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Taking the Buddha out of Buddhism:

A literature study on the concept of mindfulness

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Abstract

This paper was aimed at synthesising a comprehensive understanding of the sometimes opposing conceptualisations and practical applications of mindfulness in Western societies. Mindfulness is a part of a meditation practice derived from ancient Buddhist doctrine, in the form of the Pāli word *sati*. After proven successful against stress, Jon Kabat-Zinn started promoting it in 1990. It became popular among both the New Age movement and secular groups. There has been, however, a multitude of critique regarding the use, definition and role of mindfulness. With the anthropological theory of symbolism, this literature study analysed the historical, psychotherapeutic and capitalist contexts alongside the critique against mindfulness.

Mary Douglas' theory of purity and pollution was used to define a new symbolic system here called *mental normality*. Like Douglas' system, mental normality contains five distinct reactions to anomalies. In in this study those reactions were suggested to correspond to conceptualisations of mental health. The fifth reaction is postulated to be the practice of mindfulness in the contemporary Western context. Mending holes as they appear in the categories of mental health may not be the most constructive approach. Instead, the deconstruction of the system behind those categorisations is implied to be worthwhile.

Keywords: Mindfulness, meditation, literature study, Symbolism, Social Anthropology

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Boundless appreciation and heartfelt apologies to my loving wife and daughter for the behemoth of a husband and father this endeavour has created in its slow progression towards the finishing line.

This paper is dedicated to my mother, whose incandescent belief in her son has both emotionally and structurally, guided my first small steps into academia with unfading support.

Malmö, May 6th, 2022

Sebastian Carlsson

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1. Introduction

> As I lay there musing in the brisk darkness, I suddenly sensed a tightening inside me. It was as if I was being ever so gently wound. Then quickly, the pressure intensified, and I breathed in rapid-fire staccato and violently shook. I was a guitar string being tuned beyond its highest range. The string popped. A spike of fear slashed through my guts. And that's when I split apart. The next four hours were a hellscape of terror, panic and paranoia. There were almost no thoughts, only my body begging to escape my skin, convulsing like a fish fighting for life. The fear was a bottomless trench. (Lawton, 2021, p. 1)

This is how Dan Lawton described his experience of trying to go to sleep at a meditation retreat in the US after a day of mindfulness practice. He introduces himself as an instructor of Mindfulness-Based Stress Reduction with ten years of experience meditating. After his meltdown, he was diagnosed with post-traumatic stress disorder (PTSD) and was heavily dependent on therapy and medication for fifteen months.

Mindfulness

Mindfulness is a part of a meditation practice derived from ancient Buddhist doctrine. Its introduction in the West can be attributed to Thích Nhất Hạnh (Blomfield, 2022) and as a psychotherapeutic tool by Jon Kabat-Zinn (Kato, 2016, p. 74). After its first trials in the 1970s and subsequent large-scale adoption in the 90s, clinical psychologists and psychiatrists started investigating the effects of mindfulness and the widespread positive possibilities that it seemed to bring (Kabat-Zinn, 1985). The book *Full Catastrophe Living* from 1990 is considered the starting point of the extensive acceptance of mindfulness that has characterised western psychotherapy ever since. It is also the start of mindfulness as a secularised, modernised, westernised and eventually commodified, practice.

Touted for decades as a one-stop fix for a vast notion of behaviours and mental health issues as diverse as reducing the risk of burnout syndrome in nurses (Suleiman-Martos et al., 2020), to raising the tendency for sustainable consumption (Fischer et al., 2017), but most commonly praised as a solution for depression, anxiety, stress and distress (Gu et al., 2015, p. 5). The list is near-inexhaustible and continually growing to incorporate more aspects of mental health. However, the negative aspect of this practice is far from open discourse and common knowledge, as the narrated horror above exemplifies. There are, however, multitudes of praise and critique coming from multiple angles and dating back to the very ignition of mindfulness, as a western concept.

A critical evaluation of the current climate within mental health shows that there is reason to question contemporary Western psychiatric models of diagnosing and theorising mental illness (Clemmensen & Køppe, 2021, pp. 242-244). This is where I believe anthropology can add to the academic discourse. As an anthropologist, I will here try to divulge an intricate connection between mindfulness and conceptions of mental health.

Connection to the author

My interest lies in religious phenomena in general and the dichotomies and "spiritual and secular" in particular. I have a personal interest in religion that started with a short introduction to Buddhism and meditation. My academic journey started with psychology and led to anthropology with a developing focus on why people think, behave and believe the way they do, and how these factors symbiotically connect to a (relatively) coherent social network of cultural expressions. When I read Lawton's story, the relationship between religious and secular practice was brought to the forefront of my attention and I became fascinated by the idea of improving mental health with practices based on religious rituals.

I sense a gnawing absence of self-reflection in the growing market of "self-help" and "wellbeing" trends that base their practice or hypotheses on ancient religious ideas. I believe that deserves more academic attention. The combination of the aforementioned along with the underreporting of actual damage to people ascribing to these acclaimed panaceas should amount to considerable attention within the vanguard of mental health research. This is where I concentrated my attention before designing the present study. This paper will form a foundation on which I wish to design a field study that will be the basis of a forthcoming Master's thesis.

Aim and previous research

The aim of this paper is to synthesise a comprehensive understanding of the sometimes opposing conceptualisations and practical applications of mindfulness in Western societies. With the anthropological theory of symbolism, the present study will attempt to analyse the multiple factors included in the term mindfulness within academia.

It is not the purpose of this study to analyse the diagnostic tools, terminology or epistemology of mental health as conceived within clinical psychology and psychiatry in general. Those elements of mental health are rather used as a backdrop for the suggested need to create a new type of understanding of mental health through interdisciplinary research.

Mindfulness practice has since the early 2000s often been entangled with *positive psychology* and the various practical and theoretical applications included in that sub-field of general psychology

(Donaldson et al., 2014). In order to narrow the scope of this study, the relationship to positive psychology has been largely left out.

Another noteworthy connection is between contemporary mindfulness-based therapies and the concept of "snapping" as developed by Conway and Siegelman in their book *Snapping*. Snapping as a phenomenon details the personality change following a "spiritual breakthrough", and has been shown to be an important factor in the rise of questionable therapies and cult-like practices (Conway & Siegelman, 2005, p. 5; 29). The dangers that lurk in this development are akin to Lawton's tale above.

The present study will offer a brief description of mindfulness' historical and linguistic context to offer a foundational preface for the reader before delving into the contemporary Westernised version of mindfulness. The focus is on the evolution of mindfulness as practised in Western societies. Therefore, only the prevalent religious aspects will be included in the analysis, i.e the Buddhist and New Age movement's incorporation of mindfulness. Other religions adopting mindfulness won't be covered.

The process of researching a 2,500-year-old concept and its progression into the contemporary era has led me through multiple angles of interest connected to mindfulness. At the initial departure of this paper, the aim was to explain the process of secularisation of religious practice, exemplified by mindfulness. However, after reading Katarina Plank's 2011 dissertation "Insight and presence: academic contemplations regarding Buddhism, meditation and mindfulness" (my own translation) and her subsequent anthology "Mindfulness" from 2014, it became obvious that my original purpose had to be reworked as Plank's work is near-exhaustive on the matter. Other angles of analysis worth mentioning are Smallen's (2019) theoretical proposition of mindfulness as the ignition of a new neoliberal hegemonic masculinity and Wallis' (2011) comparison of Claude Lévi-Strauss' term *floating signifier* to mindfulness.

Kirmayer (2015, p. 459) proposed an ethnography attempting to map the social worlds in which the various aspects of mindfulness are experienced, which inspired me towards the contemporary Western context of mindfulness. After reading Hornborg's (2014, p. 196) suggestion of a comparative study of the corporate sector's mindfulness-based therapies and the healthcare sector's equivalent, I realised the present angle of enquiry. This niche can be summarised as the need for a synthesised explanation of the diverse dimensions incorporated in mindfulness as it relates to mental health as a western concept.

Essential literature

The literature chosen for this paper can be best divided into the equivalent categories following the chapters they appear in. First, Chapter Two orients the reader through the historical context of mindfulness and will primarily feature William Mikulas' "Buddhism & Western Psychology" from 2007 and Plank's doctoral dissertation *Insight and Presence* from 2014. The bulk of linguistic and historical facts stem from Tamara Ditrich's phenomenal article "Situating the Concept of Mindfulness in the Theravāda Tradition" from 2016. The choice of literature for this background chapter has not been delimited in a specific manner apart from the criteria of dealing specifically with mindfulness in its original Buddhist form.

The third chapter is the main part of the thesis. The literature collection started out with roughly thirty articles before the research questions had been properly focused. After delving into the subject matter of mindfulness and learning on the go, the questions were delimited to exclude literature not pertaining to mindfulness from a contemporary Western point of view and it's psychological underpinnings. After further research, it became clear that a chapter treating contemporary mindfulness should at least contain three important structural compartmentalisations: mindfulness as it is used in psychotherapy, mindfulness as a commodity and the collection of critique of mindfulness as it is applied in the West.

Due to the vast amount of psychotherapeutic literature, I had to add further exclusion criteria to this portion. These new criteria were to exclude the scope of psychological, psychiatric and clinical variations of mindfulness applications. This paper is concerned with what function mindfulness fills in the everyday world outside the clinical, notwithstanding their interconnectivity. To not be completely ignorant on the subject, as it inarguably relates to the issue at hand, a couple of meta-analyses were used that were referred to in other articles used in this paper.

The literature connected to the commodity aspect of mindfulness is made up of all the peer-reviewed articles I found on the subject of "McMindfulness" as well as the book *McMindfulness* by Ronald Purser from 2019. The bulk of literature that makes up the critique portion came from the reference list in the article "On the porosity of subject and object in 'mindfulness' scientific study" by Paul Grossman from 2018.

Apart from the aforementioned, the following literature was used in Chapter Three: Daphne Davis and Jeffrey Hayes' 2011 review "What Are the Benefits of Mindfulness?", a couple of other articles by Grossman, mainly his 2011 comment "Defining Mindfulness by How Poorly I Think I Pay Attention During Everyday Awareness and Other Intractable Problems for Psychology's (Re)Invention of Mindfulness" and one article by Nicholas Van Dam (et al.) from 2018 called "Mind

the Hype: A Critical Evaluation and Prescriptive Agenda for Research on Mindfulness and Meditation".

Anne-Christine Hornborg's chapter in Plank's edited book *Mindfulness* from 2014 has been invaluable. The most reoccurring book throughout this entire paper is undoubtedly the paradigmatic "bible" of mindfulness: Kabat-Zinn's *Full Catastrophe Living* from 1990. Other crucial articles are Terry Hyland's "McDonaldizing Spirituality" from 2017, João Simão's "Some Tensions between Capitalism and Buddhism" from 2019, Bhikkhu Anālayo's "The Myth of McMindfulness" from 2019 and Daniel Nehring and Ashley Frawley's "Mindfulness and the 'psychological imagination'" from 2020. The latter really helped focus the purpose of this paper towards unifying anthropological and psychological theory.

The fourth chapter is the analysis. It is primarily indebted to *Purity & Danger* by Mary Douglas from 1966 but has been guided safely home by Gananath Obeyesekere's chapter "Depression, Buddhism, and the Work of Culture in Sri Lanka" in Arthur Kleinman and Byron Good's edited book "Culture and Depression" from 1985 as well as Malene Broch Clemmensen and Simo Køppe's article "Normality, subjectivity and mental health" from 2021.

Research questions

The following questions will act as guiding stars throughout the disposition of this paper:

1. How can the phenomena of mindfulness be described in a comprehensive way that incorporates its historical development, applications within psychotherapy and its incorporation into the neoliberal capitalism market, and also take the relevant criticism into account?

2. How can the anthropological theory of symbolism be used to interpret mindfulness in its current form and what are the implications of such an interpretation?

Disposition

In Chapter Two, the reader will be introduced to the historical context of mindfulness and the origin of the term alongside Buddhism's geographical progression from East to West. In Chapter Three, the two primary versions of mindfulness in the Western context will be introduced, i.e as a method within psychotherapy and as a commodity of the neoliberal capitalist society. This chapter also includes the negative as well as the positive feedback on the mindfulness phenomena and ends with a review of the last three years of the mindfulness discourse. Chapter Four will introduce the anthropological theory of symbolism and combine the select literature under the geist of Douglas's (2002) notion of pollution and danger.

Method

This paper takes the shape of a literary study striving to map the junction of the disciplines of history, philosophy, psychology, psychiatry, religion, sociology and anthropology as they relate to the study of mindfulness. It has been my ambition to be as thorough as possible in an attempt to provide as near an exhaustive and representative summary of the phenomena of mindfulness as possible.

The data has been collected primarily through the EBSCO-based search engine LUBSearch (https://lubsearch.lub.lu.se) using the following search words: "anthropology of religion" + "psychology of religion", "buddhism", "anthropology of religion" + "buddh*", "anthropology" + "mindfulness", "buddhist psychology", "mcmindfulness", "mindfulness" + "sweden", "medical anthropology", "buddhist" + "psychology", "mindfulness" + "symbolism" and "mindfulness" + "phenomenology".

The initial inclusion criteria were peer-reviewed literature in English, followed by a second filtering on an individual basis after reading the title and abstract. In total, 100 articles and ten books were accumulated. After organising them in groups and in order of relevance, they were also divided into the years when they were written to make sense of the developmental nature of the subject. As this initial search yielded a vast number of articles relating to many aspects of Buddhism other than mindfulness, a fair few had to be discounted based on irrelevance to the purpose of this paper. A handful of articles treated the concept of mindfulness from a neurological perspective which I believe would have risked giving this thesis a slightly too psychological and biological tone than intended.

After the first cull, thirty relevant articles were left. These were read and summarised in an annotated bibliography, after which the reference lists from each article were looked up and downloaded for further inspection. Some references were found by the use of Google (https://www.google.com) and Google Scholar (https://scholar.google.com).

2. History

Before diving into mindfulness' deep linguistic and historical roots, a short introduction to Buddhism and its divisions seems fitting. Buddhism sprang out of the experiences and insights of Siddhatta Gotama, commonly referred to as the *Buddha* (meaning "the awakened one"), who claimed to have freed himself of suffering and thereby reached enlightenment. The Buddha spent most of his life in northern India but was born in modern-day Nepal, circa 2,500 years ago. The geographical spread of his ideas went from India into Southeast Asia, to Sri Lanka, to mainland China and Tibet. Later on, it spread back into India and Southeast Asia, from Sri Lanka, as explained later on in more detail. Buddhism would continue into Korea and then Japan from China before finally reaching the West around the turn of the 19th Century CE (Mikulas, 2007, pp. 5-6).

The three branches of Buddhism

From the days of the Buddha, Buddhism has been divided into three main branches, *Theravāda*, *Mahāyāna* and *Vajrayāna*. Theravāda is the oldest and arguably the most resembling of the Buddha's teachings, primarily seen in Southeast Asia and Sri Lanka (Mikulas, 2007, p. 6). Mahāyāna sprung out of the influence of the bhakti movement on early Buddhism in India. The bhakti movement emphasised love, devotion and selfless service which in Mahāyāna gave rise to a heightened value on the cultivation of compassion and faith. Today Mahāyāna has the largest following out of the three and is found primarily in China and Japan. When Mahāyāna reached China, it was infused with Taoism and became known as *Chán*. When it was brought onwards to Japan a slightly altered version of Chán infused with the traditional Japanese philosophy of art became known by its Japanese translation, *Zen*. When Mahāyāna eventually reached Tibet, it was infused with the philosophies of the concurrent Tantra movement and became the third branch, known as Vajrayāna. Today it is most notably famous for the Dalai Lama and is often called Tibetan Buddhism (Mikulas, 2007, pp. 5-6). This chapter will focus on the Theravāda branch due to its significant relationship with mindfulness.

The Pāli Canon and the Four Noble Truths
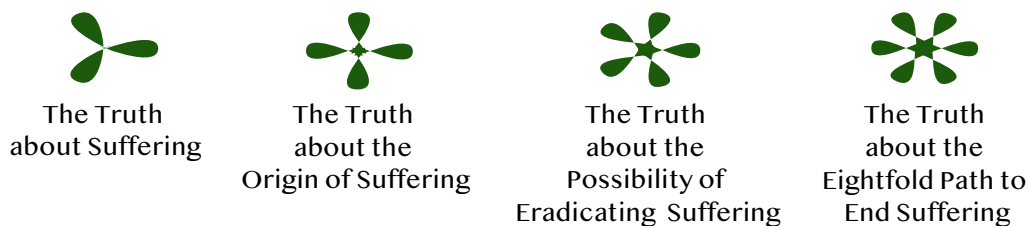
The Pāli Canon is the Theravāda collection of holy Buddhist texts, written in the ancient language of Pāli, and therefore all Buddhist terminology in this paper will be described in Pāli only. They describe the soteriological goals of Buddhism as they were described in the Buddha's original sermons (Bodhi, 2011, p. 21). Most terms and concepts in the Pāli Canon have varied meanings that

diversify into multitudes of correlated material. This creates a myriad of combinations for how to direct one's focus in order to practice concordant with the ethics and morals of the Buddha's teachings (Ditrich, 2016, p. 20). I will attempt a condensed overview of the important parts that position mindfulness within Buddhism and the practice of meditation therein.

The soteriological goals of Buddhism are summarised by the Four Noble Truths (see Figure 1 below), traditionally attributed to the Buddha's first sermon and are in short 1) Suffering (*dukkha*) is a response to the experience of reality in both its mental and physical forms combined with being ignorant of the impermanent nature of reality. 2) Suffering originates from craving or desire, two primary objects to overcome in order to rid oneself of ignorance. 3) By eradicating ignorance, the elimination of suffering follows and the state called *nibbāna* is reached. 4) The road to salvation is the Eightfold Path (Ditrich, 2016, pp. 20-25).

FIGURE 1
The Four Noble Truths

| The Truth about Suffering | The Truth about the Origin of Suffering | The Truth about the Possibility of Eradicating Suffering | The Truth about the Eightfold Path to End Suffering |

Source: Authors own design

The Eightfold Path (see Figure 2 on the next page) is like a map leading to transcendence, and meditation is the vehicle that brings the practitioner to the state of mind that connotes salvation. The Eightfold Path is compartmentalised into three categories; Wisdom, incorporating the ideas of "right understanding" and "right intention"; Ethics, incorporating the ideas of "right speech", "right action" and "right livelihood" and Meditation, which incorporates the ideas of "right effort", "right mindfulness" and "right concentration" (Ditrich, 2016, p. 24).

The last three ideas are aimed at guiding the practitioner towards the development of an appropriate mental state for contemplation on, and assimilation of the Four Noble Truths (Ditrich, 2016, p. 24). The pre-requisite for this state of mind is an overcoming of desires and aversions connected to all worldly experiences that our body, mind and six senses are subject to (Ditrich, 2016, pp. 19-20). Thusly, mindfulness is an integral part of Buddhist meditation and meditation is the practice that enhances mindfulness.

FIGURE 2
The Eightfold Path
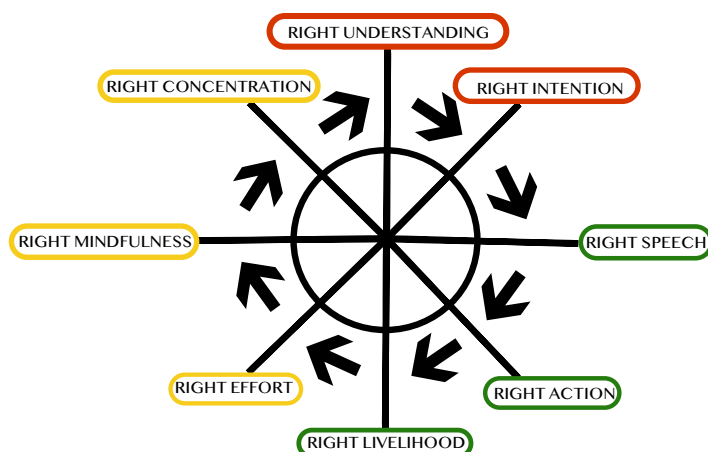
Source: Authors own design

Sati and the origin of mindfulness

Mindfulness comes from the Pāli word *sati,* a translation that traces back to the 1880s (Ditrich, 2016, p. 14). Bodhi claims that the original meaning of *sati* was "memory" and that the Buddha added the notion of "lucid awareness" following the content of his teachings (Bodhi, 2011, p. 19). Ditrich underlines the importance of *sati* being positioned in the Theravāda tradition. It points to the overarching belief within the Buddhist doctrine, namely that suffering (*dukkha*) is omnipresent in the human experience and that it can be transcended by the wisdom (*paññā*) reached through meditation (Ditrich, 2016, p. 14; 17; cf. Plank, 2011, pp. 188-192).

Ditrich posits a summary of *sati* by Pāli Canon commentator Buddhaghosa, as the basis for the modern Buddhist interpretation of mindfulness, particularly the Burmese interpretation, where meditation is the primary focus (Ditrich, 2016, p. 15). Buddhaghosa likened *sati* to a "pillar, or as a gate-keeper, because it guards the eye-door" and put firmness and clear-mindedness as its essence (Buddhaghosa in Ditrich, 2016, p. 15). This interpretation is argued to be the first step towards the popularisation and secularisation of mindfulness. It would face further simplification before being exported to the West (Braun, 2013, p. 6; 143).

Meditation as Buddhist practice

Laypeople's interest and engagement in Buddhism can be traced all the way back to the times of the Buddha, but the focus has always been maintained on the monastic parts of Buddhist associations, and thus, laypeople's impact on Buddhist development was minute. The first separation into groups of contrasting practices is that of the forest monks, focusing on attaining *nibbāna* in the seclusion of forests or caves, and the village monks adhering to the survival and passing on of scripture. This can

be traced back to 5th Century Sri Lanka (Plank, 2011, pp. 55-57). Whether or not meditation was a central notion to either of the two is debatable (cf. Sharf, 1995, p. 231), but meditation, as we know it today, can't be traced further back than the early 20th Century (Plank, 2011, p. 57).

Plank suggests that the multiple reforms to Buddhism in Asia during the 19th and 20th Centuries were catalytically responsible for repositioning meditation as the new centrepiece of Buddhist practice. The notion of Buddhism as a philosophy that should be spread far and wide rather than confined to institutions was a common denominator for all reformation attempts. At the epicentre of them all, expounds Plank, was the Theravāda Buddhists of Burma/Myanmar (Plank, 2011, pp. 56-57). Like many countries in South/Southeast Asia in the 16th Century, Burma/Myanmar was heavily changed by the ongoing colonialism. Sharf comments that, much like Sri Lanka, the colonial influence meant that elite middle-class locals started showing a growing interest in Western ideals like science and education while also opting for a strengthened national identity by stronger affiliations with Buddhism (Sharf, 1995, pp. 251-252).

Buddhist reformation

The founders of the Theosophical Society, Henry Olcott and Helena Blavatsky—the latter known as the "Mother of the New Age" (McCann, 2012, p. 6)—went to Sri Lanka in 1880. Olcott aimed to purify the Buddhist interpretation of original scripture after being enticed by Buddhism. He believed that the true message of the Buddha had been distorted or misunderstood and that through a revival and reformation, the Sinhalese identity and culture would be able to stand strong against the British colonial powers. His influence was most notably through Sinhalese writer Dharmapala. Dharmapala took it upon himself to spread these Westernised notions of Buddhist practice into India (Plank, 2011, pp. 58-59). In India, Buddhist traditions had been more or less banned from the entire country in the 13th Century AD while under Muslim rule (Plank, 2011, p. 57). Thanks to Dharmapala and his Mahabodhi Society, many of the Buddhist pilgrimages to places like Bodhgaya and Kushinagar, were resurrected. Plank underlines that many members of the Mahabodhi Society had close ties to the Burmese development (Plank, 2011, p. 59).

During the anglo-Burmese wars of the 19th Century, King Mindon became an avid meditation proponent. His court were all trained by monks and nuns, some of whom laid the foundation for what today is known as *vipassanā* meditation. Other important founding fathers of this technique were Ledi Sayadaw and Mingun Sayadaw. The latter's student, Mahasi Sayadaw, refined and spread the new technique for meditation (Braun, 2013; Plank, 2011, pp. 59-63). The technique describes a focus on any and every sensory phenomenon taking place in the moment-to-moment flow of consciousness, i.e. the focus on *sati*. In the face of traditional Buddhist doctrine, the

replacement of concentration and experience of absorption with mindfulness as momentous for the cultivating of insight was quite radical. Another controversial change was that Mahasi's new technique did not require any form of renunciation of common life (Sharf, 2015, p. 473). Apart from the development of this new technique, Mahasi is also attributed to the early modelling of urban meditation centres which helped introduce large numbers of laypeople to Buddhism in general and meditation in particular (Plank, 2011, p. 62).

Western reception of Buddhism

In 1881, the Pāli Text Society was formed in the U.K and Buddhist scripture became available on a whole new level, as previously only returning missionaries and scientists made up the bulk of contact between Buddhism and the West (Plank, 2011, p. 144).

Another major player in the rising attention being paid to Buddhism was the previously mentioned Theosophical Society, founded in 1875. They helped bring interest, not only to the eyes and ears of researchers and scientists but to the spiritually inclined commoners as well. With their view of religions as sharing an "original wisdom", the Theosophical Society combined ideas from Christianity, Spiritualism and Buddhism, among others and promoted a synthesised worldview that would later influence the New Age movement (McCann, 2012, p. 8; 19).

The influence of these two groups meant that it was primarily the Theravāda tradition that had reached the West. The 1950s however, saw a growing interest in Zen-Buddhism with Japanese poet D.T Suzuki gaining popularity, followed by the Beat Generation with writers such as Kerouac, Ginsberg and Snyder all highly influenced by Zen-Buddhism (Conway & Siegelman, 2005, p. 43). According to Conway and Siegelman, this growing interest stemmed from the boredom annexed to the American Dream in its rampaging material opulence, a dream that had awoken America to "a cold sweat of 'existential despair'" (Conway & Siegelman, 2005, p. 43). Europe experienced a "Zen-boom" during the 1960s and 70s with people travelling all over Asia to gain new experiences and spiritual attainment. From psychiatrist Carl Jung analysing Tibetan mandalas (Mikulas, 2007, p. 37) to hippies learning *vipassanā* meditation and reading about Zen, Eastern philosophies gained ground in Western societies (Plank, 2011, pp. 144-145).

According to Mikulas, the first junction between Buddhism and psychology can be attributed to a comparative study between Zen Buddhism and psychoanalysis by Fromm in 1960 (Mikulas, 2007, p. 37). The Human Potential Movement in the 1960s was another early example of combining Western scientific thought and Eastern spiritual thought. They focused on practice, often inspired by spiritual practices such as Buddhist meditation, along with holistic, humanistic psychology inspired by Maslow (Conway & Siegelman, 2005, p. 44). The combination provided a

kind of blueprint for later secular adoptions of Eastern practices, e.g Transcendental Meditation as presented by Maharishi Mahesh Yogi (Frisk, 2012, p. 55), or Vipassanā meditation as presented by Goenka (Plank, 2011, pp. 96-105).

Mindfulness enters the West properly through the teachings of Vietnamese monk Thích Nhất Hạnh in the 1970s. Hanh's version of mindfulness stemmed from the school of "Engaged Buddhism" of the mid 20th Century (Hạnh, 2008, p. vii) and went on to inspire both political and psychological thought. Most notably, Hanh's version was incorporated by Kabat-Zinn in 1979, into the therapeutic model known today as Mindfulness-based Stress Reduction, or MBSR (Kabat-Zinn, 2009, pp. xxix-xxx). I have chosen to call this transformation the "Therapeutic turn of mindfulness", borrowing Madsen's (2014) term in good faith.

Mindfulness and capitalism

Plank describes an increased interest in mindfulness from a therapeutic and clinical aspect from the 1990s and onwards. But it wasn't until the first decade of the 2000s that interest in scientific research about mindfulness really took off. The fields that took particular interest were psychology, psychiatry and neurobiology (Plank, 2011, p. 199). Within a few years, a substantial body of research, chiefly on the effects of mindfulness, had more or less established a consensus: mindfulness was a successful treatment for a vast collection of conditions. The results from mindfulness interventions included but were not limited to, increased emotional regulation, improved relationship satisfaction as well as lower levels of anxiety, depression and stress (Davis & Hayes, 2011, p. 201). The general public was not late to adopt the acclaimed solution to all their woes and by 2019 "mindfulness" had become a worldwide phenomenon estimated at several billion dollars (Purser, 2019, p. 13). In the next chapter, the shift from the "Therapeutic Turn of Mindfulness" to the business model of "McMindfulness" will be explored in more detail.

3. Contemporary Mindfulness

The first half of this chapter will present condensed and hand-picked academic feedback on mindfulness, both good and bad, from the past twenty years. The second half will detail the commodification of mindfulness into categories such as books, training programs, workshops, online courses, documentary films, apps and conferences. This commodification is sometimes referred to as "McMindfulness", a term coined by Neale (2011), and utilised to its full potential in the intriguing book *McMindfulness* by Purser (2019). The third portion will position the reader neatly in the current climate of mindfulness as portrayed by the academic discourse of the past three years.

The new paradigm

Although the original multifaceted definition of mindfulness has been reduced to a relatively simple formula—e.g "bare attention" as coined by Nyanaponika Thera, a student of Mahasi Sayadaw (Sharf, 2015, p. 473)—its role in contemporary society is still quite ambivalent in nature. To minimise the risk of this chapter suffering from a similar ambivalence the first order of business must be to review how mindfulness was introduced in the 1990s before advancing into the academic interest of the 2000s and the sea of self-help books that followed:

> The SR&RP is based on rigorous and systematic training in mindfulness, a form of meditation originally developed in the Buddhist traditions of Asia. Simply put, mindfulness is moment-to-moment awareness. It is cultivated by purposefully paying attention to things we ordinarily never give a moment's thought to. It is a systematic approach to developing new kinds of control and wisdom in our lives, based on our inner capacities for relaxation, paying attention, awareness, and insight (Kabat-Zinn, 2009, p. 2).

When Kabat-Zinn introduced mindfulness as part of a new stress-reducing program, it was called the "Stress Reduction and Relaxation Program" (SR&RP) but since then, it has become known as "Mindfulness-based Stress Reduction" (MBSR) (Kabat-Zinn, 2009, pp. xxix-xxx), so that is what it will be referred to in this paper. Other than that, the definition has stayed more or less untouched since its introduction in 1990. The program was an eight-week course involving primarily a practice of various techniques applied during meditation, offered by Kabat-Zinn and colleagues at the University of Massachusetts Medical Center (ibid., pp. 1-2).

In *Full Catastrophe Living*, Kabat-Zinn describes the clinical experience that he and his co-workers had in their "stress clinic" during the 1980s and how this could potentially "play a significant role in the healing not only of ourselves but also of our world" (ibid., p. xxxii). Patients with as varied medical problems as headaches, chronic-pain problems, seizures, panic attacks, high blood pressure, back pain, heart disease, cancer and AIDS were referred to their clinic. Kabat-Zinn underlines that his treatment neither was, nor is, a replacement for any particular medical treatment but a complimentary one (ibid., p. 1; 7). In the preface of the 2015 edition, he positions the early MBSR program in the then inceptive field of Integrative Medicine that covers evidence-based complementary and alternative medicine such as mind/body healing approaches (ibid., p. xxxi).

Kabat-Zinn's interpretation of mindfulness lies at the heart of MBSR and contains seven interrelated and interactive attitudinal factors that are taught to anyone partaking in the program. The seven factors are: *Non-judging, Patience, A beginner's mind, Trust, Non-striving, Acceptance* and *Letting go.* Their meanings can be summarised as follows: "Non-judging" being that the meditator should train in observing the automatic process of categorisation occurring with thoughts passing through consciousness to minimise this behaviour. "Patience" refers to things taking their time and the meditator is reminded that no moment is inherently better than another. Thus cultivating the wisdom that is patience and increasing their mindfulness. "A beginner's mind" is a mindset that views all things as if they are new and fresh. This enables the meditator to grasp the richness of each moment and each experience while closing the door on presumptions and taking things for granted. "Trust" comprises the need for believing in oneself and others in order to truly grasp their inherent goodness, which is especially important when practising physical acts like yoga. "Non-striving" informs the practitioner that meditating is not about setting goals but simply about being with oneself in every moment. As soon as the meditator puts up expectations upon themselves, they've created an idea that is counterproductive to cultivating mindfulness. "Acceptance" is a precondition for healing, regardless of one's condition, sick or healthy. The meditator has to accept their current situation in the given moment or tensions will just build more and make progress even harder. "Letting go" is to train in letting go of judgments, feelings and reactions to thoughts in the waking state. If the meditator is to cultivate mindfulness in extra challenging moments, they might benefit from simply acknowledging and watching the challenging aspect itself (ibid., pp. 32-40).

There are also a number of techniques used within the program, all sharing a foundational component, namely breathing. Breathing is presented as a tool for anchoring awareness in the body. It enables the practitioner, on a daily basis, to access the realm of mindful thinking and acting, simply by focusing on one's breath (ibid., p. 49). The recommended time for practising *mindful breathing* is at least fifteen minutes non-stop at least once a day (ibid., pp. 54-58).

After getting used to breathing exercises, the practitioner transitions into meditation. Meditation can be done primarily in one out of two ways: sitting or walking. Sitting meditation, or *mindful sitting*, is defined by Kabat-Zinn as "non-doing" and just like mindful breathing is about focusing and noticing how one's breath comes and goes, sitting meditation is about focusing and noticing one's body (ibid., pp. 61-64). It's emphasised to notice how one's mind tends to move away from the intended focus, e.g breathing. When this inevitably happens, one has to try and simply accept this wandering mind while also gently bringing it back to the breath. This will train the mind in being less reactive to stimuli external to the task at hand, while increasing patience (ibid., p. 65).

The breath is constantly referred back to, but meditation can be combined with various foci and Kabat-Zinn recommends five steps of progressive variations in total. First is the aforementioned "Sitting with the Breath". The second is "Sitting with the Breath and the Body as a Whole" which is essentially the basic commandment of meditation. Here the focus is on the sitting body and breathing in and out which together make up the whole body experience. The third is "Sitting with Sound", which can be practised either by tentatively paying attention and "syncing" the breath with the sounds (and silence) in one's surroundings or by putting on music. "Sitting with Thoughts and Feelings" is the fourth variation. Here the meditator should perceive the thoughts passing through the mind as "events" and note every single one along with its contents, regardless of the nature or emotions connected to it. Thoughts and feelings are often interconnected and their relationship should be brought into awareness. The fifth and final variation of sitting meditation is called "Sitting with Choiceless Awareness" and connotes the allowing of any stimulus inside and outside of the mind to be taken into awareness and watching it in non-judging stillness (ibid., pp. 72-74).

The *body-scan technique* is intensely practised for the first half of the program. This is based on the basic tenet of meditation, i.e.mindful breathing, but is conducted differently. Instead of focusing on the belly or nostrils while breathing, the meditator is lying down on their back and concentrating on one part of their body at a time, starting with the left toes and "directing the breath" towards different body parts as they enter and leave the conscious scan of the body, from toes to head. The purpose of this training is to use one's breath to become aware of every sensation in the individual part of the body in an attempt to let any tension flow away from it with the out-breath and new fresh energy with every in-breath. After completing the Body-Scan, the meditator is recommended to massage various parts of the body in order to regain the feeling of having a solid body again as sometimes, the meditator may feel that the body has become transparent and that the free-flowing breath is all that is left (ibid., pp. 76-79).

Slow stretching and strengthening of the body through *mindful hatha yoga* is the third technique used in the MBSR-program (ibid., p. 95). The recommendation is to start in the third week and to alternate daily between yoga and the body scan, for about forty-five minutes per practice (ibid., p.

101). With yoga, the practitioner could identify and mitigate physical pains or aches. Breathing through the pain or discomfort may help heal it (ibid., pp. 98-99).

The final technique is *walking meditation,* which entails walking while focusing on the act of walking or walking and breathing. Like the other techniques, the meditator is advised to set aside a time for the walking meditation, be it ten or thirty minutes. The meditator is advised to focus on all sensations of walking, from the foot touching the ground to the variations of terrain, weather and speed of the walk. However, the focus should preferably be on one aspect of walking per walk, to maximise the mindfulness training. There should not be a goal or destination to the walk (ibid., pp. 114-116). This concludes Kabat-Zinn's eight-week MSBR-program.

Contemporary science on mindfulness

A search on the EBSCO-based search engine LUBSearch (https://lubsearch.lub.lu.se) on the word "mindfulness" limited to titles, published within the years 1990 to 2010, gave 4,726 peer-reviewed articles. The same search but limited to material published between 2010 and 2020 yielded 42,405 articles. Far from being conclusive evidence, it is telling of the increase in academic interest in the subject of mindfulness over the last three decades, an increase of almost 800%. For obvious reasons, this makes any sort of summary of the literature more or less unmanageable. However, in the interest of contextualising the general tone of the consensus within psychotherapeutic adoption of mindfulness practice following the introduction of MBSR in 1990, a couple of literature reviews will be summarised.

Davis and Hayes's practice review is aimed at informing psychotherapists about the empirically supported benefits of mindfulness. The authors propose that "insight" can be interpreted as the beneficial outcome of mindfulness practice and that mounting evidence supports a neurological basis for the correlation between mindfulness and insight. Variations in meditation techniques have shown a change in the patterns of electrical activity in the brain that corresponds to the traits commonly attributed to the parts of the brain that have increased activity. Therefore, it is important to note that mindfulness meditation is distinct from concentrative meditation where mantras are used, as these would alter the electrical activity in the brain differently (Davis & Hayes, 2011, p. 199).

The benefits of mindfulness underlined by Davis and Hayes are the affective, interpersonal and intrapersonal dimensions. The first one refers to the development of effective emotion regulation, e.g how one might ruminate less on problems. The reduction of anxiety and depression symptoms are also affective benefits supported by the evidence. On the whole, it seems like mindfulness practice helps the individual to experience emotions more like a selective process rather

than an involuntary take-over of the mind (ibid., p. 200). Even the ability to keep things in short-term memory (known as *working memory*) was seen to improve after an eight-week mindfulness program. Following the aim of Kabat-Zinn's MBSR-program, Davis and Hayes retell the evidence pointing towards the practice of mindfulness improving the brain's capacity to recover after being provoked in a stressful or otherwise negative situation. The authors conclude that emotional regulation is more or less a defining benefit of mindfulness practice, supported by very strong evidence (ibid., pp. 199-201).

The second benefit, the interpersonal, is about *trait mindfulness,* i.e. an individual's predisposition towards maintaining attention in the present moment in a non-judgmental way (Brown & Ryan, 2003). Trait mindfulness is shown to be positively correlated with relationship satisfaction. An individual who scores higher on trait mindfulness has a higher statistical likelihood of responding more constructively to stressful situations within the relationship as well as handling conflicts and emotional communication better than one scoring low on the same trait as evident by numerous studies presented in Davis and Hayes practice review. In the third and final dimension, "intrapersonal benefits", physical improvements such as increased immune functioning, improved well-being and reduced psychological distress are highlighted. Many scientists attribute these physical improvements to *neuroplasticity*, which refers to the brain's physical alteration following experience, something that suggests that the more one trains mindfulness, the more beneficial the effects could become (Davis & Hayes, 2011, p. 201).

Davis and Hayes also point to evidence showing that the therapists themselves benefit greatly from having a mindfulness practice of their own. Apart from improving their personal lives, it has been shown to increase empathy and compassion as well as increase counselling skills. They conclude that more research is needed to understand the benefits of long term meditation and that other ways of increasing mindfulness need to be investigated as well (ibid., pp. 202-203).

In 2015 the first systematic review of meditation studies identified and evaluated the evidence for the effects of mindfulness-based interventions and the underlying mechanisms responsible for those effects. The majority of the twenty reviewed articles were supportive of the same claims found by Davis and Hayes in 2011. "Mindfulness", "rumination" and "worry" showed moderate and consistent evidence of being important mechanisms underlying MBSR and similar therapy interventions. "Cognitive and emotional reactivity" showed strong and consistent evidence while "self-compassion" and "psychological flexibility" showed insufficient evidence of being significant mechanisms involved (Gu et al., 2015, pp. 8-10).

Gu (et al.) add a critique of some methodological weaknesses that stand out. Many studies didn't analyse the time aspect of the mindfulness-mediation during therapy and most didn't isolate the participants who received the correct amount of mindfulness intervention. As follows,

conclusions about what mediations actually caused what and what benefits were due to other circumstances than the applied mediations are hard to deduce. Nonetheless, the data is compelling and can aid future research, but the evidence was insufficient for the identified mechanisms (Gu et al., 2015, p. 9). This critique is instructive of the academic admonitions against the naïve large-scale acceptance of mindfulness by the general public that started amassing between 2010 and 2020.

Critique of mindfulness

One of the voices on the frontier in the academic criticism of mindfulness as practised within psychotherapy is Grossman. In 2011 he published a scathing commentary on mindfulness definitions and operationalisations within psychology, in particular, the widely popular metric of self-reported questionnaires such as the "Mindfulness Attention and Awareness Scale" (MAAS). The main target of his critique is the risk of "denaturing and decontextualization" of Buddhist constructs. This in turn could lead to an avoidable loss of potential therapeutic benefits of mindfulness in the future as well as a general misinformed understanding of Buddhist perspectives (Grossman, 2011, p. 1035).

These are some of Grossman's main concerns; the absence of the use of objective instruments in combination with self-report questionnaires in the measurement of mindfulness which is standard praxis when measuring other psychological states or traits, e.g depression, in order to make sure that the measured data actually measures what the researchers intend to measure; the lack of attention geared towards *content validity*, which means to what extent the measurement is a fair representation of all essential aspects of the construct in question (Grossman, 2011, p. 1036); there is a relatively low correlation between the various available questionnaires, meaning that depending on what scale one is measured by before and after an eight-week MBI, the tests may indicate high effects on one and low on another and people answering questionnaires about a program of their own choice, meant to improve their well-being, may pose high-risk of biased answers (Grossman, 2011, pp. 1036-1037; see also Van Dam et al., 2018). Grossman ends with the advice of producing more qualitative research, incorporating such methods as interviews, in order to gain better insight into the true underpinnings of both the practice and experience of mindfulness (Grossman, 2011, pp. 1038-1039).

Echoing a similar critique, Hanley adds the need to distinctively separate the internal sub-practices of MBIs such as MBSR. Since MBSR includes both yoga and seated meditation it may be hard to ascertain the main contributors to increased mindfulness (Hanley et al., 2016, p. 105). Other critics of MBIs have called for higher demand on the education of the therapists in regards to the Buddhist background and the original context of mindfulness in its practice, i.e. as a tethered

component of the Eightfold Path (de Zoysa, 2016, p. 365). Van Dam suggests that scientific enquiry should take after the evolution of the first endeavours to explore general intelligence. Rather than attempt to investigate the big ambiguous notion of "intelligence" researchers compartmentalised the underlying cognitive structures and focused on them individually. Similarly, "mindfulness" should be compartmentalised into smaller parts that might yield more concise results (Grossman, 2019, pp. 104-105; Van Dam et al., 2018, p. 44).

Much like the narration at the introduction of this paper, there have been a number of psychotic symptoms recorded following intense meditation. Kuijpers, concluded that the heightened risk of these symptoms lies in persons who have a history of psychiatric symptoms and/or specific types of personality structures (Kuijpers et al., 2007, p. 462; see also Lindahl et al., 2017, pp. 24-30). The reporting of meditation-related experiences that led to medical attention or further treatment, so-called adverse effects (AE), has continued to increase. The range of unwanted symptoms includes psychosis, mania, depersonalisation, anxiety, panic and traumatic-memory reexperiencing. These reports are rarely featured in the bigger picture advertised in the name of mindfulness. However, poignantly, many Buddhist meditation guides *do* address the AEs which is further proof of the chasm between the secular interpretation of mindfulness and the original Buddhist version. Even though some improvements in the monitoring of AEs have been implemented in MBI-research, there's still a dire need for more systematic approaches as the majority of the past reports of AEs have mainly been in the form of case studies or case series (Van Dam et al., 2018, pp. 47-48).

It is quite worrisome that there seems to be so little attention being paid to the direction of these concerns, which are far from harmless. Van Dam points to two papers published seven years apart that consist of similar methodological faults. They explain the mixed reviews on the actual benefits of mindfulness too, it's not only a matter of questionable science, it's outright the matter of ignoring the opposing views as well. A number of meta-analyses exemplify the studies conducted with results stating the absence of a positive impact on patients' levels of depression, stress and well-being (C. Strauss et al.; Hofmann et al., 2010 in Van Dam et al., 2018, p. 46). Yet, both the American Psychiatric Association and the National Institute for Health and Clinical Excellence in the U.K endorse MBIs in some cases (Van Dam et al., 2018, p. 46). Overenthusiastic reports on mindfulness-related practices have been based on a rather weak foundation it seems and their influence has seen little-to-no signs of ceasing its evolution into new areas of Western culture. These reports have been part and parcel of the development of the next phase of mindfulness, namely its integration into the public sphere, which will be explored in greater detail next.

McMindfulness

Already prior to the therapeutic turn of mindfulness, the so-called "second wave of cognitive-behavioural therapy" was used in marketing for entrepreneurial ventures within non-clinical therapies and consultations. It was a way to add a quality marker for the programs or courses offered by the companies, and as Hornborg explains it, primed the market for the subsequent inclusion of mindfulness in both actual practices and advertisements for them. The inclusion of mindfulness into the non-clinical practices influenced the structural development of the practices and added a new emphasis on the "untapped energies" inside the individual as well as their own experiences as a source of knowledge (Hornborg, 2014, pp. 178-179).

With the addition of mindfulness, Hornborg claims that the new direction of those practices brings them closer to the New Age movement as a contemporary healing practice. Although most "lay therapists" might not subscribe to the New Age philosophy or accept the label "healer", many of their descriptions and advertisements make use of similar linguistic tropes, e.g "the Source" or "your inner potential". In order to distance their practices from religious or spiritual ones, terms like "technique" replace "ritual" even though the epistemological definitions are more or less identical (Hornborg, 2014, pp. 179-180, my translation). The same goes for reference specifically to Buddhism, which is not seldom seen advertised as combined with science for a greater product, service or outcome (Cortois et al., 2018, pp. 310-312; Hornborg, 2014, p. 193).

It is not only the religious connection that creates a paradox within the non-clinical adaptation of mindfulness, the well-being industry has a similar relationship with science too. Hornborg describes how the scientific discoveries of the effects of mindfulness reach outside the scientific community in the form of non-scientific popular literature and media coverage and become invaluable tools for spreading the gospel of mindfulness and anything remotely relatable to it. At the same time, lay therapists may portray their practises or consultations as valuable by virtue of being able to *transcend* the current scientific understanding of the world (Hornborg, 2014, p. 181; 190). The most profitable areas for these private entrepreneurs are first, what Bazzano calls a "quick fix for the anxieties of late-capitalist society" (Bazzano, 2014, p. 164) which gained popularity among individuals. Secondly, in order to reach the big money in the private sector, the promise to improve workers' efficiency and profitability became the main focus of mindfulness as a product on the market. This was done by increasing the so-called "human capital" by teaching workers to become healthier and less stressed while also becoming more present in their work (Hornborg, 2014, p. 183, see also Hyland, 2017).

A new phase of mindfulness derivation can be detected after successfully being incorporated as a solution to both individual consumer needs and public sector optimisation needs (Hyland, 2017,

pp. 339-340). This new corporate mindfulness is often implied by the term "McMindfulness", popularised by the book of the same name by Purser (2019). It is based on the process of "McDonaldization" as put forth by Ritzer (2015, pp. 14-16).

Hyland describes how the four main aspects of Ritzer's McDonaldisation can explain the transformation of mindfulness into McMindfulness. The first aspect is *efficiency* and is represented by the popularity of mindfulness following its relatively easy access and fast results as purported by scientific research. This led to an increasingly positive view of mindfulness in the eyes of the general public. Corporations immediately took advantage of this by prefixing or suffixing "mindful" to their products and *voilá*, sales galore. Anything from children's colouring books to relaxation CDs, from self-help books to smartphone apps with mindful gardening, mindful cooking etc, flooded the market (Hyland, 2017, pp. 336-337). The second aspect is *calculability*, which connects to the aforementioned concerns presented by Grossman regarding the flawed method of measuring mindfulness in individuals by the means of self-report questionnaires. This leads directly to a quantity-over-quality approach which has been seen both in the clinical and non-clinical applications of mindfulness (Grossman, 2011; Grossman & Van Dam, 2011; Hyland, 2017, pp. 337-338). The third aspect is *predictability*, which is imputed by the eight-week MBSR program presented by Kabat-Zinn and the ensuing variations of MBIs that have more or less remained unchanged since their development in 1979, along with their proclaimed benefits (Hyland, 2017, pp. 338-339; Kabat-Zinn, 1982). The fourth aspect of McDonaldisation is the *control through nonhuman technology* which can be seen in the inclining amount of smartphone apps like "Insight Timer", "Smiling Mind" and "MyLife Meditation" (Newman, 2021) along with the online versions MBIs (Hyland, 2017, p. 339).

Kirmayer postulates that "happiness, well-being, or following one's bliss is framed in terms that reflect the political economy of consumer capitalism and neoliberal efficiency in which feeling good in itself becomes both commodity and goal" (Kirmayer, 2015, pp. 460-461), and as such conflates the contemporary consumer demands with the spiritual quest. At this point, little reverence seems apt for mindfulness in its contemporary conceptualisation. The continuation of its practices, in any capacity, seems doomed to serve the opposite function than intended in its original form, e.g feeding the neoliberal capitalist machinery.

Current climate

Simão declares the impossibility of unification between Buddhism and capitalism. He exemplifies mindfulness in its pure form, i.e *sati*, in its integral part of the Eightfold Path and its aim at the liberation and enlightenment of the individual. This enlightenment is based on the realisation of,

inter alia, three primary falsehoods: 1) that there is such a thing as a tangible self, 2) that one is born free and 3) that desires are satiable (Simão, 2019, pp. 80-83).

Simão remarks that the first realisation, i.e of no-self (*anatta*), is incompatible with the capitalist notion of ownership as obviously, "there has to be someone who possesses […] but as there is no self, there is no one who possesses" (Simão, 2019, p. 81). The second connects to the *kamma*, i.e the belief within Buddhism that everything is connected. If nothing can be extrapolated in isolation, then freedom is not possible within that system (Simão, 2019, p. 83). No one is born free and we are all subject to the preexisting conditions and social contexts surrounding us before, during and after our life.

The focus on growth and acceleration in capitalist systems is often used as a description of the circular momentum of existence that keeps individuals in repetitive patterns rather than on the incremental path leading towards attaining true freedom, i.e *nibbana* (Simão, 2019, pp. 84-85). The third realisation, *tanha*, treats the negative aspect of desire, which consists of sensory pleasures and behaviour that is directed purely for the gratification of the ego. These are considered unnecessary and bad. This is in opposition to the Buddhist notion of *chanda*, which is the positive aspect of desire, namely all the necessary things for the well-being and survival of ourselves and others (Simão, 2019, p. 82). In some cases, it may be hard to distinguish between the two aspects of desire, but Simão reminds us that the problem is not the desire itself but rather the attachment to it. This is what Buddhist philosophy tries to mitigate by encouraging moderation. Capitalism, conversely, needs profit and productivity to accumulate indefinitely and can as such be defined as an opposite force to that of moderation (Simão, 2019, p. 83).

The situation that arises after decades of mindfulness appropriation, as pointed out by Simão, is a solution, not to the cause of stress and depression, but to the emotional wounds created in its pathways. Mindfulness, in the form of McMindfulness, has become an instrument of maintaining the status quo of neoliberal capitalism. The lack of questioning causes stems directly from the individualisation of stress and depression, i.e that individuals increasingly are seen as responsible for their own situations. Consequently, the solution to these problems is to be found in the individual, not the social or political origins from which they actually stem (Simão, 2019, p. 84). Simão concludes that practising true mindfulness, *sati*, would bring significant individual and social change by doing away with the ideas of possession, consumption and freedom as understood in the capitalist system. Ergo it is not possible for it to be spread throughout the current system without considerable reductions, e.g. an ethical neutralisation of its connoted philosophy. It is precisely such an ethical neutralisation that turned mindfulness into McMindfulness (Simão, 2019, p. 85).

On the subject of McMindfulness, Anālayo wrote an article titled "The Myth of McMindfulness" where he introduced some very relevant commentaries on the concept of

mindfulness in the neoliberal capitalist context. His critique of McMindfulness as a descriptive tool for MBSR, or MBIs in general, is two-fold. First, he notes that Purser and other proponents of the term McMindfulness, seem to have an expectation upon mindfulness therapists to also have a certain political agenda that they convey to their patients—as if it were integrant to the underlying Buddhist agenda—when such a notion is, in fact, completely at odds with the early Buddhist discourses (Anālayo, 2019, p. 473). Even though liberation from cravings and clinging by the practice of mindfulness would have social implications of certain magnitudes, as suggested by Simão (2019, p. 85), the focus is on individual practice within the mind of the practitioner, not on a group or society per se (Anālayo, 2019, p. 473).

Anālayo takes the argument of political engagement one step further and suggests that the becoming of a *buddha* is congruent with refraining from taking an active part in politics. If one would trace the decisions and considerations made by the Buddha himself, it would be obvious that he deliberately saw little value in using political or authoritative power in order to spread his message. The road to liberation and enlightenment is an act of placing spirituality above politics. This was not to say that Buddhism contains no reference to politics or social structures, quite the opposite. The Buddha spoke about the moral decline and the responsibility of kings regarding the poverty of their subjects in ways that would please most left-wing sympathisers today, but he emphasised a wholly different solution, namely to take refuge in the overarching Buddhist truth (*Dhamma*) and themselves (Anālayo, 2019, pp. 473-474).

A common note of criticism following the investigation into the historical development of mindfulness is that of its reformation and how it started a simplification of mindfulness in order to spread Buddhism to laypeople. Anālayo, conversely, recounted the meeting between the Buddha and King Pasenadi where the latter was aided in ending his habits of overeating by learning the art of mindfulness. Anālayo postulates that this implies that the Buddha both advocated mindfulness for its health benefits—apart from its soteriological significance—and the conveying of Buddhist ideas to laypeople (Anālayo, 2019, p. 474). Interestingly, a relatively new meta-analysis on MBIs' effect on reducing binge eating, adds scientific credibility to the Buddha's recommendation of mindfulness to an individual concerned with overeating, even if the data so far is inconclusive on whether or not its effects are maintained across time (Grohmann & Laws, 2021).

The idea that "mindfulness as a focus on the present moment" was a relatively modern definition is disputed by Anālayo (2019, p. 474). He refers to an emphasis on the present moment that can be found in the instructions for cultivating mindfulness as proscribed in the ancient texts of *Satipaṭṭhāna-sutta* and *Ānāpānasati-sutta* (ibid.). In contrast to the argument put forth by Purser (2019, p. 23), Anālayo claims that "[t]he memory connotation of mindfulness does not stand in contrast to [the present moment]" (Anālayo, 2019, p. 474), i.e there is no conflict between the notion of

mindfulness defined as attention to the present moment and the attention to memory. He continues to clarify how mindfulness-in-the-present-moment has been misconstrued in its frame of experiential time—it was conceptualised in later Buddhism as a sort of momentariness—and as such, Purser's argument that it might not be possible to actually experience the present moment as it's often presented (Purser in Anālayo, 2019, p. 475) holds ground.

Notwithstanding the above argument, Anālayo maintains that the original descriptions of mindfulness allow for a "considerable breadth", encompassing both aspects of the past and the future in such a way that the focus on the present moment is not so much lingering in a pausing manner but rather a constant reflection on the changing nature of time. The practice of mindfulness, seen through this lens, implies an improvement in the ability to clearly distinguish between the impermanence of time by virtue of its three dimensions: what has changed, what is changing now and what will change (Anālayo, 2019, pp. 474-475).

Purser condemned mindfulness within MBSR practices as educing a lack of critical thinking due to, what he believed, was a promotion of "tuning out of thoughts" (Purser, 2019, p. 40; 111). As the MBSR practice was disclosed in *Full Catastrophe Living* (Kabat-Zinn, 2009), however, thinking is not considered bad, *"nor is it even undesirable during meditation. What matters is whether you are aware of your thoughts and feelings during meditation and how you handle them"* (ibid., p. 69). Anālayo adds that mindfulness, when cultivated properly, can enhance the potential for critical reflection in a similar way to how it aids the process of noticing irrelevant thoughts during meditation. Anālayo concludes that Purser and others' use of McMindfulness as a label for contemporary MBIs has reached the status of fiction, or "myth" as he calls it (Anālayo, 2019, p. 476).

So far, the current climate seems to point towards a tendency to keep mindfulness as a psychologically beneficial practice and diminishing the reach of McMindfulness as a concept for understanding it, if not entirely abolishing it. But seeing that mindfulness is being used both in religious, secular, clinical and commercial contexts as well as showing no signs of decreasing, maybe it's not enough to state that Buddhism and capitalism can't coexist (Simão, 2019), or that McMindfulness offers a very limited and highly politically biased description of the Western mindfulness practice (Anālayo, 2019). The bigger problem of McMindfulness might lie in the individualisation of mental health in general, as implied by Simão (2019, p. 84).

The idea of individualisation is adapted and reframed in psychological terms by Nehring and Frawley (2020) with their theory of "psychological imagination". Their theory is an inversion of C. Wright Mills' sociological theory of the "sociological imagination" from 1959. Conversely to Mills, who emphasised the making of social problems into personal problems (Mills in Nehring & Frawley, 2020, p. 1185), Nehring & Frawley positions mindfulness as an example of the making of personal

problems out of social problems, more precisely in the form of mental health (Nehring & Frawley, 2020, p. 1185).

The underlying sociological explanation for the process leading to the sociological imagination is the values of freedom and reason being taken for granted (Mills in Nehring & Frawley, 2020, p. 1185). The corresponding root that is taken for granted in the process of the psychological imagination is instead the quest for wellbeing, as hypothesised by Nehring and Frawley. Extrapolating this idea reveals that the psychological imagination is a "powerful underlying cultural outlook" that spurs the well-being industry to create treatments of social problems in a private manner, like mindfulness (Nehring & Frawley, 2020, p. 1195).

The stress of neoliberal society is not treated as a social problem that needs fixing, but rather as a sign that there is a hole that needs to be filled by the well-being industry and offered to the individuals searching for it. In this context, Nehring and Frawley demonstrate that historical, philosophical and scientific connections to the treatments offered are used as reinforcements of the claims made on their behalf, in this case of mindfulness (Nehring & Frawley, 2020, pp. 1197-1198).

Facilitated by the rhetoric of mental health and wellbeing, the increasingly normalised process of the psychological imagination epitomises a tendency to tether the individual to the weight of their own existence and remove the ties to the collective spirit (Nehring & Frawley, 2020, p. 1197). But is this an exhaustive description of what mindfulness really *is* in the modern, neoliberal, capitalist, Western society? And if not, is it even the biggest and most defining characteristic of it? In most critical evaluations of mindfulness, one aspect or another is either ignored or blissfully forgotten. In the next chapter, I will analyse the previously presented factors of mindfulness in contemporary Western society.

4. Mental Normality

Here follows an analysis of the previous chapter based on the anthropological theory of symbolism, primarily as developed and presented by Douglas. This analysis will incorporate four distinct elements of mindfulness, the historical element, the therapeutic element, the McMindfulness-element and the element of critique as it applies to the previous three elements. It will be argued that the host of content included in the term mindfulness can be coherently united if positioned as a ritual within a symbolic system. But first, a short introduction to the field of symbolism as it sits within the anthropology of religion and how symbolism in a wider perspective applies to psychology and by extension, mental health.

Symbolism

Bowie compresses the general purpose of anthropology to a matter of comparing the individual to the group or investigating the relationship between the "self and other" (Bowie, 2006, p. 1). When it comes to the sub-field of anthropology of religion, Morris distinguishes four approaches that define it, the *intellectualist*, the *structuralist*, the *functionalist* and the *symbolist* approach. The first one he attributes to Tylor and Frazer. The last three he attributes to Durkheim and Radcliffe-Brown, with the caveat that structuralist notions are a "hidden thesis" within their otherwise functionalist or symbolist ideas (Morris, 2000, p. 182).

The main debate, according to Morris, regards the contrasting interpretations offered by the intellectualist approach and the symbolist approach (ibid., p. 139). The intellectualist approach is characterised by a tendency towards theoretical and explanatory models (ibid., p. 182), whereas symbolism attempts to identify patterns within a *system of symbols* or to identify the ruling facet of a symbol system, two perspectives that sometimes stand at odds with each other (ibid., p. 224). Durkheim's influence on the subsequent symbolist approaches is not entirely straightforward and Morris explains that Durkheim's view on religion is both aligned with symbolist and intellectualist definitions. Durkheim's fundamental theory of religion, according to Morris, defines it as an "intellectual precursor of science" (ibid., p. 307), which aligned with Frazer's implications and opposed entirely those of Lévy-Bruhl, who saw religion as a nonlogical practice replaced by the rational practice of science (ibid., pp. 119-120; 182; 302; 307).

However, a number of anthropologists do away with this theoretical imbalance by avoiding the discussion of logic and rationality when it comes to religion and magic altogether. Instead, these are interpreted purely in their symbolic nature, an approach applied by both Turner and Douglas (ibid.,

p. 301). Other influential anthropologists that lent their minds to the puzzling phenomena of religion are Lévy-Strauss, who thought of myths as a sign that there must be a genetically based universal psychology of sorts (Bowie, 2006, p. 17) and Geertz, who attempted to decipher the symbolic representation of social life (ibid., p. 20). In the present study, I have applied an analytical foundation from Douglas.

Douglas, along with Hertz, introduced the concept of the human body as an example of *symbolic classification* to the field of anthropology of religion, which has since been highly influential, even outside of anthropology ibid., p. 35; 39). Symbolic classification can make use of other tools than the body, such as sex, age, ethnic or cultural features, language, health and disability. Bowie details, "It is what these categories mean or represent to us that *determines our behavior towards others*" (ibid., p. 34, my emphasis). Fundamentally, this is the reason why I chose to filter the literature on mindfulness through symbolism. It invites a potentially rewarding alternative to the critical voices against the contemporary use of mindfulness *while including those voices* in the new category created.

Symbols are constructs and are not by default universally understood, but they universally abound in human cultures. One of the tools of classification available universally is that of the human body (ibid., p. 36). This body incorporates a brain, and I argue that its functionality and/or dysfunctionality is comparable to the symbolic classification of the "pure" versus "polluted" dichotomy as proposed by Douglas (2002, p. 4). The workings of the brain is obviously a conundrum hard to investigate without touching upon the field of psychology.

In psychology, and more specifically, in Jung's *analytical psychology*, the concept of symbolism was often described as various mythical or spiritual representations of psychological phenomena, i.e the symbol of Christ or Buddha as a representation of "the Self" (Jung, 1999, p. 39). Along with Freud's psychoanalysis, this can be seen as the start of a cultivation of the individual and the eventual replacement of religion by "self-actualisation" (Madsen, 2014, p. 3). This also opened the doors for a new kind of religion in the 1960s, the New Age movement with its characteristic position of "the sacred" as something to be found within each individual (ibid, p. 45; 55).

In contemporary religious expression, the social aspect takes the back seat. Together with the focus on the individual in the so called *therapeutic culture* that we see today, "society" is often something the self has to be liberated from, rather than integrated into, in a spiritual sense. Madsen aptly concludes that "[t]he result of seeing God as a cosmic therapist is that everyone is 'religious' and few are critical of this" (ibid, p. 49). So symbolism, seen through the lens of anthropology, allows us to create categories that include a large spectrum of varying behaviour and phenomena, which I will exemplify below with mindfulness. But having the changing climate within psychology in the back of your mind, the reader may sense a burgeoning connection between the psychological and the anthropological symbolism. I posit the individual replacing god, paired with Western

societies ideas of mental health, as a powerful combination capable of shaping culture as we know it. The paradox of contemporary Western religion, according to Madsen, is that it elevates the potential of the individual, while not offering a single measure of support in the path towards attaining it (ibid, p. 56). The category created with symbolism, will therefore reflect the integral views on the individual, their wellbeing and how mindfulness connects to our understanding of these notions.

Anthropology and mental health

As posited by Gananath Obeyesekere, "[t]he *work of culture* is the process whereby painful motives and affects such as those occurring in depression are transformed into publicly accepted sets of meanings and symbols" (Obeyesekere, 1985, p. 147). As such, the symptoms of certain mental health issues can be seen as conditioned by culture-specific contexts. Obeyesekere argues that it may be problematic to disengage symptoms of mental illness from culture-specific values, e.g Buddhist understanding of suffering juxtaposed with the Western psychiatric definition of depression (ibid., pp. 134-141). The *DSM-III* (*Diagnostic and Statistical Manual of Mental Disorders III*)—the reference book par excellence for psychiatric diagnosis—which Obeyesekere most likely referred to, has been through significant changes and developments since Obeyesekere's article (American Psychiatric Association, 2022b). Consequently, it is not entirely unproblematic to draw conclusions valid today from his comments, enticing as they may be.

Nonetheless, a crucial point made by Obeyesekere, is that it's plausible that the free-floating nature of certain symptoms of depression can be linked to a lack of "cultural crystallization" (Obeyesekere, 1985, p. 148). In effect, an underlying feature of the Western conception of depression may be a missing social facet relating the individual to the fact of life's impermanence and furthermore, aiding them towards accepting said impermanence with all of its implications.

In lieu of depression, stress will be illustrative of the relationship between mindfulness and mental health. As a biological and neurological phenomenon, stress is perfectly natural and fills an important role in the survival of the human species. It's not until it becomes sustained or chronic that it becomes truly dangerous to humans, e.g. prolonged stress can lead to anxiety, depression and memory loss (Sapolsky, 2003, pp. 88-90). In the everyday life of contemporary Westerners, primary factors of concern for increased psychological stress are; not having an outlet for frustration; feeling out of control; lacking social support and not seeing any near-future improvements in their current situation (ibid., p. 88).

The increase of perceived stress among 16 to 29-year-olds from 12% in 2010 to 15% in 2020 (Folkhälsomyndigheten, 2022) is an indicator of the normative role of stress in contemporary Western society. It can also be reflected in the level of engagement by academia in stress-related topics of inquiry over the past twenty years (Nehring & Frawley, 2020). Let's postulate the following; stress itself isn't something that ought to be eradicated from the human experience as it plays an essential role; stress also exists in contexts unrelated to its natural state and in these contexts stress is harmful to the individual. If those suppositions hold true, the extrapolation ought to be the need for mitigating the contexts rather than the symptoms of stress. However, as induced by Nehring and Frawley's psychological imagination, the social issue has been rephrased as a personal issue. In other words: workplace-related stress has been reconstructed into a behavioural or biological fault of the individual (ibid., 2020).

Mindfulness as symbolic ritual

Clemmensen and Køppe underline a need for a more stringent analysis of the historical context of mental health, the subjectivity entwined with the interdisciplinary development of theory within psychiatry and a firm questioning of normality as imbued in the essentialist nature of psychiatric diagnoses (Clemmensen & Køppe, 2021, pp. 244-246). In Douglas' *Purity & Danger* she describes the concept of dirt being actualised only when it is in relation to other things. She famously defined it as "matter out of place" (2002, p. 44). Inspired by Clemmensen and Køppe's recommendation, I believe that this can be reimagined for the purpose of conceptualising mental health through a similar filter as Douglas' dirt. For example, stress, as an aspect of mental health coupled with the relevant cultural context, say work-related stress, exemplifies my notion of "*symptoms* out of place". By this, I underline a distinction between mental health as it is conveyed in society at large versus the clinical setting of psychiatry where symptoms of mental health issues can be defined as in their "rightful place".

Douglas describes how *symbolic systems* deal with anomalies and ambiguities in five distinct types of ways which will be unveiled momentarily. Douglas contrasts Western society's reflection upon its own relationship to dirt and that of "primitive societies". She suggests that the former wrongly differentiates itself from the latter by claiming that its own relationship to dirt is hygienic in nature whereas the "primitive societies" have a purely symbolic relationship (Douglas, 2002, p. 43). In reality, Douglas infers, both relationships are variations of symbolic systems, and though they do not share the same rules of classification, dirt is the by-product of both systems ibid., p. 44).

I suggest that a similar argument can be applied to behaviours and experiences related to another symbolic system that is dubbed *mental normality*. Mental normality refers to a collective

notion of mentally healthy, stable and "normal" behaviour or experience. Just like dirt is a byproduct of matter not otherwise fitting into categories of purity, mental illness is the byproduct of the behaviours and experiences not fitting categories of mental normality. Following their unfitness, they are considered anomalies or ambiguities that are treated along the same five reactionary groups described by Douglas.

If anomalies and ambiguities aren't dealt with properly, the whole system collapses. It is therefore in the self-preserving interest of society at large, to confront the defying events. In addition to a short summary of Douglas' five reactions to anomalies and ambiguities, in the interest of covering all bases, brief remarks on how they can be related to mental normality will also be included. Noteworthy, Douglas prefaces anomalies and ambiguities as interchangeable in the given context (ibid., p. 47).

The five reactions are: (1) reducing ambiguity by settling for a new interpretation. Here Douglas takes the example of Evans-Pritchard's observation of the Nuer who interpret babies born with physical deformities as "baby hippopotamuses" delivered to a human by mistake and thus rationalise their decision to put these babies back in the water "where they belong" (Evans-Pritchard quoted in Douglas, 2002, p. 49). In the case of mental normality, this relates to the manual most commonly used to identify and diagnose psychological conditions, the *DSM,* which since its inception in 1952 has seen a continuous restructuring of its content (American Psychiatric Association, 2022a; Surís et al., 2016); (2) physically controlling anomalies, like in the instance of finding a rooster crowing at night when they are considered a fowl that by convention crows at dawn, the defying night-crower hence gets killed (Douglas, 2002, p. 49). An example of this type of control relating to mental normality is that people with various neuropsychological diagnoses may struggle to be accepted into an array of jobs, as has been the case in the Swedish police until recently (Polisen, 2021); (3) avoiding anomalous things strengthens the definitions to which they do not conform, Douglas takes the example of Leviticus, the third book of the Bible, that dictates all the living things that ought not to be eaten by man and by doing so, strengthens the category of "animals that may be eaten" (Douglas, 2002, p. 49; see also Ch 3). In the symbolic system that this paper posits, avoidance can be expressed through the increasing amount of young Swedish adults, previously given a neuropsychological diagnosis, wishing to overturn it (Haglund, 2018), thus strengthening the categorical boundaries between the mentally ill and the non-mentally ill; (4) labelling anomalies as dangerous, as exemplified by the old proverb regarding the "fear of the unknown", i.e. things not conforming to the norms of society are most likely perceived as dangerous (for a more detailed description, see Douglas, 2002, Ch 8). Regarding mental normality, the label of "dangerous" has often, against scientific consensus, been applied to the those suffering from various mental disorders (DeAngelis, 2021); (5) Douglas described the final reaction to ambiguity and

anomalies as the turning of them into symbols that can be used in rituals, similar to the way symbols are used in mythology, "to enrich meaning or to call attention to other levels of existence" (Douglas, 2002, pp. 49-50). It is this fifth and last application that I will attempt to enmesh with the practice of mindfulness, but first a note on mental illness and how symptoms are identified as "out of place".

In this paper, the underlying force of Western societies' relationship to mental health is suggested as having a dualistic nature, as opposed to Douglas' (ibid., pp. 10-11) conception of purity as a *single dimension,* that is, matter is either dirt or it isn't. I claim that the classification of symptoms runs along *two* poles of characteristics, the clinical and the public. I postulate that the more "in control" of a given symptom of mental health issues an individual is, the further towards the public pole that symptom is. Conversely, the less "in control" they are, the closer to the clinical pole it is positioned.

Douglas infers a complex relationship between the categories of purity (ibid.). However, our relationship to dirt, *once it is established,* is not necessarily complex nor in flux. Conversely, I speculate that our relationship to mental health symptoms, established or not, is subject to a certain fluidity. A person experiencing symptoms that are closer to the public pole is more integrated into things such as social interactions, work and responsibilities in society. In contrast, a person whose symptoms are closer to the clinical pole, responsibilities are increasingly taken care of by friends, relatives, institutions, health care facilities, government agencies, etc. *In opposition to* Douglas' dirt, I expect symptoms to ebb and flow along the axis of my proposed classification depending on numerous particularities.

Douglas details that the construction of order within any given system entails two phases of rejection, regardless of the system appertaining to the physical world of the social or the mental world of the private (ibid., p. 197). First, the anomalies in the system are recognised as out of place and thereby gain a certain amount of identity. In the mental normality system, the "symptoms out of place" are identified by their psychological hindrance to leading a "normal" life or maintaining a healthy lifestyle. It is in this initial identification process, that the symptom is placed on the polarity scale of clinical vs public as discussed in the previous section.

The second phase of rejection is when identity starts to fade away, in the case of dirt, Douglas reminds us that matter, over time, dissolves and rots away and becomes unidentifiable rubbish. Since rubbish belongs in a clearly defined rubbish pile somewhere, it doesn't provoke a sense of ambiguity nor any danger per se, Douglas contends (ibid., pp. 197-198). However, mental matter, e.g. symptoms of mental illness, does not simply decay away with time. These symptoms have to be acknowledged, treated and possibly even conditioned or internalised (cf. the process of individuation in Jung, 1967).

The ability to help an individual with the undoing of symptoms that pose a psychological hindrance to their life is often the raison d'être for mindfulness practice (Kabat-Zinn, 2009, p. 11). Symptoms that are constantly on the margins of our psychological well-being and that puts us at risk of not being able to cope with life are of a very powerful nature. Douglas proclaims almost forebodingly that a "[r]itual which can harness these for good is harnessing power indeed." (Douglas, 2002, p. 199).

The Western symbolic system of mental normality is proposed to have dealt with ambiguities and anomalies in various ways for the better part of a century. The use of rituals and ritualistic symbolism, however, has to my knowledge not been applied until the advent of mindfulness practice in 1990. The fully-fledged contemporaneous version of mindfulness that has been in vogue for the past decade or two is a result of its longstanding eastern history and its even more recent transformation through the process of integration into neoliberal capitalism. In this conglomerate state, the eastern origin of mindfulness has become equally important as a historical explanation or even justification, and a mystical gateway into the esoteric knowledge of New Age spiritualism (Hornborg, 2014, pp. 178-181).

Once the science community had started praising mindfulness as a helpful therapy tool for among other things, stress, depression and anxiety, it can be said to have become an accepted ritual in various clinical settings. Scientific and academic excitement does not necessarily straightforwardly translate into public excitement. In the case of mindfulness, neoliberal tendencies in the public sphere meant that mindfulness had to be marketed as a self-help product before being "accepted" by the average person. If the role of mindfulness were interpreted as a tool to bring Buddhism to the Western masses in its religious form, then Simão's claim that capitalism and Buddhism are incompatible holds (Simão, 2019, p. 85). However, mindfulness meditation is arguably the "most efficient way for us to fully participate in capitalist dynamics while retaining the appearance of mental sanity" as Žižek (2001, p. 1) aptly phrased it. So McMindfulness can be interpreted as a vehicle with which mindfulness as a tool for mental wellbeing, was integrated from being a purely clinical application to becoming a service publicly available. It seems like, as suggested by Plank the worldly aspirations of laypeople versus the soteriological goals of monks are not necessarily in conflict with each other (Plank, 2011, p. 55).

To bring Douglas back into the mix, the ritual symbols are often used as a way to reintroduce things considered dangerous or forbidden and harness their power in the secular realm (Douglas, 2002, pp. 206-207). In mental normality, instead, we see symptoms of mental illness that previously were wholly designated to the clinical sphere now being integrated into the public sphere as tokens of ritual prowess. People experiencing stress, depression or anxiety can continue life as normal, they just have to conform to the ritual of mindfulness, but at least they don't have to worry about hitting

the wall, losing their jobs or becoming mentally ill. Kabat-Zinn exemplifies this with a doctor who hated to fly in a helicopter but had to do so in her line of work, but thanks to the MBSR-program, she learned to handle it, although "[s]he still hated it with a passion, but she was able to tolerate it and *get her job done*" (Kabat-Zinn, 2009, p. 10, my own emphasis). The choice of title for Kabat-Zinn's book makes another poignant example of the power available to those who reclaim the dangerous symptoms affecting us:

> [T]he phrase 'the full catastrophe' captures something positive about the human spirit's ability to come to grips with what is most difficult in life and to find within it room to grow in strength and wisdom […] This includes our ideas, our opinions, our relationships, our jobs, our possessions, our creations, our bodies, everything […] In this book we will be learning and practicing the art of embracing the full catastrophe. We will be doing this so that rather than destroying us or robbing us of our power and our hope, the storms of life will strengthen us as they teach us about living, growing, and healing in a world of flux and change and sometimes great pain (Kabat-Zinn, 2009, pp. 5-6).

Whether the ritual is working or not, matters less for the survival of the ritual once established. Much like Douglas' "primitive societies" deal with scepticism by pointing to an enemy wrecking the effects of the ritual (Douglas, 2002, p. 215), the non-clinically trained adoptees of mindfulness practice may point the failure of their ritual back onto the practitioner, which was the case with Lawton (2021) in the introduction. Another way of protecting the ritual against failure is to buttress its success against the increasing difficulties that follow with advancing levels (Douglas, 2002, p. 215). If the practitioner isn't doing anything wrong per se, he might simply not be meditating enough (Lawton, 2021, pp. 3-4).

Even if the performance of the ritual is fault-free, the state of mind the practitioner is in while performing it can be enough to hinder its success (Douglas, 2002, pp. 215-216). This is obvious in Anālayo's remark on Purser's critical rendition of the various aspects of mindfulness practise (Anālayo, 2019, pp. 475-476) where Purser's rumination and critical mindset is proposed as an antagonist of the positive effects mindfulness has to offer. Kabat-Zinn also underlines the importance of the practitioner's attitude as it correlates with the success attained by the mindfulness practice (Kabat-Zinn, 2009, p. 32).

The reader has now been chaperoned through an analysis of mindfulness interpreted as a symbolic ritual. The next and final chapter will tie the sack together and discuss the implications of the previous analysis.

5. Discussion

Before heading into the nitty-gritty, let's briefly return to the questions that brought this analysis forth: Firstly, how can the phenomena of mindfulness be described in a comprehensive way that incorporates its historical development, applications within psychotherapy and its incorporation into the neoliberal capitalism market, and also take the relevant criticism into account? Secondly, how can the anthropological theory of symbolism be used to interpret mindfulness in its current form and what are the implications of such an interpretation?

By defining mindfulness as part of a symbolic system, we can make sense of each dimension as a necessary part of a comprehensive unit. The historical context assists in building a trustworthy foundation, particularly used by the New Age movement in its adoption of mindfulness. The therapeutic success acts as an integration into the contemporary Western context and positions it firmly as a practice for improved mental health in a secular setting. The commodification, or incorporation into the capitalist market is the spreading of the practice outside the clinical setting. This also completes the dualistic nature, where I suggest a conceptualisation of mental health symptoms as defined along a clinical and private pole. Counter-intuitively, the critique against mindfulness in the West actually acts as a kind of enforcing agent of the potential inherent to the practice of mindfulness. This definition is made possible by Douglas' description of symbolic systems. Such an analysis enables a deconstruction of the system itself which may provide an opportunity to redefine, improve or even replace it entirely if a consensus would stand behind such a paradigmatic shift.

This paper has provided a literary foundation for the conceptualisation of mindfulness in Western contemporary societies, following the propositions of Clemmensen and Køppe (2021, pp. 242-244). It can be said to show that the biggest direct influence came from Kabat-Zinn's MBSR program and that the complex historical underpinnings of mindfulness (i.e. *sati*) provide a diverse matrix of interpretative endeavours that can, and have been used to build abstract extrapolations both for and against the popular use of mindfulness, clinical or otherwise. But the evidence shows predominant methodological faults in the science supporting mindfulness and therefore suggests that caution is necessary when adopting practices based on mindfulness.

The methodological faults can be summarised as problematic and inconsistent operationalisations, i.e., two studies claiming to measure the effects of mindfulness do not necessarily define mindfulness in the same ways (Grossman, 2011, pp. 1038-1039). Other faults are concerning biases, i.e that participants might want to experience improvements from a mindfulness-based program and therefore report such improvements regardless of the actual outcome (ibid., pp.

1036-1037). Issues of correlation (Hanley et al., 2016, p. 105), e.g when investigating the effects of a program that consists of a blend of cognitive behavioural therapy and mindfulness practice, whether it was one or the other component that drove the positive outcome is hard to deduce. These faults may not be enough to discard mindfulness as a potent source of improved mental health for people with a large variety of conditions and problems. It does, however, highlight a dire need for improvements in the scientific methodology applied to it if mindfulness is to become generative of treatments even remotely resembling the ones offered in its name, by among others the New Age movement.

This precarious nature that mindfulness, and the practices used to cultivate it, is positioned in, can also be seen as a borderland to the position where *snapping* occurs. The religious cults and therapies portrayed by Conway and Siegelman are not entirely different to the non-clinical therapies offered by laymen in the name of mindfulness. Even if those experiencing a moment of snapping may have searched for their "deepest reach of experience" (Conway & Siegelman, 2005, p. 10)—which is quite different to someone seeking a method to lower their stress or become more attentive in their relationship (Davis & Hayes, 2011, p. 201)—there is evidently a religious element to both phenomena. Additionally, Conway and Siegelman describe the spiritual breakthroughs of the "snappers" as spiritual because it is not necessarily connected to a specific physical cause. Snappers don't seem to understand their experiences and with barely any scientific methodology apt for investigating those experiences, "people through the ages have grappled imaginatively with their experiences, […] ascribing these abrupt changes in awareness to a source outside the body." (Conway & Siegelman, 2005, p. 29). Both groups, i.e the sect-like groups pandering to the spiritual seekers and the mindfulness-based therapy advocates, make good use of the advancing communication technologies as well as the business-minded approach that serves the purposes of neoliberal capitalist societies (Conway & Siegelman, 2005, p. 36; Hyland, 2017, p. 339).

The overenthusiastic claims made in the name of mindfulness in contemporary academia are not confined to but are most commonly referred to as the lowering of stress, anxiety and depression. The corollaries of these claims are seen most palpably in marketing and corporate interests in offering mindfulness in the workplace (Bazzano, 2014, p. 164; Hornborg, 2014, p. 183). Critics of this secularised and commodified development claim some issues. Firstly, the reduction of actual benefits inherent in the practice of mindfulness. Secondly, the paradoxical use of science on the one hand as "proven benefits" of mindfulness to get customers interested and on the other hand as a downplayed actor in society, unable to provide the crucial services needed to improve the wellbeing of mankind offered by these groups or companies. Thirdly, the use of mindfulness in corporate settings is purported to move the focus away from the source of stressful environments, i.e high workload and insurmountable pressure on effectivity, and relocate the problem to the individual

worker. This allows companies to claim that they have done everything in their power to mitigate stress at the workplace by offering a mindfulness class. It also relocates the responsibility of the individual worker to reach out and seek treatment for their symptoms. Still, it's important to stress that mindfulness has shown great potential as a therapeutic tool. The critique does not amount to recommendations for steering clear of mindfulness altogether.

The present study has provided examples of the varied interpretive breadth offered by the historical material relating to mindfulness as situated in Buddhism (e.g. Bodhi, 2011; Braun, 2013; Ditrich, 2016; Sharf, 2015). These notions are not a matter of which interpretation is right or wrong but rather point to the ease with which "cherry-picking" can arise when implicit ideologies are pursued. If one wishes to advertise a method for sustaining the status quo while improving individual wellbeing, the lack of political activism shown by the original Buddha might suffice as evidence, but if one is to procure a social shift by the means of supplanting neoliberal goals with spiritual goals then one might focus on the doctrine of impermanence. The purpose of this paper has been to synthesise all these aspects of mindfulness into a coherent explanatory structure that aims at being near-exhaustive of the various functions, implications and relationships of mindfulness to the contemporary Western societies in which it operates.

The blueprint laid out by Douglas for the defining properties of a symbolic system has aided the present study in showing that defining mindfulness as a symbolic ritual integrates the ways mindfulness is practised, conceptualised and discussed in contemporary Western societies. This paper has shown that the system of mental normality contains historical religious roots and has a prevalent role as a commodity in the global capitalist market while maintaining its therapeutic relevance. The analysis has shown that mindfulness plays a crucial role in the relationship to anomalies in our construct of mental health and mental illness. This mirrors the problem of increasing amounts of mental disorders and the precariousness of diagnosing mental illness within psychology and psychiatry.

Implications

By defining the practice of mindfulness as a symbolic ritual helping society deal with emerging anomalies and ambiguities within the system of mental health, we can identify weaknesses in this system. Weaknesses may signal the unfit nature of the system that no longer fills a positive and cohesive function in society. In a world where working & studying from home is increasingly normalised and isolation becomes a feature rather than a rare occasion of everyday life, the search for meaning and acceptance takes new routes and expressions, as does the corporate interest in adapting to the new market venues with the growing demands of consumers. It is beyond arguing

that whatever method is adopted to increase well-being on either group or individual levels, stringent attention needs to be focused on the risk of adverse effects.

It is suggested in the present study that rather than mending holes in the approaches to the anomalies and ambiguities, efforts might be better directed towards the deconstruction of the system and the definition of a new paradigm for mental health and mental illness. Since symptoms can move towards or away from the public and clinical poles, as I have previously suggested, individuals may fail to recognise the severity of their situation. In other words, just because someone *can* work while being under extreme stress, it does not mean that the symptoms themselves ought to be rendered normal and acceptable. Mindfulness itself is not the problem, nor how it is implemented in neoliberal capitalist societies, but it can be rendered as symptomatic of the unwholesome relationship that Western societies have with the construct here termed mental normality.

The deconstruction of a symbolic system is suggested to be most prolific if invoked by an interdisciplinary approach. The expertise within fields such as history, philosophy, psychology, psychiatry, religion, sociology and anthropology could yield knowledge that may aid the start of a potentially paradigmatic shift within our concepts of mental health.

Further research

Hausner problematises the emerging anthropologies of distinct religions, such as Anthropology of Buddhism or Anthropology of Christianity, and points to the risk of enforcing the categories anthropologists attempt to investigate. She explains the important realisation of the researcher in acknowledging his or her role in creating these categories and that it's paramount to question the sometimes seemingly self-evident existence of categories of religion, for example (Hausner, 2020, pp. 482-483; 494).

In a similar vein, it may be fruitful to approach other synergies between secular and religious practices. Several other therapy forms with roots in Buddhism may be promising territories to find new paths for the Comparative Anthropology of Religion, such as Compassion-Focused Therapy (Gilbert, 2014), and Four Noble Truth Based Problem Solving (Uthayaratana et al., 2019). Formulating ethnographic studies comparing contemplative practices would be another way for anthropology to add breadth to the exploration of Consciousness Studies by comparing different angles of Buddhist psychology. One such example is the Integral Transformative Practice as compared to mindfulness (Lifshitz et al., 2020) where a lot of ground still needs to be covered in the name of contemplative practices.

My continuation of the research presented in this study will be in the form of moving from studying the literature to designing a field study to compare the experience of meditation as practised by secular individuals and that of Buddhist converts living in Western societies.

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