

Belinda Siew Luan Khong

# *The Buddha's Influence in the Therapy Room*

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**Editor's note:** Like those in Hakomi, Dr. Belinda Khong, has also been fostering the clinical use of mindfulness and Buddhist concepts for many years. In this revised version of a paper, first presented at the 109<sup>th</sup> Annual Convention of the American Psychological Association at San Francisco, August 2001, she shares her approach to using Buddhist wisdom within the therapy setting. See also her paper on "Minding the Mind's Business" in the 2005 edition of the *Hakomi Forum*.

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**ABSTRACT:** With the growing acceptance of Buddhist practices and ideas in psychology, therapists are addressing the question of how the Buddha's teachings such as meditation and mindfulness, "letting go" and "the concept of dependent origination" can be applied in the therapy room. The practice of concentration and mindfulness meditation enhances the therapist's own ability to bracket and setting aside theoretical explanations and preconceptions, and improves the therapist's capacity to listen quietly, and to remain open to the client. Mindfulness practices afford clients a way to self-explore, and to make space for their feelings and thoughts and to respond appropriately. The influence of the Buddha in the therapy room is illustrated with case studies and anecdotes.

**Keywords:** Mindfulness, Eightfold Path, Psychotherapy, CBT, Daseinsanalysis,

## **Introduction**

The growing interest in the interface between Buddhism and Western psychology poses helping professionals a continual challenge—how to skilfully apply the Buddha's teachings in the therapy room for themselves as therapists, and with their clients? In short, what happens if we encounter the Buddha in the therapy room? A Zen Buddhist would probably reply, "Kill him," as the Buddha or Buddha-nature is already inside each of us. But for many of us less enlightened or less inclined to "violence," his teachings could provide guidelines or a raft for therapists and clients to reach the "shore" of insight and self-understanding. In this paper, I explore the practice of meditation in Buddhism focusing on the aspect of mindfulness, and discuss its benefits for therapists and clients.

## **Meditation—An Overview**

In his teachings of the eightfold path (the Fourth Noble Truth), the Buddha advocates mental culture and discipline

(*bhavanā*) as a means to quieten down the mind, and to gain insight. Mental culture is now commonly associated with the formal practice of meditation, although what the Buddha emphasizes is not just sitting in meditation, but developing openness and clarity of mind, that is a meditative attitude. In meditation, de Silva (1979) explains, what the Buddha teaches is not the atrophy, but the development and refinement of the senses, including the mind.

Two types of meditation, namely tranquillity or concentration (*samathā*) meditation and insight (*vipassanā*) meditation are commonly practised today. Tranquillity meditation has been taught in many Indian traditions as a way of helping individuals to calm down the mind and develop an attitude of equanimity. Insight meditation, or more popularly referred to today as mindfulness practice is unique to Buddhism (H. H. the XIV Dalai Lama, 1997; Rahula, 1978). This practice is aimed at helping individuals understand the nature and workings of their minds, and manage the emotions, feelings and thoughts that arise. Rubin (1996) notes that the Theravadin school of Buddhism has preserved most of the Buddha's teachings

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relating to meditation and my discussion centres on the practices of this school.

In the eightfold path, right effort, right concentration, and right mindfulness are promoted as important factors in meditation. Of the three, right mindfulness is regarded as the most critical factor for as Nyanaponika (1992) explains, mindfulness is “the heart of Buddhist meditation.”

Briefly, right concentration involves focusing the mind on one stimulus, such as the breath, mantra, loving kindness, chanting etc., (the objects of meditation) to the exclusion of other stimuli. Right effort refers to the application of the right amount of effort to sustain this concentration, and to prevent negative (unwholesome) thoughts from intruding. By enabling the mind to stay focused, this practice of “one-pointedness” reduces the mind’s tendency to ruminate and become distracted. While tranquillity meditation focuses mainly on the cultivation of right concentration, insight meditation emphasizes the cultivation of right mindfulness and observation (Rahula, 1978).

What is right mindfulness? According to Germer (2005), the term mindfulness can be used “to describe a theoretical construct (mindfulness), the practice of cultivating mindfulness (such as meditation) or a psychological process (being mindful)” (p. 6). In this article, the word mindfulness is used in the last two ways described by Germer. There are many facets and benefits of mindfulness practice, and in my discussion, I emphasize the aspects that are particularly relevant and useful for therapy.

Different explanations have been given to capture the essence of mindfulness, and what is involved in being mindful. Gunaratana (1991, p. 148) explains that mindfulness involves “the ability to see things as they really are ... to give bare attention, and just looking at whatever comes up in the mind, or in each situation as it occurs.” Mindfulness, according to Kabat-Zinn (1994), “means paying attention in a particular way: on purpose, in the present moment and non-judgementally. This kind of attention nurtures greater awareness, clarity and acceptance of present-moment reality” (p. 4). In a comprehensive article on *The Use of Mindfulness in Psychotherapy*, Johanson (2006) notes that “a mindful state of consciousness is characterized by awareness turned inward towards present felt experience. It is passive, though alert, open, curious and exploratory. It seeks to simply be aware of what is, as opposed to attempting to do or confirm anything” (p. 24).

Although mindfulness is a capacity that we all possess, yet being mindful and paying attention to our current experiences is not an easy task as we tend to infuse what we perceive with self-interests and subjective judgements. The task of bare attention, as Gunaratana notes, is to eliminate all these accretions to the object proper.

The Buddhist practice of mindfulness is based on the four foundations of mindfulness (*satipatthāna*), that is maintaining continuous awareness of (1) the body (e.g. the breath, posture, bodily sensations etc) (2) feelings (whether pleasant, unpleasant, or neutral) (3) states of mind (e.g. depressed, anxious, angry and so forth) and (4) the mental contents (the objects or thoughts occupying the mind at a given moment) (Nyanaponika, 1992; Goleman, 1984).

In its role as pure awareness, mindfulness allows meditators to freely observe what they perceive and experience without needing to change, justify or repress it. Take the example of anger. Rahula (1978) explains that being mindful means becoming aware of the state of mind as an angry mind, and watching this state objectively, how the feeling of anger arises and dissipates if we do not become attached to the feeling. Mindfulness increases awareness of the circuitous nature of the mind as expounded in the Buddha’s teachings of dependent origination or inter-relatedness (i.e., how one thing leads to another) and karma (cause and effect). Additionally, mindfulness encourages practitioners to acknowledge and accept what is there. By simply observing our thoughts and emotions as they arise, and labelling them objectively (e.g. anger as anger; pain as pain) we uncover strengths and weakness that have hitherto remained covered and learn to deal with them. The practice of just labelling, acknowledging and experiencing the feeling without necessarily having to express it has significant therapeutic benefits (Khong, 2005).

In order to be mindful, it is important to learn to listen quietly. The ordinary mind is constantly ruminating, carrying on an internal dialogue. For example, many of us are busy thinking of our own responses as we are listening to the speaker. The practice of concentration and mindfulness enables us to “see” the workings of our minds without adding associative value to what is being actually enunciated. This is a useful skill for therapists to cultivate.

### **For the Therapist**

The practice of mindfulness is helpful to the therapist in numerous ways. Here I focus on the contributions that mindfulness can make to the attitude of the therapist when interacting with clients. In psychoanalysis, Freud (1912) recommends therapists adopt an attitude of “evenly-suspended attention” (p. 111) towards clients. According to Freud, this attitude, which behoves the therapist “to give equal notice to everything,” and to “simply listen” (p. 112) to the client, encourages the client to freely associate without concern with censorship. Boss (1984-1985) the founder of daseinsanalysis, or existential analysis, refers to this kind of attitude as “constant attentiveness” (p. 122), and adds that such an attitude enables the therapist to hear beyond what is being verbalised. To acquire this stance, Boss notes that the therapist’s existence must be more open and expansive than that of the patient.

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These are laudable recommendations for therapists, and most therapists do that to a large extent. However, there is a significant, albeit subtle difference between the kind of open attitude advocated in psychotherapy and the attitude promoted in Buddhist mindfulness. The stance advanced by people like Freud and Boss is intended to facilitate the therapist's attentiveness to clients' experiences and state of mind. While Buddhist mindfulness promotes a similar attitude towards clients' experiences, it goes further than that. Mindfulness makes it possible for therapists to listen not only to the client, but also to their own state of mind – that is to be constantly aware of the murmurings in their minds and not allow this internal dialogue to impede their openness. As Nyanaponika (1992) puts it “one who is mindful will first mind his own mind's business” (p. 81). In short, mindfulness asks of therapists nothing more than to *just wait and listen quietly* both to his own dialogue and the dialogue of the client.

But how do we bracket conceptualising and just listen? As I noted earlier, the ordinary mind is constantly chattering and ruminating. No matter how rigorously people wish to suspend their bias, judgements and preconceptions, and to remain open, if the bracketing is affected intellectually (as opposed to experientially) it has its limitations.

Batchelor (1990) explains that the meditative attitude does not rely on any formal method to sustain itself. He adds however, that if that kind of silence eludes us, it is helpful to adopt methods that can help us cultivate this attitude. Concentration and mindfulness practices equip the therapist with the skills and mental discipline to quieten the mind and to focus. In psychotherapy, the means of helping therapists to cultivate this kind of attitude is currently lacking.

According to Fulton (2005) and Epstein (2003), one of the benefits to therapists and physicians in being mindful is an increased tolerance for what Fulton describes as “learning not to know” (p. 70) and Epstein calls cultivating a “beginner's mind” (p. 17) when interacting with clients. Fulton and Epstein aver that this kind of open-mindedness allows health-care professionals to learn to accept uncertainty, see each situation afresh, set aside preconceived notions and theories about clients' problems, and “cures,” and respond appropriately to the demands of each moment.

Epstein (1995) explains that “when a therapist can sit with a patient without an agenda . . . the therapist is infusing the therapy with lessons of meditation. . . . The patient can feel such a posture” (p. 187). Caroline, a client of mine explains why she found this stance to be beneficial in our counseling (Khong, 2006).

Because you have a clear space . . . inside of you where I can know that, that space is open, fill you with me I suppose. . . . But you personally, even though I fill that receptacle, or you have that openness for me, you are not there. I mean I am there. I can be there

without any impact from you. Like I am not changed by being in there.

By sitting with Caroline “without an agenda” but more importantly maintaining moment-to-moment awareness of her, and my own, state of mind, I am better able to be there *with* her rather than just being there *for* her.

### **For the Client**

In the previous section, I discussed the usefulness of mindfulness for therapists and for the therapeutic relationship. Mindfulness is also beneficial to clients in and outside of the therapy room.

Mindfulness practice does not require the emptying of the mind or the setting aside or suppression of thoughts. Rather it permits us to be constantly aware of the workings and the contents of the mind so as not to allow them to interfere with our ability to listen quietly. The Buddha encourages people to experience for themselves the tendency of the mind to wander. Understanding this process, individuals have the choice and the responsibility to interrupt this process so that things can be otherwise. Jane, another client, captured the essence of mindfulness succinctly when she explained that mindfulness has enabled her to watch her thoughts and responses taking place in “real time” rather than from hindsight.

According to Kabat-Zinn (1994) mindfulness is “simply a practical way to be more in touch with the fullness of your being through a systematic process of self-observation, self-inquiry and mindful action” (p. 6). In his teachings, the Buddha promotes *self-help* through *self-exploration*. One of the benefits of this process is that clients can learn to isolate the issues for themselves and then deal with them holistically with the help of the therapist. In contrast, in psychotherapy, therapists are often engaged with clients during the process of exploration, helping them to isolate and resolve issues.

Diana's explanation of how mindfulness practice helped her to gain valuable insights and pursue her own personal growth illustrates the value of this meditative process of self-observation and self-inquiry.

### **Diana's story**

Diana, an attractive professional in her late thirties, came to counseling to deal with her feelings of high anxiety, and her panic attacks. Counseling helped her to uncover developmental issues arising from her ambivalent relationship with her family during her growing up years, which have also impacted negatively on her sense of self worth. I encouraged Diana to use mindfulness to explore her feelings, thoughts and responses continuously and to bring her insights to counseling for us to look at them

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together. With the complementary use of meditation, mindfulness practice and therapy, Diana was able to recognize, among other issues, the seductive powers of feeling like a victim, and her strategy in using this construct to gain external validation from other people. From these insights, Diana learned to change her negative attitude and to take responsibility for her life. I quote Diana's explanation at length to demonstrate how mindfulness helped her self-exploration and self-understanding:

I just feel more ease with stuff. I had a good week this week. The previous week was lousy. But I didn't dwell on it, and it didn't bring me down, which I used to do in the past. I acknowledge that "I just feel like crap today, but it will get better. Just take care of yourself. Don't try to be a hero. Or a victim. It took me a while to get into the habit of that. Learning new skills. Acknowledging and letting it go. Instead of dwelling on it. I realise that I would get it a bit, and then I would lose it. Get into old habits. But I would get back on the horse, and try again.

Previously I didn't believe enough that it [mindfulness practice] would have such a change, such an effect. I also recognized the power of negativeness. It was so strong in me, that it would always draw me back. I feel a victim as well. I realise that now. I like being in the victim mentality. My self esteem was so low at certain points. Being a victim gave me something important to feel about. If something bad happens to me, and I am a victim, "It's like that is what I am. You know, give myself a label." And then people would look after me and be nice to me. I can get attention. Again it is a lazy way of kind of, to get attention. . . . I was waiting for them to come to me. They have to make the effort because I am a victim, and I can't do that. Like support me and help me. Feed me mentally. Because I can't do anything. I don't do that anymore.

It not just the sitting meditation. Meditation helps me to be calmer. It is more the mindfulness. It is the one that works for me. Allows me to take me outside myself, and to think of others. I find that helpful. It does get easier, the longer you are mindful. Now I don't see myself as all better or bad. It is just who you are. But I know now what my negative tendencies are. I can recognize them now. Before I never used to. Mindfulness really helped me not only to see that, but also then not go down that direction, dwelling on things, and doing a vicious circle thing. Now I say, "Ok, that's it, let's not think about that, or not go down that road. And move on." I just let it go and move on. That has been really helpful.

I think that the other thing is making the decision to take responsibility. That is a big thing for me. I didn't want to take responsibility. I think that is where I fell down a lot of the time. I didn't want to grow up and take responsibility to be an adult, and say that is all done now, and move on. To take responsibility for my life. It is quite hard to do that. But when you are not doing it, not taking responsibility, that is quite hard to do as well [laughter].

As Diana's explanation shows, mindfulness not only enables her to step outside herself and make an honest and objective appraisal of her limitations, it also affords her the courage to confront and tolerate the "brutal" conclusions she reached, and to let go. Her relationship with her family and partner has improved significantly. Recently, Diana developed a taxing medical condition, but found that she was able to manage it better with her change of attitude.

## **The Buddha's Teachings and Psychotherapy**

In this section, I explore some of the parallels and differences between the Buddhist meditative practices and psychotherapy, and discuss how these similarities and differences can be employed in the therapy room. My discussion will focus on cognitive-behavioural therapy (CBT), rational-emotive-behaviour therapy (REBT), both of which promote the modification of behaviour and cognition, and daseinsanalysis, an existential therapeutic approach that encourages "phenomenological seeing," and "releasement" or "letting be" (Boss, 1963, 1979).

Briefly, the aim of CBT is to change *irrational thinking* into more *rational thinking* (Burns, 1980; Rapee 1998). According to Kwee and Ellis (2001) REBT is concerned with changing *irrational cognitions* into more rational ones "through a process of internal dialogue and through changing one's feelings and behaviours" (p. 13.) This accords with the Buddhist approach of understanding the workings of the mind, and replacing negative thoughts and emotions with more positive ones.

The concept of "phenomenological seeing" (Heidegger, 1927/1962, p. 78) is used by Martin Heidegger, the German philosopher, to describe an approach of permitting phenomena to unfold on their own terms. Following Heidegger, Boss (1963, 1979) incorporated the phenomenological method of seeing in daseinsanalysis. According to Boss, daseinsanalysis is a way of thinking that encourages therapists to understand phenomena as they are immediately perceived and experienced by clients. He explains that by adopting the phenomenological approach, the therapist remains open to the client's actual experiences, rather than attempt to interpret them in terms of scientific theory or past causal relationships. In their book, *Grace Unfolding* (1991), Johanson and Kurtz explore the practice of psychotherapy in the spirit of Taoist philosophy and recommend that therapists adopt an attitude of "non-doing" (p. 9) as promoted by the Taoist sage, Lao Tzu. By non-doing, Johanson and Kurtz explain, the sage, or in this case the therapist, simply attends to, and accommodates what comes up spontaneously in the client's experience. In this way, according to Johanson and Kurtz, clients are empowered and "can move on in a way that does not depend on the therapist's cleverness or insight" (p. 10.)

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Boss also encourages clients to set aside theoretical thinking and adopt meditative thinking, that is adopting a stance that allow their experiences to unfold naturally. The stance adopted by Boss is influenced by Heidegger’s notion of releasement (*Gelassenheit*) (1959/1966), a concept that promotes adopting an attitude of “non –willing” (p. 59) or waiting. Waiting according to Heidegger, involves doing nothing, becoming more void, more empty but richer in possibilities. But waiting in this sense does not imply inactivity or indifference, for the released person is not inactive, just open to different possibilities. According to Heidegger “releasement towards things and openness to the mystery never happens of themselves. . . . Both flourish only through persistent, *courageous thinking* (p. 56, italics added.) Hence, releasement for Heidegger involves both action and non-interference depending on what is appropriate to the situation. In this respect, the Heideggerian understanding of releasement appears to reflect the Taoist notion of “wu-wei” which is best understood as action through non-action (Khong & Thompson, 1997).

Like Heidegger, Boss sees releasement or letting be as involving the exercise of “*fundamental thinking* . . . opening your eyes so that all the meaningfulness which makes up a certain thing may show itself to you” (quoted in Craig, 1988). Boss’s suggestions appear to be in line with the Buddha’s recommendation to see things as they are and to let them be.

The main difference between CBT, REBT and Daseinsanalysis, and the Buddhist approach is that these therapies tend to focus on utilising the intellect to change cognitions while the Buddha emphasizes modifying cognitions through experiential and attitudinal change.

In my view, primarily using the intellect to modify cognitions poses some interesting dilemmas. One of these

dilemmas is that while clients recognize the need to change their irrational cognitions intellectually, they are often unable to do so when they are already feeling negative, anxious or depressed. Another dilemma is the “catch-22” position wherein if clients’ thinking is irrational to some extent, they may encounter considerable difficulty in adopting an approach that calls largely for rational thinking or to learn to see things phenomenologically. More importantly, how do clients continue to “help” themselves outside of the therapy room?

Many of these dilemmas can be overcome by employing the Buddhist meditative practices and the Buddha’s teachings appropriately. Let me illustrate with two clinical vignettes.

**Felicity’s story**

Felicity a young, attractive woman had a breakdown a few years ago and was diagnosed by her psychiatrist as suffering from paranoia. She had to discontinue her higher education and was unable to work or socialise for any length of time. When she was referred to me, she presented with high anxiety, obsessive-compulsive disorder and depression. Felicity was constantly concerned with people following her, being perceived as “normal,” and worried about having another breakdown.

During counseling, I encouraged Felicity to learn to separate the situation from her feelings, internal dialogue and habitual responses. The outline in figure 1 is representative of the type of anxiety-provoking situation, and the pattern of Felicity’s feelings, thinking and responses. Felicity’s anxiety often spiralled into more and more negativity, and she would ruminate continually. She was unable to break the cycle, and wanted to learn to cope with her feelings of anxiety and depression.

Situation	Feelings	Internal Dialogue	Habitual Responses
Attending a birthday party	Anxiety	“I’m stupid”	Concerns with making eye contact
	Fear	“They must think” I’m weird”	Avoid social interactions
	Tension	“People are staring at me”	Emotionally shut down
	Depression		

**Figure 1: Patterns of Felicity’s feelings, cognitions and habitual responses**

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Initially, Felicity was encouraged to try and change her irrational cognitions into more rational ones, and to learn to see each situation phenomenologically. Although she found the combination of CBT, REBT and daseinsanalytic approaches useful, she was unable to sustain this way of thinking for any length of time, especially outside therapy.

Additionally, because of her reactivity she was unable to stop her negative thoughts from spiralling into depression. Felicity was experiencing many of the dilemmas described above. In counseling, by employing mindfulness and various Buddhist ideas with Felicity, she experienced a breakthrough (see Figure 2).

<b>Mindfulness of bodily sensations</b>	<b>Circuit breakers</b>	<b>Paying bare attention (labelling, acknowledging &amp; experiencing feelings)</b>	<b>Internal dialogue / responses</b>
Heart racing	Counting the breath	“There is anxiety”	“I ‘m making friends with my anxiety”
Dryness in the throat	Cooking	“I’m feeling anxious”	“I am feeling anxious, not sick”
		“Just sit & experience the anxiety”	

**Figure 2: Felicity—Application of mindfulness practice**

Normally, when people are anxious or depressed, they are unable to step out of this state of mind and remain trapped in a vicious circle whereby the negative thinking contributes to the negative mood, and the latter perpetuates the negative thinking. Mindfulness allows individuals to step out of their habitual pattern of thinking before it spiral into more negativity.

Utilising the Buddha’s teaching of the four foundations of mindfulness, Felicity was encouraged to be mindful of her bodily sensations, thoughts and feelings whenever she starts to feel anxious. Felicity reported being aware of her heart racing and the dryness in her throat. She was also mindful of her negative thoughts. Felicity was encouraged to put in place various circuit breakers appropriate to her lifestyle. She used breath-counting and cooking, and learned to put these circuit breakers in place *at the time* the bodily sensations were experienced rather than when the anxiety or ruminative thinking had started. In this way, she was able, as the Buddha suggested, to disrupt the process so that things could be otherwise.

Felicity was also encouraged to pay bare attention to whatever feeling she was currently experiencing without needing to modify, repress or justify it. In this way, she was able to observe how her feeling of anxiety led to fear, to tension, and ultimately to depression. She also learned to label each feeling (e.g., anxiety as anxiety, fear as fear etc) as it arose, acknowledge and accept the feeling by making space for, rather than identifying with it. I will elaborate more on this process when I discuss Caroline’s case.

In learning to be mindful and just sit with her feelings, Felicity was able to let go of each feeling as it arises and

reduce her rumination. Thereafter she found it easier to change her internal dialogue and responses to more rational ones. More importantly, Felicity was able to sustain this way of thinking for longer periods, even outside of counseling

Felicity explained that being mindful and using circuit breakers has helped her enormously. She reported feeling stronger and happier, and that now instead of ruminating for hours, she is able to let go of her anxiety and other negative thoughts in a few minutes.

It is because I allowed myself to feel the feelings. I don’t try to run away from it. I tell myself, “its ok. Just experience it.” For example, when I am feeling anxious, I allow myself to just feel the anxiety. I ask myself where is the feeling located, and give myself loving kindness. I then put in the circuit breakers. I just let the anxiety sit there. I am becoming friends with it now.

According to Felicity, being friends with her feelings has made her more accepting of herself and her state of mind.

I accept it for what I am. There is just anxiety there, and that’s how I am I have become more accepting of myself, rather than saying that I have a sickness and that it is making me worse.

Through counseling and the use of mindfulness practice, Felicity was manage her anxiety, and developed greater confidence and social skills. She was able to resume her education, and has recently completed her university degree.

## **Caroline's story**

Caroline, the client I discussed earlier sought help in dealing with her feelings of anxiety and fear when encountering stressful situations. Her habitual response was to create emotional and physical distance in work situations and in relationships. Her internal dialogue included "I don't like this," "I can't do this," or "I've got to get out." Caroline have had a difficult childhood and learned during counseling that most of her feelings were related to these "childhood fears." Initially she resisted talking about these fears, as she found it too painful. However the fears kept revisiting, but she was unable or unwilling to look at them.

As with Felicity, I encouraged Caroline to meditate and practice mindfulness – In this way, Caroline was able to get in touch with her fears and more importantly to accept and make space for them:

I did some meditation, doing loving kindness, and I felt in my tummy region that there was upset and so I went down that region and see how I feel, like you said. I am feeling anxiety, fear. And then I pose the question to myself, "What does this relate to?" I just sat with the fear. I don't know what happened or what sparked it but the fear was attached to my parents fighting when I was 10 or 11. The anxiety was related to this fear. . . . And then I started to begin to move away from them [my parent] emotionally which was around that age. I started to put distance between us. I realise that the fear that I picked up is the fear that is in other people around me. Not just my parents, but also when I am in situation with other people, when they are anxious or fearful or something like that, I automatically pick up on their fear. I think that what I was experiencing [then] was a loss of orientation. A loss of your world. So change in my life [now] is a re-orientation, and my automatic response is to be fearful of that. Rather than wait for the next thing to evolve, I am stuck in fear.

According to Goleman (1990), in meditation, clients' free association is found to be richer in content and clients more able to tolerate them. Felicity's and Caroline's experiences are good illustrations of Goleman's observations.

## **Conclusion**

Nyanaponika [1992] explains that mindfulness is not a mystical state and does not require elaborate techniques or external devices. Its working material is daily life. He notes that mindfulness is free from dogmas, and does not require practitioners to change their religions or beliefs. I would add that it certainly does not require the practitioner to become a Buddhist. I often explain to people that "I don't counsel as a Buddhist therapist but that I am informed by the Buddha's teachings." What this means is that whenever appropriate, I incorporate Buddhist ideas and practices in counseling, for as I have shown in this article, they can complement and in some cases surpass Western

therapies. As Nyanaponika (1992) notes, mindfulness teaches "the virtues of simplicity and naturalness" (p. 80) and eases the task of spiritual self-help. In my view, it also eases the task of therapists who wish to help clients in the spirit of "non-doing."

My meditation teacher once said to me "You do not only sit in meditation, your whole life is meditation" (Khong, 1995.) The psychological gift I gained from this meditative attitude, as a meditator and as a therapist is in allowing myself and the people I help, accept a range of experiences, acknowledge and let go of different emotions, sit with the uncertainty of not knowing and appreciate new beginning in each ending. I learn that if you encounter the Buddha in the therapy room "Kill him," for the Buddha in each of us is unfolding moment-to-moment.

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