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Psychotherapy by means of Ancient Meditation and Ordination Practices

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Abstract

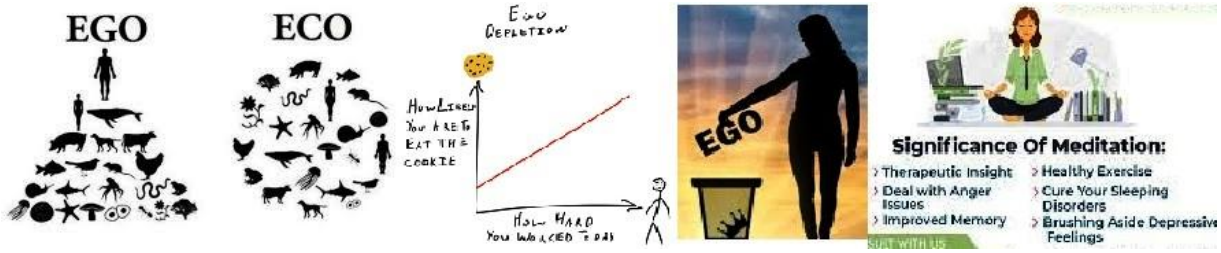
Ego theory posits that our personality consists of three interconnected aspects. The first is the (often referred to as 'Pak' in some contexts), which houses our primal desires and is driven by the pursuit of pleasure. Studies indicate that meditation effectively helps manage chronic pain; individuals suffering from chronic pain who practice meditation regularly are able to live with pain that is manageable. To understand the Buddhist perspective on meditation, we must start from the beginning—specifically, the life of the Buddha, approximately 2,615 years ago. In recent decades, meditation has been studied within psychotherapy literature and incorporated into psychotherapeutic treatments. As therapists who find meditation compatible with our Christian-based treatment approach, we have successfully demonstrated the integration of meditation and psychotherapy. Numerous scientific studies on meditation have been surveyed to evaluate claims regarding the effects of the complex and multidimensional array of practices collectively known as meditation. Senior monastics observe the Three Refuges and the Ten Precepts (or training rules). Male monastics are required to follow 227 Vinaya rules, while female monastics must adhere to 311 Vinaya rules, as prescribed by our Dhamma teacher, Gautama Buddha. It is also known that brainwaves—such as beta, gamma, theta, delta, and alpha—fluctuate in response to our activities and mental states.

Keywords: Meditation, Vinaya rules, Psychotherapy, Initiation, Ego.

Buddhism and the teachings of the Buddha hold that our unhappiness can be eliminated by understanding the true nature of reality. This process begins when we turn inward and start to accept and embrace those parts of ourselves we were previously afraid to confront. In this context, both psychotherapy and Buddhism share the same path and goal. During mindfulness meditation, equanimity is considered in relation to recurring thought patterns, including rumination and worry. Treating the content of the automatic stream of primary-process thinking with equanimity may not always be possible, and implications regarding mental health and the value of psychotherapy have been noted. Aspects of the meditative state are considered in relation to facets of the creative process, including incubation and insight effects. The concept of 'quieting the mind' during mindfulness meditation is viewed as a step-wise process: first, quieting the reflective (cerebral) mind, and second, quieting the pre-reflective (cerebellar) mind across multiple levels. Regarding access to transpersonal and spiritual meditative realms, it is suggested that 'input' can be experienced simply through 'pre-reflective mindfulness,' where the meditative consciousness 'resides' at the cerebellar level. Furthermore, 'input' from the cerebellum can be transmitted ('reflected') to the cerebrum and experienced there as 'reflective mindfulness,' where the meditative consciousness 'resides' at the cerebral level. Certain qualities of the cerebellar (unconscious) mind are highlighted as essential for understanding and communicating transpersonal or spiritual experiences. Eslea et al. (2008) presented a neuropsychological perspective on the relationship between the 'emotional' and the 'spiritual,' while also discussing implications related to mental health disorders. It has been suggested that, in certain instances,

mindfulness meditation and developmental psychotherapy can complement one another. The nature of pre-reflective self-consciousness—that is, the non-inferential self-awareness inherent in unreflective experiences—has become a subject of significant debate within recent analytic philosophy of consciousness; this is because it is generally regarded as the factor that renders conscious mental states immediately given to the subject. A major point of contention in this debate concerns the specific object of awareness in pre-reflective self-consciousness. Some scholars have proposed that pre-reflective self-consciousness entails an awareness of the experiencing subject. This "egological view" stands in contrast to the "non-egological view," according to which the subject, while pre-reflectively self-conscious, is merely aware of their current mental state.

One way to understand the "crises" we currently face is to recognize that the process of self-fashioning—of shaping oneself according to one's own design—has gone too far; it has not only reached its limits but is confronting the constraints imposed upon us by the planet itself, as well as those arising from the existence of other human beings and our mode of being with them. These are highly practical and urgent problems, as explored in research (e.g., Gert 2021; Freud 1923), yet they also raise difficult and profound philosophical questions. However, he also attempts to show that these issues strike at the very heart of education—where contemporary learner-centered education, which believes it has successfully moved beyond traditional teaching, actually manifests self-centered or ego-driven modes of thinking and acting.



Ego theory posits that our personality consists of three interconnected aspects. The first is the *id*, which encompasses our most primal desires and is driven by the pursuit of pleasure. Next comes the superego..value system, which is linked to the understanding of morality and right versus wrong that we acquire from our families and society. Finally, there is the Ego, whose function is to harmonize the conflicting desires of the Id and the Superego, enabling the fulfillment of the Id's wishes without transgressing the Superego's moral boundaries. To achieve success in any industry, it is essential to acknowledge that our (the bank's) profit is ultimately the result of retaining existing customers and acquiring new ones. If banks fail to properly care for their customers, they will inevitably lose them. Since the 'Adapted Child' ego state is predominant among the majority of banking professionals (48%), employees in this state tend to alter their behavior under strong external influence. Seeking validation, they conform to the norms of the social environment, exhibiting either compliant or cautious behavior; therefore, banks must train their employees in effective customer interaction. Jain (2010) noted that it is the responsibility of top and middle management to look after 'internal customers' (front-line officers or staff) and strive to provide a conducive work environment.

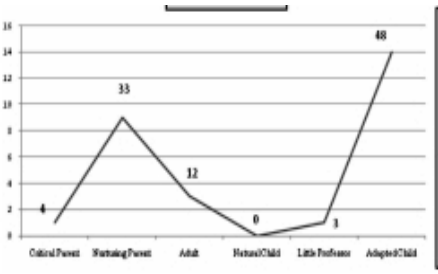
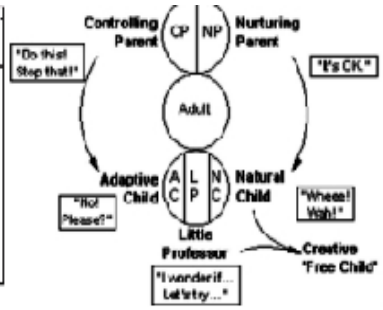


Table 4: Overall Summary of Dominant Ego States.

Dominant Ego states	Number of Respondents	% of the respondents
Critical Parent	4	4.0
Nurturing Parent	33	33.0
Adult	12	12.0
Natural Child	0	0.0
Little Professor	3	3.0
Adapted Child	48	48.0
	100	100.0



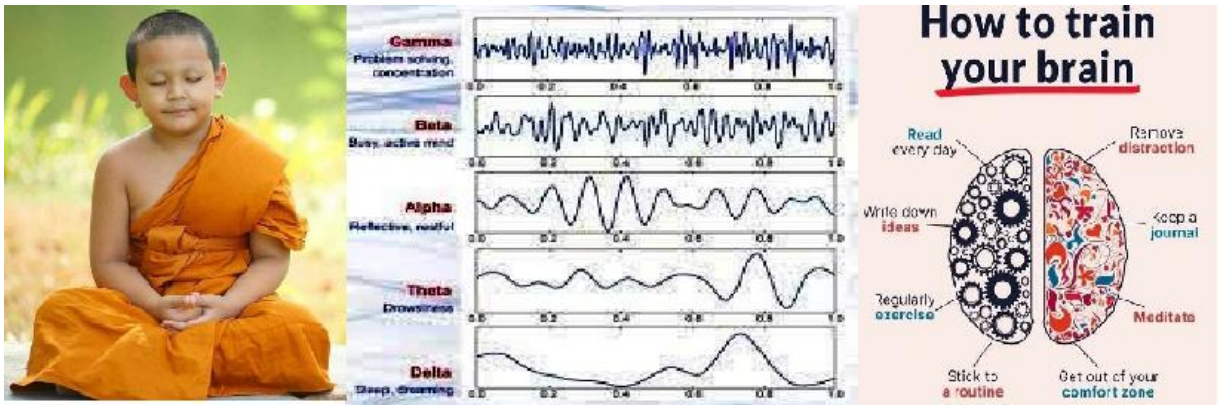
Undoubtedly, mindfulness has emerged as the most rapidly spreading and popular concept in psychotherapy over the past two decades. Its impact in modern psychotherapy surpasses that of any other concept or approach. However, its rapid—and almost obsessive—proliferation has also given rise to various complexities, unresolved questions, and controversies. This spread evidently addresses a specific void within modern, Euro-American-centric societies. Similarly, in the West, we observe a lack of critical reflection, a tendency toward boundless idealization, and a quest for a 'one-size-fits-all' solution to every problem. Alongside all this, there is also a hint of colonialism—adopting ideas, concepts, and techniques without properly studying the original sources—which brings with it several negative consequences, such as profiteering, self-promotion, unethical behavior, and hollow promises of quick fixes. This paper reviews the growing interest in mindfulness within psychotherapy, the findings and complexities of research, and the concepts and methods for implementing mindfulness in therapeutic practice. Studies indicate that meditation helps effectively manage chronic pain; individuals suffering from chronic pain who practice meditation regularly are able to lead reasonably good lives despite their condition. Experience also suggests that meditation aids in recovery from chronic illnesses. To understand the Buddhist perspective on meditation, we must go back to the beginning—specifically, to the life of the Buddha, approximately 2,615 years ago. Raised as a prince in northern India, the Buddha was shielded from the realities of human suffering. As he grew older and witnessed such suffering, he renounced his luxurious life to become a wandering ascetic. He sought to overcome suffering through the ascetic practices still taught in that region today. Eventually, he abandoned extreme asceticism and adopted a new method of meditation, which led to his enlightenment. This state can be understood as a profound comprehension of the mind and mental suffering (Four Noble Truths, 2020). Buddhist psychology does not claim that the self and the world are illusions; rather, it posits that our perceptions of the self and the world are illusions—constructs we continuously create, yet which remain constantly at risk of disintegration. Whether we are mentally healthy but simply struggling to adjust, or are genuinely grappling with a mental illness, the practice of meditation—by offering a direct experience of the non-existence of the ego—can help loosen the grip of the illusions associated with it. This loosening can reduce the intensity of our mental conflicts, regardless of their nature or origin. Consequently, we may become better at connecting with the world in a genuine and direct manner (Trungpa, 2005). Pons (1982) proposed a conceptual model for psychotherapy suggesting that if one looks past external customs, rituals, and symbols—which often confuse or alienate the uninitiated—Buddhism (as a prime example of Eastern traditions regarding consciousness) offers significant value to serious students of psychotherapy theory and practice.

Early Buddhist Texts

Early Buddhist texts state that Gautama received training from two teachers—Alara Kalama and Uddaka Ramaputta. Both taught him formless meditation or mental concentration, which is a crucial practice in authentic Buddhist meditation (Analayo, 2017). Alexander Wynne identifies these figures as historical individuals linked to the teachings of the early Upanishads (Wynne, 2007). Indologist Johannes Bronkhorst has linked other practices adopted by the Buddha to the Jain ascetic tradition; these included extreme fasting and forced breath-retention techniques (Bronkhorst, 1993). According to early texts, the Buddha abandoned the severe ascetic practices of Jainism in favor of the Middle Way. In the early Buddhist tradition, other postures for meditation were also taught, such as meditating while standing and meditating while lying on one side in the 'lion's posture.' Modern Buddhist studies have attempted to re-examine the meditation practices of early Buddhism (the period prior to the division into sects)..For this purpose, the early authentic texts have primarily been analyzed using the methods of linguistics and textual criticism. There is no consensus regarding how early Buddhist followers practiced meditation. One reason for this is that, as Indologist Johannes Bronkhorst points out, the available sources describe a variety of methods that do not always align with one another (Bronkhorst 2012). Bronkhorst cites the *Vitakkasaṇṭhāna Sutta* of the *Majjhima Nikāya*—and its corresponding sections in Chinese translations—as an example of the divergent views found in early sources regarding meditation techniques; these texts advise the practicing monk to "restrain, suppress, and forcefully subdue thoughts with the mind."

Both psychotherapy and meditation are widely used to alleviate mental distress and behavioral issues. While there are numerous theories regarding the causes of mental distress and the mechanisms by which these methods help individuals, the reality is that we do not fully understand the precise workings of these processes; indeed, our

approaches are as much an art as they are a science. This discussion reveals that the mechanisms of psychotherapy and meditation share certain similarities, and there is a growing recognition that their benefits can be mutually reinforcing. If a therapeutic approach yields observable clinical benefits and poses no significant risk of harm, it is justifiable to employ it even in the absence of definitive evidence regarding its efficacy. Therefore, further research into the combined use of psychotherapy and meditation for treating mental disorders is warranted.



Despite apparent similarities in certain goals and practices, there are significant differences between psychotherapy and mindfulness meditation. Psychotherapy examines the broader picture of the "self" and the "script"—or the way of living—by which we conduct our lives. Scott needed to gain a deeper understanding of the shame that had become a central issue affecting his emotional life and behavior. He needed to grieve for the child he once was—a child who deserved compassion rather than belittlement. He needed to cultivate skills such as self-compassion and cognitive-emotional flexibility so that he could... ...while acknowledging human nature, one could still strive for perfection. Scott needed guidance and the development of self-soothing skills to overcome his habit of undervaluing himself. Letting go of his past helped him cultivate self-compassion, allowing him to sit with open curiosity and without judgment during meditation practice. In contrast, psychotherapy focuses on identifying the experiences—and the resulting thoughts and emotions—that might hinder the genuine acceptance of feelings. For instance, regarding anger, what distinguishes therapy from mindfulness is the encouragement to stay with the emotion until an understanding of it emerges, leading to its constructive use—such as anger that motivates positive action (Totton, 2004). We have found that although people are increasingly drawn to meditation, many fail to apply the lessons learned during their practice to everyday life. Many engage in these exercises not to master the art of concentration, but primarily as a form of "emotional massage"—often in response to the day's stress or to establish a foundation of calm that enhances their resilience (Bertrand, 2019).

There are four Brahmaviharas. Loving-kindness (Metta in Pali, Maitri in Sanskrit) is active goodwill towards all (Mera, 1999; Peter, 2012). Compassion (Karuna in Pali and Sanskrit) arises from Metta; it involves perceiving the suffering of others as one's own (Mera, 1999; Peter, 2012). Empathetic joy (Pali and Sanskrit: Mudita) is the feeling of happiness because others are happy; even if one has played no part in it, it remains a form of empathetic joy. Equanimity (Pali: Upekkha; Sanskrit: Upeksha) is a state of mental stability and peace, involving impartial treatment of everyone (Damata, 1999; Vetter, 2012). The oldest material related to meditation in the Theravada tradition—associated with figures like Buddhaghosa and the Visuddhimagga—can be found in texts such as the Pali Nikayas and the Patisambhidamagga, which offer commentaries on meditation discourses like the Anapanasati Sutta. An early manual on Theravada meditation is the Vimuttimagga (Path of Freedom; 1st or 2nd century). However, the most influential presentation is the 5th-century Visuddhimagga (Path of Purification) by Buddhaghosa, which describes forty subjects of meditation. Almost all of these are described in early texts (Sara, 2006). It appears that Buddhaghosa was also influenced in his presentation by the earlier Vimuttimagga. Buddhaghosa advises that to develop concentration and awareness, one should—upon the counsel of a "good friend" (kalyana-mitta) knowledgeable about the various meditation subjects—select a subject from the forty that suits one's temperament (Chapter III, § 28). Buddhaghosa then elaborates on the forty subjects of meditation (Chapter III, § 104; Chapters IV–XI): the ten kasinas.(a) Earth, water, fire, air, blue, yellow, red, white, light, and limited space. (b) Ten types of impurities: swollen, blue-black, festering, lacerated, gnawed, scattered, hacked and scattered, bleeding, worm-infested, and skeletal. (c) Ten types of recollections: Buddhanussati (recollection of the Buddha), Dhamma, Sangha, virtue, generosity, the qualities of deities, death (see Upajjhatthana Sutta), the body, breathing (see Anapanasati), and peace (see Nirvana). (d) Four divine abodes (Brahmaviharas): Metta (loving-kindness), compassion, sympathetic joy, and equanimity. (e) Four formless states: infinite space, infinite consciousness, nothingness, and neither-perception-nor-non-perception. (f) One perception (of the repulsiveness of food) and one analysis (i.e., the four elements).

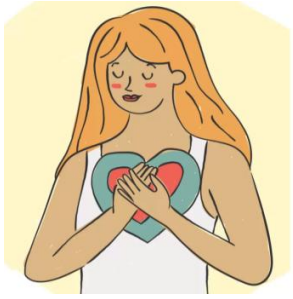
To understand this concept more deeply, mindfulness and

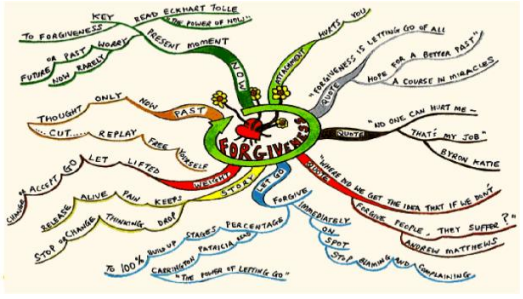
mindfulness meditation help us become more aware of the inner workings of our minds; they enhance our ability to recognize, observe, and experience our thoughts, emotions, and sensations without becoming overwhelmed by them. Furthermore, this practice can help train our brains to be less reactive to what we perceive, thereby granting us greater freedom to choose how we wish to define our lives. It is a powerful method that has become easily accessible through various channels. However, engaging in such a practice requires identifying one's goals and maintaining realistic expectations. It is equally important to remain aware of our thought processes throughout the practice. Are we truly open-minded, curious, and free from prejudice? Being fully present in our lives—which includes sitting in meditation—often requires significant self-reflection and personal work (potentially including psychotherapy) (Pollak et al., 2016). Over the past three decades, clinical medicine and psychology have integrated the fundamental principles of mindfulness into various therapeutic approaches. These principles are free from superstition or ritual and assist individuals in practicing mindfulness to improve their lifestyles, often yielding benefits across physical, emotional, relational, and sometimes even spiritual dimensions. Mindfulness does not entail a final achievement or mastery; rather, it continuously strengthens the mind's capacity to focus on and directly experience the present moment, unencumbered by the filters of thoughts, expectations, desires, or aversions that often intervene and distance us from direct experience. Given the versatile nature of mindfulness practice, it is unsurprising that it has been adopted in diverse ways (Kabat-Zinn, 1990). These include Mindfulness-Based Stress Reduction in pain management clinics, Mindfulness-Based Cognitive Behavioral Therapy, Dialectical Behavior Therapy, addiction treatment, Acceptance and Commitment Therapy, and the enhancement of individual psychotherapy. As physicians, we incorporate mindfulness practice into our medical work because it offers constant opportunities for learning and gaining new experiences. The same applies to mindfulness; it patiently awaits our return to that selfless, non-judgmental awareness of the present moment—allowing us to better understand our mental patterns and themes, and offering a continuous opportunity to choose a different thought or behavior (Kabat-Zinn, 1994). As 2019 draws to a close and we stand on the threshold of a new era, the practice of mindfulness remains just a breath away—a wonderful companion for the journey ahead.

In recent decades, meditation has been studied within psychotherapy literature and integrated into therapeutic treatment (Walsh & Shapiro, 2006). Therapists who see a compatibility between meditation and our Christian-based approach to care have faced challenges in articulating how to effectively combine the two (Hansen et al., 2008). Contemplation, reflection, and meditation can serve as spiritual avenues for connecting with God and dwelling in the presence of our Creator—distinct from the specific form of focused attention discussed here. We hope readers understand that the type of meditation we are discussing should be employed as a therapeutic tool or a personal practice in a way that respects and honors one's own beliefs. From our perspective, the healing process is ultimately empowered by a loving Creator, and meditation is a gift we can embrace to draw closer to God—both for ourselves and for our clients. As Paul writes: whatever is true, whatever is noble, whatever is right, whatever is pure, whatever is lovely, whatever is admirable—if anything is excellent or praiseworthy—think about such things (Philippians 4:8). It is a positive development that, thanks to modern global communication, access to Eastern meditation techniques has become easier. Such information helps in better understanding the meditative traditions of Christianity (which have not been discussed here) as well as scriptural references regarding meditation, contemplation, and reflection. Meditation as a spiritual intervention (Richards and B...offers a method (Bergin, 1997) that can be used to improve psychotherapy outcomes, enhance the therapist's mental well-being, and bring value conflicts to light; its effectiveness highlights the need to understand Christian values within the context of Eastern philosophy and Western psychotherapy (Perez-de-Albeniz & Holmes, 2000).

Numerous scientific studies on meditation have been surveyed to examine the breadth of claims regarding the effects of the various complex and multidimensional processes known as meditation. Furthermore, insights from cognitive neuroscience regarding visual imagery can be used to explain meditation processes that focus on internal visualization sequences (Andresen, 2000). The nature of the ensuing interaction determines the form our apology will take.

Apology-In an ideal scenario, Sam would apologize for his actions, return the stolen money, and promise not to steal from us again. In the Lotus Sutra, expounded by the Buddha, the name "Sadaparibhuta" signifies "never despising anyone." In the story, this Bodhisattva would approach people saying, "I do not hold you in contempt. You are not to be despised, for you all practice the Bodhisattva path and are destined to become Buddhas in the future." What a positive form of encouragement this was! What an impressive personality! Incidentally, Sadaparibhuta was one of Shakyamuni Buddha's past incarnations. Now, let us examine Sadaparibhuta's declaration. Is there truth to it? Sadaparibhuta demonstrated his faith in the Three Jewels. He held a genuine belief that anyone who followed the Buddha's teachings would ultimately attain enlightenment. If not in this life, then in future lives, anyone who follows the path of the Three Jewels will attain enlightenment. Therefore, Sadaparibhuta showed no hesitation in expressing his true convictions. In this way, he practiced humility and viewed everyone as a future Buddha. He respected and honored whomever he met. He neither took offense nor became angry with those who were hostile toward him. He faced challenges and difficulties with a humble mind and a spirit of respect for all. This goes beyond mere bowing or prostration. Against this backdrop, in Buddhism, ordination is the formal process by which an individual becomes a member of the monastic community (Sangha); it involves specific ceremonies and adherence to the Vinaya (the monastic code of discipline). It encompasses both novice (samanera) and higher ordination, with variations depending on specific Buddhist traditions. For Buddhist monks, the ordination process—known as "Going Forth"—begins when an applicant makes a formal request (pabbajja) to a senior monk or bhikkhu for novice ordination. Upon receiving permission, the applicant prepares for the ceremony by obtaining a full set of robes (civara) and having his head shaved with the assistance of the monastery's monks. He then approaches the senior monk, bows three times to show respect, and presents the robes while reciting the prescribed words. Subsequently, he formally requests the robes from the senior monk, and upon receiving them, the monks assist him in putting them on. Finally, the applicant makes a formal request for novice ordination. With the senior monk's consent, he is instructed in the Three Refuges (Three Jewels) and the Ten Precepts, or rules of training. As prescribed by our Dhamma teacher Gautama Buddha, male monks are required to observe 227 Vinaya rules, and female monks must observe 311 Vinaya rules. Thus Reading Visuddhimagga strength of faith in the Buddha, in His excellent conduct and in His complete teachings, much of respect in the trainings of the noble ones including all Buddhas, Pacekkabuddhas and Arahants, and ardent aspiration for the emancipation from the repeated rebirths will be increased. Additionally, it acts as a facilitator for meditation masters to give the guidance to the meditator and for the scholars who study the Buddhist literature to make use of a reference. Culturing the mind, Visddhimagga brings the blessings of civilization to possess genuine happiness, peaceful lives, and beautiful mind. In view of that, it is assured that Visuddhimagga will be standing in the future sasana (Buddhist Teachings) as an ideal practice text existing like in the past and in this present due to ability of upgrade to be successful culmination of one's life.





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