B. (2009). *Majjhima Nikaya: The Middle Length Discourses of the Buddha* (4th ed.). (Bhikkhu Nanamoli & Bhikkhu Bodhi, Trans.) Massachusetts: Wisdom Publications.
- Nanamoli, B. (1979). *The Path of Purification: Visuddhi Magga*. Kandy (Sri Lanka): Buddhist Publication Society.
- National Institute for Health and Clinical Excellence (NICE). (2009). *Depression:*Management of Depression in Primary and Secondary Care. London: Author.
- Rosch, E. (2007). More than mindfulness: when you have a tiger by the tail, let it eat you. *Psychological Inquiry*, 18, 258-264.
- Segal, Z. V., Williams, J. M., & Teasdale, J. D. (2002). *Mindfulness-based Cognitive Therapy* for Depression: A New Approach to Preventing Relapse. New York: Guilford.
- Shonin, E., & Van Gordon, W. (2014a). The Scientific Study of Buddhism and the Noble Eightfold Path: Dividing the Whole into Many. June 21. Located at <a href="http://edoshonin.com/2014/06/21/the-scientific-study-of-buddhism-and-the-noble-eightfold-path-dividing-the-whole-into-many/">http://edoshonin.com/2014/06/21/the-scientific-study-of-buddhism-and-the-noble-eightfold-path-dividing-the-whole-into-many/</a>
- Shonin, E., & Van Gordon, W. (2014b). Searching for the present moment, *Mindfulness*, 5, 105-107.
- Shonin, E., & Van Gordon, W. (2013). *Authentic Spiritual Lineage*. March 11. Located at: <a href="http://edoshonin.com/2013/03/09/73/">http://edoshonin.com/2013/03/09/73/</a> Accessed 15<sup>th</sup> October 2014.
- Shonin, E., Van Gordon, W., & Griffiths, M. D. (2015a). Mindfulness in psychology: A breath of fresh air? *The Psychologist: Bulletin of the British Psychological Society*, 28, 28-31.
- Shonin, E., Van Gordon W., & Griffiths, M. D. (2014a). The emerging role of Buddhism in clinical psychology: Toward effective integration. *Psychology of Religion and Spirituality*, 6, 123-137.

- Shonin, E., Van Gordon, W., & Griffiths, M. D. (2014b) Are there risks associated with using mindfulness for the treatment of psychopathology? *Clinical Practice*, 11, 389-92.
- Shonin, E., Van Gordon W., & Griffiths, M. D. (2013). Buddhist philosophy for the treatment of problem gambling. *Journal of Behavioural Addictions*, *2*, 63-71.
- Singh, N. N., Lancioni, G. E., Winton, A. S. W., Karazsia, B. T., & Singh, J. (2014). Mindfulness-Based Positive Behavior Support (MBPBS) for mothers of adolescents with autism spectrum disorders: Effects on adolescents' behavior and parental stress. *Mindfulness*, DOI: 10.1007/s12671-014-0321-3.
- Tsong-Kha-pa. (2004). The Great Treatise on the Stages of the Path to Enlightenment (Vol. 1).

  (J. W. Cutler, G. Newland, Eds., & The Lamrim Chenmo Translation committee, Trans.)

  New York: Snow Lion Publications.
- Van Gordon, W., Shonin, E., & Griffiths, M. D. (2015). *Mindfulness and the Four Noble Truths*. In: Shonin, E., Van Gordon W., & Singh, N. N. (Eds). *Buddhist Foundations of Mindfulness*. New York: Springer.
- Van Gordon, W., Shonin, E., Sumich, A., Sundin, E., & Griffiths, M. D. (2014a). Meditation Awareness Training (MAT) for psychological wellbeing in a sub-clinical sample of university students: A controlled pilot study. *Mindfulness*, 5, 381-391.
- Van Gordon, W., Shonin, E., Zangeneh, M., & Griffiths, M. D. (2014b). Work-related mental health and job performance: Can mindfulness help? *International Journal of Mental Health and Addiction*, 12, 129-137.