

**“RELIGION” AND “SECULAR”
IN
U.S. PSYCHOTHERAPISTS’ APPROACHES TO BUDDHIST TRADITIONS**

By

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Dissertation

Submitted to the Faculty of the
Graduate School of Vanderbilt University
in partial fulfillment of the requirements

for the degree of

DOCTOR OF PHILOSOPHY

in

Religion

August, 2016

Nashville, Tennessee

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ACKNOWLEDGEMENTS

I begin this dissertation with two vignettes derived from my own experiences. I attended the conference described in the first as a counselor seeking resources to help the people who come to see me for psychotherapy. If you had asked me then whether I could imagine returning to graduate school for a PhD in Religion, Psychology and Culture I might not have *literally* laughed out loud. I would have been surprised at the idea, but I think my curiosity would have been piqued. Just as my curiosity had been piqued sitting there, surrounded by so-called “secular” mental health professionals, listening to a Buddhist monk. “What is this all about?” I thought. This dissertation is the result of that curiosity, but would have been impossible without the insight, support, and guidance of a truly remarkable number of people.

That, of course, starts with my parents who would not have been surprised those years ago if you had asked them about my taking this path. Whatever else they might have thought about potentially interrupting my career as a therapist to start a doctoral program, they were not surprised that I would think of such thing. It is impossible to truly express my gratitude for everything my parents have given me. More than anything else, I am most grateful for their love.

My gratitude goes out to so many others:

To the rest of my family (Alex, Roz, Carrie, and Jacob), my gratitude for their encouragement, patience, and groundedness.

To so many other friends and extended family members, their names too many to list, for their love and support over these years.

To Howard Roback, who first told me about the RPC program, who facilitated and guided my start in the world of mental health care.

To my adviser and, truly, “first reader,” Professor Volney Gay who, long before I seriously thought I actually would take up doctoral work, gave me the confidence that I could.

To the rest of my committee members, Professors Rob Company, Bonnie Miller-McLemore, Ruth Rogaski and David McMahan for bringing such multi-varied perspectives to this project. I am especially grateful to David McMahan who, though an “outside reader,” has given so generously of his time in his comments, conversations, and comradeship over these years.

To my friends and formal and informal clinical consultants - Vida Sobie, Ryan Gillespie, Dave Sacks, Dodge Rea and Carleen Britton – who helped keep this work grounded in that work.

To all my professors during my time here each one of whom helped shape my thought in dramatic ways and particularly to Tony Stewart for not only welcoming me into the field of religious studies, but into his home. And to Jay Geller who, from day one, has treated me like family as much as a member of the tribe.

To an amazing number of professors at other institutions who through conversation and consultation helped guide the direction of this project including Jeff Wilson, James Robson, Pamela Klassen, Linda Barnes, Lance Laird and, especially, Anne Harrington. And to Ann Gleig and Pierce Salguero who have become both friends and fellow travelers.

To my fellow students, particularly my RPC cohort – Kent Kreiselmaier, Laura Rosser Kreiselmaier, Myounghun Yun, Jonathan Stotts, and Richard Coble - who opened me up to new ways of seeing not only academic but clinical work. And who, often with great patience, answered what might have seemed like endless questions about navigating the world of academics.

To my dissertation writing group – Caryn Tamber-Rosenau, Ryan Brand, Dorothy Dean, Jennifer Alexander, Amy Allen, and Aydogan Kars – for their thoughtfulness, accountability, and companionship.

To all of the interviewees for this dissertation – Barry Magid, Jan Surrey, Paul Cooper, Joe Loizzo, Harvey Aronson, Karen Kissel Wegela, Gay Watson, Polly Young-Eisendrath, Jeffrey Rubin, Melvin Miller, Susan Pollak, Christopher Germer, Ron Siegel, Steven Hayes, and Pilar Jennings - it is no easy thing to make yourself vulnerable to the eye of the academic observer and I will always be grateful that they trusted me to hear their voices.

To Nancy Lin and Bryan Lowe, for their contribution to some of the most foundational ideas of this dissertation and who as friends, thinkers, professors, and “bosses,” have offered me a model of what it means to be a scholar.

To my “predecessor” Boyce, to Dane, Mike, Chance, Kevin, and the rest of “the circle,” for their love and support and for reminding me to strive to practice “spiritual principles” even when writing a paper or sitting in class.

To my fiancée Jennifer Bailey, for fruit snacks and vitamin candy, for road trips and couch time. For her pure heart, for showing me the power of compassion and love. I would simply not have been able to finish this dissertation without her.

And, finally, to all those whom I have had the privilege to walk with in my practice as a therapist from the units of the Psychiatric Hospital at Vanderbilt to my office in the Kinnard Building today, for teaching me what courage is. This dissertation begins and ends with them. My prayer is that I will always remain mindful of the *mitzvah* that binds us and our work together.

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INTRODUCTION

DRAWING THE BOUNDARIES BETWEEN “RELIGION” AND “SECULAR” IN U.S. PSYCHOTHERAPISTS’ DIVERSE APPROACHES TO BUDDHIST TRADITIONS

Approximately three hundred people listen with rapt attention as the Dalai Lama expounds upon the transformational power of loving-kindness compassion and the practices that can cultivate it. He shares at length on Tibetan Vajrayana Buddhist doctrine, on its cosmology, its notions of the cycle of life and death, the nature of existence. But his audience is not made up of nuns, monks or initiates seeking the supernatural wisdom of the reincarnated *Chenrezig*, the bodhisattva of compassion. They are instead psychotherapists, mental health practitioners such as psychiatrists, psychologists, social workers, and counselors.¹ The Dalai Lama was the 2009 main speaker at an annual conference hosted by Harvard University’s Medical School. And, though this sort of direct audience with a figure such as the Dalai Lama might be rare, the phenomena it represents are not.

Harvard’s annual meeting on “Meditation and Psychotherapy,” and the multitude of others like it, provide clinicians with the continuing education credits required to retain

¹ Throughout this dissertation, I use “psychotherapist,” “therapist,” or “clinician” as general terms to refer to “talk-therapists” across professional identities: counselors, social workers, psychologists, even the stray psychiatrist still performs talk therapy today. I will use “psychology” and “psychologies” to refer to theoretical models of the mind or psyche. “Psychotherapies” speaks of modalities that put those psychologies into clinical practice for the purpose of healing. As will be discussed in more detail in Chapter One, even when psychotherapists engage in theoretical analyses of the psychological concepts they discern in Buddhist texts they do so using *psychotherapeutic* concepts that include embedded assumptions about illness and health. This is a point that Luis Gomez observes, in a paper indispensable to this dissertation, “Oriental Wisdom and the Cure of Souls: Jung and the Indian East” (1995). Jung, he emphasizes, “is not only a scholar of texts and symbolism, he is also a healer” (231). He thus is driven by a healer’s motives and, perhaps more importantly to Gomez, draws on the authority of a healer.

state licensure. However, what the psychotherapists I have studied report most motivates their interest in Buddhist traditions is a desire to provide more effective care. Take a moment to imagine a typical therapist who registers for Harvard's annual meeting. The therapist is at an impasse in long term work with, let's call her, "Sylvia." Sylvia struggles with chronic dysthymic depressive symptoms. For decades now, she tells our typical therapist, she has felt "worse than miserable." She has felt "completely numb," "like a robot." Immersed in feelings of worthlessness and self-hatred, Sylvia seems trapped in cycles of avoidance and isolation. Hopeless for so long now, often the only path Sylvia can imagine out of the all-consuming pain is suicide.²

Whether from a colleague in a peer consultation group, an academic journal, or through the wider media, our typical therapist hears that Buddhist teachings and practices could be help to Sylvia. Perhaps, the loving-kindness meditation practices the Dalai Lama speaks of could allow her to cultivate compassion for herself and others. Mindfulness "body-scan" meditations might aid Sylvia to deepen her connection to her present moment experience. They could open up her blocked grief, and make way for joy. Or perhaps Buddhist teachings about the inter-relatedness of all things could help Sylvia awaken to her essential relationality. The paths that clinicians take to Buddhist traditions vary. But they almost all describe their interest to be driven by a wish to ease the pain of people like Sylvia.³ And yet, in the existing scholarly literature on this topic, people like Sylvia and their therapists' aspirations to better care for them are almost never

² Both the "typical therapist" and "Sylvia" here are composite inventions of cases I have witnessed in my ethnographic research and my own clinical practice.

³ This, of course, is a central debate of the dissertation that follows. What we know is that therapists report that they are driven by their desire to help people in pain. But others might suggest that they only *think* they are driven by this desire, but are actually, for example, only cogs in the colonialist capitalist machine.

mentioned. I was actually one of the therapists in that conference room with the Dalai Lama. As both religious studies scholar and practicing psychotherapist, my intention is to remain, indeed, “mindful” of Sylvia and her “typical therapist.” In the pages that follow, I will periodically remind us that it is a desire to care for real people in pain that, at least in part, keeps the register rolls stocked for conferences like the above. This interest in Buddhist traditions now influences the entire field of mental health care in the United States and beyond.

No Longer A New Fad: The Religio-Cultural Impact of U.S. Psychotherapists’ Interest in Buddhist Traditions

Psychotherapists’ attention to Buddhist traditions is often described as a new popular trend, implying that it is superficial and frivolous. But it should today be considered an established feature of the U.S. mental health field. Clinicians produce an ever-expanding mass of literature on the subject - just one aspect, the use of mindfulness practices, has elicited publications numbering in the thousands (Williams & Kabat-Zinn 2011, 2). Entire treatment modalities are now designed with Buddhist teachings and practices at their core like Jeffrey Rubin’s psychoanalytic humanistic “Meditative Psychotherapy” (Rubin 2011). Some, such as Marsha Linehan’s Dialectical Behavior Therapy (Linehan 1993), have been practiced long enough to hold multiple generations of adherents. Entire graduate training programs and credentialing processes have arisen for clinicians to better meet the burgeoning demand for these therapeutic approaches. Graduate students can be awarded a master’s degree in “contemplative psychology” from Naropa University and therapists can become certified as a “Mindfulness Facilitator” by UCLA’s Mindful Awareness Research Center.

As David McMahan (2002, 2008, 2010, 2012) and Ann Gleig (2011, 2012) elucidate, these activities also shape Buddhist communities. That a Buddhist leader of such prominence as the Dalai Lama would choose to speak to a gathering of therapists is but one signifier of this interaction. From the Sri Lankan monk Anagarika Dharmapala to the Zen popularizer Daisetsu Teitaro (D.T.) Suzuki to the Tibetan leader Chogyam Trungpa - some of the figures most responsible for the introduction of Buddhist teachings and practices into the United States have interacted with psychotherapists. However, for the most part, the communities I discuss in this dissertation are so-called “convert Buddhists” in the United States. Largely of European descent, convert Buddhists are not born to Buddhist parents, but, over the course of their lives, become attracted to Buddhist traditions.⁴ It is within these communities that the impact of psychotherapists’ interest in Buddhist traditions is most visible.⁵ Psychotherapists in the U.S. develop culturally ubiquitous mindfulness practices. They popularize neuropsychological research on Buddhist meditation. And they help establish fast-proliferating Buddhist communities like the Insight Meditation Society and Spirit Rock. Psychotherapeutic frames mold common U.S. constructions of the very term

⁴ How to name such individuals continues to be a question for scholars of contemporary Buddhist traditions. Thomas Tweed’s (1999) terms, such as “convert” Buddhists (for those who fully dedicate themselves) or “night-stand” Buddhists (those with more casual interest), continue to be useful for distinguishing the multiplicity of Buddhist practice among this group. I thus utilize them here. But, regardless of what terminology we use, it is important to particularize these Buddhist communities (largely but not exclusively of European descent) from Asian immigrant “generation” Buddhist communities.

⁵ Psychotherapists’ interest in Buddhist traditions also does affect immigrant or “generation” communities, particularly in the form of Buddhist chaplaincy movements (e.g., Hanada-Lee 2006). Further, though this dissertation focuses on the United States, these phenomena are not exclusive to geographic location. Japan is just one country that is also significantly marked by these activities with forms ranging from Naikan and Morita therapies to “Vihara Care.” For general studies see Valerio Forthcoming and Harding et al. 2015. Naikan and Morita are examples of specific psychotherapies that Japanese clinicians have developed to be integrations of Buddhist and psychotherapeutic frames. On Naikan therapy: Ozawa-de Silva (2006) and Ozawa-de Silva and Ozawa-de Silva (2010). On Morita: Ishiyama (1986). Vihara Care, meanwhile, is a hospice movement that also combines Buddhist and therapeutic elements (Naoki 2006).

“Buddhism.” The qualities understood by many in the U.S. to define what is Buddhist today are heavily shaped by psychotherapeutic ideas. And yet such qualities often widely diverge from those used in the past by Buddhist practitioners.

“The Silent Takeover of Religion” or “A New Face of Buddhism”?: Current Scholarship

As a result of their significant religio-cultural import, religious studies scholars increasingly attend to psychotherapists’ approaches to Buddhist traditions. This growing body of literature is pervaded by contention about how to evaluate these activities.⁶ Are they sites of modernity’s secularization, a negative cultural erosion? Or are such anxieties unfounded? Are we witnessing the natural processes of religious transmission, the spread of the Dharma?

Buddhologists, Buddhist practitioners, and cultural commentators express multiple concerns about secularization. Prominent Buddhist studies scholars like Donald Lopez observe radical transformations of Buddhist doctrine and wonders whether we witness the “diminishment of the Dharma.” Buddhist practitioner Thānissaro Bhikkhu (née Geoffrey DeGraff) (2002) and critical theorists Jeremy Carrette & Richard King (2005) perceive a colonialist capitalization of Asian religious elements. They bemoan the medicalizing secularization of centuries-old religious rituals, “the silent takeover of religion.”⁷ Others, however, almost unquestioningly treat these activities as religious

⁶ The work of Anne Harrington is an exception to this generalization. Harrington includes psychotherapists’ study of Buddhist traditions in larger histories of “mind-body medicine” movements in the United States (in which talk therapists figure prominently). That Harrington evades these debates may be due to her disciplinary location. Religious studies scholars are trained to locate and describe “religion,” Buddhist studies scholars, “Buddhism.” But Harrington is a historian of science.

⁷ Just a few of the other critical treatments include King (1999, 2014), Hickey (2010), Sharf (1995), and Payne (2006).

phenomena, as “a new face of Buddhism” (e.g., Prebish & Tanaka, 2002). Buddhologist David McMahan (2002, 2008, 2010, 2012) argues that the psychologization of Buddhist traditions is part of the development of a new form, “Buddhist modernism.”⁸ Following McMahan, Jeff Wilson (2014), and Francisca Cho (2012) argue that there is significant precedent for the behavior of psychotherapists in the history of religious traditions. Buddhist teachings and practices have always been reconstructed, they note, when introduced into new communities (e.g., Wilson 4-5). If psychotherapists’ responses to Buddhist traditions are analogical to those of, for example, medieval Chinese communities than we might be witnessing their spread rather than secularization.⁹

The current literature helpfully illuminates aspects of this topic and will be examined in more detail throughout this dissertation. But existing studies are limited in both their methodologies and theoretical foundations. I discuss these limitations in detail below. In sum, however, in their methodologies, analyses of this subject frequently overlook psychotherapists’ own reportage about their activities. As a consequence, the variety of approaches that clinicians have taken to Buddhist traditions are often lost in the sweep of totalizing interpretations based on flawed theoretical assumptions. At this theoretical level, prevailing depictions of these phenomena often do not take account of

⁸ David McMahan’s study (2008) of what he calls “Buddhist modernism” represents a turning point in Buddhist studies scholarship on the social construction of the term Buddhism. McMahan takes seriously the vast differences between, by his delineation, “traditional” and “modern” Buddhists’ views on Buddhist doctrine or what Buddhist practices are most important. He clarifies that these divergences are not so different from those that have long existed between different Buddhist schools across time and geographic region. McMahan emphasizes that new definitions of Buddhism are shaped and sustained within “convert” Buddhist communities often growing alongside those of immigrant Asian communities in the same U.S. city.

⁹ For a larger treatment of such comparisons between these activities and Buddhist transmission to medieval China see Helderman 2015.

recent scholarship demonstrating that categories like “religion” and “secular” are not objective descriptors. These classifications have, instead, been socially constructed by particular communities for particular purpose. My central research question is: How can we improve our understanding of how psychotherapists relate to Buddhist traditions when we correct for these methodological and theoretical missteps? My main argument is that there is far more diversity within psychotherapists’ approaches to Buddhist teachings and practices than is currently depicted. Attending to what therapists actually say about their interest in Buddhist traditions reveals this diversity and, moreover, some of the major factors that shapes it. I find that psychotherapists’ approaches to Buddhist traditions are molded by their own presumptions about what defines “the religious” and “the secular” and their relative levels of investment in preserving psychotherapy’s qualification as a secular biomedical discipline. This dissertation thus offers a more accurate description of psychotherapists’ approaches to Buddhist traditions. In so doing, it also clarifies how the ongoing re-construction of categories like “religion” and “secular” function in the lives of contemporary communities.

Psychotherapists’ Voices: Methodology

The multiplicity of ways that psychotherapists view Buddhist teachings and practices is often obscured in current scholarly descriptions of this topic. This is partially due to methodological problems. Existing commentary gives scant attention to clinicians’ own perspectives about their intentioned treatments of Buddhist traditions. Most studies do not address therapists’ sizable number of publications, much less conduct ethnographic

investigation. Those scholars who do, like William Parsons (2001, 2009, 2010a, 2013) and Ann Gleig (2011, 2012), contribute much improved descriptions of this topic.

Parsons and Gleig have thus far published only focused articles or chapter-length presentations of their findings on this topic, but their work is extremely useful for more fully attending to the voices of the communities they write about.¹⁰ Based on close readings of psychoanalysts' published views of Buddhist thought, Parsons provides some of the most extensive explication available of psychoanalysts' comparisons between Buddhist concepts and their own meta-psychological theories. Gleig, meanwhile, supplements her own textual study with ethnographic observation of how Buddhist communities employ psychotherapeutic elements. Gleig concludes, in part, that, while contemporary Buddhist communities sometimes succumb to reductive psychologization, they also engage in "dialogical enterprises that utilize psychology as a tool to extend, through dialogue, the aims of Buddhism" (2012, 129). Gleig and Parsons' work begins to reveal the diversity that exists in these activities. This dissertation means to map the full range of that diversity.

I aim to do this by utilizing methodologies that will gain greater insight into clinicians' perspectives on their diverse approaches to Buddhist traditions. This means performing textual analyses of the existing religious studies scholarship on this topic. But it also requires an examination of the tremendous accumulation of publications that clinicians have themselves produced. I find and delineate within this literature a common

¹⁰ Parsons and Gleig are both trained in the religious studies sub-specialty of "religion and psychology." They, thus, may be primed to better attune to the voices of therapists. Gleig was actually once Parsons' student at Rice University, which holds one of the few surviving "religion and psychology" programs in the U.S (For a history of Rice's program see Parsons and Kripal 2010).

set of approaches that therapists have taken. I then more closely investigate specific clinicians who are representative of each approach.

To give more texture to portrayals of those therapists, I conducted “follow-up” or “expert” interviews. After obtaining IRB approval, I ultimately completed fifteen interviews in person, phone, and/or Skype during 2014 and 2015. Most questions were composed to address the specific work of the interviewee. But all interviewees were asked a set of questions on their definitions of “religion” and “secular.” The interviews clarify and expand upon psychotherapists’ published thought. As published authors and public speakers, these clinicians are representative and also wield potential influence over larger psychotherapeutic communities. The findings of these “expert interviews,” however, are not necessarily generalizable to unpublished clinicians.

A number of interviews were performed in conjunction with ethnographic observation. To gather additional data, I conducted participant-observation of just the sort of continuing education conferences depicted above. I chose three conferences that, based on their marketing materials, promised to be both representative and unique. The first was convened on February 5th, 2014 at the William Alanson White Institute in Manhattan, NY. The White Institute is an august psychoanalytic training center founded in 1946 by Erich Fromm to provide education and clinical services. The gathering, part of the White Society Colloquium series on “Psychoanalysis and Spirituality,” was exemplary of those routinely offered to clinicians. But it was also an instance of dialogue between an academic scholar, historian Anne Harrington, and a practicing psychotherapist, Jungian psychoanalyst Polly-Young Eisendrath. The second meeting I observed was the “Enlightening Conversations” conference held on May 9th and 10th,

2014 also in Manhattan. Co-sponsored by the Jungian *Spring* Journal and the popular U.S. Buddhist Tricycle Foundation, this conference was an example of conversation between clinicians and Buddhist practitioners.¹¹ The third, the 1st Annual Conference of the Institute of Meditation and Psychotherapy, was held on September 13, 2014 in Cambridge, Massachusetts. Entitled “Returning to our Roots or Uprooting Tradition? Critical Conflicts in the Interface Between Buddhist and Western Psychology,” the conference was targeted towards a general psychotherapeutic audience. In contrast, the other two gatherings were aimed at psychoanalytic communities.

These are the methodologies I utilize in this dissertation. But applying them makes apparent that there is a deeper problem with existing religious studies literature on this topic.

“Intense Scrutiny and Debate”: Theoretical Frames

More assiduously attending to clinicians’ voices clarifies that there are a variety of approaches that therapists take to Buddhist traditions. However, this multiplicity is missed in current studies for reasons that go beyond the methodological. Instead, psychotherapists’ diverse approaches are lost in the sweep of totalizing binary interpretations that declare these activities to be cases of either secularization or religious transmission. Commentators who herald a “spread of the Dharma” fail to sufficiently acknowledge therapists who believe they have been successful in secularizing practices for audiences unaware of their Buddhist origins. Meanwhile, those who describe the

¹¹ The Buddhist practitioners all appeared to be of European descent and some were leaders of convert Buddhist communities. Some participants were both therapists and leaders of such Buddhist communities.

“secularization of Buddhism” brush over psychotherapists who advance a Buddhist *qua* religious path as superior source of psychological healing.

Further, common interpretations of this topic are problematic at an even more foundational level: their conclusions largely rely on unreflective understandings of what is “religious” and “not-religious.” Only a brief glance at a treatment that is less focused on the question of secularization, William Parsons’ 2009 piece, “Psychoanalysis Meets Buddhism: The Development of a Dialogue,” exemplifies the difficulty.¹² In the final “Concluding Reflections” of this paper, Parsons takes a revealing turn:

Within contemporary academia the term ‘religion,’ while understood to be necessary and functionally useful, has nevertheless been subject to intense scrutiny and debate. There are notable figures who have uncovered the term’s hidden assumptions, fought for its qualification, offered substitutions, even called for its dismissal (Smith, 1963). In any event, when Freud wrote about religion, he entered these debates in a clear and forthright manner. For him the only ‘deserving’ definition was the ‘common’s man’s’ [sic] understanding of religion – an understanding which was western, assumed institutionalized patriarchal forms of socio-cultural power, and whose normative expression was centered in the monotheistic ‘mighty personality’ of an exalted Father-God. In *The Future of an Illusion* he defiantly chastised those ‘philosophers’ who tried to ‘stretch the meaning of words’ to the point that words like ‘God’ and ‘religious’ ceased to bear any resemblance to the Being worshipped by the common-man. (206).

Parsons contrasts Freud’s “clear and forthright manner” with a “contemporary academia” that subjects the category “religion” to “intense scrutiny and debate.” And yet, in the remainder of his conclusion, Parsons finds a use for this academic debate.

Parsons argues that the “religion” that Freud critiqued – a critique we will look at in more detail in Chapter 1 - was a very specific construction: a Catholic “enchanted” worldview. “Contemporary academia,” however, reveals that there are a multiplicity of definitions of religion. Freud’s criticism, Parsons suggests, does not equally apply to

¹² Parsons has included analyses of what he calls “the Buddhism and psychology dialogue” in a number of works but this is the one piece exclusively devoted to the topic.

“religion” as defined in “the Protestant tradition.” Parsons perceives Protestant traditions to hold an “inner-worldly asceticism” that “fits hand-in-glove” (206) with Freudian psychoanalysis.¹³ “Buddhism,” which Parsons defines as also based in a similar “inner-worldly mysticism,” would be just as exempt from Freud’s assessment. Parsons thus predicts that “one can continue to look forward to an increased sophistication in dialogue between these two related healing enterprises” (207).¹⁴ Parsons gestures towards an “intense scrutiny and debate” that surrounds the term “religion” to support his argument that “psychoanalysis and Buddhism” are capable of “dialogue.” (And, over the course of this dissertation, we will meet a number of psychotherapists who make similar claims.) But what if we took more seriously the now half-a-century’s worth of studies that, as Parsons says, “have uncovered the term’s hidden assumptions, fought for its qualification, offered substitutions, [and] even called for its dismissal”?

I submit that doing so completely reorients our analyses of phenomena like psychotherapists’ approaches to Buddhist traditions. The current literature on this topic is rife with unreflective use of the categories “religion” and “secular,” “Buddhism” and “science.” For the most part, these terms are treated as if they have universal and self-evident definitions. Absent serious “scrutiny or debate” of these definitions, these classifications often seem to take on a life of their own. “Buddhism” becomes an active

¹³ Here Parsons follows Philip Rieff’s “peculiarly Weberian line of reasoning” on “the success of psychoanalysis.” He explains that Protestant traditions had “sheared the world of [the] magical releases” of “Catholicism.” “Faced with the twin theological doctrines of predestination and salvation, with only scripture and conscience as conduits to God, the Protestant, more anxious, and guilty relative to his fellow Catholic, was particularly ripe for psychoanalytic therapy.” Thus “the most creative, popular, and powerful form of the dialogue between depth-psychology and religion during the mid-twentieth century was that between psychoanalysis and Protestant theology” (2009, 206).

¹⁴ Ultimately, Parsons perceives “the encounter between psychoanalysis and Buddhism” to be but one step in an evolutionary developmental pattern towards an “emerging psychospirituality” driven by the “driving social engine” of “inner-worldly mysticism.” (206-7). Parsons’ subsequent writing focuses on this “psychospirituality” (2010b, 2013).

entity that can, as Parsons says, “dialogue” with “Psychoanalysis.” This academic tendency is not unique to studies of psychotherapists’ interest in Buddhist traditions. This dissertation belongs to an academic sub-specialty “religion, psychology, and culture” which, like many others (“religion and science,” “religion and medicine,” etc.), relies on the same method of framing “religion.”

The field of “religion and psychology” is premised on the assumption that there is a self-evidently recognizable sphere of life, “religion,” that is self-evidently differentiated from other spheres of life that are “not-religion” or “secular.” And yet, cracks in the very foundation of constructions like “religion and psychology” are always just beneath the surface. The first essay of the seminal *Religion and Psychology: Mapping the Terrain* (Jonte-Pace and Parsons eds., 2001), written by leading historian of “psychology of religion” David Wulff (2001) thus begins in the following manner.

If we set aside ‘religious psychology’ – the psychology that, in varying degrees, is implicit in the historic religious traditions – the psychology of religion constitutes the oldest form of encounter between psychology and religion (15)

Wulff acknowledges that, centuries before the academic field of “psychology” was invented, human beings had contemplated the nature of cognition, mental images, dreams, etc. He indicates that this contemplation can be uncovered, though it is only “implicit,” within “the historic religious traditions.”¹⁵ He then names this to be a particular *type* of psychology, “religious psychology.”

Wulff gestures towards a past “before ‘religion’”¹⁶; a time when the concept of

¹⁵ It is unclear whether Wulff believes there is a psychology that has always existed separate from “religious psychology.”

¹⁶ The phrase “before ‘religion’” is now often used to emphasize that “religion” is a modern concept. Brent Nongbri uses it as the title of a book that influences my work: *Before Religion: A History of a Modern Concept* (2013).

“religion” had not yet been invented. Perhaps, what we today call “psychology” was once inseparable from what we today call “religion.” Touching the edges of this point, however, Wulff announces his intention to “set it aside” in order to introduce “psychology of religion” as “the oldest form of encounter between psychology and religion.” Through the magic of linguistics, psychology and religion are now transformed into bifurcated entities that “encounter” each other.

Robert Ford Campany (e.g., 2012) critiques scholarly treatments that imagine an “encounter” between “Buddhism” and “Daoism” in medieval China. This “encounter” is frequently presented by both scholars and clinicians as analogy for the contemporary “interface between Buddhism and psychotherapy.” Campany cites the work of Lakoff and Johnson (1980) and others that show that metaphors shape cognition. A consequence of treating concepts as reified entities is that doing so obscures “the agents who really and nonmetaphorically do things: people” (2003, 319).

We are necessarily speaking figuratively when we describe religions as entities that can make or do things. Metaphorically we talk as though they can and do, just as we personify love, countries, decades, months, seasons, nations, movements, and markets, and doing so saves words and ink; but literally they do not. When we study aspects of the history of the relationship between two religions, what we are studying—whether we recognize it or not—is the extant record of what certain people (whether or not their names are known) produced with reference to or in the presence of the productions of certain other people. One cost of the personification is that we lose sight of these people as they are swallowed up in ‘isms.’ (2012b, 102)

This dissertation is not intended as corrective to the entire sub-specialty of “religion and psychology,” much less religious studies as a whole. I only propose a new way of framing psychotherapists’ approaches to Buddhist traditions. It is impossible to entirely avoid personifying metaphors; I have already used them on a number of occasions. And it is also impossible to completely dismiss classifications like religion and secular. In

fact, a major finding of my research is that these categories are deeply intractable.¹⁷ Nonetheless, studies that track the movements of reified entities, “the triumph of the therapeutic” or “the spread of Buddhism,” remain limited. The current literature on psychotherapists’ interest in Buddhist traditions is largely fixated on whether it is a case of secularization or religious transmission. But determining whether these phenomena should be classified as “religion” or “secular” is complicated by the “intense scrutiny and debate” that surrounds these terms.

A brief overview of what that scrutiny consists of follows.

After “Before Religion”: The Social Construction of “the Religious” and “the Not-Religious”

As Parsons intimated, scholars from Wilfred Cantwell Smith (1963)¹⁸ to Brent Nongbri (2013) have long challenged the idea that the terms “religion” or “secular” possess putative referents. Kevin Schilbrack (2010) offers a helpful, if reductive, summary of scholars’ “three level critique”¹⁹ of the category religion.

¹⁷ I also avoid expressions like “the Buddhism and psychotherapy encounter” when I instead speak of “psychotherapists’ approaches to Buddhist traditions.” But this too generalizes a wide swath of human activities under a single phrase. My purpose, however, in using this language is to counter scholars’ tendency to “lose sight of the people” involved in the activities they study.

¹⁸ Wilfred Cantwell Smith is often given the distinction of having started the conversation about the social construction of the category religion. In his *The Meaning and End of Religion* (1963), Cantwell Smith pronounced the term to have outlived its usefulness, clouding more than it clarifies. (It is Cantwell Smith’s work that Parsons’ cites above.)

¹⁹ Schilbrack critiques scholars, beginning with Wilfred Cantwell Smith, who argue for the dismissal of the term religion by advancing this three level critique. He argues that these points may be accurate. But they do not preclude the possibility that the phenomena currently designated with the term religion are ontological realities. Further, Schilbrack argues, there could still be a need for a concept to name these human phenomena. Perhaps there is simply a need for better definitions. Though there are some who have proposed being rid of the category of religion altogether, Schilbrack misattributes this proposal to a number of thinkers who have revealed religion to be a social construction (e.g. Jonathan Z. Smith). Thinkers like Jonathan Z. Smith or Russell McCutcheon advocate for reflectivity on the part of scholars and awareness of the term’s past rather than eschewing its use entirely. For more on this start with McCutcheon 2015.

- (1) “the term ‘religion’ is a social construction” (1113) ;
- (2) “the term distorts. . .the cultural phenomena on which it is imposed” (1114)
- (3) “the construction of ‘religion’ is ideologically motivated. . . it serves the purposes of modern western power” (1115).

As Peter Harrison (1990) states, “the concepts “religion” and ‘the religions,’ as we presently understand them, emerged quite late in Western thought, during the Enlightenment” (1).²⁰ A number of scholars, from Jonathan Z. Smith (e.g., 1982)²¹ to Tomoko Masuzawa (2005),²² contend that these concepts were tools of European colonial and imperial expansion.²³ Religion was designed to be a universal anthropological classification discoverable in all peoples across cultures, colonized or otherwise. These

²⁰ Nongbri notes that there is an etymological trail that predates the “modern concept” of religion, but that our contemporary understandings of the word are fairly new: “From its earliest usages, the English words ‘religion’ and ‘religions’ (and the medieval Latin *religio* and *religiones* before them) identified a genus and a species, but the entities being classified were not what we would normally think of as ‘religions’. . . The Latin word *religio*, and even the English word ‘religion’ (or ‘religioun’), existed *before* these definitions of religion as an internal, private experience arose” (2013, 21).

²¹ Jonathan Z. Smith is frequently used to encapsulate this entire line of scholarly thought using his oft-quoted pronouncement that “while there is a staggering amount of data, of phenomena, of human experiences and expression that might be characterized as religious — *there is no data for religion* [his italics]. Religion is solely the creation of the scholar’s study” (1982, xi). This statement is regularly misunderstood to advocate the complete removal of the term religion (rather than that its inevitable use be re-framed by scholars’ reflectiveness). Russell McCutcheon has made this point repeatedly (start with 1995; 2015). McCutcheon (1997) has also advanced his own examinations of the capitalist and colonial power dynamics behind the construction of the classification religion.

²² Tomoko Masuzawa applies the work of Edward Said (1978) and other post-colonial scholarly resources to a “genealogy of a particular discursive practice, namely, ‘world religions’ as a category and as a conceptual framework initially developed in the European academy” (2005, 20) She exposes the social, political, (and again following especially Jonathan Z. Smith) theological factors that produced the classificatory schema of “world religions” as a means for relating Christian to non-Christian traditions. The concept of world religions, she writes, “quickly became an effective means of differentiating, variegating, consolidating, and totalizing a large portion of the social, cultural, and political practices observable among the inhabitants of regions elsewhere [from Europe] in the world” (2005, 20). Masuzawa’s analysis of the construction of the classification “Buddhism” as one of the major world religions in this schema is a strong influence on this dissertation. Further, in an important response to critics (2008), Masuzawa stresses that she is less interested in exposing the underpinnings of the academic study of comparative religion than the way that European communities used the concept of “pluralism,” as expressed in the “world religions” formulation, to mold their additional central construction of “the West.” Thus the alternate title for her book: “Or, How European Universalism was Preserved in the Language of Pluralism.” Monolithic conceptions of a “West” that stands in binary opposition to a similarly imagined “East” surface regularly in psychotherapists’ discourse about Buddhist traditions.

²³ A number of later contributors to this growing sub-specialty have also influenced the theoretical orientation of this dissertation including Dubuisson 1998 and King 1999; 2014.

scholars thus assert that, far from universal, religion is a social construction. Religion is an idea designed by particular people at a particular time for a particular purpose.

Scholars like Brent Nongbri (2013) argue that it is anachronistic to write of “religions of antiquity.”²⁴ Jason Ananda Josephson (2012) describes non-Christian majority cultures like Japan who did not recognize the concept of religion until it was introduced through diplomatic negotiations with people from the United States.²⁵

These same lines of critique have also been leveled against the category “secular.” First, the secular is not a universal category, but a contingent social construction. As Nongbri states, “the very idea of ‘being religious’ requires a companion notion of what it would mean to be ‘not religious,’ and this dichotomy was not part of the ancient world”

(4). Talal Asad (2003) and others claims that both religion and its “parasitic” (Fitzgerald 2007) “twin” (Asad 2001),²⁶ “the secular,” co-originate from the same set of European

²⁴ Of course, ultimately, Nongbri does not belong to what Schilbrack (after Ian Hacking 1999) refers to as the “rebellious” camp of scholars on the category of religion. Such scholars, the first being W.C. Smith (1963), have called for the terms dismissal altogether. But Nongbri points out that most of our contemporary concepts are as anachronistic to premodern times as “religion.”

²⁵ Josephson actually counters many of the above (and below) mentioned “previous studies of the genealogy of religion in the West [which] have focused on the term’s emergence among European intellectuals and its subsequent imposition on other cultures. . . [He instead] argue[s] that the modern concept of religion owed less to Enlightenment scholarly discourse than to the power struggles of international diplomacy” (2012, 73). Josephson’s work is a prime example of scholarship showing that communities, in this case those of Japan, did not hold the concept of religion until it was actively constructed through interactions (and, in this case, treaty-signing with peoples from the United States). He thus concludes that “religion is principally a diplomatic category whose contours emerged through a process of negotiation” (p. 73). Josephson follows the groundbreaking work of David Chidester (1996, 2014) who sees the construction of religion, and the academic discipline of comparative religion, as inextricably bound up with the practicalities of European imperial expansion. He reveals the ways the classification was produced through colonial encounters between Christian military and missionary powers and their African “others.” The work of Chidester and Josephson has especially influenced my own not only because of these theoretical findings, but because their focus is on how lived communities react and respond to the categories of religion and secular.

²⁶ Asad argues that this point necessitates a revision of the terms. In a frequently quoted summation, he states that the secular “is neither continuous with the religious that supposedly preceded it (that is, it is not the latest phase of a sacred origin) nor a simple break from it (that is, it is not the opposite, an essence that excludes the sacred)” (2003, 25). However, though it isn’t always included in references to this remark, Asad continues on to make an important point that counters frequent usages of his work: “The ‘religious’ and the ‘secular’ are not essentially fixed categories. However, I do not claim that if one stripped

Enlightenment and Protestant liberalism commitments. Colonial and imperialistic forces from Europe hegemonically impose these commitments on non-Christian majority cultures through “secularism.” Many scholars have thus criticized framing religion and secular as a binary pair – “the religion/secular binary (secular-religion binary)” or “the religion/secular dichotomy” - in which phenomena are designated as either purely religious or not-religious (e.g., Bender and Taves 2012). Similar arguments have been used to show that the specific locations of the secular most at issue for this dissertation, science and medicine, are entangled with religion.

For example, historian Peter Harrison (2001, 2006, 2007, 2015) traces the social construction of the category “science” through history. He clarifies that modern science was purposefully developed to be distinct and “in conflict” with religion. The fundamental questions and methodologies of positivist science were intentionally severed from their place in Christian “natural theology” (e.g., Harrison 2001).²⁷ However,

appearances one would see that some apparently secular institutions were *really* religious. I assume, on the contrary, that there is nothing *essentially* religious, not any universal essence that defines ‘sacred language’ or ‘sacred experience’ (2003, 25).”

²⁷ Harrison locates the particular time and particular people who actively sought to transform *scientia*, once defined by Christians as an inner quality of intellectual virtue, into the modern science psychotherapists do not bother to define. He explains that scientific research was once motivated by theological questions with the participation of theological institutions. As he has stated more recently: It was the “second half of the nineteenth century [that] witnesses the disintegration of the common religious and moral context of scientific endeavors, and sees the reconstruction of ‘science’ around the principle of a common method and a common identity for its practitioners. At the same time, the older moral and theological unifying principles are systematically rejected as this new aggregation seeks actively to demarcate its new territory and to distinguish itself from a range of newly ‘nonscientific’ activities” (Harrison 2015, 159). Harrison claims that modern science retains Christian theological presuppositions within basic structures like experimental design. In his *The Fall of Man and the Foundations of Science* (2007), for example, he shows how contemporary scientific methods were developed in relation to a doctrine of “the Fall” that taught that humanity’s powers of observation were inherently, originally, flawed. New means must be devised in an effort to recover glimpses into the knowledge that Adam once held in the Garden of Eden. Science thus did not come to be characterized as the great enemy of religion by accident. Instead, Protestant communities were intent on distinguishing the new construct from earlier forms like “natural theology” that were once used to designate some of the same theories and practices.

Harrison argues, science thus still holds prototypical Protestant assumptions.²⁸ For example, “one of the reasons that our science makes universal claims is that it borrows from ‘the Christian religion’ its notions of universal applicability. The modern idea of religion made it possible for Christianity to claim to be the one true religion. Modern science now claims an analogous universal applicability” (2015, 191).²⁹ Harrison (2006) concludes

. . .that once the constructed nature of the categories [religion and science] is taken into consideration, putative relationships between science and religion may turn out to be artifacts of the categories themselves. Whether science and religion are in conflict, or are independent entities, or are in dialogue, or are essentially integrated enterprises will be determined by exactly how one draws the boundaries within the broad limits given by the constructs. (102)³⁰

There are flaws in some of the above listed claims.³¹ But “the intense scrutiny and debate” surrounding categories like religion, secular, and science should reform analyses of phenomena like psychotherapists’ interest in Buddhist traditions.

²⁸ Harrison explains that this arises directly out of Protestants’ construction of “religion” and “the religions” and has dramatic consequences for imagined relationships between “religion” and “science.” He notes that religion was based on Christians’ “prototypical model of a belief system for which is claimed universal and transcultural significance” (2015, 191). Faced with “the conflicting truth claims of other ‘religions,’ [also] constructed in the image of Christianity” the theory of a “neutral epistemic space” was conceived “in which Christianity could be ‘impartially’ judged to be *the* true religion [his emphasis]” (2015, 191). Finally, “in the nineteenth century, the assumption of universal applicability came to be built into the fabric of the newly constructed ‘science.’ At this juncture in history the West’s sense of the source of its superiority ‘shifted seamlessly’ from its religion to its science. The new conception of science changed the locus of conflict from competing religious truth systems to the competing truth claims of science and religion. The birth of the conflict model, and its projection back into history, were thus consequences of this transfer of epistemic authority from religion to science.” (2015, 191-2)

²⁹ Of course Buddhist studies scholars might aver that Christian communities were far from alone in claiming access to universal truths.

³⁰ Here Harrison references Ian Barbour’s (1997) influential four-fold model which maps various relationships between religion and science; not only that they can be in conflict, but also “independent,” “in dialogue,” or capable of being “integrated.” We will see that not only scholars of science and religion like Barbour theorize such models. Exemplified by psychotherapists, larger communities also struggle with and seek to restructure these relationships.

³¹ For example, scholars like Company (2003) challenges the idea that the modern concept of religion is a completely cultural construction. He grants that there are aspects of the category of religion that would be unfamiliar to non-European and pre-modern communities. But he also discerns Chinese concepts that are analogical to “the very idea of religion.”

Based on the above, perhaps scholars should no longer focus on ascertaining whether psychotherapists' approaches to Buddhist traditions contribute to religious transmission or the scientization of society. Proponents on either side of those definitional debates will find ample evidence in what follows for whichever position they take. The goal, however, should be to clarify how communities themselves conceptualize these categories and where they "draw the boundaries" between them. Scholars once portrayed psychotherapists as creating "dialogue between religion and psychology." Today, we should examine how psychotherapists construct and re-construct those terms and their definitions. Again, this frame, first and foremost, provides an improved depiction of psychotherapists' approaches to Buddhist traditions. But it also offers a better understanding of how these categories influence behavior "on-the-ground."

My argument is strongly influenced by recent scholarship from Pamela Klassen (2011),³² Christopher White (2009),³³ Wendy Cadge (2012),³⁴ and Courtney Bender (2010).³⁵ These scholars challenge the unreflective classification of phenomena as religious or secular. They are outspoken critics of what Bender has called "the religion-secular binary" (with Taves 2012). These thinkers also amplify how the communities they study understand and employ these categories. Communities that are inter-related to those this dissertation focuses on: psychologists of religion (White), healers (Klassen and

³² Klassen studies liberal Protestant communities in Canada and the United States and investigates how they relate to healing practices like psychotherapies.

³³ White studies the first psychologists of religion that will be discussed at length in Chapter Two figures including William James and G. Stanley Hall.

³⁴ Cadge's ethnographic research illustrates that religious-designated and secular-designated activities are intertwined in lived experience in secular-identified hospitals. Cadge observes how religious practices seep into secular spaces and how religious practitioners comport themselves to secularist norms.

³⁵ She does this both in her ethnographic observation of "metaphysical" communities in Cambridge, Massachusetts (2010) and, with Ann Taves, on ways of making value in what they call a "not so secular age" (2012). In Chapter One, I discuss in more detail Bender and Taves' work on the "third terms" communities forward to respond to "the secular-religious binary."

Cadge), and participants in U.S. liberal religious traditions (Bender and White).

Attending to how communities perceive classifications like religion and secular reveals the inadequacy of scholarly narratives relevant to my topic like “the triumph of the therapeutic” (Rieff 1966). In White’s “countersecularization narrative” (2009, 7), for example, he emphasizes that early psychologists of religion believed their psychologies and psychotherapies would not “triumph” over religion. Their efforts were often motivated instead by desires to support and further religious aims. This research “examines not how enlightenment discourses minimized or obliterated religious belief but how they abetted religiousness in unexpected ways. Its starting point is not apprehension about psychological hegemony but a dawning awareness that religion and psychology, especially in the twentieth century, flourished together” (White 2009, 7). (Of course, “a countersecularization narrative” still reproduces “the secular.” It also offers a definitive, if revisionary, interpretation of whether “religion” is on the wane.)

Scholars have thus explored the function of binary understandings of religion and secular by focusing on their impact on specific communities. I propose that psychotherapists are an especially useful community for this work. In their efforts to move out of the margins of orthodox science and biomedicine, psychotherapists’ very identities *as psychotherapists* have always been bound up in questions about whether they are religious or secular practitioners. As discussed by Volney Gay (1979, 1982), Sigmund Freud attempted to devise psychoanalysis so as to protect it from charges that it was a new religion. Freud had reason to have his defenses up. Psychoanalysis heavily strained against the boundaries of materialist biomedicine. Freud professed to have biomedical treatment for conditions without apparent biomedical cause (e.g., conversion

disorders like hysterical blindness). He worked with phenomena that were beyond naturalistic scientific observation. Such phenomena were once said to belong to the realm of the *psyche*, the *seele*, or “the spirit.” Anne Harrington (2008a) traces psychotherapists’ techniques back to religious and “quasi-religious” forms from Christian exorcism to the power of suggestion and the vital energies of mesmerism. The “talking cure” itself (speaking stream of consciousness until the unconscious causes of pathology revealed themselves) was compared with practices like Catholic confession (Parsons references this above). Freud may not have been fully conscious of these histories. But he was intent on demonstrating to biomedical authorities, and the public at large, that psychoanalytic practices were scientific means for scientific ends. He sought what Harrington (2008a) has called “medical respectability.” His stated aim was “to furnish a psychology that shall be a natural science” (Freud “Project for a Scientific Psychology” (1895), 281).

The case of Sigmund Freud is but one illustration that psychotherapists’ behavior is significantly influenced by their understandings of what is religious, secular, science, and medicine. That Freud’s translators append the qualifier “natural” to “science” above, signals the awareness that the term has multiple definitions, as do all of the key terms of this dissertation - religion, secular, science, medicine, Buddhism, and psychotherapy.³⁶ But Freud, like the majority of therapists that will be introduced, never directly addresses what qualifies as religious or secular scientific. For the most part, Freud and his lineage

³⁶ As may already be clear, I will largely trust that the context of my usage of these key terms will sufficiently demonstrate when I employ them as categories. I abstain, for the most part, from littering the page with the common scare quotes (“religion,” “secular,” “Buddhism,” etc.). Similarly, at times, when I refer to “religious ideas” or “secular psychotherapy” I do so based on the understandings of the communities in question. Understandings that, as we will see, are often contested.

assume a set of inherited definitions. Though they will be examined in depth over the course of this dissertation, it is important to establish at the outset the dominant definitions therapists work with.

Defining Psychotherapists' Definitions

“Religion”

Freud represents a useful case example to begin a description of these definitions. This is especially so because therapists continue today to grapple with his, often implicit, understandings. For all that he said about the topic, Freud (see e.g., 1907, 1927, 1939) never listed exact criteria for what defined the category of religion. It is debatable whether he was primarily thinking of Christian ecclesial structures when he spoke of religion. But he certainly presupposed that religion was identified by metaphysical beliefs in (an) all-powerful parental god(s). Submission was owed and approval was sought from these parentified deities. This spurs compulsive and obsessional repetitive behavior. Like Freud, most psychotherapists also assume that religion is characterized, first, by internal belief. And, second, by belief in metaphysical supernatural realities of divinities, miracles, spirits, etc. at odds with naturalistic rational science.

Scholars of the category religion explain where Freud and other psychotherapists inherited their definitions of religion. Historians like Harrison (1990) and Nongbri (2013) explain that, because the concept was invented by European Protestants, it is encoded with European Protestant assumptions.³⁷ Protestants make “faith” central to their

³⁷ Josephson rightly singles out not a religious scholar but the philosopher Jacques Derrida for producing some of the most powerful analyses (e.g., *The Gift of Death* (1995)) of how “the concept ‘religion’ takes many of its features from the specific structure of Christianity” (Josephson 2012, 76). Josephson borrows

traditions (over, for example, “works”) and the category religion becomes defined by faith, by private internal belief. In Nongbri’s summary, religion is thus defined as “a kind of inner disposition and concern for salvation conceived in opposition to politics and other ‘secular’ areas of life” (2013, 24). He concludes that

because of the pervasive use of the word ‘religion’. . .we already intuitively know what ‘religion’ is before we even try to define it: religion is anything that sufficiently resembles Protestant Christianity. Such a definition might be seen as crass, simplistic, ethnocentric, Christianocentric, and even a bit flippant; it is all these things, but it is also highly accurate in reflecting the uses of the term in modern languages. Every attempted definition of ‘religion’ that I have seen has implicitly had this criterion at its base. Most of the debates about whether this or that ‘-ism’ (Confucianism, Marxism, etc.) is ‘really a religion’ boil down to the question of whether or not they are sufficiently similar to modern Protestant Christianity. This situation should not be surprising given the history of the category of religion. (2013, 18)

My research bears out and illustrates the importance of Nongbri’s point here that communities function as if they “already intuitively know what ‘religion’ is before [they] even try to define it.” Psychotherapists tend to presume that, as Courtney Bender writes, there are “things or objects” that are “self-evidently ‘religious’” (2012, 275). Moreover, they act on this presumption in important ways.

It is rare that clinicians define what is religion, secular, etc. When psychotherapists do contemplate how to define what is religious it is often generated by a desire to protect religious traditions from their imagined extinction. For example, they worry that religion, as traditionally defined, is sure to fall before scientific truths. They then challenge this traditional definition as inaccurate and suggest that it should be redefined. When I came to questions of definition in interviews, meanwhile, they were almost universally greeted with a groan (the implications of which I will discuss more in

“prototype theory” from philosopher Ludwig Wittgenstein to explain the idea that the category of religion is based on the “prototype” of Protestant traditions (2012, 76).

the Conclusion). The definitions that interviewees provided after this initial reaction, however, tended to conform to the dominant understandings of the terms explained above. There are two additional important features of psychotherapists' understandings of religion, however, that are also worth highlighting. First, as Parsons referenced earlier, to the clinicians I spoke with, religion is also defined by institutionalization; religion is "organized religion."³⁸ Second, religion was signified by "self-evidently religious" practices like prayer, bowing, etc.³⁹ Throughout this dissertation, I will refer to this set of meanings as psychotherapists' "conventional definition" of religion.

"Secular" and "Secularization"

Psychotherapists consider how to define the category of the secular even less than religion. Throughout this dissertation, I will refer to clinicians' "conventional definition" of secular. Interviews clarify the stray description of the term in psychotherapists' publications. Clinicians' understandings of secular are, as with religion, inherited from the European enlightenment and Protestant liberalism discourse described by Talal Asad (1993, 2003), Charles Taylor (2007),⁴⁰ and others.⁴¹ However, for therapists, the secular is first and foremost understood to simply mean "not religious." This "not religious," in a circular logic, is in part defined by specific spheres of life that are also defined as "not religious." Separate and differentiated from religion, these spheres include the state, the professional workplace, science, academics, medicine, and, for the most part, psychotherapy.

³⁸ I will expand on this feature and its origins within communities of psychotherapists over the course of the chapters that follow. See especially Chapter Five.

³⁹ For more on this point, start with Bender 2012.

⁴⁰ Taylor explains how particular prevailing definitions of the secular came to prominence and it is these prevailing understandings that clinicians largely think of when they use the term (2007, 1-25).

⁴¹ Other helpful introductions to studies of "the secular" include Casanova (2006) and Jakobsen and Pellegrini (2008), and Gorski et al. (2012).

Such a formulation exhibits the influence of “secularist” political ideologies. Encapsulated by the, perhaps appropriately Christocentric, phrase, “the separation of Church and State,” here communities intentionally sought to remove all traces of the religious from secular-designated “public” spaces. Some secularists envisioned a future free from religious traditions altogether.⁴² Most therapists believe that this vision will be successful in the end.⁴³ In what I will call clinicians’ “standard secularization narrative”, religious traditions, once so central to human society, will be proven false and made

⁴² Of course, many secularists actively sought to avoid such ascriptions. Asad provides some of the most helpful examinations of the invention of the category of the secular and its connection to secularist political movements. He explains that “the terms ‘secularism’ and ‘secularist’ were introduced into English by freethinkers in the middle of the nineteenth century in order to *avoid the charge of their being ‘athiests’ and ‘infidels,’ terms that carried suggestions of immorality in a still largely Christian society.* [my emphasis]. These epithets mattered not because the freethinkers were concerned about their personal safety, but because they sought to direct an emerging mass politics of social reform in a rapidly industrializing society” (2003, 23-24) The ideological motivations of communities’ development of secularist doctrine is, to Asad and others, not always visible. Asad explains that “the concept of ‘the secular’ today is part of a doctrine called ‘secularism.’ Secularism doesn’t simply insist that religious practice and belief be confined to a space where they cannot threaten political stability or the liberties of ‘free-thinking’ citizens. Secularism builds on a particular conception of the world (‘natural’ and ‘social’) and of the problems generated by that world. In the context of early modern Europe these problems were perceived as the need to control the increasingly mobile poor in city and countryside, to govern mutually hostile Christian sects within a sovereign territory, and to regulate the commercial, military, and colonizing expansion of Europe overseas” (2003, 192).

⁴³ This is despite contemporary political philosophers recent heralding of a “post-secular age.” In the most common visions of post-secular society, religious traditions are re-established as legitimate sources of political discourse provided their claims can be translated into secular arguments with which all participants can engage. Some of the most prominent thinkers have engaged the idea of the post-secular or presented theories consistent with the concept from Jurgen Habermas (2008; 2010) to John Rawls’ (1997) late-in-life revisions of his own theories. Following a number of theorists (e.g., Gorski et al., 2012), I read the concept of the “post-secular” as only a slight adjustment to secularist thought of the past. Charles Taylor (2007) is frequently cited as presenting the ultimate version of the post-secular argument. Taylor’s central thesis is that secularist political forces have succeeded in bringing in “a secular age” in which religious (read: Christian) worldviews are no longer a singular accepted reality, but only one of a multiple worldviews that can be debated. Akin to the proposals of Rawls and Habermas, Taylor suggests that religious traditions can be re-established as legitimate sources of political positions provided they can be translated into secular arguments with which all participants in public discourse can engage. (Habermas was somewhat ambivalent about the necessity to re-work religious ideas so that they are compatible with secular discourse.) Secularist ideological assumptions are often at work in all of the approaches psychotherapists’ have taken to Buddhist traditions. But it is notable that political philosophers’ shifts towards a notion of the “post-secular,” chronologically speaking, coincided with an increased openness by psychotherapists to considering religious traditions as holding clinical resources.

obsolete by scientific truth.⁴⁴ For many psychotherapists, the coming decline of religion is not only a theoretical supposition. We will see that beliefs in this inevitability have had marked impact on their behavior.

In therapists' "conventional definition," to be "not-religious" or secular also connotes particular values such as neutrality and non-directiveness. Paradoxically, then, a "secular psychotherapy" is presumed to be defined by the *value* of not supporting any single value system over another. A secular psychotherapy would, of course, never include "self-evidently religious" teachings and practices. Some strive that their clinical decisions be based not on values or belief (as in religions). The goal is that they would instead be determined by universal scientific truth (remembering Harrison's assertion above that universality is itself a Christian value).

"Science"

From Freud onward, most psychotherapists focus on the category of science rather than a general concept of the secular. In his published writings, Freud's English translators only use the word "secular" seven times to stand in for the German *Weltlich* or "worldly" (Guttman et al. 1984).⁴⁵ (The Christian genealogy of this term is not incidental, but

⁴⁴ This narrative most resembles what is often considered the earliest version of secularization theses: Max Weber's. Casanova (1994 cf. 2006) has called this the "disenchantment thesis." Here rationalist thought, propelled most fundamentally by the advancements of scientific progress, would rapidly disprove religious belief and would soon leave religions without followers. Casanova locates a second secularization narrative, what he calls "the privatization thesis" (prominently discussed by Thomas Luckmann (1967)), in which religion might not completely disappear from society, but would instead be cordoned off from public life, made a fully private matter. Many of the therapists' discussed in the following pages could be evidence for this thesis as they do believe that religion is a "personal" and "private" matter. The personalizing religion approach to Buddhist traditions (discussed at length in Chapter Three) is generated, in part, directly from this understanding.

⁴⁵ Translators of his correspondence used the word similarly in an additional three instances. See the Psychoanalytic Electronic Publishing database: <http://www.pep-web.org/search.php?author=freud&title=&datatype=&startyear=&endyear=&journal=&language=&type=&citecount=&viewcount=&viewperiod=week&sort=author%2Ca&fulltext1=secular&zone1=paragraphs&fulltext2=&zone2=paragraphs>

evidences the extent to which Freud's discussion of religion/secular is specific to the traditions he was familiar with.) In Freud's eyes, it was less a secular state or economic system that was binarily opposed to religion, but science.

As with the categories religion and secular, most psychotherapists only address the definition of science in the course of challenging what I call their "conventional definition." Psychotherapists predominantly assume that the term science refers to a particular positivist construction. More than a set of practices or techniques based on experimental design, science is conceived as a neutral, objective attitude superior for accessing the truth. Scholars like Harrison have long traced "the invention of the 'conflict myth'" (2015, 172) between religion and science as disseminated by particular people, at a particular time, for particular purpose.⁴⁶ If this is the case, and if the modern concept of science is based on a Protestant "prototype," then the idea that science will replace religion rests on something of a logical fallacy. (Instead, one Protestant form would only replace another.)⁴⁷ Contemporary sociologists of religion may further

⁴⁶ Given how engrained it is in the minds of therapists, it is unfortunate that I will not be able to delve into the details of "the invention of the conflict myth," a story Harrison says is "commonplace among historians of science" (Harrison 2015, 172). For our purposes, the salient point is that it *is* a construction, actively created with intention by Protestant communities in the 19th century and, further, that others have since sought its reconstruction. Harrison's uses the term "myth" to highlight the role of discourse in marking the boundaries that the psychotherapists' introduced in this dissertation seek to maneuver with and within. He states that "these are myths not only because they are historically dubious, but also because they fulfill a traditional function of myth—that of validating a particular view of reality and a set of social practices. This accounts for the persistence of these myths in spite of the best efforts of historians of science. At the same time, the myths also serve to reinforce the boundaries of religion, which has a negative role to play in shoring up the identity of modern science" (Harrison 2015, 173).

⁴⁷ To a certain extent, the secularization vision of Weber himself advances this theory. Most famously in the case of "the Protestant work ethic," Weber asserted that certain positive secular-identified elements held essential Christian roots. Multiple philosophers and political theorists have described secular ideologies to be, in reality, fundamentally Christian including Karl Lowith (1949), Hans Blumenberg (1983), and Carl Schmitt (1985). Each of these thinkers assert some version of the claim that supposedly secular political concepts are at root Christian, that even a political ideology like Marxism contains an essentially messianic belief structure. As recently as just two years ago, postmodern pragmatist philosopher Simon Critchley (2013) carried on this tradition declaring the Christian religious essence within all supposedly secular political ideologies. To my mind, however, all of this is an echo of the basic counter-secularization thesis

observe that the secularization narratives of their forebears, predicting the demise of religious adherence, have not come to pass (e.g., Casanova 2006).⁴⁸ But, for clinicians, such narratives often seem very real.

Will scientific truth disprove religious belief and thus make religious adherence impossible for rational society? “Sigmund Freud for one certainly believed so” says scholar of religion and science, John Hedley Brooke (2010, 116). Freud viewed psychoanalysis as positively contributing to the scientization of society. Only his methodology, he claimed, could uncover the true psychodynamic causes for humanity’s development of religious traditions. It would thus be key to dispelling their illusions. And yet, there was never unanimity among therapists about whether secularization was a purely positive phenomenon.

There was always disagreement about the positive value of religious traditions and whether psychotherapy should be defined as strictly secular. The differing answers therapists gave to these questions contributed to the formation of a multiplicity of psychotherapeutic communities. There is thus no one singular unified “Psychotherapy” that can dialogue with a singular unified “Buddhism.” Cognitive and behavioral therapists distinguish themselves from other communities of psychotherapists by the claim that they only utilize secular, scientific, and empirically-validated treatment modalities. Transpersonal clinicians, meanwhile, developed their psychotherapies as, in

that Weber injects into his secularization thesis. I read Weber as believing that, in the end, scientific progress, another possibly messianic concept, would produce a society that is secular, but would still retain the best of Protestant traditions. Of course, to many of the above critical theorists’ minds, this could only be so: to be secular *is* to be Protestant.

⁴⁸ Sociologists have long observed now that religion has not totally disappeared from European communities much less the United States or non-Christian majority countries like, just as an example, Iran. Courtney Bender’s paper “Pluralism and Secularism” is a useful analysis of the implications of this realization.

part, a refutation of the dominance of positivist science in psychotherapy.⁴⁹

“Medicine”

Psychotherapists also hold a common “conventional definition” of the category medicine. As with the above classifications, they rarely detail this definition. When they do discuss what qualifies as medicine it is often to propose revisions to dominant understandings of the term. Here medicine refers to what has been called “medical materialism,” a focus on what is observable and measurable in human physiology. For many, medicine also means a professionalized set of practices that are based on this materialist stance, determined by empirical scientific methods. In other words, for even those who protest against it, medicine first means “biomedicine.”

However, various communities of clinicians have various views about whether psychotherapy should adhere to the strictures of biomedicine. Just as communities of humanist(ic) psychotherapists decry positivist science, they are also often averse to an all-pervasive “medical model” they believe has overtaken the work of many of their colleagues (e.g., Grogan 2012). We will meet a number of clinicians in the chapters that follow who believe psychotherapy has healing purposes that go beyond a “medical model’s” diagnoses and symptom reduction. Some attribute the rise of biomedicine to secularization. They recall a world that was once homogeneously religious in which religion and healing (like religion and science, etc.) were once united and undifferentiated.

Scholars of religion and medicine like Susan Sered and Linda Barnes have made similar observations. Given the role of healing in religious traditions in the past, Sered

⁴⁹ For more, on this history, see Wampold 2001, Jonte-Pace and Parsons eds., 2001, Browning and Cooper 2004, Grogan 2012.

and Barnes muse, “one might view the perceived conventional separation of religion and medicine in twentieth-century America as something of a cultural or historical aberration” (2005, 4).⁵⁰ Some communities of psychotherapists believe a great deal was lost in this apparent “separation,” while others perceive it to be an advancement. They aim to become more aligned with the standards of biomedicine. The cultural norms of diverse communities of clinicians on these questions engender diverse approaches to Buddhist traditions.

“Buddhism”

Psychotherapists begin with a set of shared “conventional definitions” of the categories religion, secular, science, and medicine. They differ on how they “relate” to these concepts (e.g., how they should be categorized within them; whether the categories are in need of their re-definition, etc.). Similarly, clinicians share a common set of understandings about the term “Buddhism.” Of most consequence, therapists may disagree on whether Buddhist traditions should be defined as religion. But they all *treat* Buddhist teachings and practices as religious.

First, on the term “Buddhism”: therapists inherit this English word from the scholars who labored in what has been called “the British discovery of Buddhism”

⁵⁰ For other especially helpful recent studies of the entanglement of religion in the secular sphere of biomedicine see Klassen (2011) and Cadge (2012). Sered and Barnes reinforce the idea that the world was once homogeneously religious before religion was split off from the secular. As a way of denigrating this perspective as naïve, McCutcheon remarks that this notion is itself a sort of secularization thesis. “When it comes to recent studies of religion and not-religion, what we therefore often find is simply a repackaged version of the old, old story of how the primitive world was once homogeneously religious and, with the advent of modernity, was sadly disenchanting — we could go so far as calling this story’s rebirth the new secularization thesis” (2015, 171). Indeed, an iteration of this thinking is the third, the “differentiation thesis,” in Casanova’s schema of secularization narratives. Casanova asserts that this particular thesis has empirical evidence to support it. Here religion may not be removed from society entirely, but has been successfully demarcated as religious in distinction from that which has been successfully demarcated as secular.

(Almond 1988). As Philip Almond describes, philologists in Victorian England, in concert with French and German “orientalists,” concluded that the texts they studied comprised the teachings of a “world religion.” This religion of Buddhism could now be compared to other “world religions” like “Christianity.” The presumptions of the British scholars who first used the word Buddhism still stand generations later.⁵¹ They variously introduced Buddhism to others as atheistic, a psychological ethics, or a set of practices intended to cultivate introverted self-absorption. The very word Buddhism then is encoded with misapprehensions that contemporary Buddhologists attempt to correct. And yet, as I will discuss in more detail in the following chapters, psychotherapists take the accuracy of these claims for granted when they speak of Buddhism. For many, Buddhism is a universal category referring to a unified, monolithic religion that remains consistent across time and space, across millennia and continents.

Other clinicians, including some of the earliest to take an interest in Buddhist traditions like C.G. Jung, recognize that there is not a singular Buddhist form. These therapists tend to carry on another tradition initiated by the “discoverers of Buddhism.” From the beginning, scholars defined Buddhism as, for example, at its essence an atheistic religion. But they also found evidence of Buddhist communities that propitiate deities. At such times, scholars would frequently argue that those Buddhist traditions that conformed to their expectations were the purest incarnations. Psychotherapists have adopted this practice as well. When they are aware of multiple Buddhist “schools,” they will often conceive of an “early Buddhism” or a purified later “Zen” that is free from the

⁵¹ On this point begin with the papers in Lopez (1995). On the subject of how the construct “Buddhism” was specifically introduced to and shaped by communities the United States start with Tweed (1992) and Prothero (1996).

superstitious corruptions to which they are averse. Parsons places shifts in psychoanalysts' representations of Buddhism within a periodization schema (e.g., 2009). He argues that psychoanalysts have acquired more accurate understandings of Buddhist teachings and practices over time and attributes this apparent development to a globalized world that brings greater expert resources into public reach.

Parsons is correct that psychotherapists became interested in particular Buddhist strands as those strands gained wider popularity in the United States. D.T. Suzuki's version of Zen Buddhist teachings captured the attention not only of counter-cultural communities in the 1950s-1960s, but clinicians.⁵² Today, the Dalai Lama's cultural prominence brings Tibetan schools into therapists' view. However, by and large, this has not led to a greater comprehension of the history of Tibetan or Zen Buddhist traditions nor how they are currently practiced by Tibetan or Japanese Buddhists. Even psychotherapists' descriptions of the diversity that exists in Buddhist traditions would seem quite odd to Buddhologists. I have heard more than one clinician present this diversity in the manner of formative mindfulness practitioner Christopher Germer. At the IMP conference I participant-observed, Germer explained to the gathering of clinicians that there are "three main traditions within Buddhism: a Theravada tradition which is a wisdom tradition, Tibetan tradition which is a compassion tradition, and Zen which is a non-dual tradition" (Germer, 9/13/14).⁵³ With knowledge of the vast number of Buddhist

⁵² And many psychotherapists themselves belonged to those counter-cultural communities.

⁵³ I cite Germer's statement here as representative of a schema I have heard laid out by multiple therapists (and, for that matter, many others in contemporary U.S. "convert" communities). When I sent this dissertation to interviewees' for comment Germer responded by email that "when I was saying that, I was fully aware that both the Tibetan/Vajrayana and Zen/Seon/Chan traditions are generally considered Mahayana approaches. I was trying to name the *emphasis* of different Buddhist traditions rather than catalogue the different schools of Buddhism" (personal communication, 4/1/16).

communities that have arisen over the centuries, Buddhist studies scholars would likely find this schema more than a little surprising. They would wonder, for example, at the absence of the entire “Mahayana” movement.⁵⁴

What Germer names accurately here, however, are three major strands of influence on the U.S. “convert” Buddhist communities to which therapists belong.⁵⁵ When clinicians speak of “the dialogue between Buddhism and psychoanalysis” it is a Buddhism introduced in these highly specific U.S. Buddhist communities. It is Buddhist teachings and practices they learn within these communities that they incorporate into psychotherapy. More than only participating in these communities, psychotherapists sometimes lead and have even founded Buddhist groups. The Buddhist path that most therapists walk within these communities is radically different from that of the vast majority of Buddhists through history. Foundational elements such as taking refuge in the Triple Gem of the *sangha*, *dharma*, and *Buddha* with the ultimate purpose of release from *samsara* (understood as the literal cycle of rebirth) are often abandoned.⁵⁶

A growing number of Buddhist studies scholars (esp., David McMahan (2002, 2008, 2010, 2012), Ann Gleig (2012, 2013, 2014a, 2014b, 2015), Jeff Wilson (2012, 2014), Wendy Cadge (2004)) specialize on these U.S. Buddhist communities and take them on their own terms. Some of these communities, like those of the Rochester Zen Center founded by Philip Kapleau, are now over half a century old. However, the

⁵⁴ Of course, Mahayana, Theravada, etc. are themselves contested categories for classification.

⁵⁵ Germer’s derivation of the first two strands is discussed above. When he refers to the “Theravada tradition,” meanwhile, he speaks of contemporary mindfulness/insight meditation groups like the aforementioned Spirit Rock. These groups are often described as in lineages stretching back to the “original Buddhism” of “Theravada.”

⁵⁶ It should be emphasized that the Buddhist doctrine these communities adhere to is not static, but is under constant revision. Nonetheless, basic presumptions about what would or would not qualify to be weaved into that mix are quite old, dating back to “the European discovery of Buddhism.”

majority of Buddhologists, expert on historical and Asian Buddhist traditions, are apt to find it jarring to hear a clinician promote Buddhist meditation as psychiatric cure-all. Many Buddhist studies scholars view the rapid proliferation of such claims as the spread of misunderstanding or even malfeasance.

Motivated in part by discomfort with the fervor of such popular discourse, James Robson (2014) has begun examining the healing practices that Buddhist communities in the past used for what we would call today mental illness. He details multiple glaring differences between these histories and psychotherapists' present day understanding of the curative capacity of Buddhist teachings and practices. For example, while U.S. psychotherapists are primarily attracted to meditation practices as treatment interventions, meditation was not previously used for such purposes by Buddhists in, for example, medieval China. Buddhist meditation practice, Robson (2014) argues, was not intended to reduce psycho-emotional conditions like stress. "Its main objective was [actually]. . .to induce stress in the practitioner in order to radically change their orientation to the world." Individuals afflicted with the "wind maladies" that were an etiological cause of mental illness would have been treated not with meditation, but talismans or herbal remedies (Hsiu-fen, 2005). (Though this could always change, currently most contemporary psychotherapists would never contemplate using an item like a talisman as a treatment intervention.)

The repurposing of meditation practices as treatment interventions is but one of a myriad of ways in which psychotherapists can be seen as perverting or secularizing Buddhist traditions that have existed for centuries. Buddhist studies scholars could conclude that psychotherapists "to put it simply, get it wrong." But scholarship on

previous instances when Buddhist teachings and practices were introduced to new communities (e.g., medieval China) opens up another perspective. For example, Campamy observes that, in the past, when scholars analyzed “Daoist borrowings vis-à-vis their Buddhist sources” in medieval China, they

most[ly] imply that Daoism, to put it simply, got it wrong. But why would we expect that Daoists would have wanted to ‘get it right’ when appropriating Buddhist elements? What would ‘getting it right’ mean? (2012b, 104)

Perhaps, we should also not expect that psychotherapists “get it right.” As Robert Sharf writes, “the question. . . is not whether the Chinese ever ‘got Buddhism right,’ but rather what this might mean” (2002b, 11). Sharf challenges insinuations that so-called “Chinese apocrypha” (Buddhist texts written by Chinese communities that mix in indigenous elements with Buddhist doctrine) “misconstrue Buddhism.” He rhetorically asks, “why approach such developments as a ‘misconstrual’ of Buddhism? (Did the early Roman Christians ‘misconstrue’ Judaism? Did nineteenth-century Mormons ‘misconstrue’ Christianity?)” (2002b, 11).

And yet, many psychotherapists *care quite deeply* about whether they “get Buddhism right.” Many of the very clinicians who appear to “misconstrue Buddhism” are intent on conserving what they believe are essential Buddhist truths. Some psychotherapists reprimand colleagues they view as degrading those truths in far stronger terms than Buddhist studies scholars. They condemn approaches they perceive to secularize Buddhist practices or use them for unwholesome purposes. Such clinicians will sometimes reference religious studies literature that is critical of therapeutic usages of Buddhist teachings and practices. Or they will cite Buddhist studies scholarship as evidence for the authenticity of their own Buddhist doctrine. Of course, again, the

Buddhist doctrine that therapists are intent on “getting right” is already very different from that of the past. For example, psychotherapists will sometimes debate among themselves how best to assist people to awaken to the interrelatedness of all reality. They have been taught within modern(ist) U.S. Buddhist communities to see “interconnectedness” as a positive orientation to life. But, in the past, Buddhist teachings presented inter-relatedness as karmic entrapment. Buddhist practitioners once strived for nirvana as a liberation from the very interconnectedness that therapists aim to cultivate (McMahan 2008).⁵⁷

Psychotherapists are committed to distinctive Buddhist forms that, as explained by McMahan (2008, 2010, 2012), were developed to withstand secularist or scientific critique. Buddhist teachings on vast cosmographies of cyclical time or bodhisattavas that attain supernatural powers are either excised or re-interpreted as metaphors for psychological states. Some observers could view these Buddhist strands as “secularized,” bereft as they are of supernatural or metaphysical elements. Many psychotherapists agree. They argue that the “Buddhism” they know should not be categorized as a religion. They assert that it is better classified as a “way of life,” a philosophy, or even science. Clinicians often make these claims to justify how an interest in Buddhist traditions does not threaten their psychotherapies’ secularity. Of course, even at these times, Buddhist traditions retain their association with the category of religion, if in the negative. This is inevitable given that the English word “Buddhism” has connoted a religion for two centuries now. Dissidents are left repeatedly denying this stubborn expectation – and, thus, reproducing it.

⁵⁷ For a fuller discussion of psychotherapists’ views of interdependence and their difference with traditional understandings see Chapter Six.

And, again, even those psychotherapists who deny that Buddhist traditions are religious, still treat them as religious. Clarifying how and why therapists' Buddhist traditions differ from those of the past is useful not because it exposes them as misinformed, but because it increases our insight into their choices. Clinicians' assumptions about how to classify "Buddhism and psychotherapy" under the categories of religion and secular molds the "encounters" they imagine between them.

Psychotherapists' Approaches to Buddhist Traditions: Delineation and Chapter Outline

There is a diversity of responses to questions of definition among psychotherapists. Some proclaim that "Buddhism was the first psychological science." Others that "psychotherapy works because it accesses the sacred." But this diversity of answers is itself generated out of the basic inherited assumptions that Buddhism is religious and psychotherapy is secular. Therapists' frequent need to vociferously challenge those assumptions illustrates just how entrenched they actually are.

Clinicians' approaches to Buddhist traditions develop out of their conceptualizations of religion and secular. Based on these conceptualizations, psychotherapists design diverse approaches generated by relative levels of investment in maintaining status as secular scientific practitioners. Some clinicians seek to maintain a hard borderline between religion and secular psychotherapy. Here religious traditions are analyzed only from a distance. Others seek to incorporate knowledge or practices derived from religious traditions into their psychotherapies while preserving their secularity. There are still other psychotherapists who challenge an absolute differentiation between psychotherapy and religion. Some even identify a

“religion/secular binary” that they intend to disrupt. There are even therapists who present a Buddhist *qua* religious path as source of healing superior to secular psychotherapy.

I delineate six major sets of approaches that therapists have taken to Buddhist traditions. Psychotherapists have (1) *therapized*, (2) *filtered*, (3) *translated*, (4) *personalized*, (5) *adopted*, and (6) *integrated* those aspects of Buddhist traditions that they view as religious. I explain each of these approaches more below and in the chapters that follow. But there are many ways that psychotherapists' treatment of Buddhist traditions can be mapped. As demonstrated by Harrington's important work on this topic, there are linear historical narratives that can be told about psychotherapists' interest in Buddhist traditions. For example, there was a period in the U.S. (1940s-1960s) when one could argue that most psychotherapists took what I call “personalizing” approaches to Buddhist traditions (holding their engagement with Buddhist teachings silently within their person in actual therapy sessions). In the decades following, clinicians developed what I refer to as “integrating” approaches actively mixing psychotherapeutic and Buddhist elements. Parsons has “divide[d] the history of dialogue into three periods” (Parsons 2009, 180) along these sorts of lines: “1880-1940 Initial Encounters,” “1940-1970 The Zen Files,” and “1970-2007 The Flowering of Dialogue.” I have found, however, that the approaches that psychotherapists utilize are not exclusive to time period. For instance, the “initial encounters” of Parsons' psychoanalysts can be said to have generated “therapizing” approaches (the analysis of Buddhists' ideas using psychotherapeutic theories). But clinicians continue today to “therapize” Buddhist doctrine; they regularly assess the health or pathology of particular Buddhist concepts.

Meanwhile, my own schema should not be mistaken for a series of absolute, hermetically sealed containers into which particular activities can be placed. Clinicians' behavior does not neatly fit under any one of the headings I've named. It is a rare psychotherapist that has taken only one sort of approach to Buddhist traditions. They usually take multiple approaches, sometimes using them in tandem. For example, a clinician will “therapize” a particular aspect of Buddhist doctrine to assess whether it is healthy and should be “integrated” with psychotherapeutic elements. This clinician then may “adopt” their new integrated form declaring it to be a new hybrid Buddhist school. My delineation of six singular categories of psychotherapists' approaches is thus artificial. But mapping them as I have still illustrates the diversity that exists in these activities. And it reveals some of the major factors that shape them.

The chapters that follow explain my delineation of psychotherapists' approaches Buddhist traditions. Each chapter describes the main features of these approaches and introduces representative figures that utilize them. This will in part show that the terms I use to name these approaches, imperfect though they are, are drawn from the language therapists themselves use when discussing their activities. Again, one could discuss these different approaches in virtually any order. There is something of a progression through the chapters, however, from those therapists who imagine hard borderlines between the religious and the secular to those who envision more porous boundaries.

Chapter One analyzes psychotherapists' *therapizing religion* approaches to Buddhist traditions. In this approach, religion is treated as an object of study for psychological knowledge. I cite two early examples of therapists who use these approaches: psychoanalyst Franz Alexander and the analytical psychologist Carl

Jung. When clinicians therapize religion they evaluate religious teachings and practices using not only psychological, but psychotherapeutic theories founded on ideas about health and illness. Both Alexander and Jung believe that the Buddhist texts they studied (in translation) enhanced psychotherapeutic understanding. Alexander thought Buddhist texts depicted and thus confirmed the existence of particular pathological psychological states. C.G. Jung, meanwhile, believed they presented alternative (and importantly foreign) versions of the supreme level of psychological health: self-actualization.

Chapter Two describes clinicians' *filtering religion* approaches. Therapists taking these approaches also frequently treat religion as an object of scientific study. But they use different methodologies for this analysis than those who therapize religion. And they often conduct their research for very different purposes. A representative clinician like neuropsychiatrist Daniel Siegel assesses elements of religious traditions using empirical research methodologies. Appealing to the authority of positivistic science, he and others popularize experimentation they claim demonstrates the efficacy of particular Buddhist practices. The implication is that scientific research can filter away the taint of the religious. Clinicians do this not only to increase psychotherapeutic knowledge. Filtering the religiosity out of specific Buddhist teachings and practices is often intended to prepare them for therapeutic use.

Chapter Three investigates psychotherapists' *translating religion* approaches. Translating religion approaches are developed by clinicians aiming to make Buddhist teachings and practices admissible to secular psychotherapy. Represented

by mindfulness practitioners, like Marsha Linehan, here clinicians assume that Buddhist elements require transformation before they can cross the borderline between religion (Buddhist traditions) and secular (psychotherapy). Some believe they translate Buddhist elements into secular biomedical items by remaking them into treatment interventions. Others imply that translating religion into secular is, indeed, only a matter of language. They incorporate meditation practices into therapy sessions and simply rename them “attentional control training.”

Chapter Four discusses *personalizing religion* approaches. Like those who translate religion, many clinicians taking personalizing religion approaches seek to preserve psychotherapy’s secularity while incorporating Buddhist elements. A formative personalizing religion approach was developed by early Buddhist enthusiast and humanistic psychotherapist Erich Fromm. Fromm endeavored to personalize, or as he would put it, “humanize” religion by declaring the true source of religious traditions to be the human, the person. Many clinicians who take personalizing religion approaches today, like Polly Young-Eisendrath, report that they have had transformative Buddhist experiences. They indicate that these experiences dramatically impact their psychotherapies. But there are no outwardly visible signs of this impact in their psychotherapy sessions. Instead, these psychotherapists hold their Buddhist identities silently within their person; they are present, but out of public view.

Chapter Five examines psychotherapists’ *adopting* religion approaches. When clinicians take these approaches they mean to adopt Buddhist traditions as the fundamental basis for their psychotherapies. Rather than individual teachings or

practices, therapists who adopt religion believe their healing to be fully grounded on Buddhist doctrine. Some view Buddhist teachings and practices as superior sources of healing to conventional psychotherapy. A humanistic psychiatrist like Joe Loizzo engages in rigorous study (and even translation) of Buddhist texts to inform both their Buddhist and psychotherapeutic practice. Many psychotherapists treat Buddhist teachings and practices as resources to aid clinical work. Clinicians who take adopting religion approaches perceive psychotherapies as resources that can aid Buddhist communities

Chapter Six looks at clinicians' *integrating* religion approaches to Buddhist traditions. When clinicians take integrating religion approaches they seek to incorporate Buddhist and psychotherapeutic elements in a way that both remain recognizable. Representative figures like feminist and relational-cultural psychologist Jan Surrey view their work as an integration of Buddhist and clinical aims. Therapists pursuing "synthesis" thus theorize how Buddhist teachings and practices might be "compatible" with their psychotherapies. They sometimes attempt to work through differences between core concepts in Buddhist and therapeutic frameworks.

Though I am a practicing psychotherapist, I will not evaluate these approaches to determine which is better or worse, more or less responsible, more or less clinically useful. At some point in the future I may engage this material as a clinician, but such considerations will be absent from this work.⁵⁸ The reader will also not find assessments as to which approaches are more or less secular or authentically Buddhist. My findings,

⁵⁸ A first foray into these questions can be found in my forthcoming book chapter, "Of Practices and In Theory."

expanded upon in the **Conclusion**, demonstrate the ultimate futility of such efforts. They offer new insight into the very nature and function of classifying phenomena as religious or secular.

The **Conclusion** expands on a finding of each individual chapter: psychotherapists' approaches are generated from the relational configurations those therapists believe they make between religion and secular. But these configurations prove unstable. Each chapter analyzes, (1) how clinicians' intend to maneuver within imagined religion/secular binaries in their approaches and (2) the way those maneuvers break down. For instance, translating religion approaches to Buddhist traditions seem to submit the religious to the secular scientific. This is sometimes the stated intention of therapists who utilize such approaches. And yet, these approaches can also be seen as a subversion of secular spheres. To some, the incorporation of religious practices into psychotherapy signals the degradation of the illusion of its pure secularity. Scholarly commentators sometimes name the therapeutic use of mindfulness practices, for example, "crypto-Buddhism." Here the secularity of these methodologies is only a disguise hiding their essential Buddhist nature from being burned at biomedicine's stake.⁵⁹

Jeff Wilson is one scholar to perceive crypto-Buddhism in what he calls "the mindfulness movement." But he also gestures towards a dynamic that contributes to the intrinsic indeterminacy of socially constructed categories like Buddhism, religion, and secular.

Religion is not a phenomenon that exists neutrally in the world – it is a label applied variously by different people and by the same people at different times. This is true of its alleged opposite, 'the secular,' as well. . . [These terms] are markers of value employed strategically by agents in ways that reveal further

⁵⁹ Here I reference one of the communities for whom the term "crypto-religion" was invented: the crypto-Jews who feigned conversion to Catholicism to avoid their murder during the Spanish Inquisition.

patterns of value and preference.

Psychotherapists (and their observers) define approaches to Buddhist traditions as religious or secular for particular tactical purpose. In the eyes of psychoanalysts committed to Buddhist truths even the great atheist Freud can be transformed into an accidental Buddhist. And yet such declarations have by no means been universally accepted.

Contestation continues between communities of clinicians, cultural commentators, and others over how to define these phenomena. Buddhologists point out that when therapists claim to adopt Buddhism as the basis of their methodologies, it is a Buddhism stripped of traditional “self-evidently religious” elements. Some clinicians believe their integrations of Buddhist and psychotherapeutic frames are both secular and “spiritual” (a term I discuss more in Chapter Six). Are they submitting to secularism and scientism? Or, are they forging a new religiosity that is protected from such ideologies? The answer to these sorts of questions, which assume a binary relationship between religion and secular, depends on our understandings of the categories and where we draw the borderlines between them.

We may wish for a final answer on whether to define communities’ activities as religious or secular. But we will always be stymied because these terms remain in constant flux depending on how they are used. This is, in part, as Wilson references, an inescapable feature of cognition. Philosophers of language like Ludwig Wittgenstein (1961 (1921)), literary theorists like Northrup Frye (1957), and critical theorists like Pierre Bourdieu (1984) were not the first to discover that human language always entails the naming and differentiation of conceptual fields. Buddhist thinkers like Nagarjuna

(Garfield, trans. 1995) observed this back in the 2nd century CE. But the borderlines therapists imagine between religion and secular are often not only theoretical. They are established and maintained by multiple institutional authorities and individual authoritative figures.

Over the course of this dissertation, we will see that psychotherapists' behavior is shaped by the expectations of, in one moment, biomedical governing bodies like hospital boards, in another, an academic gatekeeper of Buddhist authenticity like Donald Lopez. They will adjust their behavior to conform to the social norms of their own psychotherapeutic communities in one moment. But then in the next they will intentionally rebel against those norms and replace them with those of U.S. Buddhist communities. Psychotherapists operate within numerous social spheres, each of which they conceive of as separate and differentiated from each other. The individual authoritative figures and organizational bodies they encounter have their own shifting understandings of how to define religion and secular and where to draw boundary-lines between them. This has serious practical impact. A clinician will radically transform a Buddhist practice to make it verifiable to scientific authorities. They will then later reveal that practice to be unchanged at its essence for the eyes of a Buddhist authoritative figure.

Clinicians play between the binaries, first religious despite themselves, then secular despite themselves, oscillating back and forth. As Janet Jakobsen and Ann Pellegrini have written, "in this sense, secularization both is and is not happening" (2000, 16), and religion both is and is not happening. It would not be surprising if the reader became weary of the question of definitions, as chapter by chapter, psychotherapists are shown to

be mired in classificatory indeterminacy. Perhaps, the case example of psychotherapists' approaches to Buddhist traditions proves the argument that classifications like religion have no utility. Some scholars have argued that terms like religion and secular should be dismissed altogether. Or, clinicians' blurring of the borderlines between religion and secular science may illustrate the need to abandon religion/secular binaries.

Francisca Cho (2012) argues that clinicians' study of Buddhist traditions could represent a transcendence from binary views of religion/secular science. She claims that these activities are not easily labeled clear-cut cases of secularization. She observes that they do "not fit the profile of typical scientism and materialist ideologies." Perhaps, she writes, we are witnessing

a Buddhist retranslation of what 'secularism' can entail. Hence what appears to be mere catering to predetermined goods as the West defines them is also a way of rising above one of its most entrenched social dilemmas – the tension between the religious and the secular, and the purported necessity of choosing between them. (2012, 276)

In the minds of many psychotherapists, however, there is no exit from religion/secular binaries and "the necessity to choose between them." My findings demonstrate that the categories religion and secular are intractable as well as mutable.

Psychotherapists rarely define what qualifies as religion, secular, science, or medicine. And yet, their implicit assumptions about what is religious and what is not act as deeply-rooted structures they feel compelled to contend with. Scholars may be awakening to the culturally co-constructed nature of the classifications religion or secular. But psychotherapists' approaches to Buddhist traditions exemplify that they can operate as immovable, concrete, and highly consequential. Communities operate on their definitions of these terms and, based upon those definitions, make active intentioned

choices with real consequence. In their approaches to Buddhist teachings and practices, clinicians develop innovative methods for maneuvering between what they treat as the entrenched poles of religion and secular science or medicine. Psychotherapists simultaneously reproduce hard boundaries between religion and secular before discovering means for crossing them, blurring borderlines they still perceive to be in place.

Categories like religion and secular can thus not simply be rejected by declaring that they are only constructions. In the Conclusion, we will hear therapists express the sentiment that they should be eschewed. At times, they describe such a move to be dictated by Buddhist doctrine. And yet, this rhetoric too is only an additional discursive tactic for responding to the question of whether clinicians' activities are religious or secular. These terms may very well be socially constructed. But such an avowal will not ease the concern of a person seeking non-religious treatment for their anxiety disorder. Nor is it likely to be a sufficient answer for an insurance company or state-run hospital. My findings thus illustrate that constructs like religion and secular are not only abstract categories for scholarly classification, but concrete determinants of behavior. As Ann Taves and Courtney Bender note, "the question of what is religious, what is secular, and what is spiritual is not simply a matter for scholars" (2012, 2). For psychotherapists, in fact, it matters a great deal.

Clinicians' binary understandings of religion and secular, and beliefs about whether they can cross the borderlines between them, markedly shapes the way they respond to the actual suffering people who come to them for healing. Whether clinicians' therapeutic techniques are deemed religious or scientific can impact their professional

authority and affiliation. It can dictate whether an insurance company will cover their treatment. Whether a clinician classifies a particular Buddhist item as religious can influence how, or whether, they introduce it to the individual sitting across from them struggling with flashbacks of childhood sexual abuse. This returns us to the opening vignette of this Introduction, the “typical therapist” and their work with Sylvia. Sylvia tells our typical therapist that she has come to believe that suicide may be the only way out of her constant pain. And our typical therapist can adjust their response to Sylvia based on desires to define their work as religious or secular. These are the stakes that energize clinicians’ maneuvers as they weave between religion/secular in their diverse approaches to Buddhist traditions.

CHAPTER 1

LOOK BUT DON'T TOUCH: THERAPIZING RELIGION APPROACHES

In this chapter, I examine clinicians' *therapizing religion* approaches to Buddhist traditions. First, I discuss the basic features of these approaches and distinguish them from "psychology of religion." The psychoanalyst Franz Alexander and analytical psychologist C.G. Jung are then presented as specific formative examples of clinicians who have therapized Buddhist texts. Though often characterized as taking diametrically opposed positions on Buddhist traditions, I describe how their approaches align. Continuing to use the cases of Alexander and Jung, I explain that therapizing religion approaches appear to create a hierarchical relationship between what is religious and what is secular scientific. Alexander judges religious traditions as the outgrowth of pathology. Jung, meanwhile, views religions as outmoded systems for achieving the ultimate in psychological health. Despite such fundamental differences, both can be interpreted as submitting religion to the secular scientific, reducing religion to psychodynamic causes. However, Alexander and Jung's therapizing religion approaches to Buddhist traditions demonstrate that this apparent binary arrangement between religion and secular is, in the end, destabilized. Approaches designed out of a belief that psychotherapy and Buddhist traditions must be kept separate become means for mixing them.

Buddhist Traditions on the Couch: “Psychology of Religion” vs. “Therapizing Religion”

Psychological studies of religious traditions are typically identified as belonging to the discipline of “psychology of religion.” Here psychological methodologies are utilized to explain or interpret aspects of religious traditions such as religious experience.

Psychotherapists, however, examine religion using not only psychological, but *psychotherapeutic* models. Religious elements are investigated using metapsychological theories about health, illness, and optimal functioning. Religious experience is explained, for example, in reference to basic ideas about what constitutes psychopathology.

Clinicians’ conclusions are, thus, both descriptive and prescriptive. They, for instance, explain both what leads humans to practice religious traditions and whether doing so is an indication of psychological health. Psychotherapists do not only psychologize religion then; they therapize religion.

As the first psychotherapist, Sigmund Freud was the first to therapize religion. As explained in the introduction, Freud had a specific conception of religion in mind when he analyzes it. Though, again, he never precisely defines what qualifies to be categorized as religious, he operates with the “conventional definition” of religion. Freud believes in a coming triumph of scientific truth over religious belief. Through their practice of therapizing religion, psychoanalysts would play a key role. If the psychodynamic drives that spur religious adherence can be explained, they can be cured. To a large extent, in Freud’s theories, it is explanation (insight) that is the ultimate cure. Rational, educated peoples who underwent analysis would be freed from their attachment to the illusions of

religion. They would realize that only inner psychological needs drive them to hold on to religious beliefs so clearly disproven by scientific truth.⁶⁰

In all his published material, Freud did not address word one to Buddhist traditions. Or, more accurately, Freud wrote *exactly* one word specific to the subject. In a single 1929 letter to Oskar Pfister, Freud mentions the Buddha as part of a list of ideal figures, “great men,” alongside Christ and Confucius. This has not stopped a flurry of clinicians (e.g., Silva 1973) and their scholarly observers (e.g., Parsons 2009) from speculating as to a Freudian perspective on Buddhist traditions. A few base their speculations on the couple references Freud made to a “nirvana principle.” However, Freud acquired this phrase whole from his colleague Barbara Low. Neither Freud nor Low before him makes a real connection to Buddhist teachings when they use the concept. Low introduced Freud to the concept “Nirvana” as simply another word for the cessation of suffering.⁶¹ A number of commentaries, meanwhile, focus on Freud’s correspondence with Romain Rolland on the subject of particular mystical experiences. They attempt to cull Freud’s interpretation of Buddhist experience from this discussion of “the oceanic feeling.”⁶² And yet, Roland and Freud never address Buddhist traditions at all in their conversations. It was with versions of Hindu practice - reconstructed for

⁶⁰ Freud (1927, 38) singles out Tennessee as resistant to scientific illumination. But he believes that, despite such strange anomalies, even the uneducated masses will be unable to remain blind to reality as revealed by science.

⁶¹ Low had commented to Freud that his *Thanatos*, the death instinct, bore a similarity to what she introduced to him as the Buddhist concept of nirvana. She defined nirvana to mean the cessation of suffering. That Low characterized nirvana in this way could tell us something about what “Buddhism” meant to Viennese, and, perhaps, Europeans at large, at this time. It tells us very little, however, about Freud’s perspective on Buddhist traditions.

⁶² Only a representative *sampling* of discussions of Freud on the “oceanic feeling” and Buddhist traditions: Cooper (2010, 161-162, 204), Dudley-Grant (2003, 107), Engler (2003, 49), Epstein (1998, 119-131), Langan (2003, 163), Magid (2003, 258-259, 271), Manne (1997, 107), Rubin (2003, 388-389).

European consumption – that Rolland had experimented (Parsons 2009, 182-185).⁶³ Of course, there is now so much literature speculating on Freud’s perspective of Buddhist traditions that the subject has indeed become a major feature of these activities.

Nonetheless, it was left to those who followed Freud to apply therapizing religion approaches to Buddhist teachings and practices. Having reviewed the basic structure of therapizing religion approaches, the remainder of this section introduces two representative therapists to therapize Buddhist traditions. A 1931 paper, *Buddhistic Training as an Artificial Catatonia (The Biological Meaning of Psychic Occurrences)*,⁶⁴ by Hungarian-born Chicago analyst Franz Alexander, is often framed as the paradigmatic pathologizing interpretation of Buddhist traditions.⁶⁵ Alexander does not only therapize Buddhist teachings and practices, interpreting them using psychotherapeutic theories. He finds them, like Freud had all religion, to be pathological, based in narcissistic desires. In true Freudian tradition, Alexander argues that only psychoanalytic tools can decode the true meaning and essence of Buddhist traditions. Alexander defines “Buddhism” as a system of practices intended to achieve “Nirvana,” release from “the eternal repetition of

⁶³ Most discussions of “the oceanic feeling” seek to overcome Freud’s derision for it as an obstacle to integration or “dialogue.” They seek a Freudian perspective on Buddhist traditions but feel stymied because he pathologized mystical experiences of “the oceanic feeling” as a narcissitic wish for maternal union. Interestingly, some have recently seized on the fact that Freud’s analysis was of Hindu meditative experience rather than Buddhist to argue that his critiques do not apply, that he would have in fact have approved of Buddhist meditative states as different from those Rolland described.

⁶⁴ The article was based on a lecture Alexander gave nearly a decade earlier in 1922 at only the Seventh Congress of the International Psychoanalytical Association in Berlin.

⁶⁵ Alexander’s representative status was cemented by the inclusion of excerpts of his paper in a core text for psychotherapists interfacing with Buddhist traditions published during the late 1990s publishing boom on these activities, Anthony Molino’s (1998) *The Couch and the Tree: Dialogues in Psychoanalysis and Buddhism*. Molino’s reader has formed the basis for multiple historical surveys which trace the chronology of the figures that it includes.

rebirth.” This, “the central core of Buddhism”, he says, “can be understood in its deepest meaning only in the light of psychoanalytical interpretation” (1931, 138).⁶⁶

Alexander examines the “ascetic training” of “self-absorption methods” that enable the practitioner to reach this Nirvana. He describes these techniques as facilitating a progressive turn inwards. First, practitioners’ submit to total social disconnection, then, “a systematic suppression of all emotional life,” and, finally, intense meditative states of self-absorption. This path is laid out, he explains, to foster a narcissistic rechanneling of all libidinal energies away “from the outer world” and toward the self (1931, 132-133). Alexander’s paper concludes that the practitioner is regressed first to infantile merger with the mother. The ultimate goal, however, is to recreate intrauterine states of being. Nirvana is thus revealed to be, in truth,

the deepest regression to the condition of intrauterine life, the more so since the physical characteristics [practitioners comport their body into during meditation] are the same, immobility, being folded together, breathlessness – think of a Buddha statue. Nirvana is the condition in the mother’s womb. (1931, 136)

Exemplifying therapizing religion approaches to Buddhist traditions, then, Alexander analyzes an imagined Buddhist practitioner in their very physicality. By doing so, he discovers the true psychological purpose of a Buddhist path.

C. G. Jung’s treatment of Buddhist traditions offers a second illustration of how clinicians therapize religion. Jung conducted a more extensive study of Buddhist texts than Alexander, but his conclusions were just as extensively reductive. Jung is famous for being “romantically” positive about Buddhist teachings and practices. He portrays

⁶⁶ Alexander’s understanding of Buddhist doctrine is often dismissed as ill-informed and inaccurate. And yet, he rightfully locates what has been and remains a core component of Buddhist teachings for the majority of Buddhist practitioners throughout history: the achievement of nirvana defined as release from the cycle of literal rebirth. His reading thus stands in contrast to contemporary psychotherapeutic interpretations that rarely mention the concept of nirvana at all.

Buddhist traditions to be superior means for exploring the psyche: Reading the Tibetan *The Book of the Dead*, for example, Jung is astounded to find a “whole book [that] is created out of the archetypal contents of the unconscious” (1953/1969, 525). He suggests that, when read backwards, the text’s stages of death and rebirth are revealed to be processes for delving into the inner mind. They depict a “penetration into the groundlayers of consciousness. . .a bringing forth of psychic contents that are still germinal, subliminal, and as yet unborn” (1953/1969, 515).⁶⁷ The images of divinities and Pure Lands that Buddhist practitioners visualize are thus internalized analogs for Europeans’ symbolic projections of the collective unconscious. For instance, in his essay *The Psychology of Eastern Meditation*, the symbology of a Pure Land tract, like the “meditation on the meaning of sun and water,” becomes “something like a descent into the fountainhead of the psyche, into the unconscious itself” (1948/1969, 570).

Jung recognizes the enlightenment experiences that are generated from these interior explorations whether they be a “great liberation” (1954) or Zen *satori*. In his introduction to D.T. Suzuki’s introduction to his Zen teachings, he states that “the psychotherapist who is seriously concerned with the question of the aim of his therapy cannot remain unmoved when he sees the end towards which this Eastern method of psychic ‘healing’ – i.e., ‘making whole’ – is striving”: “the goal is transformation”

⁶⁷ Jung addresses here what Alexander also discussed, “memories of intra-uterine experiences.” Though it is likely he would have read Alexander, Jung does not name him specifically. He instead takes the opportunity to diminish “Freudian” theories of the unconscious for not being able to consider a “pre-uterine existence.” Buddhist thought seems superior to him for attending to this subject as evidenced, to his mind, by the *Bardo Thodol*’s description of the concept of rebirth. Jung too does not believe in literal rebirth, but a collective unconscious which predates individual consciousness. Differences on the nature of the unconscious is a (perhaps, *the*) key distinction between Jung and Freud’s thought. While Jung perceived the keys to the ultimate level of human development, self-actualization, to lie in the unconscious, he scoffed that it is “possible for Freudian theory to reach anything except an essentially negative valuation of the unconscious. It is a ‘nothing but’” (repressed base sexual instincts) (1953/1969, 515).

(1939/1969, 554). This Buddhist search for total psychic change is what Jung calls “individuation,” the actualization of one’s higher self through integration of the contents of the collective unconscious.

Alexander and Jung’s Buddhisms

The previous section offers Alexander and Jung as useful case examples of clinicians who therapize religion. Just one reason they are worth singling out is that, among psychotherapists, they are often portrayed as opposite ends of a spectrum of early treatments of Buddhist traditions. Alexander is presented as the dour spoiler to Jung’s enthusiastic embrace of a Buddhist path. But Alexander and Jung’s interpretations of Buddhist teachings and practices share a great deal. The next section explains that they, first, both therapize a common “Buddhism.” This “Buddhism” was derived from 19th-century German commentary and translation sources that helped establish it as a religion (an assumption both operate on without question). These same sources encoded presuppositions about what defines Buddhist practice the traces of which exist to this day. Alexander and Jung first read Buddhist teachings as explained by figures like Leopold Ziegler (2004) and Hermann Oldenberg (1881). The latter receives specific extended attention by Tomoko Masuzawa (1995, 132-136) in her elucidation of the construction of a “world religion” Buddhism that could stand as foil to Christianity. Here Buddhism is viewed as a counterpoint of self-focused introversion in contrast to Christian extraverted worship of the divine. Buddhism’s construction as a religion of introverted self-absorption in binary relationship to a “West” of extroverted dominance of the outside world was fundamental to Alexander and Jung’s interpretations. Buddhism was defined

by a psychological turn inwards and the two offer psychotherapeutic explanation for this Buddhist desire for self-absorption. Alexander, for instance, divulges the psychodynamics that make Buddhism into “a narcissistic religion in opposition to the transference religion, Christianity, which attempts to regulate the social life of humanity in its affective relation” (1931, 136).⁶⁸

Jung inherits the assumptions of early representations of “Buddhism” from key European “discoverers of Buddhism.” But his role in reconstructing this Buddhism and transmitting it to a wider audience cannot be overemphasized. Prior to the 1990s, Jung had published more words on Buddhist traditions than any other single psychotherapist. As a conduit to scientific, academic, and otherwise elite audiences, his name was a sought after association for Zen popularizers like Shin’ichi Hisamatsu⁶⁹ and the aforementioned Suzuki. Suzuki personally requested that Jung write an introduction to one of his first books published for European eyes. As Luiz Gomez observes, Jung wrote

introductions to some of the most popular and influential books on Asian religions by European authors or by Asian authors publishing in English. The genre of these writings, therefore, gave Jung a religious and Asian imprimatur he otherwise would not have, and gave him likewise a strong hold on a particular type of Western Orientalist audience. In a fascinating symbiosis, Jung’s psychology rode the wave of Western fascination with the East even as the East rode on the wave of Western interest in psychology, especially on the wave of psychology as the one substitute for religion that believed itself to be scientifically sanctioned. (1995, 242 fn. 46)

⁶⁸ Notably, unlike others, Alexander does not ignore the entire systems of socio-ethical prescriptions within even his limited sources on Buddhism. But he is baffled by them. “Nowhere in the Buddhistic literature,” he says, “has sufficient account been taken of the deep contradiction between the absorption doctrine and Buddha’s practical ethics, so far as I am able to follow. The goal of absorption, Nirvana, is a completely asocial condition and is difficult to combine with ethical precepts” (1931, 144).

⁶⁹ See Muramoto et al 2002 and, for commentary from a psychotherapeutic perspective on the dialogue, Shore 2002.

We'll return to this notion of a scientifically sanctioned substitute for religion. But Gomez highlights the indelible stamp Jung left on the construct of "Buddhism" generally. His imprint would only be stronger for those who shared his profession.

All of this creates a refractory effect. When Alexander, for example, turned to analyze a "Zen Buddhism" many decades after delivering his *Buddhistic Training*, it is a Zen as depicted by his colleague Erich Fromm in conversation with Suzuki (Alexander 1966, 369-371). And both Alexander and Fromm had likely read Jung's thoughts on the subject.⁷⁰ Suzuki, in turn, framed his version of Zen as, in part, a reaction to the same 19th-century German constructions of psychologization, rationalism, and individualism that also influenced Jung. Alexander thus analyzes a Zen, as relayed to him by Fromm, having been therapized by Jung, already psychologized by Suzuki, in response to the "German discovery of Buddhism" (Faure 1993, 52-88, Sharf 1995b, McMahan 2002).

Therapizing Religion Approaches as "Psychologism" (Jung's Defense)

The next section explains that Alexander and Jung's therapizing religion approaches share more than a common Buddhism. Both Alexander and Jung's approaches are also generated from similar ways of relating the categories of religion and secular science. The two sought to maintain their status as secular biomedical practitioners. And they position religion as an object of analysis for their psychotherapeutic theories. Jung's interpretations may have been more positive than Alexander's. But he too explains every aspect of Buddhist experience in terms of psychodynamics. At times, Jung conducts an

⁷⁰ The first English edition of Suzuki's book appeared in 1934 before Jung had written his foreword for the German version. Later English editions included a translation of Jung's treatment and given what we know about when Fromm became interested in Zen (see Chapter Two) it was likely one of these that Fromm first picked up.

equivalence translation project. Each foreign concept he reads is glossed with an equivalent concept from his analytical psychology theory (e.g., “thus our concept of the ‘collective unconscious’ would be the European equivalent of *buddhi*, the enlightened mind” (1954, 485)). It is no wonder then that when a Buddhologist like Donald Lopez (1998) reads in Jung’s introduction to the *Book of the Dead* the “statement that ‘the world of gods and spirits is truly ‘nothing but’ the collective unconscious inside me’” he concludes that

Jung thus uses the *Bardo Thodol* (as he did the other Asian texts about which he wrote) as raw material for his own theories. Like the colonial industrialist, he mined Asian texts (in translation) for raw materials, without acknowledging the violence (both epistemic and otherwise) that he did to the texts in the process; reversing the order of the three bardos (sic) is but one example. He then processed these raw materials in the factory of his analytic psychology, yielding yet further products of the collective unconscious. These products were then marketed to European and American consumers as components of therapy and exported back to Asian colonials as the best explanation of their own cultures. (59)

Lopez reveals the colonial capitalistic market as the secular force that produces (and is reproduced in) Jung’s treatment of Buddhist traditions.

But the relational configurations Alexander and Jung arrange between religion and secular science are more complicated than they first appear. Both did inherit a conflict model for religion and science. Both foresaw that scientific truth would emerge triumphant over traditional religious belief. They believe that their own psychotherapeutic theories could contribute to this fall. Their analyses, for example, explain that the claims of Buddhist metaphysics are, in truth, generated by psychodynamics. But Alexander and Jung are highly ambivalent about the secularization they imagine to be unfolding. And they are even more conflicted about their own roles in what Jung called “despiritualization.”

In the case of Jung, he actively engages with such concerns. Jung does not view himself as contributing to a secularization of society that would completely eliminate all aspects of religious traditions. He directly rebuts those who characterize him in this way. Though rarely mentioned in scholarly treatments of “Jung on religion,” Jung filed a number of responses to charges that his theories were reductive “psychologism,” that he reduced religion to psychology. Jung would have been surprised to learn that he was a perpetrator of imperialism. He views himself to be a near lone voice repeatedly railing against the evils of colonial Europe. He condemns “the Aryan bird of prey with his insatiable lust to lord it in every land,” feasting on the naïve, child-like primitives of Asian or African cultures.⁷¹ Jung would have required a session on Lopez’s couch to conscientize his colonial assumptions with their racist underpinnings. He would not have been surprised, however, by accusations that his own conscientizing of the truths underlying Buddhist traditions is reductive. He was quite familiar with the reprimand that he was guilty of what he knew as “psychologism.”

To such criticisms, Jung retorts that he uses scientific tools to make religious experience more accessible, not to submit it to secular scientific authority. In one of his most revealing analyses of Asian religious thought, his introduction to the Chinese

⁷¹ Quoting the full context from which this is excerpted gives a fuller flavor of Jung’s vision of European colonialism in which he both bemoans its violence and reproduces some of its core racist assumptions: “Western man lives in a thick cloud of incense which he burns to himself so that his own countenance may be veiled from him in the smoke. But how do we strike men of another colour? What do China and India think of us? What feelings do we arouse in the black man? And what about all those whom we rob of their lands and exterminate with rum and venereal disease? . . . the Aryan bird of prey with his insatiable lust to lord it in every land, even those that concern him not at all. . . that megalomania of ours which leads us to suppose, among other things, that Christianity is the only truth and the white Christ the only redeemer. After setting the whole East in turmoil with our science and technology, and exacting tribute from it, we send out missionaries even to China. The comedy of Christianity in Africa is really pitiful” (1928b/1964, 89). (For another fascinating passage in which Jung also discusses the “boundless lust for prey of Aryan man” see footnote 77 below.)

philosophical text *The Secrets of the Golden Flower* (1957/1967),⁷² Jung acknowledges that he “dismiss[es] without mercy the metaphysical claims of all esoteric teaching”

(49).⁷³ But he protests that only doing this can make their true power accessible to the “modern” reader.

My admiration for the great Eastern philosophers is as genuine as my attitude towards their metaphysics is irreverent. I suspect them of being symbolical psychologists, to whom no greater wrong could be done than to take them literally. If it were really metaphysics that they mean, it would be useless to try to understand them. But if it is psychology, we can not only understand them, but we can profit greatly by them, for then the so-called 'metaphysical' comes within the range of experience. If I accept the fact that a god is absolute and beyond all-human experience, he leaves me cold. I do not affect him, nor does he affect me. But if I know that a god is a powerful impulse of my soul, at once I must concern myself with him, for then he can become important, even unpleasantly so, and even in practical ways, which sounds horribly banal—like everything belonging to the sphere of reality (50).

Jung’s educated “modern man”⁷⁴ was left estranged from traditional means of religious experience (and, thus, self-actualization) as scientific truth made religious belief

⁷² This is actually a translation of a Confucian, not Buddhist text. Throughout his writings, Jung made little distinction between Asian teachings viewing them all as derived from a common source, the “East,” with common essential qualities. In this text, he frequently cites Buddhist traditions as alternative equivalent for the Confucian material he treats.

⁷³ When Jung explains this point further in this text we see the place of “the Christian” in his thought. In Jung’s vision of secularization, “the Christian” is left estranged from belief by science: “It is my firm intention to bring things which have a metaphysical sound into the daylight of psychological understanding, and to do my best to prevent the public from believing in obscure words of power. Let the convinced Christian believe, for that is the duty he has taken upon himself. The non-Christian has forfeited the grace of faith. (Perhaps he was cursed from birth in not being able to believe, but only to know.) Therefore, he has no right to put his faith elsewhere. One cannot grasp anything metaphysically, but it can be done psychologically. Therefore I strip things of their metaphysical wrappings in order to make them objects of psychology. In this way I can at least extract something understandable from them, and can avail myself of it. Moreover, I learn to know psychological conditions and processes which before were veiled in symbols and out of reach of my understanding. In doing this I also may be able to follow a similar path and to have similar experiences; if finally there should still be an ineffable metaphysical element, it would have the best opportunity of revealing itself” (1957/1967, 49). Note that here Jung leaves open the possibility of ineffability, but makes his psychotherapeutic path the route to reach it.

⁷⁴ Jung’s “modern man” is a construct that encapsulates a number of his social concerns including the herd psychology of “mass man.” But the core of what constitutes “modern man” for Jung, by my reading, is a loss of traditional Christian methods of meaning-making which had once been a “counterbalance to mass-mindedness.” See Jung 1933/1964, 153-156, and especially Jung 1956/1964, 247-268.

untenable. But, by elucidating the true psychological nature of religious experience, Jung reveals a superior form of religiosity.

Jung thus does not view himself as contributing to the downfall of true religion. He has, in fact, discovered new methods for cultivating a deeper religious experience than was previously possible. Of course, Jung has a very specific understanding of what qualifies as authentic religious experience. The next section describes both Jung and Alexander's definitions of religion and science. This continues to reveal their approaches to be more complicated than the simple submission of the former to the latter.

Jung and Alexander's Definitions of Religion/Science

Therapizing religion approaches to Buddhist traditions develop out of clinicians' understandings of religion and secular. Looking at those understandings more closely, however, begins to demonstrate the unstable relationships that such approaches make between these categories. The next section continues to use Alexander and Jung's treatment of Buddhist traditions as case examples and reviews their definitions of religion, science, and psychotherapy. Doing so further illustrates how approaches that appear to reduce religion to secular are actually far more complex.

Unlike Alexander, Freud, and most of the clinicians we will meet in this dissertation, Jung engages at length with the question of what defines the category of religion. And, like most of the therapists who do so, he addresses the question in an effort to protect religious traditions from secular critique. Jung initiates a number of tactics to do this that remain common within communities of psychotherapists and beyond. First, Jung distinguishes healthy from unhealthy religion. He declares that,

though religious institutions and their dogma are typically said to define “religion,” they actually do not qualify to be designated as authentically religious. He renames these forms “creeds,” “codified and dogmatized forms of religious experience” (1937, 9; 1956/1964, 256-258). While initially generated by authentic religious experience, creeds can easily become what Jung calls

degenerate religion[s] corrupted by worldliness and mob instincts. . . [Here one finds] religious sentimentality instead of the *numinosum* of divine experience. This is the well-known characteristic of a religion that has lost its living mystery. It is readily understandable that such a religion is incapable of giving help or of having any other moral effect. (1937, 32)

In Jung’s adoption of Rudolf Otto’s concept of the “numinous” he advances another prime tactic that continues to be utilized today. Jung seeks to protect religion from secular rationalist critique by locating it within “experience.” Religious experience, he argues, remains “mysterious.” It exists outside of, and thus is immune to, scientific observation. True healthy religion is impervious to scientific proof or disproof.

Jung advances a final tactic in his effort to preserve aspects of religious traditions. He pronounces religion to be an intrinsic natural function of the human body. Ironically, he achieves this by turning his old mentor Freud’s theory of religion against itself. Freud had already made religion the product of psychophysical biology. For Freud, religion is an expression of repressed unconscious material (e.g., impressions of one’s biological father become projections of an All-Father). Jung retains Freud’s claim that religion is biologically determined, that it originates in the unconscious, something all human beings possess as part of their basic physical makeup. But he remakes religion into a positive

physiological instinct.⁷⁵ A precursor of present-day seekers of a “god gene,” Jung names religion as a basic biological reality, a “god drive.” Rather than a pathological urge in need of cure, this drive towards religion produces the ultimate in human health, self-actualization. It is in fact the repression of the religious instinct that causes illness. For, if religion is an essential component of human flourishing, then secularization or “despiritualization” would be a serious problem for society.

Alexander too believes that secularization is highly problematic, and, given the strong differences in their theories of religion, for surprisingly similar reasons. Alexander’s ambivalence towards secularization is related to his ambivalence towards what he predicted would bring religion’s downfall: science. Both thinkers have significant reservations about the overvaluation they perceive science to possess in society. Alexander practiced during a period when psychoanalysts enjoyed wider and

⁷⁵ Jung’s writings on Buddhist traditions contain revealing summaries of his own theories. Often asked to write on the subject by Buddhist popularizers, he uses these occasions to disseminate his own ideas to, what Gomez calls, “a particular type of Western Orientalist audience” (1995, 242). Jung’s reconstruction of Freud’s understanding of the unconscious required considerable explanation for such an audience. Following his break with Freud, Jung continued to credit him for bringing the existence and importance of the unconscious to the European public attention. But Freud was unaware of what Jung knew: that what had led Freud to seek healing within the psyche was not his own will but the pull of the collective unconscious. Jung believed he had discovered that the unconscious exercised far more significant a control over the individual than the stray slip of the tongue. In his introduction to Suzuki’s *Zen*, he describes a higher psychotherapy that “has been able to free itself from the historical prejudice that the unconscious consists only of infantile and morally inferior contents. There is certainly an inferior corner in it, a lumber-room full of dirty secrets, though these are not so much unconscious as hidden and only half forgotten. But all this has about as much to do with the whole of the unconscious as a decayed tooth has with the total personality” (1939/1969, 552). Jung severely denigrated Freud for not recognizing the higher purpose at work in the unconscious and focusing only on its baser aspects. He did so in at times horrifying fashion by insinuating that this was due to Freud’s baser Jewish nature (1934/1964, 165-166). His introduction to *The Tibetan Book of Great Liberation* argues that, introversion, a turn inwards to the unconscious, was not only the dirty necessity Freud described it to be. An exploration of the psyche was a source of the ultimate human liberation of self-realization. This Buddhist text was so remarkable to Jung for it showed an appreciation for the “power of the introverted mind,” even as it was “practically unknown to the West.” Writing in 1939, Jung actually says that Freud’s dismissal of this power likens him to the very Nazis who would ultimately force Freud to flee his home! “Introversion is felt here as something abnormal, morbid, or otherwise objectionable. Freud identifies it with an autoerotic, ‘narcissistic’ attitude of mind. He shares his position with the National Socialist philosophy of modern Germany, which accuses introversion of being an offence against community feeling” (1939/1969 481).

wider acceptance within biomedical psychiatry (due in part to his own efforts) (1960, 89-125). He realized that the U.S. assimilation of psychoanalysis depended on analysts' willingness to expose their work to the scientific evaluation held in high esteem in the new country. Alexander has a particular conception of science in mind when he speaks of it, a positivist construction of empirical and experimental research that he referred to as "Wundtian" science. In works like 1960's *The Western Mind in Transition*, a personal memoir presented as documentary evidence for his larger social psychological theories, Alexander tells the story of psychoanalysis' "heroic past." He encourages still-defensive colleagues to recognize that "once a neglected and bitterly contested marginal discipline on the borderline of psychiatry and the social sciences, it has now found in this country broad recognition and acceptance" (63).

With psychoanalysis achieving acceptance as biomedical science, Alexander speaks from a position of relative security. And, after witnessing the destructive capacity of scientific technological advancement in the World Wars, Alexander began to critique what he believes was the excessive utilitarianism of "Wundtian" science. He is derisive of scientists' de-prioritizing of theory, of knowledge for knowledge's sake. They appear to monomaniacally pursue discoveries of practical use. Jung also considers how to define science and is also concerned about the dominance of positivist science. He wants to maintain his status as a scientific practitioner. But he emphasizes that science should remain only a tool and scientific knowledge should never be granted immediate deference. "Science is not, indeed, a perfect instrument," he writes "but it is a superior and indispensable one that works harm only when taken as an end in itself. Scientific

method must serve; it errs when it usurps a throne. . .[It] obscures our insight only when it holds that the understanding given by it is the only kind there is” (1957/1967, 6).

Alexander depicts scientists as aiding humanity’s advancement in the world; contemporaneously they were even “in the process of penetrating outer space.” But he believes there to be a heavy cost. “All these triumphs,” Alexander said “concerned the world around [the modern man]. [And] in the fervor of this extroverted mastery of the world around him, man forgot the mastery of his own self. He conquered the world and lost his own self.” Science had become all extraversion and

religion, the traditional caretaker of man in all his other than intellectual needs, lost its hold on the western world. . .Science could not, however, substitute anything in the place of religion to guide man in his own critical decisions. It did not give him new morality, new faith, new answers for the essential question: what is the meaning of personal existence? (1960, 195)

Jung too believes that, without religious traditions, humanity lacked sources of ethical guidance. But the consequences he envisions for the loss of traditional religious Christian belief were even more dire.⁷⁶

Again, Jung believes that religious traditions are produced out of a basic biological drive towards self-actualization, the ultimate level of psychic health. Practicing religions had once been the primary means through which this self-realization

⁷⁶ It should be specified that in Jung’s conception of the “West,” Christian traditions were the only “natural” forms of religion. This is a given throughout his writings on religion, but he sharpens the claim while explaining the essence of Buddhism as a religion of “the Eastern man” in his commentary on *The Tibetan Book of the Great Liberation*: “The psyche is therefore all-important; it is the all-pervading Breath, the Buddha-essence; it is the Buddha-Mind, the One, the *Dharmakaya*. All existence emanates from it, and all separate forms dissolve back into it. This is the basic psychological prejudice that permeates Eastern man in every fibre of his being, seeping into all his thoughts, feelings, and deeds, not matter what creed he professes. In the same way Western man is Christian, no matter to what denomination his Christianity belongs” (482). Jung also references here a theory of race that explains in his mind why it is, in the end, physically impossible for the “Western man” to adopt Buddhist practices.

could be achieved. As scientific reason dispelled religious belief, then, humanity was beset with new neuroses.

When any natural human function gets lost, i.e., is denied conscious and intentional expression, a general disturbance results. Hence, it is quite natural that with the triumph of the Goddess of Reason a general neuroticising of modern man should set in, a disassociation of personality analogous to the splitting of the world today by the Iron Curtain. This boundary line bristling with barbed wire runs through the psyche of modern man, no matter on which side he lives. (1956/1964, 280-281)

Peter Homans (1995) has argued that Jung himself struggled with the internal conflict diagnosed in this passage. He suggests that Jung felt caught between religion and secular science. Whether Jung did suffer from this conflict or not, Jung believes that this split was a psychological illness endemic to “modern man.” Further, again, if religion were to fall completely, humanity could lose the ability to achieve true psychological health.

But there’s an optimism to Jung’s theory of religion. Jung describes the religious instinct to be, in the end, irrepressible. With an intensity even more powerful than other psychodynamic drives, the collective unconscious always finds means of expression both at an individual and societal level. He likens it to Einstein’s conception of energy. Psychic energy too cannot be destroyed, it can only be transformed (e.g., 1928b/1964 86). In fact, Jung believes that this process of transformation was responsible for the growing European interest in Buddhist traditions. In the preceding section, I used Jung and Alexander’s understandings of religion and science to illustrate the complex arrangements their therapizing religion approaches make between these terms. I further elucidate these understandings in the next section by introducing Alexander and Jung’s interpretations of European interest in Buddhist traditions.

“The Discovery of Buddhism”: Alexander and Jung’s Theories on Attraction to Buddhist Traditions

In their publications, Alexander and Jung regularly contrast their own interpretations of Buddhist teachings and practices with those of colleagues and contemporaries. They not only therapize Buddhist practice, but those who engage in it. Just as they uncovered the true psychological drives that compelled Buddhists in Asia, they also had psychological explanation for the attention Buddhist traditions had begun to receive in Europe and the United States. This next section presents their explanations. I show that their interpretations are based again on ideas about what defines religion/secular science, and an imagined conflict between them. Both thinkers assert that a growing cultural attraction to Buddhist practice was compensatory for secularization’s degradation of traditional religious means of self-exploration. For Alexander, the appeal of Buddhist traditions even took in friends like Erich Fromm and Karen Horney.

As the extroverted interest of European culture reached its peak in the modern era of science, eventually even psychology assumed the goals and principles of empiricism and experimentation. Introspection is, however, a basic attribute of man. Through introspection man has an avenue to the universe of which he is a part. This avenue is not contradictory but complementary to the exploration of the physical world. It is not amazing, then that in the course, of history, whenever the problems of social existence impinged forcibly upon him, Western man’s concern with himself was aroused and he became more receptive to Oriental philosophy. (Alexander 1966, 26)

Jung’s theory follows the same logic as Alexander’s. Without religion, humanity seeks out new methods for introspection. But Jung also perceives the greater unseen powers of the collective unconscious to be at work.

In a spectacular tale of the spirit of history, Jung claims that the collective unconscious is responsible for the actual physical importation of Asian texts into Europe. He states that this phenomenon is a sign of the collective unconscious grasping for novel

ways to express itself. The first European translation of the Upanishads which, he said, “gave the West its first deep insight into the baffling mind of the East,” was not completed by

a mere coincidence independent of the historical nexus of cause and effect. My medical bias prevents me from seeing it simply as an accident. Everything happened in accordance with a psychological law which is unfailingly valid in personal affairs. If anything of importance is devalued in our conscious life, and perishes - so runs the law - there arises a compensation in the unconscious. (1928b/1964, 86)

In Jung’s secularization vision, traditional Christian means for achieving self-actualization “perish,” but “there arises a compensation.” The European discovery of religions like Buddhism was a result of this displacement of psychic energy. Jung identifies a turn towards “the East” with a turn towards “the power of the introverted mind.” This identification plays a far more consequential role in Jung’s thought than is often perceived. Homans, for example, views Jung’s excursions into Asian religious thought as little more than a footnote in his struggles to come to terms with traditional Christian teachings (1995, 187). But Jung believed that “the East is at bottom of the spiritual change we are passing through today.” Jung heralded an imminent “spiritual epoch” (1928b/1964, 91) in which society would overcome “the spiritual problem of modern man.” Humanity would, in the end, move past secularization and into a new phase. “Our own psyche, constantly at work creating new spiritual forms and spiritual forces” first reached out to “the East” thus “throwing our spiritual world into confusion” (1928b/1964, 91). But the unconscious drive towards self-actualization, propelled by the

“infect[ion] of the East” (1928b/1964, 91), would only come to full fruition in the development of Jung’s own analytical psychology.⁷⁷

Therapizing Religion: Simultaneously Blurring and Reproducing Hard Borderlines Between Religion/Secular

The instability of the relational configurations Jung and Alexander make between the religious and the secular scientific is at this point clear. Both Alexander and Jung operate on putative understandings of the categories of religion and secular science. They both believe that they are witness to society’s secularization in which positivist scientific truth inevitably banishes the metaphysical beliefs of religion. As avowed scientific biomedical practitioners, Jung and Alexander contribute to these secularization processes. Their therapizing religion approaches explain psychodynamic realities behind religion’s illusions. But they both have reservations about what is lost in secularization. Their attempts to rectify this further blurs the hard borderline between religion and secular they simultaneously reproduce. Both propose revisions to what qualifies to be classified as

⁷⁷ Jung describes this process more fully in reference to his conflict about colonial imperialism. He even speculates that an Eastern influence could soothe the Aryan need to conquer. “While we are turning the material world of the East upside down with our technical proficiency, the East with its superior psychic proficiency is throwing our spiritual world into confusion. We have never yet hit upon the thought that while we are overpowering the Orient from without, it may be fastening its hold on us from within. Such an idea strikes us as almost insane, because we have eyes only for obvious causal connections and fail to see that we must lay the blame for the confusion of our intellectual middle class at the doors of Max Muller, Oldenberg, Deussen, Wilhelm, and others like them. . .The Theosophists have an amusing idea that certain Mahatmas, seated somewhere in the Himalayas or Tibet, inspire and direct every mind in the world. So strong, in fact, can be the influence of the Eastern belief in magic that Europeans of sound mind have assured me that every good thing I say is unwittingly inspired in me by the Mahatmas, my own inspirations being of no account whatever. This myth of the Mahatmas, widely circulated in the West and firmly believed, far from being nonsense, is – like every myth – an important psychological truth. It seems to be quite true that the East is at bottom of the spiritual change we are passing through today. Only, this East is not a Tibetan monastery full of Mahatmas, but lies essentially within us. It is our own psyche, constantly at work creating new spiritual forms and spiritual forces which may help us to subdue the boundless lust for prey of Aryan man. We shall perhaps come to know something of that narrowing of horizons which has grown in the East into a dubious quietism, and also something of that stability which human existence acquires when the claims of the spirit become as imperative as the necessities of social life” (1928/1964, 91).

science. They denounce the dominance of positivist science in society. Jung reconstructs what defines the category of religion to protect it from the secularization he imagines. But even Alexander, the paradigmatic pathologizer of Buddhist traditions, wants to preserve aspects of religious traditions.

Alexander appears to keep religion under the microscope of scientific study. He operates on a clear separation between his secular scientific eye and the religious object of analysis. But, like Jung, what he sees magnified on the slide is a human need that must be met. There are aspects of religion that must be sustained after secularization. Also like Jung, Alexander further believes that Buddhist experience contains knowledge that should be incorporated into psychotherapeutic theory. Alexander asserted that descriptions of *jnana* (wisdom/mental absorption) and Zen *satori* (sudden enlightenment) states confirm and expand psychoanalytic claims. Of course, the Buddhist practitioner does not have access to the psychoanalytic insights Alexander observes because they are too immersed in self-absorbed subjectivity to reflect on their experience (1931, 141-142). This was particularly so, to Alexander's mind, in the case of Suzuki's Zen with its intense strand of anti-intellectualism (1966, 371). But a scientifically-objective psychoanalyst can derive knowledge from Buddhist experience. And this knowledge can then cross the boundary into secular psychotherapy.

Jung, meanwhile, also defined himself as a secular biomedical practitioner. He also reduces Buddhist experience to his psychotherapeutic theories. But Jung was even more anxious than Alexander about the consequences of secularization. He redefines science as a tool to distill essential knowledge from religion. Alexander thought examining Buddhist teachings teaches the analyst something about psychopathology.

While, in Buddhist traditions, Jung found techniques for exploring the psyche “which simply put all Western attempts along these lines into the shade” (1939/1969, 554).

Studying Buddhist traditions thus provides important resources for psychotherapeutic knowledge.

Therapizing religion approaches like those of Jung and Alexander can not only be said to submit the religious to the secular scientific. They can be seen as means of justifying the compromise of psychotherapy’s secularity with religious elements. Jung is very much aware of such interpretations. And his idealized understanding of Buddhist traditions does not only offer a model for self-liberation. Jung imagined Buddhist traditions to emanate from a space that is liberated from the conflict between religion and science. They are a precedent for his hope that this conflict can be resolved. In his commentary on *The Tibetan Book of the Great Liberation*, Jung proclaims that

there is no conflict between religion and science in the East, because no science is there based upon the passion for facts, and no religion upon mere faith; there is religious cognition and cognitive religion. . .The gods of Tibetan Buddhism belong to the sphere of illusory separateness and mind-created projections, and yet they exist; but so far as we are concerned an illusion remains an illusion, and thus is nothing at all. (1954, 480)

Jung’s explanation here both relies on and promotes his preferred definitions of religion and science. He campaigns for a science that is less attached to “fact” and a religion free of metaphysical belief. The viability of these constructions is affirmed through their projection onto an idealized “East.” When Jung reads Tibetan Buddhist philosophies of non-duality he is convinced that the communities who adhere to these philosophies don’t really treat the divinities they propitiate as realities. Instead, they surely adhere to the same understanding of religion as he. They surely attune only to the essential human truths that are held within the illusions of religious metaphysical beliefs.

That Jung fantasizes about liberation from the binary opposition of religion and secular science demonstrates how bound he feels to this binary. He seeks to simultaneously preserve the importance of religious experience and his own biomedical secular status. Secularization is inevitable, but so is humanity's will towards the religious. "Western forms of religion," with "faith" as their essence, were predestined to fall before science (1928b/1958, 84). Thus, a replacement is necessary to channel the "psychic energy which can no longer be invested in obsolete religious forms" (1928b/1958, 84). Jung is so impressed by his romanticized version of Buddhism that he entertains the possibility that it could be this substitute.⁷⁸ However, he concludes that Buddhist practice not only should not, but *could not* be adopted by "Western man."

Jung's protestations against Europeans' Buddhist experimentation are not made casually; he repeatedly and emphatically discourages Buddhist and Asian religious practices. In his commentary on *The Secret of the Golden Flower*, Jung states that "there could be no greater mistake than for a Westerner to take up the direct practice of Chinese yoga. . . It cannot be sufficiently strongly emphasized that we are not Orientals, and therefore have an entirely different point of departure in these things" (1957/1967, 14). In the foreword he wrote for Suzuki: "a direct transplantation of Zen to our Western

⁷⁸ In a 1910 series of correspondence, Jung discusses with Freud what psychoanalysis would require to be able to replace Christianity (which he refers to as "our religion") it now having become passé. "2000 years of Christianity can only be replaced by something equivalent" (1974, 294), he told Freud; only if psychoanalysis took account of the collective unconscious, the source of religion, could it stand a chance against Christian inculcation. Freud, of course, rebuffed Jung's insinuations. Lightly reprimanding "the tempest [that] rages" within Jung, he famously told him "you mustn't regard me as the founder of a religion" (1974, 295). While these letters understandably receive much attention, it is worth highlighting what Jung cites in his correspondence among examples of other possible substitutes for traditional Christian belief: Buddhism. "If a coalition is to have any ethical significance it should never be an artificial one but must be nourished by the deep instincts of the race. Somewhat like Christian Science, Islam, Buddhism. Religion can be replaced only by religion" (1974, 293-294)

conditions is neither commendable nor even possible” (1939/1969, 555). Jung’s favorite target here are the Theosophists who he mercilessly ridiculed for attempting to take up Buddhist practice.⁷⁹ He writes in his commentary on *The Great Liberation* that “yoga in Mayfair or Fifth Avenue, or in any other place which is on the telephone, is a spiritual fake” (1954, 500).⁸⁰

Throughout his writings, Jung gestures to a number of obstacles to Europeans walking a Buddhist path.⁸¹ In the end, though, Jung’s bases his view that authentic Buddhist practice is impossible for the Westerner on what Gomez calls a “psychology of

⁷⁹ He trains his derision on multiple movements such as “Mrs Eddy[’s] invent[ion of] a ‘Christian science,’” or “[Blavatsky’s and Olcott’s] adoption of Asian ideas in Theosophy.” To his mind these figures are only “pretend[ing] to be scientific” and sees them as further evidence of an overreliance on science. He ultimately forgives them concluding that “the fact that all the movements I have mentioned give themselves a scientific veneer is not just a grotesque caricature or a masquerade, but a positive sign that they are actually pursuing ‘science,’ i.e. *knowledge*, instead of *faith*, which is the essence of the Western forms of religion.” It is a positive sign that new movements in “the West” like Theosophy orient themselves towards “knowledge” in binary opposition to a “faith” which can no longer be accepted in a world of scientific truth.

⁸⁰ For Jung, “Yoga” was a term that referred to all introverted practices of the similarly homogenous “East.”

⁸¹ At times Jung contradicted his idealization of Buddhist traditions by recapitulating old Christian critiques embedded in the European constructions of “Buddhism” we looked at earlier. He would accede that Buddhism was inferior to Christian thought for its mistaken confidence in the power of the individual without surrender to a higher authority. A Buddhist view of self-liberation was in error for not recognizing the autonomous nature of the unconscious, that actualization cannot be produced “at will.” In contrast, “it seems as if the Western mind had a most penetrating intuition of man’s fateful dependence upon some dark power which must co-operate if all is to be well” (1954, 491). On this same line of bifurcating East and West by introversion/extroversion, he stated that “Western practitioners” failed in their experimentation with Buddhist practice because they “are very apt to ‘do’ it in an extraverted fashion, oblivious of the inturning of the mind which is the essence of such teachings.” He looks at the relationship between teacher and student in Zen traditions and asks “who among us would place such implicit trust in a superior Master and his incomprehensible ways? This respect for the greater human personality is found only in the East.” Jung was especially dismissive of Theosophists and others because he believed their adoption of Buddhist practice fully crossed the religion/science borderline. The typical Theosophist, he said, “contemptuously turns his back on science, and, carried away by Eastern occultism, takes over yoga practices quite literally and becomes a pitiable imitator. . . And so he abandons the one safe foundation of the Western mind and loses himself in a mist of words and ideas which never would have originated in European brains, and which can never be profitably grafted upon them.” Even in this statement, however, Jung reveals what is his fundamental objection: biology. Referencing European colonialism, Jung ultimately concludes that adopting Buddhist traditions “merely indulg[es] our Western acquisitiveness, confirming yet again that ‘everything good is outside,’ whence it has to be fetched and pumped into our barren souls.” Instead, he said, “we must get at the Eastern values from within and not from without, seeking them in ourselves, in the unconscious.”

race” (1995, 21).⁸² Jung mixes the German racial theories prevalent in his day with his own understanding of the collective unconscious. The collective unconscious, in Jung’s theories, is at once universal⁸³ and particular to a race’s cultural history.⁸⁴ Jung thus views the European to have a fundamentally different biological make-up than the Asian. The “Western man” is simply too racially divergent from the “Eastern man” to adopt their ways. “He” is constitutionally incapable of practicing the fullness of Buddhist traditions.⁸⁵

If traditional Christian forms were to become unsustainable after science, Jung decides that Buddhist traditions were not destined to be their replacement. Jung indicates that a Western version of the Buddhist turn inwards must be established. “The spirit of the East has come out of the yellow earth, and our spirit can, and should, come only out of our own earth” (1957/1967, 49). Quoting Jung’s contention that “if we wish to understand at all, we can do so only in the European way,” Gomez (1995) quips “and, needless to say, the European way has to be Jung’s psychology” (215). In the next

⁸² Gomez states more fully that “a psychology of race. . . is at the heart of the Jungian repetition of the stereotype that assumes a special psychology for the Asian mind, an organization of the mind that places the Asian both beyond and below the limits of European normality” (1995, 21).

⁸³ In his *Golden Flower* commentary (1957/1967) he explains “that just as the human body shows a common anatomy over and above all racial differences, so, too, the psyche possesses a common substratum transcending all differences in culture and consciousness. I have called this substratum the collective unconscious. This unconscious-psyche, common to all mankind, does not consist merely of contents capable of becoming conscious, but of latent dispositions towards certain identical reactions. Thus the fact of the collective unconscious is simply the psychic expression of the identity of brain-structure irrespective of all racial differences. This explains the analogy, sometimes even identity, between various myth-motifs, and symbols, and the possibility of human beings making themselves mutually understood. The various lines of psychic development start from one common stock whose roots reach back into all the strata of the past” (11).

⁸⁴ He argued that each particular race inherits a particular cultural heritage: “Western man cannot get rid of his history as easily as his short-legged memory can. History, one might say, is written in the blood” (1954, 500).

⁸⁵ Previous analyses of Jung’s treatment of Buddhist traditions actually point to this material as evidence that Jung demonstrates a *sensitivity* to cultural difference. “In Jung’s essays on Buddhism, the reader will note Jung’s abiding awareness of fundamental differences in the ‘Eastern mind,’ and the Western-bred limitations we face in understanding it” (Meckel and Moore 1992, 2).

section, I describe how both Jung and Alexander position psychotherapy as a new innovation that can be this “European way.”

Psychotherapy as “Third Term”

In this section, I continue to show how clinicians’ therapizing religion approaches to Buddhist traditions are far more complex than the secularizing forces they might appear. In Jung and Alexander’s instances, they actively negotiate their (perceived) conflicting allegiances to both secular science and aspects of religion. Their shared solution is to present psychotherapy as “the best of both worlds.”

Jung views secularization as a problem in need of a solution. But he concludes that there is no need to turn to Buddhist traditions. The West has generated its own superior path: his analytical psychology. Alexander positions psychoanalysis in a similar fashion. For Alexander, psychoanalysis becomes a kind of fulcrum between Buddhist traditions and science, holding what each lacks. Where Buddhist traditions are obsessively intraverted, science overly extraverted, psychoanalysis is a middle way. It discloses the subjective material of the psyche and interprets it with objective reason (1931, 143). At times, Jung also speaks of his psychotherapy as a balance of the positive attributes of Buddhist and scientific traditions. Perhaps, the two make their psychotherapies into what Ann Taves and Courtney Bender have dubbed a “third term.”

In their 2012 edited collection, *What Matters? Ethnographies of Value in a Not So Secular Age*, Bender and Taves argue that

taking a longer view of the developments of religion within secularism (and secularism in relation to religion) over the last several centuries presents numerous examples of other ‘third terms’ that took on new shape and power in relation to the secular-religious binary, often enabling actors to place themselves

in enlivened (if not enchanted) relations with the social worlds they produced.” (2012, 8).

Communities, Bender and Taves explain, have long constructed new concepts they conceived as a “third” node between the two poles of religion and secular. (Today’s most prominent third term is, of course, the category of “spirituality” discussed in more detail in Chapter Six.) Bender and Taves, however, cite storied traditions of “healers, and scientists [who] invested medical practices and modern technologies with divine forces and in so doing enchanted biomedical practices in ways they presumed were entirely consistent with the sciences in which they participated.” (2012, 8). Perhaps, Alexander and Jung can be counted among these “healers and scientists.” Certainly Jung is convinced that his own “enchanted medical practices are invested with divine forces.” Or, at least, the forces humans once mistook for the divine: the forces of the collective unconscious.

Bender and Taves’ notion of “third terms” could apply to the way Alexander and Jung present their psychotherapies. The two therapists believe their methodologies to hold the best of religion and secular science without their failings. The positive aims of religion are still achievable through the new innovation of psychotherapy. But psychotherapy is an advancement over religious traditions precisely because of its secular and scientific qualities (objectivity, empiricism, etc). Of course, raising up psychotherapy as a superior substitute for religious traditions can make it appear more than a “third term.” Such an idea can instead seem like a supreme case of secularization if one can so easily replace the other. Further, Alexander and Jung’s approaches can be seen as redefining religion into an inferior therapy. Alexander proclaims that “the aims of Buddhistic teaching are therapeutic, the conquest of age, sickness, and death” (1931,

136). Given this “therapeutic” nature of “Buddhistic teaching,” it is not surprising to him that clinical communities have noticed that “Buddhistic meditation has a definite psychotherapeutic flavor; in fact, it has been advocated not only as a form of psychotherapy for the mentally sick but also as an aid in managing the difficulties of everyday life” (Alexander 1966, 25).

For Jung, it is not only Buddhist traditions, but “all religions are therapies for the sorrows and disorders of the soul” (1957/1967, 48). “Religions,” he writes “are psychotherapeutic systems in the truest sense of the word, and on the grandest scale” (1934/1964, 172). Jung literally therapizes religion; he redefines the one to mean the other. Perhaps Alexander and Jung contribute then to “the triumph of the therapeutic” (Rieff 1966). They may be partly responsible for the way that psychotherapeutic values like psychological health and optimal functioning have become so central in contemporary religious communities. In their interpretations of the true purpose of religious practice they may participate in a shift “from salvation to self-realization” (Holifield 1983). Alexander would indeed have viewed a triumph of the therapeutic as a laudable goal. Provided that it was *his* therapeutic that triumphed – a therapeutic which includes alternative means of moral and ethical guidance.⁸⁶ Jung, meanwhile, believes that Christian traditions need not disappear entirely. They can be reformed, recovered from obsolescence. Nonetheless, he does suggest that his analytical psychology more effectively serves the purpose of religious traditions.

⁸⁶ Most critics of therapeutic culture equate therapeutic values with a narcissistic amorality. Alexander would argue that *his* therapeutic would provide resources to counteract such phenomena. (Although, highly aware of the harms of totalitarianism, he raises up “the individual” in a way that most of these critics would denigrate as “individualism.”) Alexander would likely claim that, if critics are correct about therapeutic culture, it is because the wrong sorts of psychotherapies had triumphed. Interestingly, what would make a psychotherapy “wrong” would be an overemphasis on the utilitarian values of positivist science.

Jung believes his psychotherapeutic process accesses what was once known as religious experience. However, he also intensely strove to maintain his craft's secularity. Jung's admonishments against experimentation with Buddhist practice were directed to a general public. He did not even bother to address the idea of incorporating Buddhist content into psychotherapeutic practice. The idea would never have even occurred to him as a possibility. While, at its best, psychotherapy held the same goal as religious traditions, it still remained a scientific biomedical practice. Jung sought a reconstruction of the categories of science and religion. But he did not seek to remove their differentiation. There is an air of nostalgia to Jung's reveries for a past in which "the medicine-man is also the priest; he is the saviour of the soul as well as of the body" (Jung 1932/1969, 344). But these were "primitive" times.

Jung sees his psychotherapy as the apex of an evolution generated by the permanent split between religion and science. If a religio-scientific synthesis is to be found, it is a synthesis that resolves within secularity. Scientific techniques, including psychotherapy, could be useful to the Christian pastor. But there was no question that psychotherapists would not employ religious practices (Jung 1932/1969). Jung believed what Alexander also acceded to, that studying Buddhist traditions advanced psychotherapeutic knowledge. But this analysis was restricted to the theoretical. As Anne Harrington joked at the colloquium I participant-observed at the William Alanson White Institute, Jung's posture on Buddhist traditions was "look but don't touch."⁸⁷ And yet, despite how clear Jung was on this point, his treatment of Buddhist traditions has been portrayed as a model for "integration" of Buddhist and psychotherapeutic frames.

⁸⁷ Harrington's talk was titled "Zen Masters of the Couch? An Historical Study and its Lessons."

In the next section, I explore how this becomes a final way in which therapizing religion approaches can become means for blurring boundaries between religion and secular as well as preserving them.

The Conversion of the Barbarians: How Even Freud Transforms Into An “Accidental Buddhist”

In this next section, a last look at the cases of Jung and Alexander, I explain how therapizing religion approaches, and the figures who utilize them, are interpreted with particular purpose. The declaration that Jung secularizes Buddhist traditions, or reveals their truth, is not a neutral statement. Communities of psychotherapists and cultural commentators forward such interpretations to further their own agendas.

Alexander had an indispensable role in bringing psychoanalysis to the United States. He contributed to the founding of social psychology as a field. And, in the “emotional corrective experience,” he theorized a psychotherapeutic concept referred to on a daily basis by practicing clinicians. But, for clinicians interested in Buddhist traditions and their scholarly observers, Franz Alexander is known as the analyst who saw only narcissistic regression in Buddhist teachings. He is made to stand in for a backwards psychoanalytic past marred by reductive psychology of religion. Religious studies scholars and therapists alike paint a particular picture of Alexander’s place in “the dialogue between Buddhism and psychoanalysis.” They portray an evolutionary progressive development in this “dialogue” from Alexander as early benighted darkness to a contemporary growing enlightenment (e.g. Rubin 2003; Parsons 2009).

Alexander’s formative role in psychoanalytic communities is not well known. But Jung is a major figure even for clinicians who do not see him as part of their own

psychotherapeutic lineage. With his romanticized appraisal of Buddhist traditions, Jung is ripe for portrayals of him as a positive counterpoint to Alexander. Alexander's old-fashioned prudishness gives way to Jung's integration of Buddhist and psychotherapeutic frames (e.g. many of the essays of Eisendrath and Muramoto 2002). As Gomez states, Jung's treatments of Buddhist traditions "provides, in spite of itself, and pace Jung himself, the authority for appropriating Asian religious ideas" (1995, 225). Of course, this elides Jung's numerous protestations against such an enterprise. Gomez notes the irony that Jung's appropriation and reconstruction of Buddhist teachings are now in turn appropriated and reconstructed by Jungian psychotherapists. (Gomez has a psychotherapeutic interpretation for this dynamic. He suspects it reveals a search for the authority of the self through the authority of the other (1995, 230).)

Jung is far from the only authoritative psychotherapeutic figure to be employed in this fashion. A central trope for clinicians participating in "the Buddhism and psychotherapy encounter" is the discovery of similarity between Buddhist doctrine and the ideas of prominent psychotherapeutic theorists. These comparative exercises have even centered on the famously atheist Freud. Alexander initiates the tactic. He repeatedly marvels at

the striking similarity between the analytical method and the doctrine of Buddha. . . Can we regard as accidental this remarkable repetition in the history of both spiritual creations whose founders both at first attempted to use hypnosis, which they found at hand as prescientific practice? And was it also accidental that both then arrived at the conclusion that the chief and really difficult task is to establish the connection with consciousness? (1931, 142)

Again, Alexander, the paradigmatic pathologizer of Buddhist traditions, does not only strive to keep Freud and the Buddha wholly separate and distinct. He also makes equivalence between them through a recitation of perceived affinities. And he does so

with purpose. Finding similarity to a religion with adherents across the globe increases the status both of psychoanalysis and its founder. Freud himself had done a fair bit of thinking about his place among the “great men” who launched important movements throughout history. Alexander only rhetorically asks whether the “remarkable repetition in history” is an accident. Clearly he believes it is not. The discursive move implies what Jung had stated explicitly: that the design of psychotherapy was both an evolutionary step forward and a recovery of ancient esoteric wisdom.

Since Alexander, psychotherapists have produced a mass of literature comparing the ideas of Freud and the Buddha. But they usually do so for additional purposes beyond establishing the significance of psychotherapy in world history (though this motive at times also still seems present). Comparative analyses typically begin with the concession of Freud’s atheism. But they go on to list a series of remarkable similarities between Buddhist and Freudian frames. Freud is said to possess a Buddhist passion for ‘plumbing the depths’ of the intra-psychic interior. He purportedly holds a Buddhist understanding that healing transformation occurs by turning inwards. The “evenly hovering attention” Freud taught analysts to maintain in the consulting room is described as nearly identical to Buddhist meditational states. Buddhist traditions are therapized in all of these exercises using Freudian theories. They are culled for those elements that appear to be similar to Freud’s personality or work. But it is not only Buddhist teachings and practices that are transformed in this process. In short, Freud metamorphoses into an accidental Buddhist.⁸⁸

⁸⁸ Only a sampling of such analyses that specifically address the concept of ‘evenly hovering attention’: Rubin 1996, 115–124, Miller 2002, 79–91, Finn 2003: 122–131, Weber 2003, 169–189.

Psychotherapists' comparative analyses of Freudian and Buddhist teachings could in turn be compared to the stories of previous communities newly introduced to Buddhist traditions. Scholars of medieval China, for example, could point to historical records replete with instances when authoritative figures from one community – Buddhists or Daoists – were literally transformed into representatives of the other one. In the *Conversion of the Barbarians* stories of the *Laozi huahu jing*, we learn that Laozi's journeys did not end with his retirement from China on ox-back. Instead, his ultimate destination was India where he took the form of a certain Siddhartha Gautama. He then generously shared the Dao with the 'barbarians' there who lacked it – albeit simplified so the inferior peoples could comprehend it. When we read Buddhist stories from this period, meanwhile, we discover that this gets it backwards. Laozi was a disciple of the Buddha sent to China to spread the Dharma (Zurcher 1959, 288–319; Kohn 2008, 8–17).

Clinicians today image Freud, their own Great Ancestor, head of their psychotherapeutic lineage, as an inadvertent Buddhist, as a mirror of the Buddha himself. This could be a new iteration of old strategies of acculturation long used in Buddhist transmissions. What is clear is that psychotherapists interpret their predecessors' therapizing religion approaches for tactical purpose, whether to further the acculturation of Buddhist traditions or other motives. Alexander's treatment of Buddhist teachings becomes a demonized conservative effort that inhibits clinicians' progress and secularizes the true essence of Buddhist practice. With Alexander's pathologizing as foil, a psychotherapist who finds both pathology and health in Buddhist traditions appears measured and reasonable. For other clinicians, Jung or Freud become authorities of old

who pave the way for integrative approaches that transmit Buddhist truths to new audiences.

Therapizing Religion Today

Therapizing religion approaches are sometimes historicized as belonging to clinicians-of-old. However, clinicians continue to therapize Buddhist teachings and practices today. They regularly explain and evaluate Buddhist traditions using psychotherapeutic models. This was frequently on display, for example, at the 2014 “Enlightening Conversations” conference I participant-observed. At the meeting, clinicians like Jeffrey Rubin (1996) therapized Buddhist teachings to assess which were healthy and worth integrating into clinical practice. Analysts referenced attachment theory to reproduce the same diagnoses of Buddhist solitary self-absorption that Alexander discussed nearly a century ago. But these analysts did so to adapt Buddhist teachings and practices for use in relational psychoanalysis.

This chapter has described how therapizing religion approaches were designed to maintain the boundary between religion and secular science. But they can also become a means for crossing that borderline. Here clinicians therapize Buddhist traditions to discern which aspects should be integrated with psychotherapies. Further, at times clinicians therapize Buddhist doctrine to prove that it can actually contribute to human health. They employ meta-psychological theories to reveal the therapeutic wisdom within certain Buddhist teachings. Here psychotherapeutic truths filter the religiosity out of particular elements. Legitimated by science, these items are made suitable to enter

secular biomedicine. Therapizing religion approaches can thus become examples of a second set of related approaches clinicians take to Buddhist traditions: *filtering religion*.

CHAPTER 2

HIDDEN HISTORIES, REVEALED RELIGIONS, AND IMMENSE SNOWBALLS: FILTERING RELIGION APPROACHES

In this book I will try to open out the discussion between Buddhist thought and psychotherapy and the new findings of neuroscience in the context of our search for wellbeing. Buddhist teachings are concerned with a way of living and engage most resonantly with practice rather than with theory, thus the conversation between Buddhism and psychotherapy has been a particularly fruitful one for as long as dialogue has existed between Buddhist and Western disciplines. In search of a way to happiness, Buddha set out to explore our experience and in so doing presented what may well be called the earliest ‘psychology,’ an experiential exploration of subjectivity. In the West, for much of the twentieth century, psychology (science) and psychotherapy (practice) had little to say to one another. Despite Sigmund Freud’s early wish to consider psychoanalysis as a science, academic psychology had scant time for what it considered at best an ‘art’ form, while psychotherapy found little of interest in psychology’s lack of concern with subjective experience. All this has changed since the growth of the interdisciplinary fields of cognitive science, neuroscience and consciousness studies, and the development of new technology. . .Contemporary mind sciences are stumbling towards an ever-clearer picture of what it means to be human, revealing exciting facts about how our minds work as observed from an objective stance. . .Such knowledge calls for understanding and reflection, and then new action. . .and illuminates how psychotherapy actually works. More surprisingly perhaps, its findings resonate with those of the ‘first’ psychology [Buddhist psychology]. This is the moment to bring neuroscience into the long-established dialogue between psychotherapy and Buddhism, to explore a potential path informed by all three disciplines towards mental and physical health and happiness. (ix-x)

Thus Gay Watson opens her 2008 book, *Beyond Happiness*. It is only one of several she has contributed over the last three decades (1998, 2000) to the literature surrounding psychotherapists’ investigation of Buddhist teachings and practices. To Watson, the “dialogue between psychotherapy and Buddhism” is “long-established.” No “new, popular fad,” it has a weighty history behind it. But this “dialogue” is now entering a

new phase. And the catalyst for this new phase is the technological and theoretical advancements of cognitive science.

I quote Watson at length, first, as a striking example of the numerous clinicians who employ neuroscientific findings in their approaches to Buddhist traditions. Watson goes further than most. She does not only believe that neuropsychological research will allow for a better synthesis or dialogue “between psychotherapy and Buddhism.” To Watson’s mind, cognitive science will bridge the gap between the fields of psychotherapy and psychology. Here Watson recapitulates the concerns of Franz Alexander and C.G Jung discussed in Chapter One. Back in the mid-1960s, Alexander had observed that “as the extroverted interest of European culture reached its peak in the modern era of science, eventually even psychology assumed the goals and principles of empiricism and experimentation” (1996, 26). Aligned now with “science,” Alexander complains, psychology no longer attended to the data of “introspection,” to the “subjective experience” Watson speaks of. What has changed somewhat since Alexander’s time, however, is the extent to which psychotherapy is deemed scientific. Watson says that “academic psychology. . .consider[s it to be] at best an ‘art’ form.” Neuropsychology, Watson explains later in her book, can heal this estrangement. It accesses “subjective experience” in scientifically verifiable ways for the use of clinicians. Cognitive science, she writes, “illuminates how psychotherapy actually works.”

Watson further suggests that psychotherapists’ attention to neuropsychology could have an additional transformative effect. The binary opposition Watson envisions between psychology and psychotherapy is founded on a more basic binary she glosses in parentheses: “theory/practice.” Cognitive science, she writes, can heal the divide in this

common rift between theory and practice. Scientific theory is now capable of real impact on practical healing. However, according to Watson, all of this requires a third party: Buddhism. She clarifies later in her text that Buddhist practitioners' experiential knowledge of the inner mind make them the perfect test subjects for revealing "how psychotherapy works." The "mind sciences," meanwhile can unlock the hidden wisdom of Buddhism's ancient esoteric teachings. They prove that Buddhist teachings are, in fact, the world's "first psychology." Watson's vision is by no means only held by communities of psychotherapists. Today, many hope that the latest scientific methods will reveal the truth of religious traditions and that, hand-in-hand, science and religion will discover the ultimate path "towards mental and physical health and happiness."

In the following chapter, I argue that Watson takes a particular approach to Buddhist traditions here: she *filters religion*. First, I outline therapists' *filtering religion* approaches and its key features. I explain that psychotherapists inherit these approaches from practitioners dating back to the very invention of "academic psychology" mentioned by Watson. Scholars and commentators have long depicted these activities as contributing to the secularization of U.S. society. Drawing on historical studies on early contributors to these approaches (psychologists of religion, alternative healers, etc.), I complicate those claims. When clinicians use filtering religion approaches, they do reproduce a binary hierarchical relationship between religion and secular science. But, like, for example, their Mind-Cure forbearers, they also upend this hierarchy; they reductively treat secular science as merely a tool for discovering and propagating new forms of religiosity. In the first section, I define psychotherapists' filtering religion approaches using the representative work of Gay Watson and psychiatrist Daniel Siegel.

The Monk and the fMRI: Filtering Religion Approaches

In this section, I introduce psychotherapists' filtering religion approaches to Buddhist traditions. The passage from Watson that opens this chapter exemplifies these approaches: Watson presents empirical scientific research to validate Buddhist teachings. Clinicians who take filtering religion approaches believe that scientific experimentation identifies those elements of religious traditions that contain healing potential. Alexander and Jung would likely be disappointed to learn of these activities. Psychotherapists' positive valuation of a "conventional definition" of science, what Alexander calls "Wundtian" science, has clearly not abated. (Again, under the conventional definition, utilitarian science is defined by empiricism and research design.) However, psychotherapists who take filtering religion approaches appeal to the authority of this science to preserve their position as secular biomedical practitioners.

Clinicians present empirical research findings to prove the truth content or efficacy of a particular religious item. This is seen as filtering away the taint of the religious from these elements. The historically religious item is brought under the domain of secular science; it is made scientifically verifiable. Watson presents the "contemporary mind sciences" as confirming the ancient truths of Buddhist doctrine. The lessons of the Buddha thus cease to be superstition or dogma. They are revealed as the world's "first psychology," a scientific discipline. Further, Alexander and Jung had also believed that knowledge could be gleaned from their analyses of Buddhist experience. But they maintained a posture of "look but don't touch." As Watson references, they intend to split off their theoretical examination from actual clinical

practice. Psychotherapists take filtering religion approaches, however, often appropriate actual practices into their work. Clinicians refer to scientific studies that purportedly demonstrate the positive health effects of a particular Buddhist practice. They then argue that this legitimates this practice's incorporation into psychotherapy sessions. Filtering religion through scientific research, therapists believe they make religious content suitable for the secular clinic.

As exemplified by Watson, some of the most popular contemporary Buddhist phenomena figure prominently in clinicians' filtering religion approaches. Neuropsychologists' study of Buddhist traditions hasn't only grabbed the attention of clinicians. It has ignited the public imagination in the United States and beyond. As observed by Harrington (2008a) and McMahan (2011), this popular excitement is encapsulated in the cultural ubiquity of a single iconographic image. The picture can be found on the covers of Time magazine or academic monographs on philosophy of mind: A Tibetan Buddhist monk dressed in traditional maroon and saffron robes sits in meditation. His face is placid in contemplative equanimity. But the unexpected intrudes; a set of electrodes completely covers the monk's head. They are, in turn, attached to wires extending out like a high-technology web. The image visions an exciting, perhaps enchanted, meeting between the "ancient" and "futuristic," "sacred" and "secular," "East" and "West." This research is now some decades old as the Dalai Lama continues to send monks to be hooked up to fMRI machines.

For psychotherapists like Watson, the cognitive scientific study of Buddhist practices promises to access a new realm of knowledge about human behavior. Energized by this conviction, they cite neuropsychological concepts to explain particular Buddhist

teachings. The findings of cognitive science are presented to validate the effectiveness of Buddhist practices. To support claims that Buddhist meditative attentional techniques have healing power, for example, Watson reports that “current studies have shown that experienced meditators display vastly greater neural activity in those areas of the left prefrontal cortex of the brain which are known to be associated with feelings of wellbeing than is found in the brains of control groups” (2008, 90).

Daniel Siegel is a second representative clinician who uses filtering religion approaches to Buddhist traditions. Siegel is a psychiatrist and researcher of what he has dubbed “interpersonal neurobiology.” In nearly every sentence of his numerous books, he cites experimental studies in ways similar to Watson. In the introduction to one, *The Mindful Therapist* (2010), he informs the reader that they should expect to find “plenty of science here. . .My hope is to have the experience of reading this book expand the way you embrace science” (xviii). Siegel often focuses on the research validation of practices, especially mindfulness practices. Drawing from the same pool of research as Watson, he suggests that mindfully observing the flow of one’s physical sensations as in

body scan exercise[s]. . .keep[s] your connection of the insula’s input into your consciousness-creating cortex fully honed. Studies by Sara Lazar and colleagues even suggest that with regular mindfulness meditation, the right anterior insula and other aspects of the middle prefrontal region remain thicker – that is, they do not show the usual diminishment with aging. This preservation may be due to the growth of neural connections in areas that are repeatedly activated. The saying in neuroscience is that ‘neurons which fire together wire together.’ (46)

The filter of scientific empiricism seems to be so effective in *The Mindful Therapist* that it has completely removed any trace of the origins of such practices. The word “Buddhism” only appears once in the entire text. It can be found in a footnote citing Jack Kornfield’s *The Wise Heart: A Guide to the Universal Teachings of Buddhist*

Psychology. Siegel sources Kornfield's book for what he calls "the classic loving-kindness meditation that [he] believe[s] helps further activate both the social- and the self-engagement systems" (83) of the brain.⁸⁹

In earlier texts, such as the companion *The Mindful Brain* (2007), Siegel was less shy about discussing the origins of the practices he prescribes. He details his own personal experiences on an Insight Meditation Society retreat sponsored by the Mind and Life Institute (53-67).⁹⁰ Siegel sometimes explicitly depicts scientific research as a filter for religion. Unlike, we will see, some close associates, he does use names like meditation and even prayer for his therapeutic practices. But he argues that experimental findings transmute religious rituals into trainable life skills. He explains that

the integration of consciousness can also be nurtured through the other mindfulness practices, such as walking meditation, yoga, or tai chi. We've seen that while mindfulness is practiced throughout the world, East and West, ancient and modern, it is a human skill that religions use – not itself a religious practice. While some educational programs appropriately shy away from bringing uninvited religion into a secular setting, it is in fact the case that research has now demonstrated that mindful awareness practices, such as mindfulness meditation, are actually ways of strengthening the healthy functioning of the body, the brain, the mind, and interpersonal relationships. (2010, 239)

⁸⁹ The practice here is a popularized version of Buddhist *metta* practice. Here one repeats a series of phrases that send positive intention first to self, then others ("May I be well, may I be peaceful, etc."). To the ears of Candy Gunther Brown (2014), such a "loving-kindness meditation" sounds especially religious, especially like prayer. But to Buddhologists these practices may seem completely estranged from its past use within most Buddhist communities. Once Buddhist practices here of non-self has been remade by secular therapeutic ideologies founded on a "subjective sense of *selfhood* [his emphasis]" (McMahan 2008, 156).

⁹⁰ Again, both of these institutions and their activities should be particularized within recent Buddhist forms. The Sharon Salzberg and Jack Kornfield-founded IMS in Barre, Massachusetts, where the retreat was held, is one of the hearts of insight meditation movements in the U.S. The Mind and Life Institute is a major source for psychotherapists filtering religion. Sanctioned by the Dalai Lama it stands at the forefront of what many of its participants refer to as "the Buddhism and Science dialogue." Siegel titles this section of diary writing, "Scientists in Silence," and the conceit is clear, the dissonance of the secular scientist experimenting with the strange and exotic, surprised to find scientifically explainable truths.

Here research literally acts as a filter by which the religious may enter secular spheres. The findings of empirical science prove that these practices are, in reality, not religious at all. They are in fact only “a human skill that religions use.”

The neuroscientific study of Buddhist traditions is best understood as only the latest variant of a long and storied discipline: “psychology of religion.” Scholars debate the validity of a “rise-and-fall formula”⁹¹ for psychology of religion’s place in the academy. But, if we accept David Wulff’s (2001) still serviceable broad definition that “strictly conceived, psychology of religion comprises the systematic application of psychological theories and methods to the contents of the religious traditions and to the related experiences, attitudes, and actions of individuals” (15), then the practice is experiencing a veritable boom in the laboratories of cognitive scientists. Where the early psychologists of religion relied on surveys, questionnaires and self-reports of subjective experience, investigators of religious functioning today exploit the latest advancements in biofeedback or electromagnetic imaging.⁹²

Because they so often include high technology scientific methods, psychotherapists’ filtering religion approaches can often seem like the most contemporary of the approaches I map. This is intentional. Watson implies, in the passage that opens this chapter, that Freud therapizes religion because cutting-edge

⁹¹ David Wulff, for example, disputes this commonly cited formula. He acknowledges that a rapid proliferation of interest in the subject by William James, G. Stanley Hall, and James Bisett Pratt was followed by a near complete disappearance of outlets for research publication. But he notes “that in psychological circles and with the obvious exception of the work of James, the rise was far from spectacular” (1998, 188) and “so also was the decline less dramatic and thoroughgoing” (1998, 189). A major feature of the case Wulff (1998, 1999, 2003) makes becomes consequential for us later, that psychology of religion never received much attention within secular scientific communities, but was always and has remained of importance within religious (re: Christian) communities.

⁹² Christopher White (2008) and Leigh Eric Schmidt (2008) expound on this connection as part of the “A Cognitive Revolution?” discussion on the Social Science Research Council’s Immanent Frame blog. The discussion was very helpful to this chapter (as is the blog as a whole for my research generally).

cognitive science was not available to him. Clinicians intend to authenticate their approaches to Buddhist traditions as the most up-to-date by citing the most up-to-date results of neuropsychology. And yet, therapists' filtering religion approaches date back to the very development of psychology of religion as an academic discipline. Having examined the major features of filtering religion approaches in this section, in the next, I review some of this history. Looking at how early psychologists of religion design their filtering approaches to Buddhist traditions give us more insight into their current use.

“Take My Chair”: Early Psychologists of Religion and Filtering Religion Approaches to Buddhist Traditions

In this section, I outline how early psychologists took filtering religion approaches to Buddhist traditions. I demonstrate that psychotherapists continue to be influenced by these approaches. Contrary to Watson's perception, psychotherapists always employed the theories of “academic psychology” in their clinical practice. Clinicians continue today to draw from the theories of early prominent psychologists of religion like William James. In fact, it was psychologists of religion who first innovated what I call filtering religion approaches to Buddhist traditions. And therapists use the *findings* of these psychologists' study of Buddhist traditions to filter the religion out of Buddhist teachings and practices. Finally, early psychologists of religion played a seminal role in shaping the very Buddhisms that therapists study. Early psychologists of religion transmitted core ideas about what defines “Buddhism” as a world religion from Europe to the United States. Perhaps even more consequential, a figure like William James had direct contact and influence over founders of the modern(ist) traditions that therapists practice today. In

this section, I discuss each of these important historical aspects of clinicians' filtering religion approaches. I begin with an anecdote which brings all of these streams together.

The role that Buddhist traditions played during the early years of psychology of religion as an academic discipline in the United States has been largely ignored in current scholarship. The first founders of "the new psychology," from G. Stanley Hall to James Henry Leuba, all referenced the term "Buddhism" to greater and, mostly, lesser degrees. Buddhism was, for these thinkers, a key comparative example in surveys of world religions. It was crucial to the production of a comprehensive scientific explanation of religion. And yet, this story has been for the most untold.

There is one remarkable story, however, that *has* been told repeatedly as illustration of how perhaps the most formative psychologist of religion viewed Buddhist teachings. A "conversion of the barbarians" tale of its own, this story opens the psychiatrist Mark Epstein's seminal 1996 work, *Thoughts without a Thinker*. Epstein's book is a core text for therapists interested in Buddhist traditions (its "Tenth Anniversary Edition" even includes a forward by the Dalai Lama). Epstein begins his book by describing the great adversity he faced in his search for a "Buddhist psychotherapy," his progress impeded by prejudiced clinical authorities. This forced Epstein's "attempts at integration [to be], above all, private ones,"⁹³ conducted in secret. However, according to Epstein, such a state of affairs

is a far cry from the way in which the great psychologist William James imagined it would be. James was impressed with the psychological sophistication of Buddhism and predicted that it would be a major influence on Western psychology. A story about him sets the stage for this book. While lecturing at

⁹³ We should note here Epstein's description of his early integration attempts as "private." Chapter Two introduces psychotherapists who continue to restrict their Buddhist practice to their private, personal lives, and thus "personalize religion." Epstein, meanwhile, will be discussed in detail in Chapter Three as he ultimately would go further than just "integrating" Buddhist traditions to more holistically "adopt" them.

Harvard in the early 1900s, James suddenly stopped when he recognized a visiting Buddhist monk from Sri Lanka in his audience. ‘Take my chair,’ he is reported to have said. ‘You are better equipped to lecture on psychology than I. This is the psychology everybody will be studying twenty-five years from now.’ James was one of the first to appreciate the psychological dimension of Buddhist thought, yet he was not as accomplished at prophecy as he was at psychology. Several years earlier, in Vienna, Freud had published *The Interpretation of Dreams*, and it was Freud’s psychology, not the Buddha’s, that has had a far greater impact in the West over the subsequent decades. (1-2)

Epstein believes this anecdote “sets the stage for [his entire] book.” He implies that any aversion that psychotherapists might have to religion is inherited from the psychoanalytic Freud. But, in the James of the story, he finds an alternative authoritative lineage head. “James,” Epstein writes, “understood something that subsequent generations of more psychoanalytically influenced commentators did not: the essential *psychological* [his emphasis] dimension of Buddhist spiritual experience” (3). Epstein wrote *Thoughts Without a Thinker* in the mid-1990s when Freud’s work had been all but discredited as scientific. He casts himself instead as the progeny of a psychological thinker with a different mystique. Epstein presents himself as fulfilling James’ prophesy, if a century late.

Epstein uses the scientific authority, as much as the research, of William James to filter the religiosity out of Buddhist teachings and practices and justify their use in psychotherapy. Epstein cites James’ finding that “Buddhist spiritual experience” has an “essential *psychological* dimension.” The religious, or here “spiritual,” can contain an “essential” scientific truth. It is simply a matter of filtering one from the other. In at least a general sense, Epstein’s portrayal of James is not completely inaccurate. James’ project, like his growing cohort of contemporaries, was to cull the essential universal truths held within all religious traditions. These thinkers were explicit about their conviction that

filtering religious traditions through the the nascent science of psychology would reveal these truths. To a certain extent, many early psychologists of religion embrace the conventional definition of science. And they clearly had great confidence in the capacity of this science to explain religion as an object of study. However, debates broke out between various thinkers over whether empirical science was capable of accessing subjective experience. James famously came down on the “con” side of these arguments and warned against what he called “medical materialism.”

Nonetheless, formative practitioners of the then-new discipline of comparative religion, these early psychologists shared a desire to describe and explain common elements across religious traditions. This purpose led many to seek an ultimate definition of the category of religion. However, they always first operated with the conventional definition for the classification; even if they proposed revisions to it. The chief quality of “religion” that goes unquestioned by this cohort is that it is a universal anthropological category. Religion is something that can be found across all peoples. Once religious traditions are located, they can then be compared and contrasted. For these thinkers, however, the science of psychology was key to finding the common essence in these different types. Many of the first psychologists of religion hoped to discover an ideal religious form in this search. Some intended to find evidence that their own versions of Protestant Christian traditions could qualify as this superior universal religion.

When the early psychologists of religion train their attention onto Buddhist traditions, however, many find a number of the qualities they believe an ideal type to possess. In this, Epstein’s story has another kernel of truth. James and his colleagues view “Buddhism” as fundamentally “psychological.” And, not surprisingly being

psychologists themselves, they were thus attracted to Buddhist teachings. In their search for universal essential psychological elements in the universal anthropological category of religion, they are also highly impressed by Buddhism's apparent universalism.

Buddhist traditions seemed to more than rival Christian teachings' capacity to spread across cultures. Edwin Starbuck makes this direct comparison and marveled that

even more remarkable [than those of Christian traditions] are the accommodations of Buddhism to all classes of men as widely divergent as the cultured Hindus of India and Ceylon and the formalistic type of mind of the Chinese. In such plasticity is to be found perhaps a reason that Buddhism can claim more adherents than any other religion. (1908, 101)

We can hear the underlying criticism beneath Starbuck's compliment: unlike eternal, unchanging Christian truths, Buddhist teachings are "plastic" making "accommodations" to the particular psychologies of different peoples.

James Bisset Pratt, meanwhile, expresses a more unabashed appreciation. Pratt gives Buddhist, and Asian religious traditions as a whole, the most sustained attention of this group. He published, among other texts, a lengthy tome on the subject, part travelogue, part ethnography and part psychological treatise. Pratt writes that his purpose in doing so is to share with the reader the

tremendous impression of the advance of this religion from land to land, gathering further enrichment in every stage of its progress, growing like an immense snowball as it goes, yet assimilating its increments as an organism its food, moving irresistibly onward till it reaches 'the sea that ends not till the world's end.' (1928, vii)

His title for the work, *The Pilgrimage of Buddhism and A Buddhist Pilgrimage*, was meant to convey to the reader "this way of conceiving Buddhism. . .For this great Traveler is also an exile and a pilgrim – perhaps the figure of a missionary would have been more appropriate" (vii). Pratt's metaphors suggest a model for Buddhist

transmission alongside Buddhologist Erik Zurcher's icebergs and pyramids⁹⁴ (1980; 1959) or the billiard balls Stephen Bokenkamp strikes down (2007).

Of course, the travels of Pratt and others in Buddhist studies and Buddhist lands constitute another step towards "the sea that ends not till the world's end." Pratt traces a path of Buddhist transmission in his book and this book then transmits something of Buddhist traditions to new audiences. Throughout his writings, he acknowledges this growing interest in Europe and the United States. For example, in the earlier companion text, *India and its Faiths* (1915), Pratt relays a conversation he had with a Burmese monk. Pratt questions the monk about the state of Buddhism and its ability to take on new adherents in a modern age. The monk, however, was "confident" replying that Buddhist teachings were finding new acolytes among "the Germans" (419). Indeed, it is likely from Germans like Hermann Oldenburg (introduced previously) that Pratt and the early psychologists of religion acquired their understandings of the term "Buddhism."

The early psychologists of religion did not invent the Buddhism they filter through psychological science. As discussed in the Introduction, this Buddhism had been passed on for their analysis after its "discovery" some decades earlier. The idea that Buddhist teachings had "an essential psychological dimension" was printed on the covers of the very texts that James or Pratt read. The translator and founder of the Pali Text Society, T.W. Rhys Davids, explicitly identified "Buddhism" as a "psychological" religion (McMahan 2008, 52-53). His wife, Caroline Rhys Davids, plainly titled one of the first English-language translations of a Buddhist text: *A Buddhist Manual of*

⁹⁴ For a helpful analysis of Zurcher's metaphors and their place in literature on Buddhist transmission into China see Bokenkamp (1996, 57 fn 3).

Psychological Ethics (1900). (It was a translation of the first book of the *Abhidhamma pitaka*). In her introduction to the work, Rhys Davids writes that

Germany has already a history of psychology half completed on the old lines of the assumed monopoly of ancient thought by a small area of the inhabited world. England has not yet got so far. Is it too much to hope that, when such a work is put forth, the greater labour of a wider and juster initiative will have been undertaken, and the development of early psychological thought in the East have been assigned its due place in this branch of historical research?" (1900, xviii).

The early psychologists of religion had likely read Rhys Davids' call here to bind the academic fields of psychology and Buddhist studies to each other. (She appears to speak more here of Wundtian experimental psychology than psychoanalysis). Her husband, T.W. Rhys Davids, meanwhile, had collaborated with Oldenburg to raise up this same Buddhism as a "world religion." A major qualifier for this distinction was that, like Christianity, it was capable of attracting mass followers, it was universal. Starbuck only reproduces this understanding in his own comparisons between Christian and Buddhist teachings.

However, James and Pratt did not only filter the Rhys Davids' Buddhism through their psychological methodologies. Nor did they only reconstruct and transmit it through the writings of a Pratt. The early psychologists of religion and their theories contributed to the founding of entire new Buddhist forms. We can again use Epstein's story to bring this dynamic into focus. Epstein does not mention it, but, when his anecdote's sources are examined, we find that the monk whom James is said to have offered his chair was none other than Anagarika Dharmapala. James and Dharmapala's meeting was occasioned by the latter's attendance of the Parliament of World Religions in Chicago. Judith Snodgrass (2003) describes the Parliament as a watershed moment for Asian Buddhists seeking to present a "Buddhism" that could stand up to the critical eye of European

colonial powers. Dharmapala was a key figure in such efforts. He was instrumental in the revival of Buddhist practice in his home of Sri Lanka/Ceylon as well as India. Epstein's citation for his story is an important cultural artifact as an early history of U.S. versions of Buddhist practice: Rick Fields's *How the Swans Came to the Lake* (1980). Fields was transparent about the popularization motives behind his book upon its publication. Nonetheless, it still collects some useful historical material on the transmission of Buddhist traditions to the United States. Fields' source, meanwhile, was a text that comes directly from Dharmapala's Sri Lankan Buddhist revival movements. Written by Sangarakshita Bhikshu, *Anagarika Dharmapala: A Biographical Sketch* (1964) was meant both to introduce the figure to a new generation of English-speaking readers and advance his cause.

Even if its source is a baldly devotional biography, the story of James paying deference to Dharmapala may not be pure apocrypha. Dharmapala is said to have told the tale himself and it is quite possible the event occurred.⁹⁵ Whether James and his cohort influenced Dharmapala's thought through actual interpersonal interaction, Dharmapala had read their work with great interest. His close associates were contemporaries, colleagues, and, in some cases, friends with the early psychologists of religions. These included Henry Steel Olcott and Helena Blavatsky, founders of the Theosophical Society that Jung held in so low esteem. Perhaps chief among them, however, was the writer and *Open Court* editor, Paul Carus. Carus states that the World Parliament of Religions opened his eyes to the importance of Buddhist traditions. Not only had he connected with Dharmapala there, he had a perhaps even more consequential

⁹⁵ Whether this is even of any import; see McRae's first rule of Zen studies: "It's not true, and therefore it's more important" (McRae 2003, xix).

encounter with Japanese Buddhist, Soyen Shaku. Soyen Shaku later referred his protégé, D.T. Suzuki, to Carus as a translator and collaborator in introducing Buddhist teachings to U.S. Suzuki, of course, became perhaps the greatest Zen popularist of the 20th century. The Buddhist teachings of Dharmapala and Suzuki, then, were not only shaped through their own study of James and other early psychologists, but as represented by closer interlocutors like Carus. (Carus wrote a considerable amount on James' influence on his work. He described many of his theories as a reaction against James' ideas.)

Shaped by the thought of such interlocutors, the Buddhisms that figures like Dharmapala and Suzuki presented to European and U.S. audiences were intended to withstand scientific and secular critique. Their Buddhist teachings were thus seen by people like Carus to be superior alternatives to dominant Protestant traditions. Carus was on a public quest to find a "religion of science" and was enthused by what Buddhist philosophies offered to his mission. But Carus rarely recognized that he had a hand in the production of these Buddhist philosophies. As Sharf has written in regards to modern(ist) forms of "Zen":

Like Narcissus, Western enthusiasts failed to recognize their own reflection in the mirror being held out to them. As it turned out, the seemingly felicitous convergence of Eastern and Western intellectual and spiritual agendas prevented those on both sides from recognizing the historical mischief entailed in the radical decontextualization of the Zen tradition. Asian apologists, convinced that Zen was making significant inroads in the West, failed to recognize the degree to which Zen was "therapeutized" by European and American enthusiasts, rendering Zen, from a Buddhist point of view, part of the problem rather than the solution. (1995b, 140)

If the early psychologists of religion did not also contribute, they certainly disseminated the "therapeutized" definitions of Buddhism held by Carus and others. In Buddhism, they found a religion that seemed eminently suited to science; at its essence it was

rationalistic, experimental, and atheistic. Pratt is struck by the “absolute reliance on reason and experience” he found in “all Gautama’s teaching.” His writing on the subject is representative of many of his colleagues’ perspectives. It is also exemplary of lines of cultural rhetoric that continue to be reproduced today.

There is a modern note in [“Gautama’s”] words and attitude that comes to us through these twenty-five hundred years with something like a shock of surprise and which differentiates his religion from all others. He alone of founders and prophets turned away from all supernatural sources of knowledge and attempted *to think the thing out for himself*, [his emphasis] and to recommend his doctrine to others only because it was *scientifically verifiable by an appeal to experience* [his emphasis]. This was possible to him in part because his teaching had nothing to say of the hypothesis of a personal Creator or a personal Providence. . .And this atheism, this lack of the mystical element in his religion, which has been so long used as a reproach to it, has become to-day a further recommendation in the eyes of many a modern thinker. For science is atheistic in exactly the same sense as is Buddhism. . .[They both] center their attention, in positivist fashion, on the phenomenal world, the world that is verifiable in human experience and has direct and obvious bearing upon human actions and human weal and woe. (1915, 398)

For Pratt and his cohort, the supposed atheism of Buddhist traditions went further than only “recommend” them to their “modern eyes.” Buddhism’s status as an atheistic religion rendered the “conventional definition” of the category religion illegitimate. It was, thus, in need of their revision.

Buddhism’s atheism, Pratt (1920) wrote in *The Religious Consciousness*, made it “that great stumbling block to most definitions” of religion (4). James explains how this is the case at the very outset of his *The Varieties of Religious Experience* (1902).

Religion, therefore, as I now ask you arbitrarily to take it, shall mean for us *the feelings, acts, and experiences of individual men in their solitude, so far as they apprehend themselves to stand in relation to whatever they may consider the divine* [his emphasis]. . .But, still, a chance of controversy comes up over the word ‘divine,’ if we take the definition in too narrow a sense. There are systems of thought which the world usually calls religious, and yet which do not positively assume a God. Buddhism is in this case. (36)

Buddhism appears to disprove the validity of the conventional definition of the category religion. James presents it as evidence that belief in divine personalities is not essential to religious traditions after all. Religion is no longer defined by faith in metaphysical realities, but “*the feelings, acts, and experiences of individual men in their solitude*” of a divine in a broad sense what he calls the “More.” Filtered through the science of comparative psychology of religion, the essence of religious traditions becomes psychological or psycho-mystical experience, an attitude, or affect state. In a moment I will explain that, for James et al., this is not only a descriptive question. Expanding what can be defined as religion, means expanding the range of religious options available to “moderns.” A debate about whether Buddhism is, in fact, atheistic then took on a power that went beyond the academic.

The slightest study of Buddhist communities, however, easily complicates the idea that they are atheistic. James quickly adds, after the above statement, that in “popular” Buddhism “the Buddha himself stands in for God; but in strictness the Buddhistic system is atheistic” (36). Pratt also addresses the contradiction. He could not ignore that the Buddhism introduced to him and James as, by definition, atheistic, did not comport with the many Buddhist texts and images he read depicting the propitiation of deities. Pratt shares the same explanation as James: the “supernatural tales” one reads in Buddhist texts “sprang out of the popular soil in which Buddhism grew. . .[But] we shall be justified in abstracting from them altogether in our efforts to get at the real essence of Buddhism” (1915, 399). He thus emphasizes the need to “confine our attention to the purest form of Buddhist doctrine” (1915, 399).

As discussed in the Introduction, James and Pratt's explanations were themselves encoded into the Buddhism they analyzed. The translations and commentaries of Buddhist teachings available to them for study were penned by individuals who held these same understandings. The Pali canon was Buddhism's "great book," equivalent to Christianity's Bible. Within it, the translators of the Pali Text Society found the original, true teachings of the Buddha which were atheistic, rational and averse to supernaturalism. "The popular soil in which Buddhism grew" might have diluted this "purest form" over time. But "the real essence of Buddhism" was available to those committed to finding it. Writers from Europe and the U.S. like Henry Steel Olcott penned texts like *The Buddhist Catechism* (1881) which claimed to only communicate these core teachings. Olcott and others were convinced that these should be core teachings for a new religiosity compatible with scientific truth.

Some early psychologists of religion, however, were less convinced of a recoverable pure Buddhism that proves the need for a dismissal of the conventional definition of religion. For instance, the publications of James Henry Leuba reveal his own internal debate on the matter over time. In his doctoral thesis (1896), Leuba had "insisted upon the absolute divorce which must be recognized between intellectual beliefs and religion." He too uses Buddhism to substantiate the argument. Furthermore, he is transparent about the ultimate desired consequence of acceptance of this claim:

If the belief in a beneficent personal divinity watching over the actions of men, able and ready to answer prayers directly, is lost, this form of religion also ceases to exist. Yet religion need not be impaired. History has preserved a famous example of the independence of religious experience from those intellectual concepts. Buddha Sakyamuni was a godless man, in the narrow meaning given to the term God in Christian theology. He discouraged formal prayer, for it ascended but to strike against the adamant vault of causal connection and to come back in a mocking echo. Yet we recognize in him a remarkably powerful and elevated

religious nature. What shall we say of the intellectual vanguard of our day? What is the religion of the few bred in the atmosphere of intellectual freedom and scientific thought, whose strong faith in nature boldly discards the ragged garments inherited from the past? (314)

Some years later, Leuba (1921) sought to tamp down overexcitement about his “famous example” of religion without metaphysical belief. He concludes that “the contradiction which such religions as Buddhism. . . seem to inflict to the affirmation that the notion of divinities in relation with man is necessary to the existence of the institutions [of religion] . . . is merely apparent” (58). “Original Buddhism died almost with its founder,” he notes (58). He thus returns to the supposition that “religion cannot begin before the birth of some conception, however vague, of superhuman personal power or powers, whose existence is felt to be a matter of moment” (58).⁹⁶

Despite Leuba’s reappraisal of the history of religious traditions, the sentiments he expressed at the start of his career remain fundamental for him and other early psychologists of religion: “What shall we say of the intellectual vanguard of our day? What is the religion of the few bred in the atmosphere of intellectual freedom and scientific thought, whose strong faith in nature boldly discards the ragged garments inherited from the past?” In the next section, I explain that the new religiosity that early psychologists of religion seek, freed from “the ragged garments inherited from the past,” is a *psychologically-healthy* religiosity. They search for what James calls “the religion of the healthy-mindedness.” It is unsurprising then that psychotherapists would draw from this tradition. But the preceding section has already outlined a number of elements that

⁹⁶ He had previously advanced a racial explanation: “the chief lesson that primitive Buddhism teaches the inquirer into the future of religion is the difficulty for men of the Hindu temperament, and at the intellectual level of the contemporaries of Gautama, to produce a religion based upon a belief in non-personal psychic power” (1912, 289). (“Primitive Buddhism” here again meaning the “original Buddhism” discussed by Pratt as free from supernaturalism.)

clinicians carry forward from the early psychologists of religion. Like Pratt and Leuba, therapists continue to filter religion through empirical scientific research (whether or not they share the goal of discerning universal, psychological truths across religious traditions).

Further, when therapists filter Buddhist traditions through, for example, neuropsychological research they are Buddhist traditions that bear the stamp of formative figures psychology of religion. So strong is this influence that, unlike Pratt or Leuba, psychotherapists today often *only* know of a Buddhism that is atheistic. Many take it on faith that Buddhist doctrine is compatible with scientific truths; Buddhist practices well-suited for scientific verification. Nonetheless, the concept that Buddhism is an “atheistic religion” reinforces all the implications of the phrase. It continues to be categorized as a religion based on the conventional definition. But it seems to complicate that conventional definition and thus requires a qualifier. Psychotherapists today sometimes subscribe to what they call “secular Buddhism” and present it as not religious, but “spiritual.” In the next section, I lay out some of the history of therapists’ belief that Buddhist teachings and practices have been filtered through scientific authentication and thus can be incorporated into biomedical practice. James’ search for a “religion of healthy-mindedness” is intertwined with efforts to legitimate healing methods once on the margins of biomedicine. These efforts significantly shape psychotherapists’ approaches to Buddhist traditions.

Out of the Margins: Religion and other Unorthodox Healing Methods

In this section, I describe how psychotherapists' filtering religion approaches to Buddhist traditions develop out of larger "alternative medicine" movements. James and his cohort contributed to these movements through their own efforts at filtering religion through the science of psychology. Gay Watson began this chapter by describing an estrangement between practice and the scientific theory of academic psychology. James would certainly not have subscribed to such a split. And a number of other early psychologists of religion explicitly state their intention that a robust psychology of religion spur new, superior religious forms. For many, the search for a new religiosity was inseparable from a search for a new healing from the ills of a modern age.

Wakoh Shannon Hickey (2008) draws a direct line from the clinical use of Buddhist meditation back to multiple older, alternative medicine forms of "mental healing" (Mesmerism, Christian Science, Swendenbourgism, mind-cure, etc.). These modalities are often explicitly religious or have been described as "quasi-religious." When discussing his "religion of healthy-mindedness" in *The Varieties of Religious Experience*, James cited the work of one of his students, the Swedenborgian minister Horatio Dresser. Dresser was a key figure in the New Thought movement out of which grew another religio-therapeutic form that James also endorses in his seminal text: "To the importance of mind-cure," James writes, "the medical and clerical professions in the United States are beginning, though with much recalcitrancy and protesting, to open their eyes" (1902, 91). James wants both "the medical and clerical professions" to take note of the advancements of "mind-cure." In his perspective, the therapeutic concerns of mind-

cure and New Thought had once been addressed by the institutions of religion and medicine. But they now require new methodologies.

Historians often attribute the appeal of unorthodox or alternative healing to a disillusionment with conventional medicine. Describing the growing cultural prominence of “mind-body medicine” among baby boomers, Susan Sered and Linda Barnes (2005) explain that an “awareness of biomedicine’s inability to cure the many chronic diseases that plague a rapidly aging American population contributed to the search for other responses and solutions to emotional and corporeal suffering” (8). But James had called for a reform of the traditional institutions of both religion and medicine in the United States as a joint enterprise. Harrington (2008a) clarifies that movements like mind-cure

drew on the larger currents of antiauthoritarianism and individualism of the time; indeed, it came to function as a kind of early-twentieth-century counterculture. The movement’s leaders appealed to a larger popular culture of alternative therapies that collectively aimed to challenge the authority and competence of mainstream medicine. At the same time, they appealed to a larger popular culture of alternative religiosity that was rebelling against the perceived spiritual inadequacies of older forms of Protestantism such as Congregationalism and Episcopalianism. (111)

Robert Fuller (1989) has asserted that unorthodox medicine movements were actually less motivated by a desire for new modes of healing than new modes of religious expression.

We should remember that increased interest in Buddhist traditions has also been attributed to disenchantment with traditional Christian practice. Jung and Alexander believe that Christian faith had become inexpiable by science. Communities turn to Buddhist practice to fulfill the needs that Christian traditions once met. Participants in alternative health movements, meanwhile, have always experimented with Asian religious practices as potential sources of “mental healing.” Scholars like Hickey thus

name them to be the “hidden histories” of contemporary psychotherapists’ approaches to Buddhist traditions (2008). She emphasizes that these histories are often “hidden” because they concern the disempowered. To Hickey’s mind, James and other men of European descent co-opted movements that were initiated not only on the margins of medicine and religion, but race and gender. She argues that women and African-Americans played key roles in designing unconventional healing modalities (e.g., Mary Baker Eddy’s Christian Science). Whether Hickey is fully accurate on this point or not, Pamela Klassen (2011) argues that *concerns* about race and gender oppression among liberal Protestants motivate their experimentation with non-Christian practices. She describes this as a different sort of disillusionment than the sort predicted by Jung and Alexander.

Klassen first notes that the communities of liberal Protestants she studies “maintain a continuity with their historic churches” (207) even while taking up non-Christian elements.

Where some scholars and theologians have mocked those liberal Protestants who practice a “cafeteria-style” therapeutic religion for their seemingly indiscriminate borrowing from multiple religious and therapeutic traditions, and their implied lack of fidelity to particular denominations or to particularly Christian “difference,” others recognize this borrowing and bricolage as an attempt to come to terms with the legacies of male-dominated, heterosexist, and racist strands of Christianity (2011, 18)

Klassen recognizes that these communities can be seen as re-enacting the structure of colonial imperialism. They appropriate religious practices from disempowered minorities. But she believes the situation to be more complex. Klassen sees such activities to be part of liberal Protestant communities’ engagement in “an (unfinished) transformation from missionary-colonizers to self-critical advocates of social justice”

(2011, 7). She states that liberal Protestants have a growing awareness of the harms of “missionary-colonialism.” Her writing charts how such enterprises often included the transmission not only of Christian teachings, but biomedical healing. However, Klassen argues that contemporary “liberal North American Protestants shifted from considering themselves to be healers of all nations – whether through evangelism or Western medicine – to understanding themselves to require healing via multiple medical and spiritual resources, including some practices formerly (or even still) considered heathen” (2005, 378).

Klassen portrays liberal Protestants as “renounc[ing]” their “colonial privilege and choos[ing] to affiliate themselves. . .with the colonized.” This renunciation is mixed with beliefs in cosmopolitanism – the idea that human beings, their religions, and their religious healing practices, all share an ultimate common source.

Practices of healing became one means through which liberal Protestants sought to live out their dawning vision of a cosmopolitan world – a world in which they sought connections beyond their local communities that would tie them to others not necessarily as Christians, but instead as human beings participating in a universal collectivity “spirit.” (2011, 18)

Klassen believes that the liberal Protestants she studies are often “caricature[d]” by outside observers. She notes that “attitudes to the ambiguity of syncretism – the blending of various religious traditions – are deeply shaped by what people have to gain or lose with the waning of distinct institutional identities” (18).

Some critics explicitly state that the clinical usage of Asian religious threaten Christian identities. Candy Gunther Brown (2013) portrays alternative medicine as a threat to “Christian America.” She implicitly warns Christians who use unorthodox healing methods that they expose themselves to unwanted conversion experiences.

Brown is especially distressed by those who take a filtering religion approach to practices like Buddhist meditation. Above, Dan Siegel argued that scientific research on mindfulness practices legitimate them as secular, neutral “human skills” with valuable healing potential. Brown refutes the validity of scientific studies purporting to show the effectiveness of such practices. But she more strongly attacks the notion that filtering religious practices through empirical research reveals them to be secular items. She argues that they, in fact, remain intractably religious and are only disguised as secular treatment interventions. The use of such practices is thus a subversive infiltration of public secular spaces like hospitals.

In Chapter Three, I critique Brown in more detail for pretending that medicine is a pristinely secular category (rather than the inheritor of Protestant assumptions). Her position serves to restrict non-Christian teachings and practices to the margins of a Christian dominant society. Her argument also, by implication, deligitmizes Christian practice that does not conform to her own norms. As Klassen has argued in a different context, criticisms of Christians’ use of Asian religious practices “are often themselves predicated on unarticulated notions of what counts as ‘pure’ Christianity” (2011, 17). Though I will be unable to delve into it, an element that is worth noting here is the role of religious “others,” as marginalized populations, in these activities. A figure like Dharmapala asserts himself in the face of not only scientific, but Christian dominance. Beyond Buddhists, Jews have played a major role both in the growth of Buddhist communities and the use of Buddhist practices in healing in the United States. Psychotherapists frequently learn about Buddhist traditions in communities founded by individuals born to Jewish families (e.g., Jack Kornfield, Sharon Salzberg, etc.). These

therapists in turn were themselves often raised by Jewish parents. In fact, some of the most prominent clinicians to have investigated Buddhist traditions belong to this sub-group: Jon Kabat-Zinn, Mark Epstein, Jeffrey Rubin, the list goes on. Many of the clinicians I've interviewed who meet this profile express an awareness that their location as Jews, members of a minority religious tradition, had at least some influence on their openness to experimentation with Buddhist traditions as sources of healing (e.g., Barry Magid, Jeffrey Rubin, Harvey Aronson, etc.).

The fervor of critiques like Brown's, meanwhile, comes in reaction to an increasing acceptance of healing practices once considered unconventional. This is a reality that is often overlooked by observers and cultural commentators. By the latter half of the 20th century, the unorthodox health movements that Harrington once called "countercultural" had become very much cultural. The phrase "alternative medicine" was first coined in the late 1960s (Whorton 2002). But, as Courtney Bender, (2010) observes,

recent surveys on American's participation in alternative and complementary health practices demonstrate that this once truly 'alternative' way of thinking about health has become quite mainstream, at least in some respects. (202)

One sign of this shift is that psychotherapists who seek to filter Buddhist teachings and practices through empirical research today have such copious resources available to them. There are now hundreds of scientific research papers claiming to show the positive physical and psychological health effects of mindfulness or Tibetan compassion cultivation.

This section has presented more of the histories that undergird contemporary therapists' approaches to Buddhist traditions in general and filtering religion approaches in particular. Communities in the late 19th-century and early 20th-century sought new

forms that would simultaneously offer new new methods for healing and new ways to be religious. The growth in empirical study of religious experience and religious practices has only increased since then. Studies on the potential social and health benefits of religiosity and religious elements has rapidly proliferated. Herbert Benson's 1975 publication, *The Relaxation Response*, was once seen as a radical break with biomedicine. The text famously employed the most cutting edge scientific means to demonstrate that "Transcendental Meditation" (TM) had a positive impact on the psychophysical condition of "stress." Today, empirical studies are conducted on a broad range of unconventional religion-associated healing practices from yoga to Christian centering prayer (Harrington 2008a: 214-220; Barnes 2011).

These investigations do not only have consequences for theoretical discussion. Dan Siegel uses neuropsychological research on such practices to filter away their religiosity. He states, for example, that "Christian Centering Prayer, yogic practices, tai-chi chuan, and Buddhist forms of meditation have each been studied in recent years, and they appear to harness neurologic and immune improvements in the practitioners lives" (2007, 96).⁹⁷ Although a casual relationship cannot be proven, the chronology here is striking. Herbert Barnes' empirical study of Transcendental Meditation preceded a growth in research on Christian practices like prayer. Some commentators portray this phenomenon as Christian-majority communities acceding to scientific authority. In the next section, I examine that debate in more detail. The preceding pages could be viewed as a history of the secularization of religious traditions from Leuba's "unimpaired religion" to the scientific co-option of prayer. Prioritizing the psychological psychosocial

⁹⁷ Siegel believes that all of these practices, regardless of religion of origin, are variations of mindfulness-building skills.

or health benefits of religious practices may be a perfect summation of a movement “from salvation to self-realization.” Or we may be witnessing the use of science as a tool for the preservation of religious traditions. The empirical study of Buddhist experience may reduce an authentic Buddhist path to what is scientifically verifiable. Or it may allow for the transmission of Buddhist teachings and practices to new communities.

Secularization Narratives, Countersecularization Narratives, and “Middle Ways All The Way”

The previous two sections showed that psychotherapists’ filtering religion approaches were adapted from the approaches of early psychologists of religion. These figures were not only engaged in theoretical study, but participated directly or indirectly in unorthodox healing movements. In his transformative work on early psychologists of religion, Christopher White (2009) surveys scholarly responses to their impact on U.S. culture. He explains that the growth of psychology of religion as an academic discipline has been “linked to different forms of religious decline or cultural malaise” (4). The core critique is that participants were

too eager to reconcile revelation and nature, or too willing to interpret Christian symbols in scientific idioms, or too adept at translating theological categories into psychological ones. . .[which] led to the secularization of religion, the marginalization of theology in public discourse, and the decline of the assumption (in American culture) that God exists. (2009, 4)

Again, as Klassen observed above, this conventional secularization narrative is fundamentally concerned with the loss of traditional Christian adherence. It holds implicit assumptions about what constitutes a “pure Christianity” compromised by these movements.

Buddhist practitioners and Buddhist studies scholars have begun to voice similar anxieties about the effects of scientific research on authentic Buddhist teachings and practices. Donald Lopez (2008, 2012) is wary when intricate visualization exercises of complex Buddhist cosmographies are transformed into medical material - alpha and gamma waves on a CT scan. He looks askance at the imaging of Buddhist meditative experiences like of the *jnanas* (progressive levels of enlightened awareness) which quantify oxygenated areas of the brain. Psychotherapists today continue in the tradition of predecessors like Pratt by filtering Buddhist elements through this sort of scientific research. Like Pratt, they claim that this process proves that Buddhist traditions are aligned with scientific truth. Therapists like Gay Watson thus proclaim, as she did to begin this chapter, that Buddhist doctrine is the “first psychology.” Lopez challenges “claims for the compatibility of Buddhism and Science” (2008, xi). In his incisive critique, Lopez argues that to make

‘Buddhism’ compatible with ‘Science’, Buddhism must be severely restricted, eliminating much of what has been deemed essential, whatever that might be, to the exalted monks and ordinary laypeople who have gone for refuge to the Buddha over the course more than two thousand years. (2008, xiii)

Lopez references a long tradition of Buddhist practitioners predicting the decline of the dharma before making a prediction of his own: “Many forms of Buddhism speak of the decline of the dharma, the process whereby Buddhism slowly disappears in the centuries after the Buddha’s passage into nirvana” until another buddha returns to remind us. “If the practice of the four foundations of mindfulness is reduced to stress reduction and the visualization of Vajrayogini is understood as a technique for raising one’s body temperature,” he asks, “where do we stand in the process of the disappearance of the dharma?” (Lopez 2012, 211-212).

Narratives of decline - whether of the dharma, Protestant traditions, or religion in general - clearly do not tell the whole story. Holifield and others who tell such tales barely acknowledge the religious motives behind a G. Stanley Hall, motives that White calls “the search for spiritual assurance.” Like Jung and Alexander, many of the early psychologists of religion are also concerned that an imagined secularization by science is a problem for society. The early psychologists of religion do not seek the fall of religion to science. Some, like Hall, aim to use scientific means to shore up traditional religious belief. Many also pursue new ways of being religious. They believe that

psychological traditions could aid faith as well as obliterate it. These traditions were used to reform and revive religion. . .Historians have too often ignored psychological strategies that Americans used to reconstruct older forms of faith or develop new ones. For these reasons, I think the story here is more complicated than clear conflict and decline. . .American believers struggled to turn psychology to their advantage. . .They tried to render psychological symbols and discourse in ways that were either not hostile to faith or clearly supportive of it. (2009, 196-197)

White’s “countersecularization narrative” (2009, 7) thus tells a story of communities looking to psychologies to support and further religious aims.

Cho (2012) and Harrington (2008a; 2008b) wonder whether the filtering of Buddhist traditions through empirical research re-enchant the definition of science itself.⁹⁸ Whether successful or not, the attempt to achieve this has been ongoing for some

⁹⁸ Harrington suggests the idea titling a section of *The Cure Within* “Buddhist brains: A Tibetan re-enchantment” (230) but in public lectures, when she addressed the question directly, she remained ambivalent. As a participant-observer in the neuropsychological studies of Buddhist meditation, a board member of the Life and Mind Institute, she couldn’t fully endorse that an enchantment was at work. She found it impossible to ignore the “basic tension between the mainstreaming scientific goals of this enterprise and its larger cultural goals. The happiness of enlightened lifestyles is still translated into specific enhanced left prefrontal activation; compassionate states of consciousness are still translated into the language of gamma waves.” And most interesting is that it is the scientist characters like Richie Davidson who she describes as not only seeking spiritual assurance for Buddhist practice but access to a “more” through scientific means. The Dalai Lama, on the other hand, she says “is very interested in science, but it is unclear that his goal is to ‘enchant’ it. On the contrary, he brings a thoroughly practical and even

time now. McMahan (2012) explains that “Buddhist modernists” like Dharmapala present Buddhist teachings as not only an alternative to traditional religious belief. They also play off concerns about “the secular[‘s]. . .capacity to strip meaning from the universe and render it lifeless and mechanical” (219). McMahan demonstrates that here Buddhism seems to promise to

enchant the secular disciplines. . .One niche that early Buddhist modernists attempted to fill was to provide a way of thinking about the human and the cosmic that embraced the secular, naturalistic worldview, yet infused a new kind of enchantment into it. This enchantment was not a return to gods, spirits, heavens, and hells, but rather an attempt at ‘secular’ enchantment, i.e., the spiritual.” (2012, 219)

Contemporary neuroscientists like Richie Davidson do not seek to disenchant Buddhist traditions. Many are deep believers in the transformative capacities of Buddhist practice. They too seek what White called “spiritual assurance” and partner with present-day Dharmapala’s like the Dalai Lama to find it. These cognitive scientists are often not driven by a desire to reduce Buddhist meditative states into medical material. They instead hope to legitimate those meditative states. Finally, Cho (2012) has observed that

the secular discourses of therapeutic intervention and neuroscience, in particular, have become an unexpected place for non-reductive talk about things such as religious experience and self-transformation. Indeed, what is most interesting is how the secure identity of the therapist and researcher as secular scientists enables this kind of conversation in a professional and academic context. In our present cultural situation, many of us need the assurance that the secular label provides in order to engage the religious.⁹⁹ (284)

modernist attitude to his interest in science, one that is clearly tempered by his sense that, for Tibetan Buddhism to survive in the modern world, both in exile and in Chinese-occupied Tibet, it needs to modernize” (12-13). Ultimately, Harrington suggests that it is more than anything “the unique cast of characters involved that give this project its sense of being something more than business-as-usual. The implications is that it is the aesthetics of the affair, captured in the iconography discussed earlier, the Dalai Lama’s mere physical presence, the flowing robes and incense, that might be its most “enchanting” feature - which could mean that it is purely ornamental.

⁹⁹ Cho even implicates her own community, academics, and questions the convention that the scholarly study of religion must be more “scientific,” more neutrally objective in the analysis of religious traditions. When she looks at the hard scientists engaged with Buddhist traditions however she sees “a curious

Psychotherapists who filter Buddhist traditions through neuropsychological research express the wish that these studies transform science in just the way Cho describes.

When contemporary clinicians use filtering religion approaches to Buddhist traditions, they often simultaneously critique the conventional definition of science. At the start of this chapter, Gay Watson heralded an optimistic outlook for the future role of neuroscience. But, when I asked her about this in our personal interviews, she voiced an aversion to an overvaluation of science.

I'm wary of the thing that science is going to explain everything - the kind of scientism - I think that's another one we have to be very careful about. I mean, to use a good Buddhist thing, anything that you grasp too tightly is bad news, you know? Middle ways all the way between this and that.¹⁰⁰

Both Watson and Siegel have written at length about the failings of positivist science. They echo Jung, Alexander, and James in denying that empirical science is capable of accessing subjective experience. Alexander offers up psychoanalysis as a means to unify the objective and the subjective. He describes the psychoanalytic process as an exploration of the interior experience using scientific methodologies. Siegel and Watson believe that neuroscience can serve this same function. Contemporary therapists often speak of the unparalleled explanatory power of neuropsychology as a way to reveal the inner workings of the mind.

Buddhist traditions, meanwhile, Watson argues, offer something that even neuroscience lacks. "Research into consciousness," she writes

needs to be able to work from different viewpoints, paying attention to the phenomenological level as well as the neurological level. Further research into this area must take account of experience. Yet science lacks the mental

inversion of sorts, in which scientific talk about religion exhibits more heart and openness than professional [academic] talk about religion, which seeks to be scientific" (2012, 285).

¹⁰⁰ Interview was conducted by Skype on March 31st, 2014.

disciplines reliably and repeatedly to access specific subjective experience and to distinguish subtle emotions. (2008, 89)

Watson advocates for a “first person subjective perspective to accompany the third person objective stance of Western science” (2008, 28). Buddhist practitioners, Watson suggests, could offer this additional perspective. “As the mind sciences bring further scientific knowledge of the ways our experience is formed,” she declares “let us also explore Buddhist practices that help us subjectively understand these processes” (2008, 162). Siegel similarly presents his methodologies as a move towards a “synthesis of science and subjectivity” (2010, 9).

Watson and Siegel view themselves as participants in a sort of re-enchantment of science. But, put simply, they want to have it both ways. Watson critiques the materialism of positivist science. But as evidence for her claims she points to the “discoveries” of “the scientific field. . .complexity theory,” “relativity, indeterminacy and quantum mechanics” (2008, xi).¹⁰¹ She suggests that these new theories disprove the validity of positivism and are, incidentally, compatible with many Buddhist concepts. Watson thus cites the latest scientific findings to critique the conventional definition of science. The most up-to-date science, to her mind, calls for a revision of how science is defined. This paradox runs throughout this discussion. Buddhist teachings and practices

¹⁰¹ In his genealogies of the discipline of psychology of religion, White discusses the history of what Watson refers to here, the rise of a “broader culture of probabilism and uncertainty in science” (197) and a subsequent “disillusionment with older, positivist psychologies” (199). This disillusionment diminished interest in psychology of religion for “by the 1920s, behaviorism was the dominant American psychology and the inheritor of earlier, positivist aspirations to a cause-and-effect account of human nature.” Watson’s critique of science is based precisely in the fact that “behaviorists could be critical of earlier ‘new psychologists,’ who, while attempting to build certain knowledge of the self by studying reflect actions, often found themselves mired in unscientific categories such as mind and consciousness. So behaviorists made a final attempt to excise mind altogether: their psychology put in play only measureable behaviors” (White 2009, 198-199). Watson is so enthused with the growth of what she calls the mind sciences following a disenchantment with positivism because she believes they roll this trend back, “giving sanction to exploration of conscious and non-conscious experience in a way unforeseen a generation earlier. It is this change in scientific outlook that brings it into more direct dialogue with Buddhist thought” (2008, xi).

are characterized as providing resources otherwise unavailable to small-minded scientists. But empirical research studies are also cited to grant these resources more legitimacy. Similarly, advocates will criticize conventional biomedicine for being limited by prejudice against alternative unorthodox healing practices. But they will then use scientific studies to validate those practices' effectiveness. All of this has had a marked institutional impact. Scientists are given NIH grants to investigate whether Buddhist practices can decrease the intensity of panic attacks. Entire departments of "integrative medicine" now find homes in mainstream biomedical institutions.

Historians have charted shifts in the place of unorthodox healing in U.S. culture. Whorton (2002) presents a periodization schema: from "medical cultism" to "holism," from "alternative" to "complementary medicine," all the way to today's "integrative" health. Delineating such phases is helpful to the extent that they map the diverse ways that unconventional healers conceive of *themselves*. Unorthodox healing practices are sometimes presented as superior alternatives to biomedicine while, at others times, complement to conventional techniques. But periodization models obscure what Watson and Siegel's work evidences: that unconventional healers routinely blend this rhetoric. Bender (2010) has challenged the common perception that the success of unorthodox medicine is due to a disillusionment with conventional biomedicine. She states that "there is, in fact, no apparent correlation between individuals' dissatisfaction with biomedicine and complementary and alternative medicine (CAM) use" (202 fn. 11). This does not stop *alternative healers*, however, from using dissatisfaction as a rhetorical tactic to promote their methodologies.

A psychotherapist or other healer will express disillusionment or even condemnation of biomedicine. They will suggest that their unorthodox healing methods are superior precisely because they present an alternative to the norm. But this same healer can, moments later, appeal to biomedical research to prove that their methods are efficacious. Eclecticism is frequently cited as a primary characteristic of unorthodox health movements. Holistic healers will mix and match reiki with yoga with guided meditation. At times such eclecticism is held together by general concepts of vital energies that bind the universe. At others, they are not overtly held together by anything at all. Clinicians like Watson and Siegel mix and match discursive tactics to legitimate their practices as eclectically as they mix and match the practices themselves. This section has reviewed the debate that surrounds filtering religion approaches among scholars and cultural commentators. But we've also seen that Watson, Siegel, and other unorthodox healers employ arguments from this debate when presenting their theories and methodologies.

Citing the Dalai Lama: Making Hard Borderlines Between Religion and Science Porous

In conclusion then psychotherapists' filtering religion approaches can be viewed as submitting religion to secular science or reducing science to a tool to further religious aims. But we have heard the clinicians who use these approaches categorize their efforts in complicated, sometimes contradictory, ways. They thus demonstrate that imagined relationships between religion and secular are inherently unstable.

In this chapter, I first discussed clinicians' filtering religion approaches to Buddhist traditions. Using the case examples of Watson and Siegel, I explained that

therapists use scientific research to filter the religiosity from Buddhist elements. This creates a particular hierarchical arrangement between religion and secular science. Scientific authority is made the arbiter of what is legitimate in religious traditions. Siegel actually summons a religious authority to support this choice. He cites an oft-repeated anecdote about a scientist who asks the Dalai Lama “what he would do if the science proved tenets of Buddhist meditation were inaccurate. His response was that they would then have to revise Buddhist practice and thinking (2007, 102).” And when Watson asserts that science validates Buddhist teachings it is only a particular sort of Buddhist teaching. She claims that science supports Buddhist notions of emptiness and conceptions of the self. But not that it proves the existence of Buddhist divinities. Neuroscience reveals interconnectedness as a positive sign of health. It does not legitimate the idea that interconnectedness is a problem of existence, the cycle of rebirth. As far as practices, Siegel argues that Buddhist elements can actually be used as biomedical treatment interventions after scientific research reveals them to be, not essentially religious, but neutral “learnable skills” (2007, 96).

I went on to outline the histories behind contemporary therapists’ filtering religion approaches. Regardless of how they approach Buddhist traditions, present-day clinicians inherit a great deal from early psychologists of religion and unorthodox health movements. Among this inheritance are particular definitions of the terms religion, science, medicine, and Buddhism. But, like their forbearers, when therapists’ filter Buddhist traditions through biomedical studies they too often express sometimes extreme dissatisfaction with these dominant understandings. Thus, they feel compelled to maneuver with a hard borderline between religion and secular science. But they also

seek to blur that borderline in fascinating ways. In Chapters 3 and 4, I analyze approaches to Buddhist traditions that seek methods for preserving the secularity of psychotherapy while also incorporating religious elements. We will see that, to do so, many will filter or therapize a Buddhist teaching or practice to prepare it for biomedical use. However, even this will not be enough. These items will still require *translating* or *personalizing*.

CHAPTER 3

BLACK BOXES AND TROJAN HORSES: TRANSLATING RELIGION APPROACHES

The following two chapters describe approaches to Buddhist traditions designed to work through two (purportedly) conflicting convictions held by psychotherapists. On the one hand, clinicians believe that certain Buddhist teachings and practices contain important healing properties. They wish to incorporate these elements into psychotherapy. On the other hand, these therapists remain committed to keeping psychotherapy a secular-designated discipline distanced from the classification religion. The following two chapters look at approaches to Buddhist traditions that are intended to resolve this seeming conundrum: *translating religion* and *personalizing religion* approaches.

This chapter analyzes psychotherapists' translating religion approaches to Buddhist traditions. I first give a brief general introduction to the major features of these approaches. As a specific case example, I then focus on clinicians' use of mindfulness practices in therapy. I introduce key figures like Jon Kabat-Zinn and Marsha Linehan. These clinicians designed full mindfulness modalities based on translating Buddhist teachings and practices into secular biomedical items. I note some of the institutional and affiliational factors that lead these therapists to be predisposed to translating religion approaches. I explain that translating religion approaches appear to create a relationship between religion and secular science wherein the religious is literally transformed into the secular. Subsequent sections of the chapter, however, detail multiple reasons why this relational configuration is unstable. First, I interrogate therapists' public revelations that

their once-purely secular treatment interventions have religious origins. Interrogating those claims, I consider how Buddhist mindfulness practices actually were when therapists translated them. I explore the implications of prominent mindfulness practitioners' statements that their modalities are in fact not translated Buddhist items. Finally, I reveal that psychotherapists engage in the same debates as outside observers about whether to classify their activities as religious or secular. In the end, we find that translating religion approaches develop out of particular understandings of religion and secular. But they also illustrate the ongoing contestation that surrounds the fluctuating definitions of these categories.

Practice Makes (Im)Permanent: Translating Religion Approaches

This section is a brief, general introduction to psychotherapists' translating religion approaches to Buddhist traditions. These approaches are first developed by communities of clinicians who are highly invested in maintaining their status as biomedical, scientific practitioners. Such therapists are most enthused about the healing potential of Buddhist practices, including cognitive and linguistic practices. However, they seek to refashion these practices into scientifically-approved treatment interventions. For therapists who translate religion, these elements are capable of being incorporated into psychotherapy precisely because they are *practices*. Unlike, for example, doctrinal beliefs, practices do not seem permanently marked to them as religious. Instead, for these clinicians, practices begin as nothing more than a set of embodied actions or behaviors. The presumption is that actions are in-of-themselves neutral and value-free. They can be used with or without a particular theory, with or without particular religious beliefs. They can be used

for either religious or secular purpose. Scholar Catherine Bell critiques dominant theories of ritual¹⁰² as based in a false thought/action binary.¹⁰³ However, therapists who translate religion operate on the assumption that “theory” and “practice” are dichotomous.

For psychotherapists who take translating religion approaches, practices can thus be detached from their theoretical and, thus, religious contexts. In Chapter 2, Dan Siegel suggested that, filtered through scientific research, a practice like mindfulness meditation is revealed to be “a human skill that religions use – not itself a religious practice” (2010, 239). Once legitimated by science, such a practice should be freely employed by clinicians. For some therapists, however, more is required: to make Buddhist practices suitable for clinical practice they must be translated into secular biomedical terms. As we

¹⁰² Robert Sharf describes how the term “ritual” has been employed in this effort to pry off meditation’s label as a religious item. Where, the religious-identified ritual “is understood to refer to outward scripted and stylized activity, ritual would appear to be the very antithesis of meditation” defined as directed “towards personal and transformative experience of awakening” (2005, 260). Contrasted with a relatively new normative view of meditation, the Buddhist meditations that Alexander and Jung analyzed, or meditations in which the practitioner contemplates rotting flesh or pursues direct teaching from all interdimensional buddhas, would, as Donald Lopez says, evoke “protest that such practices are not meditation” at all “but rather forms of ritual” (2012, 83-84). Of course, Lopez and Sharf trouble this contention offering that “it might be argued that all forms of meditation over the long history of Buddhism are ritual practices” (Lopez 2012, 84). Interestingly, Catherine Bell has found that a “particular understanding of ritual – as a type of psychosocial mechanism unbound and undetermined by any one religious or ritual traditions” (2009, 240) has itself become a rhetorical device to legitimate just the kind of cultural appropriation psychotherapists are accused of. If ritual is a universal, anthropological category, something every functioning humans needs for their psychological health, then they can be repurposed regardless of their context of origin. Bell, who incidentally asserts that meditation is actually “not ritual but are readily thought to have ‘ritual-like’ qualities” (2009, x), is influential for revising scholarly approaches to ritual theory she sees as over-reliant on dichotomies such as “thought/action.” This is precisely the dichotomy that psychotherapists often act upon in their clinical use of meditation, that an action, a practice, can be excised from thought, from its theoretical framework.

¹⁰³ Also in this tradition, Courtney Bender (2012) has integrated conceptual apparatus ranging from Bourdieu’s habitus to David Hall’s take on “lived religion” to propose a new approach to the study of religious practice. Bender advances an “analytical shift” from “things (practices)” to “processes (practicing)” which “redirects attention from the things or objects that appear to be self-evidently ‘religious’ and turns it instead toward the processes” generated within networks of social interactions “that make certain things (activities, ideas, institutions) recognizably religious” (274-275). Practice theorists like Bender thus highlight the fields of social interactions which make and unmake particular practices as religious or secular. But clinicians who translate religion imagine that practices can be dis-embedded from social fields of meaning-making, can be removed from their, to twist the word a bit, habitus.

will examine in more detail, how drastically clinicians transform these practices in their translations is a matter of much debate. Many believe they have only re-named neutral actions once mislabeled as religious. Others believe that they have fully secularized practices so as to remove any traces of their religious pasts. These variations figure prominently in debates surrounding translating religion approaches. For some, translations only “disguise” the religious essence of practices incorporated into therapy. Interestingly, here practices seem permanently marked as religious, again, precisely because they are *practices*. Here a practice like meditation is irrevocably associated with religion and, unlike beliefs, as a practice, is visible to an outside observer.

Psychotherapists take translating religion approaches on a regular and, often, casual basis. A clinician with only passing interest in Buddhist traditions may have heard of teachings on non-attachment to thought. Sitting with a person unable to sleep because of rumination, this therapist may spontaneously remember such concepts. If they introduce these ideas as new “cognitive restructuring” techniques, then they are translating them into secular psychotherapeutic terms. A number of therapists, meanwhile, have taken up a whole range of Buddhist practices and translated them into treatment interventions. From Zen koans to Tibetan Buddhist devotional visualization meditations, clinicians have formulated systematic methods for translating Buddhist elements for use in biomedical healing. None, however, has been as systematic, nor as culturally influential, as the development of clinical mindfulness practices. In the next section, I present this specific case example. It is a useful location to explore the core issues surrounding translating religion approaches over the remainder of this chapter.

The Development of Therapeutic Mindfulness Practices

In the contemporary United States, we are bombarded with advertisements for an item called “mindfulness” in everything from parenting (e.g., Bailey 2011) to pedagogy (e.g., Schoeberlein and Sheth), from mindful golfing (e.g., Wise Ways 2012) to mindful lawyering (e.g., Rogers 2009). This mindfulness is presented as a therapeutic, as helpful in almost any forum to enhance performance or alleviate pain. Today, the word mindfulness is most commonly defined as a particular experiential state. In this state, one holds a posture of unmediated “bare attention.” Here one has a fully accepting non-judging awareness of, and non-attached connection to, present moment phenomena.¹⁰⁴ Mindfulness is said to be achieved and cultivated through a set practices ranging from formal sitting meditation to mindful dishwashing.

The popularity of therapeutic mindfulness practices is due in large part to their successful entrenchment in health care, especially psychotherapy. Though it is often described as a “new fad” - implying that it is superficial and frivolous - the clinical use of mindfulness practices is now decades old. There are entire treatment modalities like Dialectical Behavior Therapy built around it and publications numbering in the thousand have appeared on the topic.¹⁰⁵ Credentialing processes are now offered to clinicians (e.g., UCLA’s Mindful Awareness Research Center offers certification as a “Mindfulness Facilitator”) to authenticate their proficiency as mindfulness practitioners. Therapeutic

¹⁰⁴ Georges Dreyfus (2011) offers an especially thoughtful and nuanced Buddhological assessment of what he describes as “something close to a consensus” (p. 43) in contemporary, and specifically psychotherapeutic, definitions of mindfulness. Common understandings of mindfulness have Jon Kabat-Zinn’s “operational definition” at their core: “Mindfulness is the awareness that arises by paying attention in a particular way: on purpose, in the present moment, and non-judgmentally” (see, for e.g., Kabat-Zinn 2003, 141).

¹⁰⁵ Publications have grown exponentially since the hundreds Williams and Kabt-Zinn tracked in 2010. (Williams and Kabat-Zinn 2011, 2).

mindfulness practices are so ubiquitous that they are frequently mistaken as the sole psychotherapeutic approach to Buddhist traditions. They are, however, simply the most culturally prominent instance of when clinicians translate religion. They are thus useful as a case study to explore the dynamics of this approach. First, I lay out the origin stories that formative mindfulness practitioners have told about the creation of their methodologies. Clinicians have stated that Buddhist healing practices would only receive mainstream acceptance if translated into secular treatment modalities.

Therapeutic mindfulness practices were designed by clinicians who all happened upon the same word to rename Buddhist practices as secular treatment interventions. Jon Kabat-Zinn, developer of the Mindfulness-Based Stress Reduction program, is frequently cited as an origin point for these activities.¹⁰⁶ Ironically, while steeped in the world of science, Kabat-Zinn has no formal medical training whatsoever. He instead holds a PhD from M.I.T. in molecular biology. As a young graduate student, Kabat-Zinn began practicing meditation techniques he was told were Buddhist. He describes these meditative experiences as personally transformative (2011, 285-292). And he became convinced that such practices hold healing capabilities that could be helpful to others (Ludwig and Kabat-Zinn, 2008).

Kabat-Zinn has made conflicting statements over the years on whether Buddhist traditions should be classified as religion. At times, he reproduces the rhetoric we examined in Chapter 2 that Buddhist traditions are closer to science than religion. At other times, he reinforces what he knew the hospital administrators of the University of Massachusetts Medical Center would presume: Buddhist practices are religious and, thus,

¹⁰⁶ Kabat-Zinn's construction of MBSR has at this point been much discussed see, for example, Wilson 2014 and Braun 2013, 166-167.

inadmissible in biomedical spheres (Kabat-Zinn 2011a: 285-292). Kabat-Zinn's enterprise would only be accepted then if presented in a way

that avoided as much as possible the risk of it being seen as 'Buddhist'. . . a constant and serious risk that would have undermined our attempts to present it as commonsensical, evidence-based, and ordinary, and ultimately a legitimate element of mainstream medical care. (2011a, 282)

In the minds of institutional authorities, religion and secular biomedicine are in conflict. To these authorities, "mainstream medical" care is "commonsensical, evidence-based, and ordinary" (or [*weltliche*] worldly). It cannot openly co-exist with the religious.

In "mindfulness," Kabat-Zinn found his answer. He was introduced to the term from Buddhist sources. But, to the uninitiated, the word sounds an abstract concept betraying no overt signs of this Buddhist derivation. Instead of proposing classes on Buddhist meditation, Kabat-Zinn marketed mindfulness training for stress reduction. Thus Kabat-Zinn's explicitly intends to secularize Buddhist meditation practices. Without this secularization, he believes, communities would be denied the healing these practices could provide (2011a, 282). Kabat-Zinn did not invent his translating religion approach *sui generis*. The innovation of the Mindfulness-Based Stress Reduction program, patterned after psycho-educational group therapy, is part of larger concomitant cultural shifts described in Chapter Two. As elucidated by Harrington (2008a, 2015), Kabat-Zinn borrows his tactics from the contemporaneous efforts of other unorthodox healers. During this period, a number of unconventional "Eastern" healing practices (e.g., acupuncture, *reiki*, etc.), once relegated to the margins of New Age medical cultism, were translated into scientific biomedical terms.

The traces of this influence are evident in Kabat-Zinn's claims that mindfulness practices are curative for stress. Harrington (2008a; 2015) places Kabat-Zinn in the

tradition of practitioners like Herbert Benson (mentioned in Chapter Two). Benson's *The Relaxation Response* persuaded the biomedical community to grant "stress," a psycho-emotional state, legitimacy as a serious health concern. Benson presented empirical evidence showing stress' impact on the body in conditions like hypertension. He further claimed that his research proved that the "Eastern religious"-derived "Transcendental Meditation" (TM) could be effective for stress reduction providing that it was sufficiently translated for medical settings. Harrington argues that both Kabat-Zinn and Benson draw on wider socio-cultural narratives about the harmful bodily effects of modernity. Stress is only one illness endemic to the "modern age." A notable aspect of this "modern age" is that it brings secularizing dis-enchantment. Consequently, narratives about the ills of modernity, are coupled with additional cultural memes about the healing capacity of "the East." Here an exoticized East is portrayed as repository of ancient wisdom capable of addressing the modern condition.

The histories that Harrington outlines are now built into current definitions of mindfulness practices. Mindfulness practices are often presented by Kabat-Zinn and others as the antidote to sickness of modernity. The modern age demands that people remain constantly on-the-move, disassociated from their experience, and ensnared by high-technology. Mindfulness practices are said to re-connect sufferers to their experience. When a state of mindfulness is achieved, one finds that the "ordinary" Kabat-Zinn spoke of above is not dis-enchanted after all. Instead, when fully experienced in the present moment, the "every-day" is revealed to be imbued with numinosity. David McMahan (2008) observes that this positive valuation of a sensual world-affirming connection to the "every-day" and ordinary (in, for example,

aforementioned mindful dish-washing techniques) stands in strong contrast to longstanding Buddhist teachings on non-attachment, impermanence, and *samsara*.¹⁰⁷

Nonetheless, with stress already standing in a liminal space between physical and psychological health, clinicians speculated that mindfulness practices might treat other emotion states like anxiety or anger. They ultimately find that mindfulness techniques are effective for easing a whole range of patients' presenting complaints. Entire treatment protocols began to be created with mindfulness at their center. Kabat-Zinn helped develop Mindfulness-Based Cognitive Therapy (MBCT), one of the first modalities based on these practices. MBCT's developers initially presented it as a form of relapse prevention for major depressive disorder. But it has since been taken up for multiple other diagnoses (Segal, Williams, and Teasdale 2001). MBCT reforms the techniques of earlier cognitive therapies for the "cognition distortions" they assert cause worry and rumination. Where cognitive therapists once instructed patients to challenge or dispute their worries, MBCT practitioners teach people to disengage or "de-center" themselves from their thoughts altogether. It is something of a radical move for cognitive therapists to encourage patients to "come out of their head" or teach exercises meant to bring insight into the illusory nature of all thought.

Like Kabat-Zinn, the founders of MBCT, Zindel Segal, J Mark G. Williams, and John Teasdale have told the story of their methodology's development in print (2001). The team reports that, a decade before their work on depression relapse prevention began, Teasdale heard a lecture from the U.S.-born, Thai forest tradition monk Ajahn

¹⁰⁷ For the origins of some of this thinking, McMahan points to literary reactions to "the frenziedness of late modernity." Here "the appreciation of the ordinary are antidotes to both the petty anxieties and deep spiritual illnesses of the global middle class" (McMahan 2008, 217).

Sumedho.¹⁰⁸ He remembers being “struck by the parallels between the core ideas of the Buddhist analysis of suffering, as described by Sumedho, and the basic assumptions of cognitive therapy” (2001, 37). Nonetheless, Teasdale was “stuck,” he says, as to how to functionalize his observations. When Teasdale learned of MBSR he wrote Kabat-Zinn to say, “I have been very impressed by your ability to extract the essence of Buddhist meditation and to translate it into a format that is accessible and clearly very effective in helping the average U.S. Citizen” (42).

While Teasdale had experimented with meditation for some years, neither Williams nor Segal were exposed to it before meeting Kabat-Zinn. It was through Kabat-Zinn and MBSR that they were introduced to what they were told was the essence of Buddhist meditation. However enthusiastic Teasdale was, Williams and Segal were warier. They worried that Kabat-Zinn had not gone far enough in secularizing mindfulness because he retained meditation practice as the delivery mechanism. They collectively recall:

We must admit that we were unsure how such a move might affect our scientific colleagues. Meditation seemed too close to a form of religious practice, and though each of us had a different ‘take’ on religion, we all felt that such personal issues were best left outside the laboratory and the clinic. . . .Our collective mix of enthusiasm and curiosity on one hand, and diffidence and alarm on the other, might not be atypical of the reactions of other behaviorally and cognitively trained therapists. (41-42)

Like Kabat-Zinn, Segal et al. have not directly defined religion. But here we see their implicit assumption that religion is something private and personal that is “best left outside” public spheres like “the laboratory and the clinic.” They go further than Kabat-Zinn in their vigilance about maintaining this bifurcation. But it is not meditation itself

¹⁰⁸ Ajahn Sumedho played an important role in popularizing the Thai Forest Tradition in England and the United States. For treatments of Sumedho see Mellor 1991 and Bell 1998.

that remains “too close to a form of religious practice.” It is the *word* that is problematic. The team moved forward with their modality and simply retitled the techniques they taught, “attentional control training.”

Segal et al.’s final observation above, that “behaviorally and cognitively trained therapists” would be especially ambivalent about this sort of activity, is an important one. Clinicians across psychotherapeutic orientations incorporated Kabat-Zinn’s mindfulness techniques as they became more popular, but cognitive and behavior therapists built full frameworks around it. Cognitive and behavior therapists are especially invested in maintaining their status as secular scientific practitioners adherent to “the medical model” (See Browning and Cooper 2004: 86-106, 217-245, Wampold 2001). They highly value clearly defined treatment modalities that can be evaluated for measurable symptom reduction. Instead of private practices or other settings, the developers of mindfulness modalities tended to work for large biomedical institutions often reliant on managed health care and insurance.¹⁰⁹ Cognitive and behavior therapies are often the preferred talk therapy option in such settings as complement to increasingly emphasized psychopharmacology. The cultural norms of both these institutional and affiliational contexts inculcate a tentativeness about incorporating a religious practice into psychotherapy. Cognitive and behavior therapists would thus be more likely to gravitate to translating religion approaches than others. One central behavior therapy journal reassured its readers that “the modern investigators of mindfulness as therapy . . . are in

¹⁰⁹ For example, Kabat-Zinn inaugurated his MBSR program at the University of Massachusetts medical center; the MBCT team worked at various such institutions at various times including the Medical Research Council’s Applied Psychology Unit in Cambridge, England; the Clarke Institute of Psychiatry in Toronto, Canada and the University of Wales at Bangor (England).

the tradition of scientific psychotherapy, which owes allegiance to science and evidence-based practice” (Dryden and Still 2006: 6-7).

This is despite the debate mindfulness practices’ popularity has spurred about the empirical basis for claims of its effectiveness. Practitioners remain convinced of mindfulness’ curative abilities. But observers and, notably, clinicians themselves, deliberate on the construct validity of the instruments employed to assess it. They question whether mindfulness practices have been fully scientifically verified. Nonetheless, it is the idea that the effectiveness of mindfulness practices *is* measurable that is most salient for those who utilize them. Cognitive and behavior therapists often seek to distinguish themselves as more scientific than their psychoanalytic or humanistic colleagues by an adherence to “evidence-based practice.” They portray the therapeutic interventions they employ to be amenable to experimental design. Symptoms are assessed, interventions are applied, and outcomes are measured. Part of what makes mindfulness practices as secular “technologies” so attractive to behavior therapists is that they are perceived to be well-disposed to research methods: Patient reports symptoms, apply meditation, measure the increase or decrease of these symptoms.

Enough clinicians were convinced of mindfulness’ research verifiability that it spurred what has been called a ‘third wave’ of behavior therapies (e.g., Hayes 2004). Reaching its height through the 1990s, this third wave is defined by the rise of mindfulness-based methodologies like MBCT.¹¹⁰ Marsha Linehan says her goal to “take the Zen out of Zen” produced the popular Dialectical Behavior Therapy (DBT). DBT’s “core skill” of mindfulness assists people diagnosed with borderline personality disorder

¹¹⁰ For a brief history of the so-called ‘third wave’ behavior therapies see Hayes 2004, 3-6.

to, for example, become non-reactive to urges to cut or burn themselves (Wick 2005).

Steven Hayes' Acceptance and Commitment Therapy (ACT) promotes the mindful acceptance of anxiety sensations to prevent their escalation into panic attacks (Hayes and Strosahl, 2004). Based on the origin stories laid out in the above section, the explosion of mindfulness modalities appears to be a clear-cut case of secularization. In the next section, I reiterate how this interpretation is persuasive before problematizing it.

The Returned of the Repressed Buddhism: How “Mindfulness” Became Buddhist (Again)

As exemplified by mindfulness practices, psychotherapists' translating religion approaches appear to create a particular relationship between the religious and the secular. Taking account of the above origin stories, this interpretation can seem to be simply descriptive of therapists' stated intentions. The MBCT team transparently report that they secularize religious elements to make them suitable for biomedical, scientific healing. They envision religion as in conflict with the scientific or medical, unable to coexist in the same space. Linehan and Hayes have also expressed a commitment to a science of empiricism. They too reproduce the “conventional definition” of a science that is incompatible with religion.¹¹¹ Hayes urges his colleagues to adhere to strict guidelines when incorporating these sorts of practices into psychotherapy.

¹¹¹ When I sent this completed dissertation to Hayes for comment he responded by email clarifying what he had shared in our interview about his definition of science: “As far as a ‘conventional definition’ I believe that science is a social enterprise that has as its purpose the development of increasingly organized statements of relations among events that analytic goals to be achieved with precision, scope, and depth and based on verifiable experience. Not sure is that is conventional or not but I did not adopt it because of convention. The definition is my own and I adopted it because it fits with my pragmatic / contextualistic assumptions and appears to be capable of organizing progressive empirical work” (personal communication, 4/4/16).

We must fit them into our field theoretically, without any sectarian or supernatural connotations. It may appear slightly sacrilegious to say so, but if religious and spiritual traditions are to enter empirical clinical psychology, they must be ours. We, as a field, must be free to interpret, analyze, and transform them, without being limited by their religious and spiritual past. (Hayes 2002, 105)¹¹²

Reading a comment like this from Hayes, it is not surprising that the clinical use of mindfulness practices raise the ire of Buddhologists or Buddhist practitioners. Hayes seems to explicitly advocate that “spiritual technologies” (2002, 105), as he calls them, be fully submitted to the secular biomedical or scientific. But such a comment itself complicates the claim that translating religion approaches to Buddhist traditions lead to their secularization. The remainder of this chapter illustrates this inherent instability between religion and secular. I argue that there are a number of reasons why we cannot definitively pronounce translating religion approaches to be secularizing forces.

First, the stories that psychotherapists tell of their development of mindfulness practices are all in print. They are included in introductions to training manuals and in published interviews. Clinicians publically proclaim that the mindfulness practices they utilize are religious in origin. They explain to readers and listeners that they have translated these religious practices into secular terms. These public disclosures undercut

¹¹² When I sent my completed dissertation to Hayes for comment he responded by email: “I stand by the quote 100% but I don’t quite understand what you mean by incompatible. Is water incompatible with exercise? Water is not exercise and exercise is not water. They complement each other but it would be a category error to compare them directly. I would say that science and religion are complimentary and different. They are incommensurable or incomparable each in their own terms. A science of religion is not a religion. A religious take on science is not science. The point of my quote is that scientists *as scientists* never genuflect. But there is more to scientists than science -- scientists as religious people genuflect. When you are doing a science OF the sacred that activity itself is not scared and it must adhere to the rules of science. Is that what you mean by incompatible? If so, what would “compatible” science and religion look like? The holy books ARE SCIENTIFICALLY TRUE? Can you name a progressive modern scientist of achievement and note who would believe such a thing if the “holy books” were speaking about his or her scientific domain? Science IS ALL THAT GOD SAYS. Is there a modern religious leader who would say that religion and science are compatible in that way who still has a congregation?” (personal communication, 4/4/16).

the purely secular status of mindfulness practices and associates them with the religious. Psychotherapists endeavor to translate Buddhist practices into secular techniques. But they also unveil and market these practices' "true" Buddhist religious origins. Here a public interest in Asian healing practices is perceived to increase access to the healing marketplace rather than prevent it. Mutually co-arising out of the unconventional healing movements surveyed in Chapter Two, at these times, clinicians often play off disillusionment with biomedical as much as religious institutions. They critique them for being overly reliant on a positivist science that contributes to secularizing disenchantment. Again, the secularization of modernity is portrayed as illness-inducing; the illness of "stress" that Kabat-Zinn aimed to treat was only one popular example in the 1970s-1980s United States. Alternative and unconventional healing practices, particularly those associated with "the East," become desirable precisely because of their seeming binary opposition to these forces of secularization (Harrington 2008a).

When psychotherapists use this dual-edged rhetoric to speak of their translating religion approaches they create a fundamentally unstable relationship between religion and secular. These clinicians might first present a practice as a secular treatment intervention. But, in the telling of the above stories, they reconnect this practice to its supposed religious past. When a cultural commentator tells the apparently "hidden histories" of elements like mindfulness practices they too reveal a secularized item to be, in truth, once religious. However, this raises a second reason for challenging the interpretation that translating religion approaches to Buddhist traditions amount to clear-cut cases of secularization. When we look more closely at the purported religious origins of secularized religious items we are left questioning such interpretations. In the next

section, I more fully detail mindfulness practices' journey into psychotherapy. We will find that the mindfulness practices clinicians were first taught were *already* heavily translated from historical Buddhist versions. Perhaps, there was little translation left to perform. We can trace mindfulness practices' translation into psychotherapeutic techniques back to the literal translation projects that first introduced Buddhist texts to English-speaking audiences.

The Origins of Mindfulness' Buddhist Origins

In the beginning, the word mindfulness was associated with Buddhist teachings for over a century prior to clinicians' introduction to it. How did this come to pass; how did mindfulness practices come to be viewed as Buddhist and in need of translating for secular spheres? This section aims to answer that question. Ultimately, I argue that looking further back into the past of therapeutic mindfulness practices calls into question whether they were in fact Buddhist to begin with.

“Mindfulness” is, first, of course, an English word; one that has been used to translate specific Buddhist concepts for over two centuries now. The cultural genealogy of the term may be difficult to narrate because, as Lopez notes, it “rarely appeared prior to 1950” (2012, 99). However, we know that the word long predates its connection to Buddhist traditions.¹¹³ Mindfulness was first made to transmit Buddhist doctrine in the

¹¹³ The Oxford English Dictionary has entries going back to 1530. The word mindfulness was, of course, predominantly spoken by Protestant Christians who thus had specific conceptions about what the “mind-“ is and what relationship it has with the body, others, the world. The US-born contemporary monk, Thanissaro Bhikkhu (2008), goes so far as to suggest that the word “was probably drawn from a Christian context” and implies that it carries with it the traces of those theologies, the whispers of Anglican prayers “to be ever mindful of the needs of others.” A strong version of this claim seems difficult to prove, but we can say that the word was previously *used* in Christian contexts. The OED includes supporting examples

late 19th-century translation projects of the Pali Text Society discussed in Chapter Two. The Society's Thomas Rhys Davids settled on mindfulness as a translation for the Buddhist technical term *sati* (Pali; Sanskrit: *smṛti*).¹¹⁴ Rhys Davids had described *sati* as “one of the most difficult words. . .in the whole Buddhist system of ethical psychology to translate” (1890, fn2 58). Notice that he assumes that the Buddhist writings he translated were part of a systematic “ethical psychology.” The Pali word *sati* is a nominalized form of the verb *sarati* which literally means “to remember,” and, thus, was already related to cognition, to psychology.

Like most of his fellow translators, Rhys Davids once corresponded *sati* with words related to memory and remembrance.¹¹⁵ But Rhys Davids came to believe that *sati*'s true doctrinal purpose included not just remembering but an ethical discernment of judging wholesome from unwholesome phenomena.¹¹⁶ Rupert Gethin has eloquently clarified how the practice of *sati* as remembering functioned for those on the Buddhist path to enlightenment:

The basic idea here is straightforward: if one is instructed to observe the breath and be aware whether it is a long breath or short breath, one needs to remember to do this, rather than forget after a minute, five minutes, 30 minutes, and so forth. That is, one has to remember that what it is one should be doing is remembering the breath. There is a further dimension to this remembering implied by my use of the expression ‘what one is supposed to be doing’. That is in the specific context in which the practice of mindfulness is envisaged by ancient Buddhist texts, in

of Christian usages but also other early appearances of the word which do not explicitly reference a Christian context, but instead inner psychological states of ‘attention,’ ‘intention,’ and, notably, ‘memory.’

¹¹⁴ Lopez (2012, 94) observes that the OED cites Monier-Williams as the first to use mindfulness in 1889, but corrects it to point out that Rhys Davids had already done so in his 1881 *Buddhist Suttas*.

¹¹⁵ For detailed analysis of Rhys Davids deliberations see Gethin 2011.

¹¹⁶ Interestingly, Rhys Davids (1910) explains that early Buddhists themselves engaged in a re-contextualization of the term *sati*. Buddhists, he says, had also taken up the word and repurposed it within a then new Buddhist framework, adding layers of meaning onto it: “Etymologically Sati is Memory. But as happened at the rise of Buddhism to so many other expressions in common use, a new connotation was then attached to the word, a connotation that gave a new meaning to it, and renders “memory” a most inadequate and misleading translation. It became the memory, recollection, calling-to-mind, being-aware-of, certain specified facts. (Quoted in Bodhi 2011, 23)”

remembering that one should remember the breath, one is remembering that one should be doing a meditation practice; in remembering that one should be doing a meditation practice, one is remembering that one is a Buddhist monk; in remembering that one is a Buddhist monk, one is remembering that one should be trying to root out greed, hatred and delusion. Conversely, in forgetting the breath, one is forgetting that one is doing a meditation practice; in forgetting that one is doing a meditation practice, one is forgetting that one is a Buddhist monk; in forgetting that one is a Buddhist monk one is forgetting that one is trying to root out greed, hatred and delusion. This seems to me to make sense of such traditional Buddhist meditations as recollection (*anussati*) of the qualities of the Buddha, the Dhamma and the Sangha, which the texts themselves seem keen to include within the broad framework of mindfulness practice. (Gethin 2011, 270)

Contemporary mindfulness practices are often characterized as decontextualized from Buddhist frameworks. For Gethin, an authentic practice of *sati* is a practice of contextualizing the self. The Buddhist adherent's mindfulness is a "remembering" of the wider context of Buddhist traditions to which they are bound. The word can thus be found as the root of the *anussati* practices (e.g., "recollection of the Buddha") so central to mainstream Buddhist practice.¹¹⁷

Early renderings of mindfulness as "recollection" and "remembrance" have been forgotten by therapeutic mindfulness practitioners. The additional ethical prescriptive meanings that led Rhys Davids to eschew "memory" as an adequate translation for *sati* are also forgotten. In fact, the vast majority of the history, context, and tradition surrounding *sati* and mindfulness has been all forgotten in their current usages. Furthermore, today's mindfulness practices are actually meant to foster an experiential state of forgetting. When one practices the mindfulness of today one is only to remember the breath, to "barely" attend to the unmediated present moment. The practitioner is to forget the past, the future, one's context and identity (as a Buddhist monk or otherwise).

¹¹⁷ For more on mindfulness as memory see Jaini 1992; Cox 1992; Kuan 2008

They are to let go of judgment, the conceptual apparatus of “good” and “bad,” and the cognitive-linguistic altogether.

The mindfulness practices that therapists translated into secular biomedical techniques are clearly not those described by Gethin. They are practices of “bare attention,” not contextual embedded-ness and ethical discernment. These contemporary mindfulness practices are so far from those historically associated with *satipatthāna* that some question “Is Mindfulness Buddhist?” at all (Sharf 2014).¹¹⁸ Perhaps, the mindfulness practices clinicians were introduced to were already translations that are less than fully Buddhist. The distance between today’s understanding of a state of mindfulness might not be a translation, much less a secularization, of Buddhist elements after all.

However, in the minds of psychotherapists, the practices they translated for psychotherapeutic use were Buddhist and, thus, *in need* of translation. These therapists believed the practices they translated were in fact “the essence of Buddhism.” Where did they get this notion? It may be a direct importation from Asia to the United States, from Burma to Cambridge. In British imperial Burma (Myanmar), a lineage of Buddhist monks developed “the Mahāsī method.” The Mahāsī method was meant to preserve Buddhist traditions in the face of lost Buddhist organizing structures and new competing Protestant and scientific ideologies. The method was meant to provide “an approach to *satipatthāna* [mindfulness practice] that was particularly suited to laypersons, including persons with little or no prior exposure to Buddhist doctrine or liturgical practice” (Sharf

¹¹⁸ There is an ongoing scholarly debate on whether contemporary mindfulness’ practices are authentically Buddhist. Bhikkhu Bodhi (2011) notes the distance between traditional *sati* practices and today’s mindfulness practices of the present moment and non-judgment, while John Dunne (2011; Harrington and Dunne 2016) finds precedent for such meditative states in Indian and Tibetan Mahāmudrā traditions.

2014a, 15; Also see Braun 2013). A version of this Mahāsī method was subsequently popularized in English by the German-born monk Nyanaponika Thera (née Siegmund Feniger), in his 1954 publication, *The Heart of Buddhist Meditation: A Handbook of Mental Training Based on the Buddha's Way of Mindfulness*.

Current understandings of mindfulness practices are directly attributable to Nyanaponika's text. It is Nyanaponika who, in English, calls the central meditative state sought by practitioners, "bare attention" (Sharf 2014a, 15; Braun 2013, 223). It is Nyanaponika who takes up bits and rhetorical pieces of the Burmese lineage to frame mindfulness as universal and perennial. He construes mindfulness as not only easily deracinated from religion, but an antidote to what he calls religion's "sedatives" (1954, 9). *Satipatthāna* practice he proclaims

provid[es] the foundation and the framework of a living *dhamma for all*, or, at least, for that vast, and still growing, section of humanity that is no longer susceptible to religious or pseudo-religious sedatives, and yet feel, in their lives and minds, the urgency of fundamental problems of a non-material kind calling for solution that neither science nor the religions of faith can give. For the purpose of such a *satipatthāna dhamma for all* it is essential to work out, in detail, the applications of this method to modern problems and conditions [his emphasis]. (1954, 9)

In this passage, we see the considerable transformations that *satipatthāna* practices underwent in Myanmar prior to Kabat-Zinn picking up Nyanaponika's book. The monk Ledi Sayādaw's teachings are distinct from those of Mahāsī Sayādaw which are further removed from Nyanaponika Thera's.

However much mindfulness practices had been reconstructed in Myanmar, psychotherapists read in Nyanaponika's book that they were the ultimate means to transmit the deep truths of Buddhist teaching, the "dhamma." Introduced as Buddhist then, these practices still required translation for secular biomedical use. Nyanaponika

would likely be taken aback by the way his later readers reduce his more detailed descriptions of *sati* to the phrase “bare attention” (Braun 2013, 223). At the same time, Nyanaponika stamp remains visible on today’s mindfulness practices. Kabat-Zinn often parrots his very language in equivalence almost word-for-word. He too proclaims a “*dhamma for all*” that is applicable to “modern problems and conditions” and transcends both “science and the religions of faith.” We can thus trace a line of transmission from the insight meditation movements of Burma to the Insight Meditation Society (IMS) of Barre, Massachusetts to the University of Massachusetts Medical Center. The psychotherapists who formulated Mindfulness-Based Cognitive Therapy learned mindfulness practices from Kabat-Zinn who learned them from IMS founders like Jack Kornfield who claims the Burmese Mahāsī Sayādaw himself in his teaching lineage (Braun 2013, 167-168). Donald Lopez sums it up: “the ‘mindfulness’ that is now taught in hospitals and studied in neurology in laboratories is thus a direct result of the British overthrow of the Burmese king” (2012, 99). Lopez’s quip mournfully drips with the irony that Burmese cultural items, born out of resistance to colonial pressures, have now been appropriated by communities in the United States. This sort of cultural appropriation can itself be seen as a reenactment of the violence of colonialism.

But the mindfulness practices that psychotherapists translated into biomedical techniques are not a direct import from Myanmar alone. Many of the clinicians who developed mindfulness modalities travelled throughout Asia. On their journeys, they did not only experiment with the Mahāsī method, but multiple Buddhist practices. They then returned to the States where they were immersed in a number of different U.S. Buddhist communities populated largely by “converts” of European descent. Sometimes these

groups claimed an affiliation with, for example, a particular strand of U.S. Zen. But they were still in turn also influenced by multiple sources and traditions: from revitalized Thai forest tradition communities to the U.S. *vipassana* practitioners that viewed them as ‘symbols of pure Buddhist simplicity,’ (McDaniel 2011, 36)¹¹⁹; from D.T. Suzuki’s universal Zen to the Beats who collaged his ideas into their poems.¹²⁰ Further, these communities were not only shaped by U.S. Buddhist lines. Many psychotherapists first became attracted to Asian religious elements while participating in the larger, often psychedelic-laced, U.S. liberal religious activity of the 1960s and 1970s.

There is a final source for contemporary mindfulness practices that cannot be overemphasized. Many psychotherapists were introduced to the Buddhist practices they translate into secular techniques *by other psychotherapists*. The MBCT team learned mindfulness practices from Kabat-Zinn. Kabat-Zinn practiced in groups led by therapists like Kornfield.¹²¹ Over time, Kornfield’s communities have, reciprocally, also been shaped by the popular work of Kabat-Zinn (Gleig 2011). Taking all of this into consideration, one begins to wonder whether the mindfulness practices that were incorporated into psychotherapy are secular translations after all. These practices drawn, from Kabat-Zinn-influenced Buddhisms, may not have required any translation at all.

Translating religion approaches to Buddhist traditions are generated out of psychotherapists’ attempts to maneuver within their understandings of the categories

¹¹⁹ Thai meditation movements generally and the Thai Forest tradition referred to in this McDaniel quote in particular had a marked effect on current understandings of mindfulness. For more on modern Thai meditation movements see Cook 2010.

¹²⁰ Most of the clinicians we will look at cite what are 20th-century U.S. Anglo versions of Zen as an influence on their mindfulness modalities. For histories of these movements see Fields, 1982, 195-225; Faure 1993, 52-88; Sharf 1995; McMahan 2002; Gleig 2011, 56-67.

¹²¹ Sharf’s commentary on this feedback loop and the cultural drivers of “American Buddhists [who] prefer tracts by modern Western or Westernized Asian teachers to translations of classical texts or scholarly expositions of doctrine” apply well here (Sharf 2002, 23-24).

religion and secular. Clinicians believe they translate a religious element for secular use. But delving into the details of that translation, as we have above, shows the situation to be much more complex. When did the Buddhist mindfulness become secular exactly? Was it before or after Nyanaponika reconstructed Mahāsī's teachings for English-speaking audiences? The narrative that there is an item called mindfulness within Buddhism that psychotherapists extract and secularize is vastly oversimplified.

And yet, this vastly oversimplified narrative is not only told by clinicians. When scholars and cultural critics express anxiety about the decontextualization and secularization of mindfulness, they too reproduce these understandings. Critical theorists of religion like Jeremy Carrette & Richard King (2005) and scholars of contemporary Buddhist practice like Wakoh Shannon Hickey (2010) level a variety of charges based on the narrative of decontextualization. Many observers reconstruct the analyses of dominance and power of Michel Foucault (1999) and Talal Asad (2003) to fit with old sociological predictions of secularization. They envision religious items absorbed into secular systems of power (e.g., global capitalism) in a "silent takeover of religion." The instrumentalization of Asian cultural items, Carrette and King (2005) suggest, reenacts the violence of colonialism in which a disempowered minority is stripped of its resources. Critics like Ron Purser and David Loy (2013) further detect the capitalistic consumerist drivers of these processes. They note the profit motives of mindfulness practitioners. And they argue that cultural appropriation is itself a feature of global consumerism in

which absolutely anything can be taken from the cafeteria line, capitalized and marketed.¹²²

These critiques are premised on the notion that contemporary mindfulness practices were deracinated from Buddhism and secularized. Other critics, however, are more concerned that it is inappropriate to attribute Buddhist origins to these practices. Buddhologists like Sharf (2014b) and Lopez (2008; 2012) challenge the idea that contemporary mindfulness practices are Buddhist at all. They are suspicious that the Mahāsī method fits within the majority of Buddhist teachings throughout history. Psychotherapeutic reconstructions of the Mahāsī method like Teasdale’s appear even less Buddhist. Consequently, proclamations that mindfulness practices are derived from deep Buddhist wisdom could be just more capitalist marketing. Such advertisements seem to exoticize, or to appropriate Edward Said’s term, orientalize Asian traditions.

In the next section, I describe additional therapeutic mindfulness modalities that hold even more tenuous connections to Buddhist traditions than the above. The origin stories told by the developers of these methodologies further complicate the claim that mindfulness practices are secularized Buddhist items.

Incredible Coincidences, or, The Hidden Hand of Secularization/Religious Transmission

Previous scholarly studies of clinical mindfulness practices tend to focus on Kabat-Zinn’s contributions and broad overviews of psychotherapeutic applications (e.g., Wilson 2014).

¹²² Both Foucault and Asad’s work ironically undermines the secularization narratives they are often appropriated into because they both demonstrate the culturally contingent nature of the “secular.” Foucault and Asad illustrate the ways in which both the categories of “religion” and “secular” mutually co-arise within European Enlightenment systems of power rather than there being a clearly designated secular that could successfully “takeover” religion.

However, the development of other formative mindfulness modalities like DBT and ACT diverge in revealing ways from a methodology like MBCT. In the next section, I detail some of this development as explained by the designers of these methodologies, Linehan and Hayes, respectively. The reportage of Linehan and Hayes further problematizes the simple narrative that mindfulness practices were excised from Buddhism and secularized.

Dialectical Behavior Therapy is likely the most influential mindfulness-based modality currently in clinical use. Its founder, Marsha Linehan, states that she designed it in a markedly different way from MBCT. Linehan (e.g., 2007) denies having extracted an item called mindfulness from Buddhism to translate it into secular scientific terms. Instead, she says she extracted the term mindfulness from *science* and used it to stand in for the Zen Buddhist practices she sought to translate for therapeutic use. Linehan's larger project parallels those of Kabat-Zinn and the MBCT team. She does say she aimed to construct a "Zen but without the Buddhism."¹²³ But she also states that she came across mindfulness completely independently of these colleagues. She indicates that she did not even know of the term mindfulness' Buddhist association when she chose it. She was actually attracted to the word because, to her, it referred to scientific psychological concepts.

When I brought [mindfulness] in, I did what could be essentially considered to be a behavioral translation of Zen. I used the word 'mindfulness' because in psychology they have a lot of research on mindfulness, which is mindfulness versus mindless or automatic behavior versus behavior with awareness. So I thought mindfulness sounded like a psychological word and actually did not know that it was such a major spiritual word. I thought I was picking as a psychologist, because I am sitting here looking at Langer's book on mindfulness right on my bookshelf which is research, psychological research. (Linehan 2007)

¹²³ Marsha Linehan, interview with David Van Nuys, Wise Counsel, podcast audio, October 20, 2007, http://www.mentalhelp.net/poc/view_doc.php?type=doc&id=28746

Kabat-Zinn employs the word mindfulness in the creation of MBSR because, though he learned it through his Buddhist practice, it would be unrecognizable to those who didn't. Perhaps Kabat-Zinn's speculation is borne out by Linehan's reported experience. She apparently did not encounter the term in her own Zen practice and knew it only as a "psychological word." The "Langer's book" that led Linehan to mindfulness was Harvard social psychologist Ellen Langer's 1989 volume, *Mindfulness* which presented her experimental research on memory. Rhys Davids chose mindfulness as a translation for *sati* because he adduced it to have valences beyond memory. But it was the term's psychological association that led Linehan to employ it in her "behavioral translation" of Zen practices.

It may have been a coincidence that Kabat-Zinn and Linehan both stumbled upon the same word, mindfulness, in their translating religion approaches. If so, it is an even greater coincidence that Steven Hayes used mindfulness practices at all in his methodology. Hayes' Acceptance and Commitment Therapy is the third central mindfulness modality in psychotherapeutic use today. But Hayes states that "there was no conscious attempt to base ACT on Buddhism per se, and my own training in Buddhism was limited." (2002, 58). Later, Hayes did create an association between ACT and Buddhist traditions: he discusses parallels between their core ideas at conferences and in journals.¹²⁴ But he denies a direct connection in the formulation of his therapy. The previous section considered whether mindfulness practices were already so

¹²⁴ Hayes thinks that finding these parallels could potentially be all the more useful because they were unintended. "It is one thing to note how Buddhist philosophy and practices can be harnessed to the purposes of behavioral and cognitive therapy. It is another to note how the development of a behavioral clinical approach has ended up dealing with themes that have dominated Buddhist thought for thousands of years" (2002, 58). Hayes expresses a sentiment similar to those we heard from Franz Alexander in Chapter One, that there may be common truths at work if his theories ended up dealing with the same themes addressed in Buddhist thought.

transformed from historical versions that therapists translated them very little for secular biomedical use. Hayes speaks of a mindfulness that is completely estranged from Buddhist teachings. He too incorporates mindfulness practices to foster acceptance and non-judgement, but is not aware of having acquired them from Buddhist traditions. Both Linehan and Hayes' stories provide a last reason for questioning the idea that translating religion approaches are pure cases of secularization. In the case of Hayes, his therapy may no longer qualify as a translating religion approach at all. Unless Hayes was translating Buddhist concepts without realizing it.

When Hayes writes that "there was no *conscious* attempt to base ACT on Buddhism per se" he inserts a caveat in an otherwise clear statement. This caveat might offer explanation for how Hayes could have unknowingly used concepts and practices derived from Buddhist traditions. (Besides the uncanny synergistic flow or mysterious alignment of the universe.) Hayes may have acquired Buddhist elements from the larger cultural milieu without being conscious of it. He may have been translating Buddhist items for secular audiences without realizing it. Hayes could be viewed as evidence that, as Bender says, "modern people can be religious without knowing it" or "can be secular without knowing it" (2012, 286). On the one hand, Hayes may be carrying forward secularization processes already in action. Perhaps the concepts of mindfulness and acceptance that Hayes built into his methodology really were at one point Buddhist. However, perhaps they were already so fully translated into secular terms when Hayes got to them that their origins were concealed. His use of these practice would only further reinforce the secularization of once-Buddhist items.

On the other hand, Hayes could be viewed as an unwitting participant in the transmission of Buddhist traditions rather than their secularization. In fact, he could be illustrative of a basic feature of Buddhist transmission and cultural diffusion generally. In his study of early representations of Buddhist traditions in British popular literature, Jeffrey Franklin (2008) argues that Buddhist ideas became so absorbed into Edwardian England that they were no longer identified as Buddhist. In cultural diffusion, some new elements may always be fully assimilated when introduced into new communities to the point where they are no longer recognizable as “foreign.” Above, I surveyed the scholarly and cultural commentary that interprets translating religion approaches as secularizing forces. In the next section, I review counter-vailing arguments that they actually contribute to Buddhist transmission. These claims are often based in comparisons to previous instances when new communities first learned of Buddhist teachings and practices.

Historical Precedents for Psychotherapists’ Active Agency

Scholars like Jeff Wilson and Francisca Cho have argued that “the mindfulness movement” (as Wilson calls it) is a form of Buddhist transmission. They suggest that the reconstruction of Buddhist rituals for practical benefit “is actually,” as Wilson says, “how Buddhism moves into new cultures and becomes domesticated” (2014, 3). Cho (2012) employs the concept of “cultural translation” to describe this dynamic. She explains that cultural matter is always transformed, just as language, when translated for new

communities.¹²⁵ Further, the first cultural elements to be attractive are those that offer practical benefit. She sums this up in the dictum:

Praxis precedes theory. In other words, when two different cultural traditions come into contact and substantially engage, it is the perception of practical benefits that will determine which concepts are appropriated and translated (or mis-translated, as is often the case) (2012: 276).

Wilson states that “we should not be surprised” by psychotherapists’ behavior, for “what at first seems like a development without precedent. . .actually reflect significant patterns within Buddhism’s Asian history” (105). The precedent that Wilson uses to support his case is usually “the Japanese assimilation of Buddhism.” Cho, meanwhile, cites medieval China.

Research on the introduction of Buddhist traditions into locations like medieval China could substantiate Wilson and Cho’s arguments. A scholar like Christine Mollier (2008) studies “Buddho-Taoist relationships” in medieval China. She describes particular “ritual procedures” in the “religious marketplace of medieval China” that held “the reputation and adaptability” which

whether for exorcistic, prophylactic, or therapeutic ends, conferred on them the capacity to traverse the permeable boundaries separating Buddhism and Taoism without losing their original features, while at the same time forging a path among parareligious specialists in order to serve more pragmatic goals. . .Removed from their devotional context and more or less emancipated from their canonical moorings, such Buddho-Taoist traditions became, in Dunhuang, the main constituents of pragmatic procedures, whether astromedical or mantic. Thus somehow ‘desacralized,’ they were nonetheless not demoted to the jumbled realm of despised ‘superstitious practices.’ (2008, 211)

Perhaps, therapeutic mindfulness practices are contemporary instances of “pragmatic procedures. . .removed from their devotional context” and “emancipated from their

¹²⁵ William Parsons (2010) has also raised the possibility that we might think of these phenomena in terms of cultural translation.

canonical moorings.’” Of course, Mollier depicts medieval practices as borrowed “without losing their original features.” This is highly contested in the debate surrounding mindfulness practices.

Pierce Salguero’s (2009, 2010a, 2010b, 2014) analyses of medieval Chinese religious phenomena could provide further resources for a Wilson or Cho. Salguero examines Chinese responses to Buddhist traditions in general and Buddhist healing practices in specific. More than only using translation as a metaphor, Salguero extensively applies translation theory as a model for cultural diffusion. He argues that Chinese communities alternatively used “foreignizing” and “domesticating” strategies and tactics in their transmission of Buddhist medical teachings and practices. “Imported knowledge,” he says, was taken up and

translated strategically in dialogue with a variety of domestic standards, norms, and preferences, and [put] to specific sociopolitical purposes in the target culture. Translators and authors frequently made choices to couch certain types of Buddhist medical knowledge in foreignizing, exoticizing terms in order to mark it as novel, unique, or specialized. [But] just as often, and within the same texts, they decided to deploy familiar Chinese concepts and vocabularies in order to explain foreign ideas to their readers in ways that would both appeal and seem accessible. (2014, 85)

Salguero says he must peer into the “black box” of medieval translators’ minds to ascertain their aims and intentions (2014, 9-11). Those translators past centuries ago. But we can listen to the stated intentions of present-day mindfulness practitioners. Many are transparent about their decisions to variously employ domesticizing or foreignizing language depending on audience. A figure like Kabat-Zinn “domesticates” religious-identified practices by translating them into secular scientific terms for certain audiences. For others, he “foreignizes” them by unfurling their ancient origins.

Salguero's analyses are undergirded by the thesis that human beings are capable of making intentioned choices. He presumes that communities choose the translation strategies they use to assimilate and disseminate new cultural material. Many interpretations of mindfulness practitioners assume the opposite. Cultural critics tends to treat psychotherapeutic communities as passive conduits that reified entities like "secularism," "capitalism" or "Buddhism" flow through for their organismistic spread and survival. We read, for example, Wilson earlier proclaim that "this is how Buddhism moves into new culture and becomes domesticated." Alternatively, clinicians can be interpreted as "secularizing without knowing it." In the minds of psychotherapists, however, cultural translation does not occur through the unconscious forces of the spirit of history. They believe themselves to be active agents freely shaping these processes. Scholars like Salguero and Company emphasize this point in their study of Chinese communities' response to Buddhist traditions. Salguero asserts that "far from passively being influenced by transmitted knowledge from abroad, [medieval Chinese communities] actively retooled these imports to fit with Chinese intellectual concerns, to mesh with preexisting literary and cultural conventions, and to forward their own political and economic interests' (2014, 3). Company has long discouraged conceptualizing "-isms" (e.g., secularism, Buddhism) "as agents acting on people (or on each other)" (2012b, 107).

Multiple scholars propose the interpretation that psychotherapists are engaged in cultural translation.¹²⁶ What has thus far gone unmentioned is that, as we've already seen instances of, psychotherapists too use the same metaphor of translation as model for their

¹²⁶ Besides Cho, William Parsons (2010) has also raised the possibility that we might think of these phenomena in terms of "cultural translation."

enterprise. We heard clinicians like Teasdale express excitement at Kabat-Zinn's ability "to translate the essence of Buddhist meditation." Linehan named DBT a "behavioral translation" of Zen practices. Kabat-Zinn repeatedly declares his enterprise to be "translational work" (e.g., 2011b, 36). Further, clinicians also liken their own "translational work" to that conducted in medieval China. They do this for particular purpose. At times, therapists indicate that they have successfully secularized Buddhist teachings and practices for therapeutic use. But, as we will see in more detail, they also respond to condemnation of such activity with protestations that they actually only translate Buddhist teachings just as in medieval China. This is another point that is largely missed in current literature on this subject. Believing themselves to be active agents with free will, clinicians adjust their translating religion approaches in reaction to the interpretations of so-called "outside" observers. Another reason that it is futile, then, to seek a definitive conclusion as to whether these activities are religious or secular is that participants' intentional maneuvers confound definitive interpretations.

In the next section, I explore this important aspect of therapists' translating religion approaches to Buddhist traditions. Clinicians who once aimed to translate elements like mindfulness practices into secular items react to critique by claiming their modalities are still authentically Buddhist. When commentators criticize or defend clinicians who take translating religion approaches they may imagine they do so on a rarified plane hovering context-free above the microscope. But psychotherapists have heard the trepidation of Buddhologists and Buddhist practitioners for decades now. Moreover, they have expressed concerns of their own. Clinicians may not stop using mindfulness practices after hearing scholarly rebuke. But they offer surprising answers

that reposition themselves in relation to the categories religion and secular, medicine and science.

Outside Observers and Inside Ears: Therapists Respond to Criticism

What first attracted my attention to the September 2014 meeting held by the Institute of Meditation and Psychotherapy in Cambridge, Massachusetts was its title: “Returning to our Roots or Uprooting Tradition? Critical Conflicts in the Interface Between Buddhist and Western Psychology.” Among the conveners of this conference were clinicians like Christopher Germer, Ron Siegel, Susan Pollak, and Paul Fulton. Less strictly aligned with cognitive-behavioral therapies than integrative approaches, Germer et al. were pivotal figures in the incorporation of mindfulness meditation practices into clinical practice. They published central texts like *Mindfulness and Psychotherapy* (now in its second edition). Now, however, they had adopted the question of decontextualization and secularization of religious traditions to title what was announced as IMP’s first annual conference.¹²⁷ The recent IMP conference exemplifies an increasingly visible aspect of psychotherapists’ approaches to Buddhist traditions. The same concerns raised by cultural commentators can be heard within the communities engaged in these activities.¹²⁸ When I interviewed the conference’s organizers about this, in the days and

¹²⁷ Though it was billed as IMP’s first annual conference it is actually a continuation of like conversations that have been going on for some decades now. Christopher Germer, Ron Siegel, Susan Pollak, and Paul Fulton, have participated in a study group together since the late 1970s-early 1980s. Through their positions at Harvard and the Cambridge Health Alliance, Germer, Siegel et al have hosted a series of conferences over the years that I once attended purely as a participant. This meeting was in many ways typical though on the smaller end: nearly a hundred attendees able to afford the registration fee, by appearance virtually all Anglo and an over 2 to 1 ratio female to male.

¹²⁸ Though this question about deracination was core to the conference, speakers also reported on research findings challenging the efficacy of mindfulness meditation as a treatment intervention as well as its possible deleterious effects, (e.g., a potential precipitant of psychotic episodes). Bubbling up in the

weeks following, they historicized the emergence of these deliberations into a linear narrative: Pollak told me that they signal mindfulness’ “coming of age” (11/18/14).¹²⁹ Germer stated that they “represent in some respects a maturation of the field” (11/11/14).¹³⁰

A figure like Kabat-Zinn, however, has interacted with such concerns for some decades now. A single conversation from 1997 illustrates how, in answering challenges to the legitimacy of their activities, practitioners swing mindfulness practices’ back and forth between the poles of religion and secular. While a speaker at what still advertises itself as “the First ‘Buddhism in America’ Conference,” Kabat-Zinn was directly confronted by an audience member’s critique of the consumeristic underpinnings of MBSR. Kabat-Zinn’s initial responses assume the story he has always told for his development of mindfulness practices. He acknowledges that he secularized them, but reiterates that he was forced to make them acceptable within biomedical institutions. It is pragmatically necessary, he says, that mindfulness practices be refashioned into a fee-for-service technique. Without doing so, suffering people would be denied healing: “if you want to integrate into medicine, you’ve got to be able to charge the insurance companies for this” (Kabat-Zinn 1998, 505).

But then, moments later, he begins to shift his stance. He first acknowledges that his program may seem to diverge from Buddhist practice in the past. But he contextualizes his program’s for-profit status within a contemporary for-profit society

relatively few hours of the meeting, speakers and participants noted the “monochromatic” racial make-up of the audience and expressed concern that “we’re making those who developed these practices invisible and these are largely people of color who have been oppressed.” I heard talk of “neo-colonialism” and “neo-liberalism,” “cultural appropriation” and “moral anesthetics.”

¹²⁹ Interviews were conducted in person on September 13, 2014 and by phone on November 14, 2014.

¹³⁰ Interview was conducted by phone on October 11, 2014.

that he contrasts to “monastic cultures [where] money wasn’t necessarily part of the bargain” (Kabat-Zinn 1998, 505). This is of course a fantastical projection based on a number of faulty and fascinating assumptions about the history of Buddhist communities (see, e.g., Gernet 1995). The incorporation of mindfulness practices into health economies becomes a constituent part of Buddhist transmission: “When Buddhism goes from one culture to another,” he says “it very often adopts a good deal of what is present in the culture that it’s landing in. Well, if we’re known for anything in this country, it’s money. . . It is the measure of value, in some ways” (Kabat-Zinn 1998, 505). Mindfulness practices’ classification as secular or religious can, thus, intentionally be made to vacillate moment by moment within a single conversation.

At the IMP conference I observed, meanwhile, influential psychologist Paul Fulton, appealed to history in a slightly different way. First, Fulton also described the emergence of mindfulness practices in corporate settings as an opportunity to spread Buddhist teachings:

Mindfulness is now sold to corporations to improve the performance of its entrepreneurs. [Beat] But so what? [Big laugh from group] Maybe people who would never otherwise touch Buddhist practice find a course in mindfulness for hedge fund managers, and find it *deeply* helpful. And hedge fund managers are people too. I recently read something from Thich Naht Hanh in which he was quite clear that every country needed to find its own way of practice.

Fulton and Kabat-Zinn thus present the same historical interpretation of “the mindfulness movement” of Wilson and other scholars. And they use remarkably similar language; both Wilson and Kabat-Zinn speak of a reified “Buddhism that moves into one culture after another.” Kabat-Zinn, however, makes this argument to legitimate his actions to a questioner. Psychotherapists have clear motives behind their claims to be engaged in “translational work” consistent with those of the past. When religious studies scholars

argue that these activities are a contemporary case of Buddhist transmission, they give support to this positioning. They too do not only describe the phenomena they observe, but normalize it as cohering to a discernible historical pattern. The interpretations of so-called “outside” observers are anything but outside. Psychotherapists adjust their behavior in response to criticism. They will sometimes cite historical studies as evidence that they only follow in the tradition of earlier communities who similarly adapted Buddhist teachings and practices.¹³¹

Psychotherapists actively maneuver their activities’ definitions between religious/secular in response to outside concerns. But they have also raised their own questions without outside prompting. Over a decade ago, Linehan expressed concern about the translation of mindfulness practices into secular items.

Although the secularization of mindfulness has undoubtedly been pragmatic in an effort to make the treatment models accessible to as many clients as possible, it is also possible that something is lost in the separation of mindfulness from its spiritual roots. (Dimidjian and Linehan 2003, 167)

Linehan’s worries that, without “spiritual” frameworks, the effectiveness of mindfulness practices could be reduced. Perhaps, their full potential is only activated if taught in traditional ways by traditional teachers.¹³² Linehan’s solution continues to be based on a hard borderline between the secular scientific and the religious (or spiritual).

¹³¹ Of course, Kabat-Zinn in the above dialogue locates his use of mindfulness within histories of Buddhist traditions, but it was at this same conference that he made frequently quoted and quotable remarks like “I really don’t care about Buddhism it’s an interesting religion but its not what I most care about.” Kabat-Zinn says here that he is not interested in translating Buddhism, but translating mindfulness *out of* Buddhism.

¹³² Linehan thus raises issues of authority by questioning the state of “therapist training and competence” something I heard echoed in interviews with Christopher Germer and Ron Siegel. As the training of mindfulness practices becomes increasingly decentralized, once authoritative figures for their transmission cease to be exclusive access points, and, from their perspective, lose the ability to ensure their accuracy and authenticity. Therapists frequently answer criticisms of their activities by stating that they only apply to inauthentic or improper usages of mindfulness. Back in 2003, Linehan called for a more reliable and verifiable method for certifying clinicians’ qualifications to be mindfulness practitioners and a new industry was already sprouting up then from institutions just like IMP to deliver those certifications.

Psychotherapists, belonging firmly to the secular biomedical sphere, should work in concert with differentiated “spiritual teachers” (Dimidjian and Linehan 2003, 167). Maintaining their difference as scientific practitioners, clinicians might introduce mindfulness practices in psychoeducation groups. But they would then refer out in-depth training to religious figures –as mindfulness practices are their property.

Linehan wonders whether a religious practice remains effective for symptom reduction when translated for biomedical secular spheres. But, as exemplified by the IMP conference, psychotherapists also worry that, when translated, mindfulness practices might no longer transmit Buddhist truths. Here clinicians’ commitments are to the Buddhist traditions they affiliate with. At these times, these therapists seem to suggest that they are taking what I am designating as adopting religion approaches. They adopt Buddhist aims, as they understand them, as the ultimate purpose of their therapies. Paul Fulton, for example, answers the conference title’s question by concluding that there is no need for anxiety that he and his cohort are “uprooting tradition.” He argues that there is an essence to Buddhist teachings, what he called “the Dharma.” This Dharma will always be achieved if mindfulness practices are diligently performed. This would be the case regardless of the motive that initially drives that practice or the context in which it is taught.

When we speak about the Dharma as the sort of nature of things, the truth of how things happen, I’m not so concerned because it will remain untouched. We can’t do it any harm; it is durable; it is beyond form.

Here mindfulness practices become carriers of essential truths, “the nature of things,” that would thus transcend categorization. Such Truth would be neither religious or secular. It is Truth. This, of course, could represent yet another major retranslation of mindfulness

practices. Such a translation again problematizes totalizing interpretations of psychotherapists' translating religion approaches. In the next section, I more fully examine this shift and its implications.

Mindfulness Under (Re)Construction: From Third Terms to Umbrella Terms

Clinicians like Kabat-Zinn and Teasdale tell the story that they extracted mindfulness practices from Buddhist traditions and translated them into secular terms. The public rehearsal of this narrative simultaneously defines mindfulness practices as both religious and secular. In the following section I describe psychotherapists' tactics to resolve this tension. Tactics that only further destabilize the classification of therapeutic mindfulness practices.

First, clinicians today describe mindfulness practices as present not only in Buddhist traditions, but all religions. This mirrors the discourse often used throughout the contemporary U. S. to define the category of "spirituality." Mindfulness (or spirituality) may be what is most essential in religious traditions, but it is not religious itself. This idea is often evoked as a response to the criticism that the use of mindfulness practices in public secular spheres like hospitals promotes one religious tradition, Buddhism, over others. Descriptions of mindfulness practices as perennially present across cultural contexts are now ubiquitous (e.g., Siegel 2007, 2010). And the development of major mindfulness modalities like DBT and ACT could support this claim.

Marsha Linehan reports that she did not only translate Zen practices for secular psychotherapy. She says she also incorporated Christian contemplative and other

“spiritual traditions.” Hayes did not consciously seek to bring Buddhist content into his psychotherapy at all. But in a personal interview he clarified that, at the time he developed ACT, he was steeped in experimentation with not only Asian religious material, but what he described as mystical practices writ large.¹³³ Hayes’ story may evidence that mindfulness practitioners do not so much translate Buddhist elements for biomedical use, but the practices of more general U.S. liberal religious forms. U.S. liberal religious traditions, as described by historians like Schmidt (2012) and Albanese (2012), have sources in the movements of William James, New Thought, and Emersonian transcendentalism mentioned in Chapter Two. These influences were swirled together in the hippie movements to which Hayes and many other mindfulness practitioners belonged. Hayes stated it plainly in our interview:

I drew on my cultural familiarity, which was there inside my entire generation. Some of what we are seeing in the third wave [of behavior therapy] and all that is nothing more—I hate to say it this way because it sounds like it’s trivializing it—but the hippies grew up and are driving the bus. (Hayes 11/15/14)

Infused with this material, mindfulness practices may have taken on a religious (or spiritual) tenor all of their own.

Wilson devotes an entire chapter of his *Mindful America* to explaining that “the mindfulness movement” is “doing the work of religions” (2014, 161). Point by point, he qualifies “the mindfulness movement” to be classified as religion based on multiple criteria (e.g., he indicates that “the mindfulness movement” “posit[s] a theology of human nature;. . .primary sources values for human culture,” etc. 2014, 170). Changes in how Hayes has presented ACT over time may illustrate how quickly mindfulness practices have been redefined as religio-spiritual. In my conversations with mindfulness

¹³³ Interview was conducted by phone on November 15, 2014.

practitioners, I repeatedly heard the same phrasing: when describing their work to others, there were times they felt it necessary to stay mum as to “the B word.” In my interview with Hayes, however, he went further indicating that “I was always afraid of ‘the M word’ and ‘the B word.’ You do not see the ‘M word’ or ‘the B word’ early on in my writings.” Once specifically chosen because it was free of religious resonances, for Hayes, even the word mindfulness now needed to be translated away for secular audiences. Hayes’ first writings mention “acceptance-based” more than mindfulness-based techniques. It was only after mindfulness practices attracted popular interest that this language changes. When the earliest volume published on ACT, *Acceptance and Commitment Therapy: An Experiential Approach to Behavior Change* (2004), was re-released it was given a new subtitle to capitalize on this demand, *Acceptance and Commitment Therapy, Second Edition: The Process and Practice of Mindful Change* (2011).

Mindfulness practices may today be known by the wider public as less than wholly secular. But clinicians also portray them as free of those aspects of religion they perceive to be negative. Fulton argues that the essential truths, “the Dharma,” that mindfulness practices transmit are scientifically verifiable. Mindfulness becomes one of Bender and Taves’ (2012) “third terms,” an alternative to both religion or secular.¹³⁴ Even Kabat-Zinn has been key in advancing this construction. He declares authentic mindfulness practices to impart the core knowledge of all religious and scientific biomedical traditions, thus transcending them altogether (Kabat-Zinn 2011a, 290). He

¹³⁴ Many therapists today appeal to one of the most culturally ubiquitous third terms, “spirituality,” when discussing the origins of mindfulness practices. Linehan, for example, referred above to the “spiritual roots” of mindfulness rather than “religious roots.”

does not want to translate mindfulness into a ‘third term,’ however, but an ‘umbrella term.’ He says that he aims to use

the word *mindfulness* intentionally as an umbrella term to describe our work and to link it explicitly with what I have always considered to be a universal dharma that is co-extensive, if not identical, with the teachings of the Buddha, the Buddhadharma. By “umbrella term” I mean that it is used in certain contexts as a place-holder for the entire dharma, that it is meant to carry multiple meanings and traditions simultaneously, not in the service of finessing and confounding real differences, but as a potentially skillful means for bringing the streams of alive, embodied dharma understanding and of clinical medicine together. (2011, 290)

Kabat-Zinn acknowledges that mindfulness today functions as an empty signifier, used to refer to a whole host of concepts and practices designated as both religious and biomedical. He believes this not to be an accidental consequence of acculturation, but an intentional result of his active agency.

At the IMP conference, Chris Germer shared Kabat-Zinn’s recent declarations with the audience and contrasts it with other definitions of mindfulness practices reviewed in this chapter. Germer seeks to answer the

many critics [who] say that we have denatured mindfulness. But what have we denatured if we’ve done it? What’s mindfulness?. . . [A definition] we’ve come up with [is] “mechanisms of action,” different, like, subcategories of mindfulness such as attention-regulation, body awareness, emotion-regulation, reappraisal, exposure, flexible sense of self. So I made this point at a conference at MIT a couple of months ago . . . and Jon [Kabat-Zinn] and I were on the same panel. Jon, when I said this, he said, ‘I don’t like mechanisms of action.’ And at this conference he defined mindfulness as, check this out, ‘A placeholder for the most universal expression of the dharma.’ A placeholder for the most universal expression of the dharma, that’s mindfulness in Jon’s view.

There was, to my ears, an audible reaction from the participants, a murmur if not something close to a snicker. In the weeks following, I found that Germer, Siegel, and Pollak had had similar perceptions of the audience’s response. They also all had similar

explanations for what we had heard. As Ron Siegel said,¹³⁵ “the murmur is because Jon created MBSR and got mindfulness practice into the medical community by using language that was extremely non-religious sounding and by really keeping it at arm's length from Buddhist practice. . .The interesting thing is Jon is now saying publicly what most of us I think, you know, have felt that Jon believes privately” (9/15/14).¹³⁶

This episode displays the ongoing and unstable processes of retranslating religion. We are allowed to listen as psychotherapeutic communities actually react and respond to the situation and re-situation of mindfulness practices as religious, secular, scientific and spiritual. Germer responds to the critique that psychotherapists denature mindfulness practices by arguing that there is nothing to denature. He repeats Dan Siegel's definition of these practices as neutral life skills. And, indeed, the phrase “mechanisms of action” sounds eminently scientific. But Kabat-Zinn rejects this understanding of mindfulness. He wants one that is far more expansive; so expansive that it includes the religious, the secular, and everything in between. The gathering at the IMP conference marvels at the irony that he would lead that charge. In the concluding section, I will look at a final way of conceptualizing these processes. We may tire of the question of how to define the religious or secular, but we will see that communities themselves are highly engaged with them.

Lost in Translation: Is Mindfulness Secularized Or Just Disguised?

For both psychotherapeutic communities and their observers, what is often most at issue in translating religion approaches is what, if anything, is lost in translation. Has the

¹³⁵ Interview conducted by phone on September 15, 2014.

¹³⁶ I should note that none of the therapists actually disagreed with Kabat-Zinn on this point.

religious or Buddhist really been expunged or is it just in hiding? We see that Kabat-Zinn and Fulton feel bound to answer these questions. Their answer is that mindfulness practices transmit certain truths that transcends categorization. (Though, it is notable that Fulton and Kabat-Zinn employ an un-translated, Buddhist-associated Sanskrit word here, the “Dhrama,” even as they claim these truths are not exclusive to Buddhist traditions.)

At the same time, Teasdale and others believe they have succeeded in fully secularizing Buddhist elements into scientifically-approved techniques. In today’s graduate training programs, countless clinicians are instructed in the use of mindfulness practices by teachers who themselves have little notion of their Buddhist origins. Multiple generations of psychotherapists now only know mindfulness as a purely secular treatment intervention. Psychiatrist Edel Maex (2011) picks up the metaphor of translation to decry mindfulness practices’ apparent complete detachment from their Buddhist origins. He observes that most people learn only secularized mindfulness practices and endeavors to “*back-translate*” the Buddhist content within them. (Of course, the Buddhism Maex brings out is of a particular sort – absent of concepts like the cycle of rebirth, merit, or *bodhisattvas*.)

Meanwhile, as Ron Siegel told me, “those of us in the know” never had a need for back-translation, “those of us in the know immediately recognized it.” For them, the most secularized versions of mindfulness were always Buddhist items in disguise, smuggled into secular spheres under cover of darkness. Scholars like Wilson seem to concur when referring to these activities as “crypto-Buddhism” (e.g., 2014, 94).¹³⁷

¹³⁷ When Wilson uses this term “crypto-Buddhism” drawing on a concept with a long history for Protestant anthropologists of religion making sense of “syncretism.” Robbins (2011) recent work on crypto-religions is especially useful for elucidating how the concept was strategically employed by Protestant anthropologists to make sense of the ‘syncretism’ of religious others.

Therapists have long declared that in forms like mindfulness practices “the Dharma is so disguised that it could never be proven in court” (Goleman 1985). Scholar Candy Gunther Brown (2014) has *literally* testified in court that secularized religious items actually do retain their religious roots. For Brown (2013), there is a dangerous deception at work. Practices like mindfulness meditation are permanently marked as religious, to her mind, and their use violates the secularity of public spaces like schools or hospitals. They endanger Christians seeking secular healing, not suspecting that they will be asked to practice a religious tradition dissonant with their own. Of course, Brown’s interpretation ignores what was reviewed in the Introduction: the fact that secularists advance a “secular” that is itself based on prototypical Protestant frames (encapsulated by the very Christocentrism of the phrase “separation of church and state”).

Nonetheless, Brown seizes on the comments of clinicians like Fulton who refer to mindfulness practices as “Trojan horses” for Buddhist truths. Such therapists also suggest that, again, because they are *practices* their translated treatment methods still transmit Buddhist enlightenment. Regardless of the motives that drive people to take them up or the theories used to explain them, practices are understood to be akin to recipes which, if followed precisely, will always yield the same results. And in the private, what Teasdale called above “personal,” black boxes of their originators’ minds mindfulness practices were always once-religious items. Further, many therapists believe that practices incurably signify religiosity even when renamed “attentional control training.” This assumption is what drives clinicians when they take personalizing religion approaches.

CHAPTER 4

“TO KEEP MEDITATION RELIGIOUS” AND PSYCHOTHERAPY SECULAR PERSONALIZING RELIGION APPROACHES

“Returning to our Roots or Uprooting Tradition?”: The Institute of Meditation and Psychotherapy chose this to question to name the conference I participant-observed. While this title expresses a concern about “uprooting traditions,” the meeting’s participants were more anxious about a different possibility. They worried that mindfulness practices could today be used in institutions (e.g., the military, corporate, etc.) for unwholesome ends. The speakers evoked an increasingly common solution to this problem. They suggested that mindfulness practices should be *recontextualized* back into Buddhist frameworks. Right mindfulness could be taught in concert with additional aspects of the Eight Fold Path like right speech and right livelihood. This would free communities from the hindrances of greed, delusion, and ignorance that undergird oppressive politico-economic ideologies.¹³⁸

If the humanistic psychoanalyst Erich Fromm had attended the IMP conference he would have been sorely disappointed to hear such conversations. As I will discuss in more detail, Fromm believed that mindfulness practices were assured to bring liberation from authoritarian or capitalist systems. Fromm even implies that mindfulness meditation was impervious to a capitalization he perceived other Asian religious items to have succumbed to in the United States. Fromm spoke from his own experience; he was one

¹³⁸ This also illustrates the extent to which recent forms have supplanted a historical *Satipatthāna* founded on ethical cultivation, discerning wholesome from unwholesome. Psychotherapists believe new supplementary elements are now necessary to conduce Buddhist ethical aims.

of the first psychotherapists to practice what is today called mindfulness meditation. And his teacher was none other than Nyanaponika Thera himself. Fromm's interest in the Zen of D.T. Suzuki is well known, oft-mentioned as a significant episode by general observers of "Buddhism in the United States." But his friendship with Nyanaponika, charted in the two's archived and currently unpublished correspondence,¹³⁹ is virtually unknown.¹⁴⁰ It is important, however, in part because it represents a bridge between the approaches to Buddhist traditions of psychoanalytically-informed clinicians and mindfulness practitioners.

Speakers at the IMP conference claimed that mindfulness practices are uniquely suited to generate a complete ethical transformation in practitioners (even when taken up in corporate settings). Fromm had advanced a similar proposition back in the 1970s. Fromm believes that the meditation he learned from Nyanaponika was capable of liberating practitioners from psychological bondage to authoritarian structures. Used as a

¹³⁹ I am extremely grateful to Fromm's archivist, Rainer Funk, for granting me access to Fromm and Nyanaponika's letters. The two's archived and currently unpublished correspondence, written in between Nyanaponika's visits to Locarno, Switzerland where Fromm ended his life, included as much discussion of their health issues as Buddhist doctrine. Though, of course, this was not always mutually exclusive: Nyanaponika offers counsel in the letters on how Buddhist teachings can help the two endure their physical ailments. The letters exude a palpable warmth and mutual admiration as the two brainstormed on how to increase the circulation of Nyanaponika's writings. Not knowing that Nyanaponika had already found U.S. publishers for some of his work, Fromm offered to connect him with some of his publishing contacts. Nyanaponika was still hopeful that the two might find a way to improve the U.S. public's access to his writing.

¹⁴⁰ As told by Fromm's biographers, Rainer Funk (2000, 162) and, more recently, Lawrence Friedman (2013, 293–295), Fromm was introduced to Nyanaponika by a mutual friend, previous director of the Leo Baeck Institute, Max Kreuzberger. The three connected over their shared experience of, born Jewish in Germany, being forced to flee the Nazi menace. One reason the two's connection has been so rarely mentioned is that it was only in recent years that Fromm's archived material was published on the topic. Fromm removed pages he had written on the transformative potential of what he simply called "Buddhist meditation" along with the rest of a section titled "Steps toward Being" from one of his last books to be published in his lifetime, *To Have or To Be?* (1976). Rainer Funk, Fromm's archivist, states that Fromm "withdrew the chapters on 'Steps Toward Being'. . . because he believed that his book could be misunderstood to mean that each individual has *only* to search for spiritual well-being in the awareness, development, and analysis of himself without changing the economic realities that produce the having mode" (1992, vii). The result, however, is that his writing about these individual or "personal" practices were removed from what was published in the public eye.

“step towards being,” practitioners would learn to resist submission to consumeristic automatization (1992, 49-55). And yet, however enthusiastic he was about meditation, Fromm would never have incorporated it into psychotherapy sessions. Fromm might have thought that analysts and analysands alike could benefit from a personal meditation practice. In fact, there were certain aspects of all religious traditions that could foster psychological health. But the religious is to be kept separate and distinct from secular-designated psychotherapy. Fromm thought that Buddhist doctrine held deep psychological knowledge that should inform psychotherapists’ theories. But these contributions would remain theoretical, invisible in the secular psychotherapy office. Held silently internal in the person of the therapist, Buddhist truths are *personalized*.

In the following chapter, I discuss *personalizing religion* approaches to Buddhist traditions like Fromm’s. I first explain the defining characteristics I find in these approaches and why certain communities of psychotherapists are attracted to them. I argue that clinicians’ personalizing religion approaches arise out of their understandings of religion/secular and psychotherapy’s relationship to these categories. Therapists develop these approaches to incorporate aspects of religious traditions while still preserving their psychotherapies’ secularity. I first re-emphasize an important connection between translating and personalizing religion approaches in this regard. In translating religion approaches, Buddhist practices are excised from theoretical frameworks and incorporated into psychotherapy. But, in personalizing religion approaches, theories can inform psychotherapists while actual Buddhist practices are eschewed. To illustrate this point, I survey the treatment of Buddhist traditions by prominent psychoanalysts like

Karen Horney. Horney is now famous for theoretical investigation of Buddhist thought. But this interest appears to remain at a theoretical level.

I then provide a deep exploration of a singular therapist to take personalizing religion approaches to Buddhist traditions: the aforementioned Fromm. Fromm's treatment of Buddhist teachings is not only worth extended attention because it is so famous. His personalizing religion approach is also both distinctive and highly influential. Somewhat uniquely, Fromm actively grapples with the definitions of terms like religion and secular. And his methods for, for example, resolving an imagined conflict between religion and science are not only representative of therapists, but the wider culture today. I ultimately contend that Fromm's efforts to ward off the interpretation that he contributes to the secularization of society, surely complicates such a claim. And yet his efforts cannot be entirely successful given the very nature of these classifications. To further illustrate this, I finally introduce two contemporary psychotherapists, Barry Magid and Polly Young-Eisendrath. Magid and Young-Eisendrath exemplify that psychotherapists' personalizing religion approaches are generated from a desire to preserve the differentiation between religious and secular. But they simultaneously blur the boundary-lines between them.

Religion/Secular, Practice/Theory, Personal/Professional

In this section, I analyze psychotherapists' personalizing religion approaches to Buddhist traditions and their major features. The therapists who take these approaches find deep truths in Buddhist doctrine. Buddhist teachings, to these clinicians' minds, offer unique psychological insights that were unavailable before their importation. They publish

books and give public lectures comparing Buddhist and psychotherapeutic concepts. Therapists will at times be more than only intellectually influenced by Buddhist insights. Some have a regular sitting meditation practice. Others will even lead meditation groups and establish Zendos for communities of Buddhist “converts.” A number of clinicians describe having Buddhist experiences that are profoundly transformative. They are thus often intensely committed to a Buddhist path and, at time, the preservation of an authentic Buddhist practice in the United States. But they are also as intensely committed to maintaining the secularity of their psychotherapies.

Psychotherapists resolve these dual commitments in two major ways when they take personalizing religion approaches to Buddhist traditions. First, they draw a hard borderline between Buddhist practice(s) and theoretical engagement with Buddhist teachings. Like the clinicians who take translating religion approaches, this plays off binary understandings of theory and practice (Catherine Bell’s “thought/action dichotomy”), but in the reverse. It is largely individual practices like meditation that are *translated* into secular treatment interventions. Here practices are neutral actions, decontextualizable from their religious theoretical foundations. For the therapists who utilize a personalizing religion approach to Buddhist traditions, however, practices are permanently marked as religious, again, *because they are practices*. Because practices consist of embodied behaviors they seem stronger markers of religiosity. Beliefs or thoughts can be kept silently hidden in the private space of the therapists’ mind, but practices like meditation are visible to the human eye. A particular normative view of what practices like meditation entails is often at work here: A therapist announces aloud that a session is to include meditation, demarcating the time and space. Postures are

straightened, eyes closed, even legs crossed. Attention is brought to the physical sensations of breath or a repeated mantra may be spoken, again, aloud. The idea is that a clinical supervisor observing this session through a two-way mirror would immediately deem the line between religion and secular to have been crossed. Engaging in practices materializes religiosity in embodied actions. They thus especially need avoiding if psychotherapy is to remain secular. At the same time, unlike, for example, many mindfulness practitioners, therapists who take personalizing religion approaches often engage in serious theoretical examination of Buddhist teachings. Clinicians sometimes work through intricate comparative analyses between psychotherapeutic and Buddhist concepts. They restrict themselves, however, to these theoretical exercises. Doing this, therapists believe they maintain psychotherapy's secularity even as they may derive invaluable insights from religious traditions.

The second way clinicians seek to achieve this goal is to distinguish their "personal, private" religious practice from their "public, professional" secular occupation. Here the entrance to the consulting room becomes the boundary line between the religious and the secular. Scholars of religion today debate the validity of the privatization narratives first told by Max Weber (e.g., Gorski et al 2012: 6-7, Torpey: 288-289). In these theories, religion may not be entirely eliminated from society, but is quarantined from entering public life. Whether these theories are accurate or not, many of the clinicians presume, as Teasdale did in Chapter Three, that religion is "personal," segmented off of public professional life. Many meta-psychological investigations of Buddhist doctrine are held in public at conferences like those I have observed for this dissertation. The papers presented there are then often published in collected volumes

that are also for public consumption. But, many psychotherapists understand this to be a separate, or separate part, of their professional identities. We will meet a clinician like Polly Young-Eisendrath who might have a copy of such conference proceedings on her office bookshelf. But she would never mention its contents in a therapy session.

Meanwhile, when many clinicians engage in Buddhist practice, they perceive it, like religious observance is often treated in the U.S., as something private and personal. A number of the therapists we will meet in this chapter, like Fromm, come to believe that this practice can be extremely helpful for psychological health. But they emphasize the need to keep it a separate and distinct methodology from psychotherapy. Some do not only do this to preserve psychotherapy's status as secular, scientific, and/or biomedical. A psychoanalyst like Barry Magid expresses a desire to protect Buddhist traditions from secularization. Like many taking these approaches, he begins with a suspicion of science, as conventionally defined, and is averse to "the medical model." A clinician like Magid fears that the appropriation of Buddhist practices for clinical use endangers their authentic religiosity. Maintaining a differentiation between Buddhist and psychotherapeutic realms is meant to safeguard the essential qualities of both. Consequently, however affected therapists taking these approaches are by Buddhist practice, they internalize these effects. Some indicate that their experiences with Buddhist practice are very much still present in therapy sessions. Emanating off their very person, they are, thus, personalized. Buddhist identities are seen as a part of the "therapist-as-person," but these clinicians remain silent about these identities. Of course, for many psychotherapists who take personalizing religion approaches, this is no different from any other aspect of their "personal life."

Psychotherapists who take personalizing religion approaches tend to come from psychoanalytic schools and their derivatives. The cultural norms of these communities help explain their treatment of Buddhist traditions. Many psychoanalysts do not only refrain from disclosure of religious identities in therapy sessions, but anything at all that is classified as “personal.” A restriction of explicit Buddhist teachings and practices from psychotherapy is in keeping with the conventions of psychoanalysis. Conventions that were significantly shaped by their developers’ antipathy to religion. Clinicians often take personalizing religion approaches out of a desire to both remain within the conventions of psychoanalysis and push against these conventions. Many dispute the contention that religious traditions are wholly pathological and posit that they can be a sources of healing. Erich Fromm’s efforts in this regard – to be discussed at length shortly - were formative and highly influential.

Contemporary clinicians who personalize religion largely descend from Fromm’s lineage. Today’s analysts are educated generations after so-called “classical psychoanalysis” held dominance in training programs. They have supervising analysts and professors who were themselves less dismissive of religious practice than a Freud or Alexander. Young-Eisendrath defines herself as a Jungian psychoanalyst. Magid cites Fromm as a direct influence on his work and has been privy to some of the major shifts in analytic communities of recent decades (he is married to major psychoanalytic reformer, Jessica Benjamin). We can thus gain insight into personalizing religion approaches by looking back in time to some of the early psychoanalysts to engage in these activities. In the next section, I discuss some of this history to illustrate how therapists confine their contemplation of religious ideas to theory.

In Theory. . . Mid-20th Century Psychoanalysts' Restriction of Buddhist Teachings to Theoretical Examination

Franz Alexander's *Buddhistic Training* (1931) was one of the earliest psychoanalytic treatments of Buddhist texts.¹⁴¹ By the time Alexander returned to write further on the subject in 1966, the situation had changed significantly. There was now an ever-growing interest in Buddhist traditions from psychotherapists. And it was no accident that Alexander addressed "Zen Buddhism" at this time. It was "Zen" that most attracted the attention of prominent psychoanalytic colleagues like Karen Horney and her student and chosen successor as editor of the *American Journal of Psychoanalysis*, Harold Kelman.

Karen Horney remains an important figure in psychoanalytic history and the field of psychotherapy generally. Horney's eminence has led many to make special mention of her association to Buddhist traditions in histories of "The Buddhism and Psychoanalysis Dialogue" (e.g., Parsons 2009, 2010). And her Buddhist connection is also the subject of a number of full articles from clinicians (e.g., DeMartino 1991, Westkott 1998, Morvay 1999). Commentators are left, however, combing over Horney's works for the scant public evidence of her attraction to Zen. In her published material, Horney mentions Buddhist traditions exactly thrice: twice in 1945's *Our Inner Conflicts* (162-3, 183) and once in the posthumous publication of the *Final Lectures* she gave in the last year of her life (1987, 31-34). In each of these instances, Horney employs Zen philosophy to illustrate qualities she believes analysts should possess in sessions – non-judgment, full

¹⁴¹ It's worth reemphasizing here again that Alexander only analyzed "Buddhist texts" as translated or described by German scholars.

presence, absolute “sincerity” or genuineness.¹⁴² Horney had argued elsewhere that, in the end, holding such a posture is not only necessary for psychotherapeutic treatment. As a state of being, it is actually key to all human flourishing, to “self-realization.”

Observers explain Horney’s comparisons between Zen and therapeutic qualities to be public outward signs of a private, personal theory. A theory that would not have stayed private if only Horney had lived long enough to see it come to fruition. These observers believe that Horney had begun to view Buddhist contemplative states as models for an ideal psychotherapeutic posture and a path to true healing, to self-realization (Kondo 1991, Westkott 1998). Both analysts and scholarly observers have suggested that Horney’s premature death of cancer cut short a fuller investigation into Buddhist traditions. Lacking evidence from her writings, they cite episodes from within Horney’s lifetime to make this case.

Historians like Harrington (2016) explains psychoanalysts’ experimentation with Zen during this period as the result of increased cross-cultural conversations between communities in the States and Japan following World War II. Horney participated in

¹⁴² In *Our Inner Conflicts* (1945), one of the instances is a sentence-long gesture towards Horney’s understanding of Zen philosophy which she says describes the human condition: “Philosophers of all times have stressed the pivotal significance of being ourselves and the despair attendant on feeling barred from its approximation. It is the central theme of Zen Buddhist writings.” An analysis that yields self-realization heal this “despair” of estrangement from the self. The other reference to Zen in *Our Inner Conflicts* receives more attention as it is a nearly a page long description of Horney’s concept of “wholeheartedness” which she sates is exemplified by Zen aphorisms on the importance of sincerity (or “putting forth one’s whole being” (162-3)). She acquires this extended quotation from, not surprisingly, a text by D.T. Suzuki. (1938’s *Zen Buddhism and Its Influence on Japanese Culture*). Horney’s last published mention of Buddhist traditions is transcribed from a oral lecture she gave to the final class she taught. Horney began the talk, “Free Association and the Use of the Couch,” with a quote she attributes, circuitously, to “a book on Zen Buddhism in which is quoted a passage by Eckermann from his conversations with Goethe.” The passage would not immediately suggest itself as Zen doctrine telling of the particular acumen of a headwaiter save, she explains, that the headwaiter exhibited such “absorb[tion] in his vocation,” such, we might say, “mindful serving,” that he becomes an illustration of what she says are “commonplaces of Zen because this is the very essence of Zen”: again, wholeheartedness (1987, 31-34).

such activities in a number of ways. Horney's impressions of Zen and the popular(ist) Zen teacher D.T. Suzuki were likely influenced by her colleague and former lover, Erich Fromm.¹⁴³ But, though Fromm's connection to him is more famous, Horney was actually the first to meet Suzuki in person when the thinker moved to Manhattan for a lectureship at Columbia. Additionally, Horney dialogued with other Japanese psychiatrists like Akihisa Kondo.¹⁴⁴ In the summer of 1952, she joined Kondo, Suzuki, and Suzuki's translator Richard DeMartino on a visit to Japan. According to Kondo (1991), Horney took the journey to investigate whether Zen *satori* might be a form, or the highest form of, self-realization. Horney explains that self-realization is an uncovering of one's true self. The goal of psychotherapy, in fact the goal of life, is to learn how to fully be one's authentic self. For some, self-realization comes as a powerful experience of insight. Could *satori* be such an experience of awakening or enlightenment?

In the wake of his trip with Horney and Suzuki, Kondo joined a group of clinicians in Japan who sought to integrate psychotherapeutic and Buddhist frames into singular amalgamated modalities (e.g., Morita therapy). Their counterparts in the States, however, including Horney and Kelman, took a markedly different tack to relating psychotherapeutic and Buddhist frames. While their Japanese friends "integrated" religion and psychotherapy, they personalized it. Kondo, and a number of other Japanese psychiatrists of this period, published article after article on the subject in the - notably English-language - Japanese journal *Psychologia*. Their papers preformed comparative studies between Buddhist and psychoanalytic concepts and found multiple points of

¹⁴³ For more on Horney's relationship with Fromm (as well as Franz Alexander) see especially Friedman 2013, 78-84.

¹⁴⁴ In Kondo's 1991 "Recollections of Dr Horney" reflects on his encounter with Horney as figural in his career and her invitation to present his thesis to one of her classes as a seminal experience in his life.

affinity. Findings of similarity between Buddhist and therapeutic frames was seen as establishing their compatibility. If they are compatible, then an actual synthesis between them could be possible. Kelman (e.g., 1960) and others in the States, meanwhile, published highly similar papers. But they did so without the intention of creating actual integration. Clinicians gave the same kind of serious and detailed theoretical consideration to what Zen teachings might offer. But this consideration remained theoretical, placed snugly into a drawer of the therapist's mind, the therapist's person.

This dynamic also applies to the apex of this period's theoretical investigations of Buddhist doctrine: Erich Fromm's co-edited *Zen Buddhism and Psychoanalysis* (Fromm, Suzuki, DeMartino 1960). Still frequently cited, the book has become a virtually canonical text for therapists interested in Buddhist teachings and practices. In 1957, Fromm arranged a watershed meeting between Suzuki and some fifty psychoanalysts at the University of Mexico. *Zen Buddhism and Psychoanalysis* is a collection of only a handful of the papers that were delivered there. These papers set the mold for the countless meta-psychological "dialogues between Buddhism and psychotherapy" that followed in later years. Fromm's paper is an extended comparison reviewing similarities between Zen and psychoanalytic frames, a trope that now represents an entire body of literature. The points that Fromm highlights (e.g., conceptions of the unconscious, parallels between the teacher/student and analyst/analysand relationships) still resurface in contemporary discussions.

Whether Fromm's seminal publication or Kelman's lesser known articles, these writings are all representative of personalizing religion approaches. They are developed out of a common desire to maintain the differentiation between religious Buddhist

doctrine and secular psychotherapeutic theory. Horney and Kelman might have believed that analysts could learn from Buddhist teachings. They might even experiment with personal meditation practices. But they would never have conceived of incorporating these elements into therapy sessions. The therapists at Fromm's conference might engage in extensive discussion of Suzuki's Zen teachings. But Fromm would never have advocated explaining those teachings in analysis. However, in this tension, we may already detect the cracks in the barrier wall these approaches erect between religion and secular.

First, therapists like Horney and Kelman acknowledge that their theoretical discussions influence their work. Kelman explicitly advocates that it should (1960, 76-79). In this they go further than clinicians like Alexander or Jung. Both Alexander and Jung believed that Buddhist traditions had knowledge that could be useful for psychotherapists. But only as confirmation of existing theories. Buddhist texts might be interesting, but they were far from indispensable. Kelman, however, suggests that Buddhist traditions hold unique resources to inform psychotherapeutic practice. Both Jung and Horney therapize Buddhist experiences when they speculate that they may be versions of, respectively, self-actualization or self-realization. But Horney would be unperturbed by an analyst taking the next step and studying Suzuki's writings to enhance their therapies. These clinicians would not contemplate the full integration that Japanese colleagues like Kondo sought. But they do believe that Buddhist teachings can be incorporated into psychotherapeutic, so long as they are personalized.

Fromm goes even further than his colleagues. For of all the similarities he finds between psychoanalytic and Zen traditions, the most consequential is that they share a

common aim. Both Zen and psychoanalysis, in Fromm's perspective, have the same goal of ultimate healing: the liberation and actualization of human being. This is not necessarily new. Horney's followers have suspected that, privately, she believed this too. Jung is unequivocal on the point. And even Alexander suggests that Buddhist traditions are inherently "therapeutics"; like analysis, they too were meant to salve the pain of living. But Fromm's theories more radically alter the relationship between psychotherapy and Buddhist traditions. Fromm views particular forms of Buddhist practice (first, Suzuki's Zen and, later, Nyanaponika's "Buddhist meditation") as unique methods for bringing true psychological healing. At times, Fromm speaks of them as so powerful that even his version of psychoanalysis seems lesser in comparison. Further, the transformative healing he believes Buddhist traditions could provide is not to be limited to individual growth but society as a whole. Analysts and the wider public should not be restrained by Jung's policy of "look but don't touch." A Buddhist path can certainly be taken up as parallel adjunct to psychotherapy. Beyond that, Buddhist teachings and practices were deep wells of therapeutic knowledge from which analysts should draw. Personalized Buddhist experiences can become a vital part of psychotherapeutic practice.

Fromm's treatment of Buddhist traditions relies on his larger argument about the place of religious traditions in human society. Fromm did not only personalize Buddhist traditions, but religion in general. In fact, prior to any real study of it, he cited "Buddhism" as evidence for his theories of religion. In the next section I explain Fromm's thought as a cogent case study for how psychotherapists' approaches to Buddhist teachings and practices develop out of their understandings of the categories of religion and secular. One can only fully understand Fromm's assessment of Buddhist

teachings and practice after grasping his views on religion, science, and secularization. And, while the same can be said for all of the clinicians introduced in this dissertation, Fromm is nearly alone in having written at length on how to define religion and secular. Finally, Fromm may be the very first therapist to argue that these categories are social constructions. If religion is socially constructed, then it can be reconstructed and Fromm believes he has achieved this goal. His work exemplifies how many therapists who take personalizing religion approaches actively maneuver with and within binary understandings of religion and secular. Fromm is highly aware that he can be interpreted as contributing to the secularization of religion. His approach to Buddhist traditions typifies his ingenious method for obfuscating such an assessment. Fromm's redefinitions of religion are both representative of a generation and influential for those who follow him. Many of the therapists I've spoken to reference his perspective and we hear echoes of his reasoning in, for example, the growing communities who identify as "spiritual-not-religious." His work is thus worth careful consideration.

Terminological Difficulties: How (Re)Defining Religion is a Problem

Having once considered becoming a Torah scholar (Friedman 2013, 8-12), Fromm always felt that religious traditions held value for human society. And yet, Fromm's greatest intellectual heroes, Marx and Freud, had dismissed them. Fromm advances three main tactics to respond to critiques of religion.¹⁴⁵ While we have seen versions of

¹⁴⁵ Though he would bristle at the comparison, both of Fromm's tactics here had been previously employed by Jung. Perhaps an awareness that his treatment of the category religion bore similarities to Jung's led Fromm to harshly criticize his predecessor for "reduc[ing] religion to a psychological phenomenon and at the same time elevat[ing] the unconscious to a religious phenomenon" (1950, 20). Fromm was especially averse to Jung's "general relativistic position with regard to the 'truth' of religious experience" (1960, 116).

two of his tactics previously, the first is something of an innovation among psychotherapists: Fromm argues that the category of religion is a social construction. When people use the term, he argues, they assume its conventional definition. But this definition is culturally contingent and, more importantly, it is incorrect. Fromm contends that what truly qualifies to be designated as religious is very different from what is usually meant by the word. Critiques of religion only apply to the inaccurate conventional definition of religion. And, we will see that, in Fromm's larger theory, imprecise decisions are no small matter.

Fromm is the rare psychotherapist to write about how to define religion. But he is even rarer for having described the work of defining religion as a problem. Fromm complains that "any discussion of religion is handicapped by a serious terminological difficulty." "We simply have no word," he writes, "to denote religion as a general human phenomenon in such a way that some association with a specific type of religion does not creep in and color the concept" (1950, 21). When the word religion is used it is immediately associated with dominant understandings of the concept. But Fromm contends that these understandings are only about "a specific type of religion." Unlike historians like Brent Nongbri, Fromm does not trace how this "specific type of religion" came to be hard-wired into the concept religion. Nongbri explains why it is not

Jung's response to Freud's declaration that religious experience was illusory is that, while perhaps an illusion from a certain perspective, it was nonetheless a healthy and productive illusion. "Contrary to him," Fromm countered, "I believe that a lie is never 'a spiritual fact,' nor any other fact, for that matter, except that of being a lie" (1960, 116). According to Fromm, in his redefinition of the classification, Jung made unverifiable subjective experience, its truth ultimately irrelevant, the essence of religion. The *pièce de résistance*: simultaneously employing his own reconstruction of the category religion and speaking in the name of "all great religions," Fromm, by implication, actually declares Jung's stance to be *antireligious*. "In its relativism concerning truth, however, Jung's concept of religion is in contrast to Buddhism, Judaism, and Christianity. In these, man's obligation to search for the truth is an integral postulate. Pilate's ironical question 'What is truth?' stands as a symbol of an antireligious attitude from the standpoint not only of Christianity but of all other great religions as well" (1960, 19).

surprising that the category religion is based on a Protestant prototype. Fromm is strongly averse to features of this prototype; chiefly its “theistic-supernatural aspects.” He also, in a way, challenges the idea that religion is defined by belief. Fromm still defines religious traditions to be internal belief systems, but does not conceptualize religion as a part of life that humans can choose to take up or choose to abjure. This is Fromm’s second tactic to protect religion from critique; he makes it an anthropological inevitability.

Having established that the conventional definition is only a social construction. Fromm offers up a new definition to replace it. Religion, Fromm writes, is “*any system of thought and action shared by a group which gives the individual a frame of orientation and object of devotion [his emphasis]*” (1950, 21-22). This definition so broadens the criteria for what qualifies as religion that it is hard to question his subsequent claim that “there is no one without a religious need, a need to have a frame of orientation and an object of devotion” (1950, 25). A “religious need” is universal, an intrinsic component of human personality. “The question is not *religion or not* but *which kind of religion*, whether it is one furthering man’s development, the unfolding of his specifically human powers, or one paralyzing them [his emphasis]” (1950, 26).

Fromm thus forwards his second tactic, still in common use today. He sorts “good” from “bad religion.” The “religious need” is eternal, it will never fall away. This need can be directed towards harmful, oppressive “authoritarian religions” or healthy, empowering “humanistic religions.” “Authoritarian religions” are founded on the exact sort of “religious experience” that Jung had claimed was the essence of all authentic religions: “a specific kind of emotional experience: surrender to a higher power, whether

this higher power is called God or the unconscious” (1950, 19). This, to Fromm, is actually the root of human submission to oppressive forces in society. Looking back to his definition of religion, “frames of orientation or objects of devotion” based on religious experiences of surrender will predictably fixate on metaphysical deities. Such religions self-sustain themselves by inculcating the conviction that surrender and submission is a positive good. In Fromm’s estimation, Freud’s critique only applies to these kinds of religions and to the category of religion’s “theistic-supernatural aspects.” “Freud’s main reason for criticizing religion,” Fromm states, is that “he saw as the essence of religion the illusion of substituting the dependence on God for the original dependence on a helping and punishing father” (1960, 124).

Freud’s critique both went too far and had not gone far enough. Freud had not had the time to define religion precisely. If he had, he would have realized that there are far more harmful religions than those that are “theistic-supernatural.” People do not only substitute deities for “the original dependence on a helping and punishing father” but a host of other “objects of devotion.” It is not enough that theistic religions fall away. Without getting to the root of the problem, they are only replaced by new authoritarian religions: the worship of messianic political ideologies, totalitarian states, or the capitalist’s idol of money. Further, Freud also missed that there are religions, and aspects of religions, that cultivate liberation rather than dependence.¹⁴⁶

¹⁴⁶ Fromm claims that “the statement that Freud is ‘against’ religion. . .is misleading unless we define sharply *what* religion or what aspects of religion he is critical of and what aspects of religion he speaks of” [his emphasis]. While Fromm implicitly labels Jung antireligious, he declares that “Freud speaks in the name of the ethical core of religion and [only] criticizes the theistic – supernatural aspects of religion for preventing the full realization of these ethical lanes” (1950: 19).

In Fromm's schema, "humanistic religions" are never grounded in humanity's powerlessness. They are instead "centered around man and his strength," (1950, 36).¹⁴⁷ Rather than indoctrinating submission, humanistic religions inspire humanity to their liberation, to fulfill the great promise of humankind. Such humanistic religions are founded on and foster different kinds of religious experience. Here the practitioner cuts away layer after layer of the internalized psychic structures that compel acquiescence to authoritarianism. Religious traditions hold practices of self-cultivation that enable practitioners to progressively uncover their own power, including the power to take action for social justice. Fromm thought that the religions he was most familiar with, Jewish and Christian traditions, had such practices, had "humanistic aspects." They too were redeemable if approached in a particular manner, if personalized. And yet, Fromm nearly gives up hope on what he often refers to as "the monotheistic religions." We will learn Fromm's theory in the next section that, even as their dominance grows throughout society, the monotheistic religions have, in truth, been secularized.

Flipping the Script: Making Religion Secular and Secular Religion

In the previous section, I reviewed Fromm's redefinition of religion. Fromm also analyzed other central terms for this dissertation including science and the secular. Moreover, Fromm directly addresses "the religion/secular binary" and evaluates the secularization theses of major thinkers like Max Weber. In this section, I review Fromm's perspective on these terms and argue that his approach to Buddhist traditions

¹⁴⁷ Of course, as is the case throughout this dissertation, Fromm does not speak of humanity as often as "man." His gender exclusive language is not inconsequential, but undermines his thought as itself blind to difference.

relies upon them. I explain that he redefines a term like science and revises prevailing scholarly visions of secularization. But he does with particular purpose. Fromm was well aware that his theory of religion could be viewed as furthering secularization. He asserts that religious traditions arise to meet what is an essential psychological need. He then advocates for the rise of new religious forms that many would not recognize as religious at all. And he calls for the elimination of the very qualities that typically define the concept of religion. For many, if religious traditions amputate their “theistic-supernatural aspects” this, by definition, would mean their secularization. But Fromm actively moves to delegitimize such interpretations of his theories. He does this by upending what it means to be truly secular as well as what it means to be truly religious.

Fromm was well schooled in a number of famous secularization theories. While a student at the University of Heidelberg, he was taught about Max Weber’s ideas directly from the thinker’s brother, Alfred.¹⁴⁸ However, far from promoting it, Fromm names secularization to be an illness ailing society. But the secularization he speaks of is not limited to the waning of religious institutions. For Fromm, true secularization is more extensive than what Weber imagines. Weber was wrong; religious institutions are very much *not* on the wane. In fact, the secularization that concerns Fromm has infected them. Fromm casts himself as healer returning a repressed true religious essence to religious communities. I can think of no better way to describe this move than that of contemporary parlance: he “flips the script.” Fromm does not only sort good from bad religion, but authentic from inauthentic. It is humanistic religions that are truly religious,

¹⁴⁸ Friedman dubs Alfred Weber: Fromm’s “first and only Gentile mentor.” The relationship coincided with Fromm’s shift from Talmudic studies to the university’s “department of national economy with a specialty under Alfred Weber in sociology” (2013, 12-15).

precisely because they lack the basic elements that typically define the designation, their “theistic-supernatural aspects.” If the “theistic-supernatural aspects” of religious institutions are extinguished, they will become *more* authentically religious. Further, the historical “theistic-supernatural aspects” of religious traditions are at the root of the secularization of society. Institutional authorities capitalize on them to suppress a true religiosity in three inter-connected ways.

First, and most dramatically for our purposes, Fromm argues that it is theistic dogma that creates “the religion/secular binary.” Binary understandings of religion and secular are not only conceptually flawed in Fromm’s view. They are a pernicious sickness that suppresses human creativity. As we saw above, Fromm first therapizes the theistic beliefs of most Jewish and Christian forms; he analyses and assesses them using psychotherapeutic frames. Theistic beliefs split off humanity’s capacity for greatness and projects it onto imagined divine parental figures. It is thus through psychodynamics, according to Fromm, that “the separation between the ‘holy’ and the ‘secular’ occurs” (1950, 50).¹⁴⁹ Human innovation is made worldly and, consequently, worthless in its impermanence. Humans, belonging to the secular world, are fallen, venal, without their own inherent goodness. Whatever goodness human beings possess becomes only an

¹⁴⁹ In the full quote Fromm explains that, in authoritarian religions, humanity’s own worth is “paralyzed” and “this alienation from his own powers not only makes man feel slavishly dependent on God, but makes him bad too. He becomes a man without faith, in his fellow men or in himself, without the experience of his own love, of his own power of rescue. As a result the separation between the ‘holy’ and the ‘secular’ occurs. In his worldly activities man acts without love, in that sector of his life which is reserved to religion he feels himself to be a sinner (which he actually is, since to live without love is to live in sin) and tries to recover some of his lost humanity by being in touch with God. Simultaneously, he tries to win forgiveness by emphasizing his own helplessness and worthlessness. Thus the attempt to obtain forgiveness results in the activation of the very attitude from which his sins stem. He is caught in a painful dilemma. The more he praises God, the emptier he becomes. The emptier he becomes, the more sinful he feels. The more sinful he feels the more he praises his God – and the less able is he to regain himself” (1950, 50) Even the concept of sin is turned against the religious frameworks from which Fromm decontextualizes the concept. This is of course an extension of his larger work on ethics begun in the book written just prior in 1947, *Man For Himself: An Inquiry Into The Psychology of Ethics*.

image of (a) divinity/ies. In truth, Fromm claims, it is the other way around. The gods have been made in the image of humanity.

Humans are not fallen creatures, Fromm claims. Just one sign of their incredible ingenuity is the fantastic religious imagineire they have constructed. Gods, angels, and pure land paradises should thus not be completely removed from society (as in, for example, authoritarian communist regimes). But they should be seen for what they really are: evidence of the power of human generativity. A misapprehension on this point is of great consequence. Filled with shame, human beings believe that they are totally powerless and dependent on the good graces of divinities, rulers, totalitarian states and corporations. Much of the true evil that has befallen humanity, in Fromm's eyes, is the result of this thinking - including evils that Fromm was intimately aware of like the Holocaust. Rather than projecting it onto otherworldly beings, humans must come to see their own incredible capacity for good. And this is the true essence of religious traditions: *humanistic* ethics, love, aesthetics (1950, 25-37).

If ethical humanism is the only authentic religiosity, and theistic dogma destructive to this authentic religiosity, then much religious doctrine injects a kind of secularization-from-within into religious communities. But the religion/secular binary created by theistic beliefs also causes a second order secularization. Fromm begins here with the "standard secularization narrative," the theory that religious traditions would fall to secular spheres. He discusses these theses on a number of occasions in his writings. Unlike the psychotherapists we've examined previously, however, Fromm does not only focus on science as a force of secularization. At times, Fromm seems to subscribe to the theory that religious institutions will slowly disappear. But he always attended more to

what replaces them like the secular state or corporations. He was ambivalent towards the role of science here. At times, Fromm indicated that, in search of new “frames of orientation and objects of devotion,” humans can also worship positivist science in place of deities.¹⁵⁰ Such a fate had befallen psychotherapists like Freud himself and, consequentially, psychoanalysis had lost its way as a “cure of souls.” I will say more about this shortly. But Fromm often appears to accept Freud’s version of the standard secularization narrative. Scientific truth would dispel the illusions of religious traditions and cause their decline. But this should not be thought of as secularization.

Fromm asserts that scientific knowledge can facilitate true religiosity by culling away supernatural beliefs, and thus false religion. The typical secularization narrative could then be rewritten to tell the tale not of the fall, but the rise of true religion. And yet, Fromm expresses discouragement that this was not yet coming to pass. Science could only “kill God,” but, as he stated more than once, “in the nineteenth century the problem was that God is dead; in the twentieth century the problem is that man is dead” (e.g., 1955, 360). Society had not replaced deceased divinities with “man,” with humanism, as Fromm prophesized. Still mired in the psychological sickness of dependence, society instead substituted politico-economic ideologies and institutions. These politico-economic forces only furthered society’s dehumanization. Further, because of binary understandings of religion and secular, communities do not realize that they are only replacing authoritarian religion with authoritarian religion. Though society remains religious, the theory is widespread that it is undergoing secularization. And herein lies a

¹⁵⁰ A number of prime examples are collected together for this purpose along with his early essay *The Dogma of Christ* (1955): “Psychoanalysis – Science or Party Line?” (131-147), “Medicine and the Ethical Problem of Modern Man” (169-191), and “On the Limitations and Dangers of Psychology” (191-203).

third location of true secularization in Fromm's schema, a secularization that reaches religious institutions.

Weber argued that a Protestant spirit animated so-called secular spheres like the marketplace or the state. But Fromm was more concerned with how the marketplace or state animates religions. In the last decade or three, sociologists of religion have become more and more vocal about the need to revise Weber's secularization theses and many of their descendants. Contrary to predictions, religious participation has not declined, but steadily risen. Fromm was already proposing such a revision in the late 1940s-early 1950s. Rather than worrying that religious institutions will disappear, society should be concerned about a different sort of "spiritual crisis" (1960, 78). Ever the sociologist, Fromm references data that is still cited in these discussions. "It is true," he acknowledges

church membership is higher than ever before, books on religion become best sellers, and more people speak of God than ever before. Yet this kind of religious profession only covers up a profoundly materialistic and irreligious attitude. . . .As a truly religious attitude, it has no reality. (1950, 176)

Fromm thus proclaims that "our culture is perhaps the most completely secularized culture in human history" (1950, 176). It is participation in authoritarian religions that is on the rise. Religions that are, in reality, not "truly religious" at all. "Religion has become an empty shell," Fromm writes, "it has been transformed into a self-help device for increasing one's own powers of success. God becomes a partner in business. *The Power of Positive Thinking* is the successor of *How to Win Friends and Influence People* (1955, 100)."¹⁵¹

¹⁵¹ He continues: "We claim that we pursue the aims of the Judeo-Christian tradition: the love of God and of our neighbor. We are even told that we are going through a period of a promising religious renaissance.

In this section, I described how Fromm wholly redefines the term religion; he personalizes it. He further reconstructs what is secular and, in so doing, prevailing secularization narratives. His reconstructions are meant to thwart those who would label him a secularist. In the next section, I examine his personalizing religion approach to Buddhist traditions specifically. This necessitates an explanation of his redefinition of psychoanalysis and its purpose in society. I show that Fromm does not only interpret Buddhist teachings and practices by personalizing them. He looks to Buddhist traditions as a possible solution to the problem of secularization. A solution that works in parallel to those psychotherapies that bring true healing (rather than actually perpetuating illness). Ultimately, I elucidate that, like the other approaches we've examined, Fromm's elaborate reworking of the relationship between religion and secular, while fascinating, remains unstable.

Personalizing Buddhist Traditions: Field Observations from “The Most Completely Secularized Culture in Human History”

In the preceding section, we heard Fromm intimate that the concept of religion is a social construction. But he does not propose dismissing the term altogether. Fromm does think that there is “a general human phenomenon” worth designating as religion. In fact, society suffers as long as common understandings of what is religious and what is secular remain unreconstructed. A healing of society first requires proper diagnosis:

What is the religious situation in contemporary Western society? It resembles in curious fashion the picture which the anthropologist gets in studying the religion of the North American Indians. They have been converted to the Christian religion but their old pre-Christian religions have by no means been uprooted.

Nothing could be further from the truth. We use symbols belonging to a genuinely religious tradition and transform them into formulas serving the purpose of alienated man” (1955, 100).

Christianity is a veneer laid over this old religion and blended with it in many ways. (1950, 28)

Notably, Fromm's depicts "blending" here as problematic. This is a presumption he shares with the Protestant anthropologists who invented a term to explain religious mixing. These anthropologists sought to determine whether members of colonized communities like "the North American Indians" had had true conversion experiences. It is the same term that scholars like Wilson and Brown employ to label "the mindfulness movement": crypto-religion.¹⁵² Fromm writes his own field observations of "our own culture [where] monotheistic religion and also atheistic and agnostic philosophies are a thin veneer built upon religions which are in many ways far more 'primitive' than the Indian religions" (1950, 28). Further, without realizing the true nature of their worship, humans are trapped in delusion.

Man. . . may be aware of his system as being a religious one, different from those of the secular realm, or he may think that he has no religion and interpret his devotion to certain allegedly secular aims like power, money or success as nothing but his concern for the practical and expedient. (1950, 26)

Without clarity about what is truly religious and what is truly secular, communities remain bound to authoritarian religions, dehumanized and oppressed. An analysis is necessary.

Just as he had religion, secular, and science, Fromm redefines what qualifies as a true psychoanalysis. Fromm innovated a new critique of psychotherapy and its role in society that remains in common use today. (In fact, it has since been turned against Fromm's theories themselves!) Psychotherapies, Fromm claim, do not always bring healing. Some actually only perpetuate sickness, "adjusting" people to systemic

¹⁵² Robbins (2011) recent work on crypto-religions is especially useful for elucidating how the concept was strategically employed by Protestant anthropologists to make sense of the "syncretism" of religious others.

oppression rather than aiding in their liberation. In Fromm's understanding, self-actualization means more than a discovery of an authentic self. The realization of the self results in a complete ethical transformation that would, in turn, transform society as a whole. Untreated psychodynamic needs leave people vulnerable to falling sway to submission, to ways of life based on, for example, "consuming." A truly healing psychotherapy aids people to move from "having" to "Being," to authentic ethical living. In this then both psychotherapy and humanistic religions have the same goals. But, as I will say more about below, this does not make psychotherapy religious in Fromm's eyes. He is aware that such goals seem unconventional to most clinicians who seek only to liberate people from panic attacks. Late in life, he would thus refer to them as "trans-therapeutic" (e.g., 1992 63-65).¹⁵³ Nonetheless, they are definitional; any psychotherapy that does not seek self-actualization, as Fromm understands, doesn't qualify to be considered an authentic psychotherapy.

Fromm calls for a full "spiritual revolution" of contemporary Western society. The liberation of humanity from authoritarian, systemic oppression would be "spiritual" in nature. And it would surely be a revolution if religious authorities came to realize that they work for the forces of secularization and dehumanization. This revolution begins in the human mind, a complete psychic change that raises people's consciousness of the power structures of society. Fromm believes that psychotherapy's purpose is to assist people to gain these insights. But he at one point wonders whether Buddhist traditions might be more effective.

¹⁵³ Following Jung again, Fromm titles psychoanalysts, and a chapter of *Psychoanalysis and Religion*, "Physicians of the Soul" (1950 63-95). And, like Jung yet again, Fromm raises the role of the psychotherapist alongside humanistic clergy in society by reconstructing the function of psychoanalysis.

Even before meeting Suzuki in person and beginning more concerted study of Buddhist practice, Fromm had considered Buddhist forms to be the humanistic religion *par excellence*. From his earliest writings on the topic, Fromm displays an awareness that there are multiple Buddhist schools. He names “early Buddhism” “one of the best examples of humanistic religion” (1950, 37). “Zen-Buddhism,” meanwhile, “a later sect within Buddhism, is expressive of an even more radical anti-authoritarian attitude” (1950 39). After studying further with Suzuki, Fromm declares “Zen” as to be so far from the “religion” that Freud critiques as to be laughable. He argues that Freud’s central problem with religion was that it fosters submission. But, he rhetorically asks,

What would Freud have said to a “religion” which says: ‘When you have mentioned Buddha’s name, wash your mouth!’ What would he have said to a religion in which there is no God, no irrational authority of any kind, whose main goal is exactly that of liberating man from all dependence, activating him, showing him that he, and nobody else, bears the responsibility for his fate? (1960, 124)¹⁵⁴

Notice the tension here. Fromm never questions Buddhist traditions classification as religion. But here he names Suzuki’s Zen a “religion” in scare quotes, a religion in name only. Fromm continues a tradition passed on from the early psychologists of religion discussed in Chapter Two, positioning “Buddhism” as a challenge to the conventional

¹⁵⁴ The perceived anti-authoritarianism of Suzuki’s Zen, and Buddhist traditions at large, represents a major break between Fromm’s thought and that of Jung’s. Jung takes exceptions with Buddhist teachings for placing self-reliance, absorption, above the need for surrender. For Fromm, this distinction is what makes Buddhist teachings superior.

definition of religion. He steadfastly refers to it as atheistic and therefore an historical example of a religion without “theistic-supernatural aspects.”¹⁵⁵

Fromm’s psychosocial assessment of why so many psychoanalysts in the U.S. were attracted to Buddhist traditions serves as explanation of his own interest. More and more people experimented with Buddhist practice in Europe and the U.S., he thought, in their search for religious paths to liberation that are free of the supernatural beliefs that science make untenable.¹⁵⁶ Observers have noted that Fromm found the Zen of Suzuki and other popularizers so appealing because it was already refashioned for audiences just like him.¹⁵⁷ Most Buddhist studies scholars find the notion that Zen Buddhist communities, for example, lack submission to hierarchical authority to be extremely odd. Fromm, however, voraciously read Suzuki’s books and suspected them blueprints for liberation from the strictures of social norming. After learning of his lectureship at

¹⁵⁵ When problematizing the conventional definition of religion, before unveiling his own superior definition, Fromm raises the idea of not calling Buddhism a religion at all: “While we know that there were and are many religions outside of monotheism, we nevertheless associate the concept religion with a system centered around God and supernatural forces; we tend to consider monotheistic religion as a frame of reference for the understanding and evaluation of all other religions. It thus becomes doubtful whether religions without God like Buddhism, Taoism, or Confucianism can be properly called religions” (1950, 21). But he ultimately concludes that it is not Buddhism’s classification as a religion that needs to be adjusted, but common understandings of that classification.

¹⁵⁶ Like those who came before him and those who would follow, Fromm attributes an increased attention to Buddhist traditions to what he calls “crisis” of secularization. *Zen Buddhism and Psychoanalysis* contains a tight summation of his secularization theses and “the spiritual crisis which Western man is undergoing in this crucial historical epoch” (78). Science had killed God, “man gave up the illusion of a fatherly God as a parental helper- but he gave up also the true aims of all great humanistic religions.” Fromm reiterates that the authentic essence of “the great Western religions” was also ethical humanism, like those of “the East.” “The East, however, was not burdened with the concept of a transcendent father-savior in which the monotheistic religions expressed their longings” (80). Not only was Buddhist doctrine free of the theism that had outlived its usefulness in Christian and Jewish traditions, but they opened up paths to self-realization “superior” to those that are otherwise available in “the West today” (80). “This is precisely the reason,” Fromm concludes “why Eastern religious thought, Taoism and Buddhism- and their blending in Zen Buddhism – assume such importance for the West today. Zen Buddhism helps man to find an answer to the question of his existence, an answer which is essentially the same as that given in the Judeo-Christian tradition, and yet which does not contradict the rationality, realism, and independence which are modern man’s precious achievements” (80).

¹⁵⁷ The other major Zen reference for Fromm was Herrigel’s influential *Zen and the Art of Archery* (1948). For helpful critical commentary on Herrigel see Shoji 2001.

Columbia, Fromm wrote Suzuki directly. Enclosing copies of his books, Fromm hoped that Suzuki would agree that the two had common cause. As Harrington (forthcoming) observes, “the tables had turned” from “twenty years earlier [when] it had been Suzuki who was sending gifts to the psychoanalytic community, hoping to convince them of the interest of his work.” By the time of the conference in Mexico, Fromm was far from alone in his hopes that Zen held healing potential. Many were convinced that, as Suzuki suggested, Zen practice could be a superior practice for accessing the unconscious. And, again, Fromm believes that *Zen satori* could, indeed, be an experience of awakening akin to the self-actualization he saw as the ultimate in psychic health. This enlightenment would awaken people to the nature of their authentic self and the societal strictures that inhibits it. But, just over a decade later, Fromm was far less hopeful about Zen and on the hunt again for a new alternative.

Fromm came to believe that Suzuki’s Zen was not the optimal path to liberation.¹⁵⁸ He had once showed an uncharacteristic openness to mixture, describing Zen as a container in which was poured the best of both “Taoism” and “Buddhism.” But, in the last years of his life, this “blending” appears to cloud the purity of the Buddha’s “original” and, thus, essential teachings.¹⁵⁹ Nyanaponika’s practice, distilling the heart of

¹⁵⁸ Fromm biographer Lawrence Friedman argues that it was the anti-intellectualism of Suzuki’s Zen (which taught an intense aversion to theoretical understanding) that led to Fromm’s break. (2013, 295). Fromm’s essay in *Zen and Psychoanalysis* attends at great length to the subject of “cerebration” and “intellectual knowledge,” perhaps exhibiting the sensitivity Friedman speaks of. But, at that time, Fromm appeared to be quite taken with Suzuki’s epistemological position. Though he does not explicitly theorize how theory acts as a practice, Fromm praises Suzuki’s search for alternatives to cognitive-linguistic knowledge. He raises up “experiential knowledge” over “intellectual knowledge.” He agrees that only an awakening experience of deep insight can bring true psychic transformation. (1960, 108-113). As Friedman writes, it is probable that Fromm, like many of his colleagues (e.g., Alexander), was conflicted about the anti-intellectualism of Suzuki’s Zen teachings. But Fromm provides his own explanation for his turn to Nyanaponika’s “original Buddhism”: he says that it is a superior, purer form.

¹⁵⁹ Reading his treatment of “early Buddhism” and “Zen” in *Psychoanalysis and Religion* I wonder if he might have always harbored these suspicions.

all Buddhist meditation, becomes the true means for ethical transformation. *Zen satori* now seemed to Fromm to have a different aim. He now defined it as “a sudden experience which breaks through the perceptions of concepts and ideas and produces a pre-perceptual experience which can be achieved in a similar way by some drugs or prolonged concentration on an object” (1975, 5).¹⁶⁰

Fromm’s claim here that *satori* experiences are equally attainable through the use of hallucinogenic drugs is revealing. What I contend truly led Fromm away from “Zen” was his perception that it had been co-opted through the 1960s and 70s towards what he calls “the mass production of spiritual goods.” In a piece Fromm wrote in praise of Nyanaponika, Fromm states that the public’s growing interest in Asian religious items has been “misused by cults. . .[that] appeal to the same weaknesses that they promise to ‘cure’. . .stultifying methods of contemporary industrial and political propaganda.” According to Fromm, “to ‘cure’ becomes big business” and religious practices with liberative power are capitalized. Some are repurposed towards “having” and “consuming,” towards self-aggrandizement and self-satisfaction. Others are used to pacify people who otherwise might recognize and overturn their sources of oppression (1992, 12-19).¹⁶¹ Fromm speaks of Nyanaponika’s practice - sometimes simply referring

¹⁶⁰ In a short, fascinating, late piece simply titled “Buddhism” (1975) written in conjunction with *To Have or To Be?*, Fromm states that “classic Buddhism has been almost completely covered in historical practice by impenetrable underbrush of superstition and irrationality, that it is so difficult to find it in its original, pure form.” Unconsciously reproducing colonialist metaphors, Fromm believes that the “Mahāsi method,” now imported to the States in Nyanaponika’s book, had trailblazed through the “underbrush of superstition and irrationality” leaving only the “pure form.” Zen had once appeared the evolutionary culmination of Buddhist thought, but Fromm now saw a “difference between the Buddhist aim of total or partial enlightenment and Zen Satori. The Buddhist aim is change of character achieved by insight and constant practice. Zen Buddhism does not essentially aim at character change” but instead the same effects that one can find in hallucinogenics (5).

¹⁶¹ Fromm’s critique here is one of long-standing and applicable to forms of psychotherapy that, he believed, “adjusted” people to societal oppression rather than helping them to self-actualize and become capable of contributing to their own liberation. Fromm had once spoken fairly highly or at least

to it simply as “Buddhist meditation” - as if it might be capable of withstanding this capitalization. Perhaps, it could be effective regardless of the context in which it was taught.¹⁶²

Whether it is Suzuki’s Zen or Nyanaponika’s “original Buddhism,” Fromm always took a personalizing approach to Buddhist traditions. He therapizes them to interpret their aims or functions. But he concludes that the only way to truly understand them is to personalize them: to recognize them as perhaps the consummate religion for raising up the person, the human. “The European discoverers of Buddhism” had defined the construct as fundamentally based on “self-absorption” and “self-reliance,” and then critiqued it on this basis. To Fromm, these qualities made it “one of the best examples of humanistic religion.” Fromm’s personalizing religion approach to Buddhist traditions is thus generated out of innovative and influential redefinitions of religion/secular. He is aware that religious studies scholars and Buddhologists of the future could interpret him as complicit in the denaturing and secularizing of Buddhist traditions. But he pre-empts the interpretation that he contributes to secularization by redefining what secularization means.

sympathetically about the public’s interest in “the liberation of the mind. . .centered mostly on Eastern ideas.” However, through “the fifties and sixties a much larger number of people were looking for new ways to happiness, and a mass market began to form. Especially California was a fruitful soil for mixing up legitimate methods, like some of those mentioned, with cheap methods in which sensitivity, joy, insight, self-knowledge, greater affectiveness, and relaxation were promised in short course, in a kind of spiritual smorgasbord program. . . From college students to business executives, everybody finds what he wants, with little effort required. . . In essence, these methods are means of feeling better and of becoming better adjusted to society without a basic change in character” (1992, 15).

¹⁶² I should be clear that Fromm is not explicit about this but implies that this is the case. I thus pull back from stating that Fromm believes “Buddhist meditation” cannot be co-opted or misused as a strong claim. But, I believe there is evidence, discussed below, that Fromm believed that, having distilled the essence of Buddhist traditions into the practice, Nyanaponika’s meditation would always work regardless of how it was introduced.

Removing concepts like rebirth from Buddhist doctrine and centering self-actualization as the aim of Buddhist practice could seem to, as Lopez says, “eliminat[e] much of what has been deemed essential, whatever that might be, to the exalted monks and ordinary laypeople who have gone for refuge to the Buddha over the course more than two thousand years” (2008, xiii). But, put simply, Fromm believes that these “exalted monks and ordinary laypeople” have been mistaken. What is actually “essential” to Buddhist traditions is self-realizing ethical transformation. Fromm does not aid in the de-naturing of a Buddhist path; he aids in the uncovering of its true nature. Fromm does not participate in the secularization of society; he participates in the restoration of true religiosity.

Fromm’s personalizing religion approach to Buddhist traditions is important because he is an early psychotherapist to define categories like religion and secular and to define them as contingent social constructions. For Fromm, language frequently obscures the truth just as it had with the “terminological difficulty” of “discussions of religion.” Even his own language of humanist psychotherapy was twisted beyond recognisability during the 1960s and 1970s. “There are almost no words left in this field,” he complains

that have not been commercialized, corrupted, and otherwise misused. Words such as ‘human growth’ or ‘growth potential,’ ‘self-actualization,’ ‘experiencing versus thinking,’ ‘the here and now,’ and many others have been cheapened by various writers and groups, and even used in advertising copy. Must I not fear that the reader will connect certain ideas I am writing about with others that have the opposite meaning, just because some words are the same? Is it not more adequate to stop writing in this field altogether, or to use mathematical symbols that are defined in a separate list? I beg the reader to be aware of the fact that words, in and by themselves, have no reality, except in terms of the context in which they are used, in terms of the intentions and the character of the one who uses them, if they are read in a one-dimensional way, without a depth perspective they hide ideas rather than communicate them. (1992, 13)

Part of what had attracted Fromm to Suzuki's Zen practices was that they promised freedom from the constraints of the cognitive-linguistic. In the above, he contemplates silence, "stop[ing] writing in this field altogether." But he never did. The indeterminate definitions of categories like religion and secular makes some psychotherapists wish to dismiss them altogether. Fromm never despaired of discerning accurate definitions for these concepts, even if he was frustrated by the way others skewed them. Fromm is an essentialist. Language may be a problem, but this does not mean there aren't essential truths to be named ("a general human phenomenon" called religion). Transformative experiences of self-actualization are a human reality regardless of the words used to name them or the context in which they are cultivated.

This encapsulates Fromm's entire personalizing approach to religion. Fromm's approach can be interpreted as blurring the boundaries between religion and secular, in part, by redefining these terms. But it should be emphasized that when Fromm writes about "religions" he is more often than not referring to religions *under the conventional definition*: organized religious institutions; "Christianity," "Judaism," "Buddhism," etc. When he speaks of the "secular," it is a secular under the conventional definition: practical worldly affairs; spheres of the not-religious like science, the state, etc. Each time Fromm reproduces the conventional definitions of these terms he undermines his new reconstructions for them. Moreover, Fromm explicitly advocates a clear differentiation between a clearly defined religion and a clearly defined secular. He maintains a hard distinction between humanistic religions and psychotherapy though he says they have the same goals (again, Fromm sometimes refers to them as supplemental to psychotherapy's core aims, as "trans-therapeutic"). As for Buddhist traditions

specifically, Fromm speaks of an absolute gulf between Buddhist and psychotherapeutic practice.

Just a cursory glance at Fromm's seminal essay "Psychoanalysis and Zen Buddhism" illustrates his investment in upholding this separation. Fromm begins his piece with the hypothesis that "in spite of the fact that both psychoanalysis and Zen deal with the nature of man and with a practice leading to his transformation, the differences seem to outweigh these similarities." He asks "can the discussion of the relationship between psychoanalysis and Zen Buddhism result in anything but the statement that there exists no relationship except that of radical and unbridgeable difference?" (1960, 77). At first, Fromm appears to want to answer this question with a "no." The essay is a listing of deep similarities between the frames. But, in his concluding thoughts, Fromm reaffirms that, while their aims are aligned, "as to methods of achieving this aim, psychoanalysis and Zen are, indeed, entirely different." (1960, 139).

Fromm is open to the possibility that Zen practice could yield results - Jung is mistaken that it is incompatible with "the European" (1960, 114). Fromm meditated himself, first in the Zen style he learned with Suzuki, and, in the last years of his life, for an hour a day as taught by Nyanaponika. And yet he always kept this discipline separate from psychoanalysis. Furthermore, anticipating contemporary critics of the clinical use of mindfulness practices, Fromm expressly discourages Buddhist practice decontextualized from Buddhist frameworks.

All of this is not a 'technique' which can be isolated from the premise of Buddhist thinking, of the behavior and ethical values which are embodied in the master and in the atmosphere of the monastery. (1960, 138)

Fromm would never have incorporated a Buddhist practice into psychotherapy; it is “Zen thought [that] will deepen and widen the horizon of the psychoanalyst” (1960, 140).¹⁶³

Fromm suggests that Buddhist knowledge could be quite useful to analysts, and psychoanalysis useful to Buddhist teachers. But he would have been highly opposed to an integration of the two. This position is fundamental to the clinicians who follow in Fromm’s lineage.

Personalizing religion approaches represent one of the primary means by which psychotherapists continue to relate to Buddhist traditions. Clinicians’ contemporary versions of such an approach are directly influenced by Fromm’s early adoption. At times, however, they even more strongly embrace Buddhist practice. Even as they still strive to keep it separate, personalized in their clinical work. Some psychotherapists today do not only have a personal meditation practice, but are leaders of meditation groups. And yet, they never speak of this practice or of their position out loud in therapy sessions.

“A Living Version”: Contemporary Personalizing Religion Approaches

In the previous sections, we looked at psychotherapists who engage in serious theoretical investigation of Buddhist teachings and, at times, participate in personal Buddhist practice. These clinicians personalize their Buddhist experiences for their clinical work, safely housing them within their person, invisible in therapy sessions. In the next section, I introduce contemporary therapists who continue to take this approach, personalizing

¹⁶³ The full quote: “And its very radicalism with respect to intellectualization, authority, and the delusion of the ego, in its emphasis on the aim of well-being, Zen thought will deepen and widen the horizon of the psychoanalyst and help him to arrive at a more radical concept of the grasp of reality as the ultimate aim of full, conscious awareness” (Fromm 1960, 140).

Buddhist traditions. Some recent psychotherapists, however, do not only personalize their theoretical study of Buddhist doctrine. They personalize their roles as Buddhist teachers.

The very first interview I conducted for this project was with the psychoanalyst, Barry Magid.¹⁶⁴ While maintaining a full time private practice, Magid is also the founding teacher of Manhattan's Ordinary Mind Zendo.¹⁶⁵ He received "dharma transmission" in 1999 from an important recent figure in U.S. versions of Zen, Joko Beck. Magid has published multiple books comparing psychotherapeutic and Zen frames and gives public lectures on the topic.¹⁶⁶ Based on these activities, I had the preconception that Magid practiced a psychotherapy fully based in Buddhist doctrine, that he takes what I call an adopting religion approach to Buddhist traditions. I was thus surprised that explicit mention of Buddhist teachings and practices are totally absent from his therapy sessions.

My surprise may be illustrative of the experience of some who come to see Magid for therapy. Magid and other therapists who take personalizing religion approaches, acknowledge this dynamic in interviews. For example, another adherent of U. S.

¹⁶⁴ Interviews were conducted by phone on January 13, 2014 and in Manhattan on February 6, 2014.

¹⁶⁵ "The Teacher [Barry Magid]," Ordinary Mind Zendo, last accessed 4/30/12, <http://www.ordinarymind.com/>

¹⁶⁶ Based only his then-published material, I speculated that Magid might have undergone an evolution in his thinking over the years about the relationship between psychotherapy and Buddhist traditions, science and religion. Magid seemed to have become prepared to reverse the traditional hierarchical arrangement of secular science over religion. This was detectable to my mind in just the front matter of his books. Magid's first book *Ordinary Mind* is subtitled *Exploring the Common Ground of Zen and Psychoanalysis* (2002), but the subtitle of his next publication, *Ending the Pursuit of Happiness*, is simply *A Zen Guide* (2008). (A third book, *Nothing is Hidden: The Psychology of Zen Koans* (2014), was published shortly after I generated my hypothesis.) In this work, Magid seemed to me to transition from a seeker of "common ground," of a clinician taking an integrating religion approach, to an adopting religion. I read him as having become a full-fledged proponent of the belief that it is religion, a religion shaped by psychology of course, but *religion* that will be most of service to the suffering. He states in the book that it is his "hope" that the reader "will see how a new psychologically-minded Zen practice can be relevant to your daily life in twenty-first-century America" (xi).

versions of Zen, Jungian psychoanalyst Polly Young-Eisendrath has participated for decades in dialogues on Buddhist and psychotherapeutic thought. She arranges conferences to facilitate those discussions (like the “Enlightening Conversations” meeting I observed). And she has co-edited the resulting collections of papers from those gatherings like *Awakening and Insight: Zen Buddhism and Psychotherapy* (2002). While all conducted in the public eye, most traces of this work are erased from Young-Eisendrath’s psychotherapy practice. In a personal interview, she expressed bemusement that she is regularly sought out for therapy by individuals who have read her work and know her as both a Buddhist and a psychoanalyst.¹⁶⁷ These individuals are surprised to find that her psychoanalysis does not incorporate Buddhist practice.

As discussed at the outset of this chapter, Young-Eisendrath and Magid both come out of psychoanalytic traditions. They are thus primed to take personalizing religion approaches to Buddhist traditions. Like Kelman or Jung, they seek a strict separation between overt psychotherapeutic and Buddhist practice. However, Magid told me that he is not primarily driven by a desire to maintain his psychotherapy’s designation as secular. Magid’s true goal, he says, is actually “to keep meditation religious” (2/16/14). Explicitly citing Fromm as a major influence on his thought, Magid believes that the therapeutic use of Buddhist practices degrades an authentic Buddhist path and contributes to a sick society.¹⁶⁸ When I asked him about therapists who do incorporate meditation practices into their clinical work, he said “I think these people are ‘helpers.’

¹⁶⁷ Interview was conducted in person in Manhattan on February 6, 2014.

¹⁶⁸ However, when I invited him to comment on the completed dissertation, Magid reminded me by email that “you seem to have me more directly connected to Fromm than seems correct. I was trained by followers of Horney & Kelman and belong more to her lineage than his” (personal communication, 4/10/16).

They're taking this and using it as a technique" (2/6/14). Following Alexander and Fromm, Magid believes that psychotherapists in the U.S. have become overly reliant on positivist science. The dominance of "the medical model," to Magid's mind, induces an "instrumentalized" care that is ultimately dehumanizing, creating as much suffering as it eases. The ideological assumptions of conventional biomedicine inculcate "instrumentalized" views of life. Here one ceaselessly seeks to "help," to "fix" the inherent pain of life rather than "being with" things as they are.

When therapists use Buddhist practices in their clinical work they employ them as instruments, as techniques. This compromises, in Magid's view, these practices' true religious purpose, the attainment of enlightenment. This is what Magid means when he says he wants "to keep meditation religious." Of course, Magid has very specific definitions for the concepts of enlightenment and religion. On the former, Magid does not seek a Buddhist enlightenment that means release from the cycle of rebirth. "It's a metaphor; get over it!" Magid blurted to me on that subject (Magid, 2/6/14). Magid's understanding of enlightenment is a self-realization that includes self-transcendence, ethical transformation and an awakening to the inter-relatedness of all things. Using Buddhist practices "instrumentally" for symptom reduction would be antithetical to authentic Buddhist enlightenment. "Instrumentalism," Magid says, is a "means-to-end thinking," a way of walking through the world that looks to change, adapt, or conquer, rather than "being-with" experience just as it is.

In Magid's Zen Buddhist teachings, practitioners are to see the perfection of things-as-they-are, the true Buddha-nature that is the natural state of everyone and everything. "Zen offers us a counterbalancing insight into our essential wholeness," he

writes “a wholeness to which nothing need be added or subtracted – or indeed even could” (2002, xvi). In our interviews, Magid makes this same “essential” aspect of Buddhist practice, the essential defining quality of the category religion.

What I think, to me, is essential about religion is to get off this grid of means-to-end thinking [instrumentalization]. See, what a religious perspective is is something that basically is appreciation and acceptance of everything in this moment and you for its own sake, not what you're becoming, not what you're doing, but “being,” right? That, to me, is the religious perspective of Zen. It's a non-theistic religious perspective. (2/6/14)

Magid concedes that his definition of religion equally applies to his definition of authentic psychoanalysis (under his definition “psychoanalysis can be a religion” (Magid, 2/6/14)). He characterizes both after all as providing an antidote to the “means-to-end thinking” he sees as so harmful. But, he told me to actually define psychoanalysis as religion, “that's sort of silly” (2/6/14). In this tension, we again see the instability of the relationship between religion and secular set up by personalizing religion approaches.

Magid's definitions can seem to blur the lines between the aims of religions, Buddhist traditions and psychoanalysis. But he actually operates on multiple definitions of these terms. In our interviews, he did not only speak of the “religious” as defined above. Like Fromm, he more frequently assumed the term's conventional definition than his reconstruction of it. When, for example, I asked him whether he would describe his Zendo as religious, he answered, “Yes. I make a big point of saying that this is a religious practice, even though I'm not a priest.” He explained that his Zendo “has an alter, and we do traditional chants, and we bow. . .I do all that stuff.” No matter how “religious” psychoanalysis is under Magid's redefinitions of these terms, it would never include accouterments like chants and bowing. Buddhist and psychotherapeutic practice remain clearly differentiated in their outward appearance. Motivated in part by a

commitment to guiding psychoanalytic principles, Magid can at times seem intent on preserving the separation between two distinctive frames. But, at every turn, this separation is destabilized by the multiple roles therapists like Magid and Young-Eisendrath hold.

There may be numerous practicing clinicians in the United States who take personalizing religion approaches to Buddhist traditions. But I would never have interviewed them for this project: they would indeed have been invisible to me. Magid and Young-Eisendrath, however, are not only therapists in private practice, but published authors on the subject of “Buddhism and psychotherapy.” They are public about their personal practice and its intense impact on their psychotherapies. Magid does not keep his work as teacher of his Zendo private; his internet presence as leader of Ordinary Mind is more pronounced than that for his psychotherapy practice. In their publications or public lectures, Magid and Young-Eisendrath are psychotherapists “adopting” Buddhist traditions. They adopt religious practices, aims, and identities. But in their clinical practices, they personalize this extracurricular behavior, holding it internal and silent.¹⁶⁹ And yet, a person who seeks Magid and Young-Eisendrath out for therapy because of these activities returns their Buddhist identities to them. The personal religiosity of clinicians crosses the boundary of the secular consulting room when carried in by someone who expressly chooses them as their therapist because of this connection.

Magid told me that people sometimes seek him out specifically because he is a leader of a

¹⁶⁹ This is a common practice in the United States. Many keep their professional identities separate from leadership roles they play in religious communities. Individuals work forty-hour-weeks in their chosen professions while, in personal “free” time, serve as gabbai at their synagogue or deacon at their church. Magid’s position as Teacher of Ordinary Mind is prominently publicized. But, in our internet age, a google search of any therapist would likely out them as serving in positions of religious leadership.

Buddhist community. But if they are interested in Buddhist practice, he refers them to his Zendo. Magid is aware that this could appear to set up an unethical “dual relationship.”¹⁷⁰ But he likens this to times when a therapist sees someone in both individual and group therapy. Further, Magid believes that both therapeutic and Zen practice will assist analysands to become psychological healthy enough to simultaneously hold both his differentiated roles.

Perhaps “personal” or outside information about these therapists’ Buddhist identities can be successfully worked through (or out) of the analytic process. Analysts regularly hear that analysands have discovered, accidentally or otherwise, details about their personal lives. They are trained to process such incidents so that they do not interfere with the work of therapy. However, Magid and Young-Eisendrath told me that they do not seek to fully cordon off their Buddhist identities from psychotherapy. As Young-Eisendrath explained in our interview, even when people are unaware of it, her Buddhist practice still exudes off her in a way that is all the more powerful for being silent.

Even people who don’t come because they know that I am a BuddhistOccasionally there is somebody who comes kind of innocently. It’s rare now with the Internet, almost nobody because they look me up on the Internet, but, in the past, when people have come for other reasons, they have eventually noticed that there is something about me that they remark on. They usually call it calmness or something like that. (2/6/14)

¹⁷⁰ Psychotherapeutic professional codes have proscriptions against clinicians doing therapy with someone with whom they have an existing outside relationship. Therapists are encouraged to minimize wherever possible dual relationships (simultaneously acting as both therapist and friend, partner, business associate, etc. to someone coming to see them for therapy) for potentially compromising confidentiality or professional boundaries.

Magid and Young-Eisendrath may outwardly keep an absolute separation between the religious and secular, but they suggest that their Buddhist selves remain present, if invisible, within their person. Religion is truly personalized.

Contemporary clinicians' personalizing religion approaches to Buddhist traditions are influenced by humanist and humanistic therapeutic movements that stress the healing function of "the person of the therapist." This phrase is now so prevalent that it is not only spoken today by person-centered therapists. A wide swath of clinicians use the concept whether they employ post-Rogerian psychodynamic modalities or cognitive-behavior therapies. For clinicians like Magid and Young-Eisendrath, theories of "the person of the therapist" explain how their Buddhist identities still operate in their psychotherapeutic work. Magid believes he has had Buddhist liberative experiences that have so reworked his personhood that it would be impossible to not bring them with him into his office. Magid has written that Buddhist texts, like the Heart Sutra, are powerful sources of healing. When I asked him why he does not discuss such doctrine in sessions, he explained that it is unnecessary.

I have an experience of the Heart Sutra as the expression of the underlying emptiness and perfection of things. And that, that is the sensibility I try to bring when I listen to [analysands]. They get *me*. They don't need the Heart Sutra. They get the living version of it. (2/6/14)

Magid may seem to uphold a strict separation between Buddhist and psychotherapeutic practice. But only to the unknowing eye. At times like this, Magid can begin to sound as if he is taking a translating approach to Buddhist traditions. He is still presenting the sensibility of the Heart Sutra, but translated into secular psychoanalytic terms. This is similar to Horney's "wholeheartedness" which some claim is a secular translation of Suzuki's Zen teachings.

But Magid is absolutely scathing in his criticism of the clinical use of mindfulness practices. Here the popularity of mindfulness practices becomes a mark against them, a sign of their basis in superficial capitalistic marketing. Magid's person may be "the living version" of Buddhist truths, but the incorporation of specific teachings and practices "instrumentalizes" them. Magid describes translating religion approaches to Buddhist traditions as inauthentic secularization. Of course, to most U.S. audiences, therapists who incorporate practices like meditation likely appear to practice a *more* Buddhist form of therapy than those who remove all visible signs of Buddhist influence. As evidenced by Magid and Young-Eisendrath's experiences, there is a growing desire for therapists who have a connection to Buddhist traditions. Someone seeking such a therapist would likely be dissatisfied with Magid's living version of the Heart Sutra. A DBT practitioner, meanwhile, who teaches meditation in sessions would seem to fit the mold, even if that practitioner has never studied a word of Buddhist doctrine.¹⁷¹ A therapist like Magid appears to find this quite frustrating. He feels protective of the integrity of Buddhist truths when hearing clinicians like Steven Hayes decree that "if religious and spiritual traditions are to enter empirical clinical psychology, they must be ours."

Of course, when I asked Hayes to respond to those who might be incensed by his attitude, he sounded remarkably similar to Magid. Hayes stated that therapists must translate Buddhist elements into secular items to maintain the same differentiation that

¹⁷¹ Of course, again, DBT therapists do sometimes study Buddhist doctrine. They sometimes read and discuss Buddhist texts with those coming to see them for therapy; these texts could even be written by Magid. At times, they might translate Buddhist concepts into secular terms. But, as discussed in the previous chapter, mindfulness practitioners sometimes take adopting, as well as translating, religion approaches to Buddhist traditions. Here their therapies would both achieve therapeutic and Buddhist aims like enlightenment.

Magid seeks between Buddhist and psychotherapeutic frames. Hayes told me that this doesn't only preserve psychotherapy's secularity; it also protects Buddhist traditions from being submitted to science. Buddhists and scientists, he says, should have authority of their own separate realms of knowledge. He actually expressed concern about the Dalai Lama's proclamation that Buddhist doctrine disproved by science should be dismissed. Magid wouldn't share Hayes investment in keeping psychotherapy scientific, he never believed it was. But *both* deride more integrative approaches to Buddhist traditions. Hayes told me that therapists who explicitly offer Buddhist teachings and practices in their clinical work are "mixing things and confusing people" (Hayes 11/15/14).

That psychotherapists like Magid and Hayes take such different paths to the same place is perhaps unsurprising. Personalizing and translating religion approaches to Buddhist traditions are, in many ways, "two sides of the same coin." Both believe they incorporate Buddhist elements into psychotherapy in a way that preserves the differentiation between them. Clinicians taking translating religion approaches incorporate Buddhist practices translated into biomedical treatment interventions. Those employing personalizing religion approaches bring Buddhist identities or experiences into sessions, safely sequestered within their person. To a clinician like Hayes, therapists must translate religion into secular terms to maintain the differentiation between the two. To another, like Magid, this already subsumes religion within the secular; the only way to preserve the differentiation is to keep one fully separate from the other. The last two approaches we will look at in this dissertation are taken by psychotherapists who seem unfazed by "mixing things" and embrace a union between psychotherapeutic and Buddhist practice.

CHAPTER 5

“WITH RIGOR”: ADOPTING RELIGION APPROACHES

The approaches to Buddhist traditions discussed so far in this dissertation are intended to maintain a clear differentiation between religious Buddhist practice and secular psychotherapy. In the final two approaches we will look at, imagined boundaries between Buddhist and psychotherapeutic frames are blurred. Psychotherapists taking these approaches can seem to completely upend the way that their predecessors related religion and secular. In the following chapter, I present the first of these: *adopting religion* approaches to Buddhist traditions.¹⁷² I begin by reviewing the major features of psychotherapists adopting religion approaches. I describe three main ways that therapists have adopted Buddhist teachings and practices and introduce representative figures to illustrate each: Psychotherapists (1) adopt Buddhist teachings and practices in their capacities as teachers, speakers, authors, and even religious leaders; (2) frame therapy sessions as separate adjunct to assist in the achievement of Buddhist goals; and, (3) fully adopt Buddhist teachings and practices as the basis for their psychotherapies.

¹⁷² It is worth nothing that the phrase “adopting religion” is a far from a perfect name for these approaches. In the end, I settled upon it as the least flawed alternative of the many I have considered. Perhaps the most accurate way of describing the behavior of the clinicians presented in the following is that they are “practicing religion.” I ultimately decided that using the word “practicing” would be confusing given how often “practices” are discussed. Further, in the case of some therapists’ approaches, “practicing religion” is a stronger phrase than they themselves would use. I have contemplated many other words that could speak to aspects of these approaches including “serving,” “advancing,” “observing,” “propagating,” “advancing,” or “spreading,” religion. But, despite its obvious limitations, “adopting religion” still seems the best of a set of defective choices.

In the course of reviewing these adopting religion approaches to Buddhist traditions, I briefly survey the impact these approaches have had on Buddhist communities in the United States. I then explain how adopting religion approaches to Buddhist traditions have been shaped by key humanistic and transpersonal psychotherapists like Abraham Maslow. Such therapists actively rework the conventional definitions of religion and secular science in a manner that clinicians who adopt religion still employ. The revisions of transpersonal psychotherapists to these categories have an even stronger influence on the integrating religion approaches to Buddhist traditions discussed in Chapter Six (as, I will argue, many transpersonal modalities themselves constitute integrating religion approaches to Buddhist traditions). Meanwhile, representatives of adopting religion approaches introduced in this chapter, like psychiatrist Joe Loizzo, sometimes explicitly distance themselves from transpersonal forbearers. Contrasting themselves with transpersonal clinicians, these therapists believe they offer psychotherapies that are “rigorously” and authentically Buddhist in character.

In the next sections of this chapter, I will delve into the three ways outlined above that psychotherapists have adopted Buddhist traditions. Each one can seem to upend the relationship between religion and secular we’ve become accustomed to seeing in previous chapters. Where psychotherapists have sought to adapt religious elements to make them acceptable to secular scientific authorities, therapists who take adopting religion approaches to Buddhist traditions will reverse this hierarchical relationship. At times, they will portray a Buddhist path to be superior alternative to secular psychotherapy. Instead of treating Buddhist teachings and practices as resources to aid clinical work, clinicians who take adopting religion approaches perceive psychotherapies

as resources that can aid Buddhist communities. In a variety of ways then, these clinicians seek to make psychotherapeutic frames serve Buddhist aims. Some clinicians even propose that their psychotherapies are new Buddhist forms consistent with those of the past. I conclude the chapter, however, by again demonstrating that adopting religion approaches too create an unstable relationship between religion and secular.

“Moving Into the Area of Religion”

In this section, I present the first way I have observed psychotherapists adopt Buddhist teachings and practices in their capacities as teachers, speakers, authors, and even religious leaders. We already saw instances of this approach in Chapter 4. Barry Magid personalizes Buddhist traditions in his clinical work. But, as a psychotherapist leader of a Zendo, Magid fully adopts Buddhist teachings and practices. Another striking example of this approach is the psychologist Karen Kissel Wegela.¹⁷³ Wegela often takes a translating religion approach to Buddhist traditions. She is opposed to direct incorporation of Buddhist practices into secular psychotherapy. In her writings, she indicates that “loving-kindness practice [maitri]. . .[or] the formal practice of tonglen is not something that would be appropriate for us, as psychotherapists, to teach our clients” (2010, 86).¹⁷⁴ When asked about this in personal interviews, Wegela clarified that doing so would be “moving into the area of religion. . .maybe it's analogous to a therapist teaching a client to pray” (Wegela 6/10/14). Wegela will include Buddhist aims among

¹⁷³ Interviews were conducted by phone on June 10, 2014 and June 12, 2014.

¹⁷⁴ Wegela has also, of course, been touched by mindfulness movements. But she tends to translate items more specific to the Tibetan Buddhist “Shamabhala” lineage within which Naropa is embedded like “maitri” and “tonglen” practices.

the desired treatment outcomes for her psychotherapy. But she translates those aims into secular-defined equivalents for use in actual therapy sessions:

In contemplative psychotherapy, our aspiration is to help our clients recognize and manifest their brilliant sanity. Since “brilliant sanity” is a term for our absolute nature, it is, perhaps, completely outrageous to think of it as a treatment goal. After all, it sounds like the aim of many spiritual paths. While I certainly don’t suggest giving up that aspiration and all it implies, I sometimes translate this goal into a simpler form: I am especially interested in helping my clients develop mindfulness, loving-kindness, and connection. (2010, 75)

Wegela thus translates Buddhist teachings and practices for clinical use. She suggests in the above that explicitly meditating in sessions is “inappropriate” in her role “as a psychotherapist.”

But Wegela also sometimes describes her identity as a therapist to be only a “thin veneer” over her true essence as a Buddhist healer. Here then her Buddhist identity is personalized within her and psychotherapy becomes an “empty form” through which it can be channeled.

I may cling to my identity as ‘psychologist’ or ‘psychotherapist’ or ‘counselor’ or whatever label I have assumed. We can easily make a big deal out of therapy. Instead, we could see that it is simply an available form. Because there is such a thing in the culture as ‘therapy,’ we can take that empty form and possibly be of help to people who are suffering. (2010, 42)

In her role as a therapist, Wegela may take translating or personalizing approaches to Buddhist traditions. But this is only an impermanent label for her true work. Further, in her role as an author, teacher, and speaker she adopts Buddhist traditions. The above descriptions of the way Wegela relates Buddhist and psychotherapeutic frames are excerpted from her publications. Wegela thus shares with the public a clinical approach that adopts Buddhist doctrine. Four early chapters of one of her books, *The Courage to Be Present: Buddhism, Psychotherapy, and the Awakening of Natural Wisdom* (2010),

are each based on one of the Four Noble Truths. She told me that she sees them as “a blueprint” for therapy.¹⁷⁵ Wegela devotes a whole section of that same volume to how psychotherapists can “engage in bodhisattva activity.”¹⁷⁶ A more recent text like *Contemplative Psychotherapy Essentials: Enriching Your Practice with Buddhist Psychology* (2014) provides elucidation of topics such as “Mandala Approaches to Supervision and Consultation.” Thus, as a writer and speaker, Wegela adopts Buddhist language and immerses her theories of psychotherapy within that language.

Wegela’s writings are often directed to a wide audience, but were honed by ongoing interactions with students and trainee therapists. For fifteen years, Wegela served as the director of the “Contemplative Psychotherapy” training program at Naropa University in Boulder, Colorado.¹⁷⁷ “Leading to a master’s degree in psychology,” Wegela explains, the “Contemplative Psychotherapy” program “may be said to have two parents: the wisdom traditions of Buddhism and Shambhala and the clinical traditions of Western psychology” (Wegela 1996, 229). The program is thus based on adopting Buddhist traditions; it has an explicit Buddhist affiliation within a university that has an

¹⁷⁵ But, again, she also told me that she cannot remember a time that she “introduce[d]” the Four Noble Truths by name in a session to someone otherwise unfamiliar - “I’m not going to ever say never” she added. Instead, she translates them: “I might talk about the basic ideas,” she said to me, “but I wouldn’t call them the Four Noble Truths” (Wegela 6/12/14). In general, Wegela does not bring in Buddhist elements unprompted. At the same time, she is willing to respond when they are introduced by those who come to see her for therapy: “Sometimes I have clients who are Buddhist, right? . . . [And] I would use that language with them if they wanted. If they were comfortable with that, if that was already in their world. I wouldn’t shy away from it, but I wouldn’t introduce it to someone” (Wegela 6/12/14).

¹⁷⁶ Of course, the bodhisattva activity Wegela refers to does not include powers like teleportation as they have in the past. Acting as a bodhisattva means, to Wegela, acting in the service of others for the betterment of humanity.

¹⁷⁷ Founded in 1976, Naropa University is one of a growing number of academic institutions in the United States that are affiliated with U.S. Buddhist strands and cater primarily to “convert” students of European descent. Future research should examine how these schools relate to Christian and Jewish affiliated universities in the U.S. as well as historical Buddhist educational institutions. For more start with Goss 1999.

explicit Buddhist affiliation.¹⁷⁸ Still an instructor at Naropa today, Wegela adopts Buddhist doctrine when teaching students. These students often have chosen Naropa precisely because it offers training in a Buddhist-informed psychotherapy. As we saw above, Wegela will adopt Buddhist goals as the aim of the psychotherapy she shares with trainees even as she also instructs those trainees to translate or personalize those goals in actual therapy sessions. To summarize then, psychotherapists sometimes take adopting religion approaches to Buddhist traditions in their dual roles as both clinician and teacher or author, even when their clinical work shows no visible sign of this activity. But at times the additional role in question is not “psychotherapist who also lectures on the intersection between Buddhism and psychology,” but “psychotherapist who also leads a Buddhist community.”

Jack Kornfield (2008), for example, is renowned as the founder of Buddhist meditation centers like Spirit Rock. So famous is he as a Buddhist leader, it may require a reading of his “bio” to learn that he is also a licensed psychologist. And yet, clinicians like Kornfield and Magid hold the mantle of leader of Buddhist communities *as psychotherapists*. Their Buddhist teachings are explicitly infused with psychotherapeutic theories. We have already met modern(ist) Buddhist leaders like D.T. Suzuki whose

¹⁷⁸ An area for future research, Naropa’s program is representative of a burgeoning industry responding to the growing demand for education and credentialing in psychotherapy connected to Buddhist traditions. Naropa’s program notably titles itself “contemplative” rather than “Buddhist” psychotherapy and its courses refer to multiple religious traditions. Nonetheless, it clearly contrasts with comparable offerings such as the Master’s of Psychology program offered by San Francisco’s Institute for Integral Studies. The latter is representative of an education marketed to those seeking an even more integrative approach – it is specifically aligned with Ken Wilber’s which we will look at more closely in the second half of this chapter. Naropa, meanwhile, bears a Buddhist associated name, a notable history of Buddhist association, and a stronger bent towards specifically Buddhist practice. Included in the curricula for students enrolled in the three-year program are “Maitri programs.” These retreats “in a scenic setting. . .include intensive sitting and walking meditation, the introduction of tonglen practice, study, and the mairtri space awareness practice” (Wegela 1996, 230). Both the “maitri” and “tonglen” practices students learn are reconstructions of Tibetan Buddhist elements discussed in mainstream texts by figures like the U.S. born Tibetan Buddhist nun Pema Chodron.

understanding of Buddhist doctrine was shaped by psychotherapeutic thought. The Naropa Institute that would later become Naropa University was founded by another such figure, the controversial Tibetan monk and Oxford University scholar Chogyam Trungpa (1973, 1984, 2005). Trungpa led a community that became known as the U.S. Buddhist form Wegela named above: “Shambhala.” Trungpa presented Buddhist teachings that actively incorporated psychotherapeutic concepts. As far back as the 1960s, Trungpa asserted that, in a modern age, it was psychotherapy that was best suited to “spread the Dharma.” It was Trungpa that popularized the phrase Wegela mentioned above, “brilliant sanity,” to convey the essential qualities of enlightenment. He encouraged followers to view Buddhist practice as a superior kind of therapy. And he created Buddhist-therapeutic programs like the “Maitri” groups that are still part of Naropa’s clinical training. Trungpa was vocally enthusiastic about how psychotherapeutic elements could serve Buddhist communities in the United States. But when it is a psychotherapist who establishes a new Buddhist community themselves, it is often simply assumed that they will be shaped by psychotherapeutic frames.

U.S. Buddhists’ Approaches to Psychotherapeutic Traditions

In all of his writings on the relationship between religion and psychotherapy, Jung never even raises the possibility that a therapist might utilize religious practices in their clinical work. He did, however, believe that psychotherapy could be useful for a Christian pastor (1932). Fromm, meanwhile, also does not incorporate Buddhist practices into psychotherapy. But he suggests that psychoanalysis could aid Buddhist practitioners in multiple ways. It could, for example, assist in distinguishing authentic from inauthentic

satori experiences (e.g., 1960). Clinicians have long claimed that psychotherapy could aid Buddhist communities. They will often therapize particular Buddhist teachings and determine that they are not altogether healthy and in need of therapeutic assistance. Buddhist doctrine is regularly read as opposed to relationality or healthy expression of emotion.¹⁷⁹ A path towards Buddhist enlightenment would then be improved by reworking these teachings with the insights of psychotherapists.

In our interview, Polly Young-Eisendrath expressed a common belief among clinicians that Buddhist communities underestimate the resources of psychoanalysis and other psychotherapies. She has watched for years now as psychotherapists enthusiastically adopt Buddhist teachings and practice. But, from her perspective, Buddhist communities have less readily adopted psychotherapeutic resources. Part of the impetus for Young-Eisendrath's Enlightening Conversations conference, she said, was to rectify this perceived disparity. I heard much discussion at the conference of what is perhaps clinicians' prime argument for why Buddhist communities should turn to them for help: "teacher scandals." So-called "teacher scandals" have shaken U.S. Buddhist communities over recent years. Multiple leaders have been exposed for abusing their power over followers including through sexual violence. The aforementioned Chogyam Trungpa is a prominent example; his students continue to argue today about his sexual activity and (over)abundant use of alcohol. Analysts like Young-Eisendrath believe that psychoanalysis is well-suited to address issues of sexual repression. They suggest that

¹⁷⁹ One recent favorite example often discussed today surrounds the concept of "spiritual bypassing." Inspired by the integrative approach work of therapist John Welwood (2002) (following the aforementioned Trungpa) psychotherapists suggest that practitioners be assessed to ensure that their Buddhist practice is not utilized to "spiritually bypass" emotional or unconscious material, to inhibit or repress. For those taking adopting religion approaches, this is an updated version of Fromm's suggestion that psychoanalysis could assist practitioners to discern true from false enlightenment experiences.

concepts such as transference and idealization can inform the power dynamics in relationships between Buddhist teachers and their followers.

From a certain perspective, these discussions hierarchically position psychotherapeutic values as arbiter of what religious practice is worthwhile. But from another point of view, we see here psychotherapeutic theories and methodologies reduced to instruments, placed into the service of Buddhist aims. Rather than Buddhist traditions holding resources for clinical work, psychotherapies are viewed as holding resources for Buddhist practice. A topic I unfortunately will be unable to delve into here, Buddhists now commonly utilize psychotherapeutic elements in the course of providing “chaplaincy” in hospitals or prisons in the U.S. and beyond.¹⁸⁰ The influence of psychotherapeutic frames on Buddhist communities could be explained by the dominance of a contemporary “therapeutic culture.”¹⁸¹ Sociologists have described modern society to be permeated with therapeutic ideologies. But as Ann Gleig (2011, 2012) shows,

¹⁸⁰ I do not discuss Buddhist pastoral care & counseling or chaplaincy partially due to the constraints of space. But partially because, as illustrated by a therapist like Wegela, most of the clinicians I spoke to view there to be a hard line between the disciplines of psychotherapy and pastoral care. Both Wegela (6/12/14) and Magid (2/6/14) mentioned to me that incorporating Buddhist practices into treatment resembles “pastoral counseling” more than psychotherapy. The topic is thus out of the scope of this current dissertation’s focus. Nonetheless, it should be noted that the work of Buddhist chaplains and caregivers brings to light core issues for “pastoral theologians” and the relationship between pastoral care and secular-defined psychotherapy. They could first be a location to explore the possibility of models of care that are not normed by Protestant or psychotherapeutic frames. Asian Buddhist communities both in the U.S. and abroad (e.g., the *Vihara Care* hospice movement in Japan see Naoki 2006) now expect monks to preform many of the same functions of Protestant pastors where caregiving had once functioned quite differently. In the past, monks were absolutely indispensable to the well-being of communities, but care-giving per se was provided by the community at large. Further, in the scant literature that exists on Buddhist chaplaincy or pastoral care & counseling (e.g., Giles and Miller 2012), one finds the same range of approaches I outline in this dissertation. Pastoral counselors and chaplains have been influenced by some of the same norms as the therapists I study. Many are just as reluctant to meditate with those they care for as Wegela. Thus, some of the therapists discussed in this chapter who actively share Buddhist doctrine and participate in “sending positive intention” to those in need might appear to behave more “self-evidently” religious than many contemporary pastoral counselors. This raises important questions about pastoral counseling as a unique discipline.

¹⁸¹ For a helpful introduction and treatment of this concept begin with Illouz 2008.

participants in Buddhist communities like those at Jack Kornfield's Spirit Rock do not believe they have submitted to a therapeutic culture. They instead view themselves as skillfully appropriating psychotherapeutic elements for their Buddhist practice. Figures like Harvey Aronson (2004) voice a strong dedication to performing this task.

When I contacted Harvey Aronson to request an interview, he initially responded that he was uncertain if he would fit with my project.¹⁸² His email read in part

I don't know if I have a place in your thesis or not. My interests lean towards what the modern psychotherapeutic understanding has of [sic] contribute to allowing Western practitioners to more effectively be able to engage in Buddhist practice.

Aronson is a practicing psychotherapist. But, as he noted in his email, he is more concentrated on what "the modern psychotherapeutic understanding" can offer Buddhist communities than what Buddhist teachings can offer psychotherapeutic practice. In terms of his clinical work, Aronson largely takes personalizing and translating approaches to Buddhist traditions. He rarely uses even translated forms like contemporary therapeutic mindfulness practices. When he occasionally employs, for example, "body-scans" it is to assist people to increase awareness of their experience.

Trained decades ago as a Buddhist studies scholar and translator, Aronson once held a visiting appointment at Stanford University and a tenure-track position at the University of Virginia. Now a lama in the Nyingma lineage, he leads a Buddhist community in Houston, TX with his wife, noted contemplative studies scholar Anne Klein. In his publications, Aronson emphasizes that Buddhist communities in the States should remain cognizant that their participants usually operate with psychotherapeutic values and assumptions. For instance, he says, the relationship between student and

¹⁸² Interviews were ultimately conducted by Skype on March 7, 2015 and March 18, 2015.

teacher in “traditional Buddhist cultures” highly diverges from the kind of relationships that practitioners in the U.S. anticipate. In Chapter Six, I further explain Aronson’s innovative integration approach “reconciling” Buddhist and psychotherapeutic frames. But, again, as a clinician, Aronson does not practice a psychotherapy that integrates Buddhist traditions. Instead, as a therapist co-leader of a Buddhist community, he shares how psychotherapeutic insights can enhance Buddhist practice. On occasion, however, Aronson will perform a function that I highlight in the next section as the second major way that psychotherapists adopt Buddhist traditions.

“Facilitating Religious Experience”: Psychotherapy as Adjunct to Religious Practice

In this section, I describe the second way that psychotherapists have adopted Buddhist traditions. Here clinicians will frame therapy sessions as adjunct to Buddhist practice. At these times, therapists assist Buddhist practitioners with psychological issues they see as impeding their path towards Buddhist enlightenment. Aronson’s expertise as a psychotherapist in this regard will sometimes inform his guidance of the Buddhist community he co-leads. Paul Cooper (2010), meanwhile, is another example of a therapist who sometimes performs this function for Buddhist practitioners. A psychoanalyst in private practice in Manhattan, like Aronson and Magid, Cooper also holds a dual role as leader in a Buddhist community. He acts as “Sensei, Director and head teacher” of the Two Rivers Zen Community in Honesdale, Pennsylvania.¹⁸³ Cooper shares another quality with Aronson: both were engaged in Buddhist practice long before becoming clinicians. This may be a common determining factor that contributes to why

¹⁸³ As listed on Two Rivers’ Website: <http://tworiverszen.org/teachers>

these psychotherapists choose adopting religion approaches to Buddhist teachings and practices. They often stress this aspect of their biography implying a sort of prioritization to their identities. Another therapist to take adopting religion approaches to Buddhist traditions, Mark Epstein (mentioned in Chapter One) never fails to mention in his writings that he too “was in the relatively unusual position of learning about Buddhism *before* [his emphasis] I became a psychiatrist, and I studied meditation before either entering or practicing psychotherapy” (8-9).

Cooper has published his thought on “the interaction between Zen and psychoanalysis” (2010, 1) of public consumption. In personal interviews, he expanded on how psychotherapy sessions can provide support to Buddhist practitioners.¹⁸⁴ Cooper has observed a number of individuals who, in the course of meditation practice, uncover profoundly painful emotions and memories that otherwise might have remained dormant beneath the surface. Fromm and Suzuki (1960) had previously discussed this exact possibility. They suggest that committed meditation practice could be useful precisely because it could access such material. Many Buddhist practitioners, however, do not meditate as a tool to gain greater personal insight. They instead seek to attain a transformative Buddhist enlightenment. Releasing inhibited painful emotions may be informative, but, when persistent, can seem like obstacles on a Buddhist path. Cooper endorses bringing psychological difficulties to the professionals who have been trained to care for them, psychotherapists. He will not work with the same person in both therapy

¹⁸⁴ Interviews were conducted by Skype and phone on 5/21/14, 5/28/14, and 6/4/14.

and his Zen community, only one or the other. But he will sometimes treat people who hope that analysis can clear out psychic interferences to their Buddhist practice.¹⁸⁵

This approach could be seen as paralleling Marsha Linehan's solution to therapists' lack of training as "spiritual teachers" (discussed in Chapter Three). Just as Linehan suggests that clinicians refer out to meditation teachers for "spiritual instruction," a meditation teacher who discovered that their student had hit an emotional impasse could refer them to a therapist. This approach could be amenable to those who seek a clear differentiation between the secular and the religious. But such a differentiation is complicated when psychotherapy is framed as a means for achieving Buddhist goals. Does therapy remain secular when put into the service of religious aims? Cooper's adopting religion approach to Buddhist traditions is generated by his understandings of these concepts.

Cooper writes at a time when the classification of Buddhist traditions as religion has frequently been called into question. In Cooper's understanding, "Zen" is clearly a religion: "I view Zen as a religion. There is no problem with this view in the East, where most of the scholarship on Zen comfortably describes Zen as a religion" (2010, 24). Just as Magid says he wants "to keep meditation religious," Cooper seeks to protect Zen's religiosity. He describes Zen to have clear "salvational" or "sorteriological" aims which he views as qualifying it for the designation. "Zen practice," he writes, "is not, as it has been misunderstood, aimless, meaningless, or purposeless. It includes a highly structured set of practices that support a sorteriological aim, which can be asserted, as

¹⁸⁵ Cooper explains that through "the psychoanalytic encounter" analysands acquire awareness of the deeper dynamics of blocks in their meditation practice. This "awareness facilitates a capacity to naturally allow interferences to meditation practice to lose their hold because their defensive function has been reduced or eliminated" (2010, 35).

enlightenment or satori” (2010, 37). Cooper locates a specific threat to the survival of the “soteriological aims” of Buddhist traditions in contemporary times: “the medical/scientific model that [has] governed Western scientific discourse for the past 400 years or so” (2010, 11). Among clinicians,

following Freud, it seems that many Zenists, in order to be taken seriously by their scientifically oriented colleagues, tend to distance themselves from the religiosity of the tradition and present Zen exclusively as a science, technique, or philosophy. As a result, Zen has been described in the West, as exemplified above by [Alan] Watt’s definition, as a science, technique, philosophy, mystical tradition, psychology, but not as a religion. (2010, 53)

Cooper singles out Alan Watts for special rebuke here. He disdains the thinker for propagating a “secular reading of Zen” (2010, 25).

Cooper believes that Watts’ representation of Zen “is problematic given his tremendous popularity and influence” (2010, 25). Watts did a great deal to spread throughout the U.S. the notion that Buddhist traditions is “the religion of no-religion” (e.g., 1995, xi). He borrows this phrase from one of his close associates, the religious studies professor, Frederic Spiegelberg (1948).¹⁸⁶ As detailed by scholars like Jeffrey Kripal, Spiegelberg’s writings impacted the thought of a generation into the 1970s (Kripal 2007, 47-62). Spiegelberg was highly critical of religious institutions. But he also searched for ways to conserve religious experience and thus, for “the religion of no-religion.” Watts’ “secular reading” of Buddhist teachings then is motivated in part by this search. “Watt’s antireligious sentiment typifies,” Cooper writes, “the Western difficulty with accepting the Zen religious impulse” (2010, 25).

¹⁸⁶ A collection of Watts’s lectures, *Buddhism: The Religion of No-Religion* (1995), uses this phrase for its title.

Cooper says he has witnessed a shift on these subjects within communities of psychoanalysts. Where analysts once saw only pathology in religious experience, they have become increasingly open to the idea that it could play an important part of psychological health. But he expresses concern about the direction this shift sometimes takes:

The increasingly positive response among contemporary psychoanalysts to religious experience reflects a radical departure from the early pathologizing stance. However, when operating as an expansion of its own territory that co-opts, misappropriates, and subsumes religious practices and techniques while simultaneously ignoring associated philosophies, ideologies, languages, and beliefs, the psychoanalytic encounter remains entrenched in the conservative positivist stance of the medical/scientific model (2010, 7).

Cooper is highly critical of “co-opting Buddhist techniques such as meditation, while ignoring the wider radical salvational intention of genuine and thorough Buddhist practice” (2010, 13). He views this as merely an “expansion of psychotherapy’s territory.” He worries that, even as his colleagues become more open to religious teachings and practices, they actually only further their secularization by reducing them to instruments and “ignoring their wider salvational intention.”

In personal interviews, I asked Cooper about the passion he displays in his writing on this topic. He explained that

it's a highly personal concern because I am deeply embedded in a Buddhist tradition, and I don't like it being misunderstood or abused or anything. Or destroyed. I like to see the tradition preserved. This tradition has been around for a long time. Just the Soto tradition alone has been around since the thirteenth century. You mean, like in twenty years, the arrogant Americans are going to totally destroy it? (Cooper, 5/28/15)

Cooper voices a strong conservative desire here, an inclination to preserve Buddhist traditions. He hopes that his approach to Buddhist traditions counters what he calls the “hegemony of the scientific model” (2010, 14). And yet, like Magid, he is uncertain

whether any incorporation of Buddhist elements at all into psychotherapy can ever avoid instrumentalism.¹⁸⁷ Consequently, he at times puts analysis into the service of Buddhist practices when analysands request this sort of help. But he rarely explicitly introduces Buddhist teachings or practices into sessions if the analysand does not do so first. Cooper told me that the majority of his therapy sessions would look no different from those of colleagues with no interest in Buddhist traditions at all.¹⁸⁸ At the same time, Cooper insists that it is impossible to compartmentalize his Buddhist identity in therapy sessions. To do so, he says, would be a sort of repression that will only prove unsuccessful and, potentially, even harmful. He thus believes he has no choice but to theorize how best to integrate Buddhist and psychotherapeutic frames. His conclusions about how to go about such an integration will be discussed further in the next chapter. However, Cooper presents his integration approach as devoted to the achievement of Buddhist liberation. At these times, Cooper adopts Buddhist traditions.

Sometimes using “a specific Zen religious vocabulary” in sessions (2010, 13), Cooper seeks to discern “how the Zen impulse influences the conditions in which the analyst and the patient meet and work and how the psychoanalytic encounter might facilitate an individual’s religious practice” (2010, 13). Cooper believes that “a Zen psychoanalysis” is capable of deepening religious practice. Moreover, he describes how this sort of analytic process can actually eliminate a desire to instrumentalize Buddhist

¹⁸⁷ He discloses a struggle with the very question of how he practices clinically, of “what is it that a Zen psychoanalyst does that is different?” To these questions, there is “no specifically or exclusively pragmatic answer exists that would be true to the original intentions of the versions of Zen or psychoanalysis that have influenced my thinking and practice” (2010, 12).

¹⁸⁸ He explained this in psychoanalytic terms in our interviews. As important as Buddhist traditions are to Cooper, it would be inappropriate to raise them himself in a session “because it was not coming from [the analysand’s] narrative. That’s a simple answer. I don’t want to saturate the patient’s psychic space with my stuff, I want to keep their space as open as possible” (Cooper, 5/28/15).

practices into treatment interventions or “fixes.” To Cooper, “a Zen psychoanalysis” can aid people work through their “cathexis” to particular beliefs about religions that no longer serve them. Cathexis is an analytic term Cooper somewhat idiosyncratically defines as, “‘attachment’ or ‘energy attachment.’” Cooper states that it is cathexis that can lead some to “latch on to the life skills aspects of a religion, such as can be found in the calming aspects of meditation available through Zen practice, and safely negate its religious intent” (2010, 34).

In other words, it is only engrained psychodynamic tendencies that lead practitioners to instrumentalize “life skills aspects of a religion” and, thus, secularize them “safely negat[ing] their religious intent.” Cooper has a cure.

One strategy that works synergistically integrates the Zen religious impulse and the psychoanalytic understanding of unconscious processes, entails uncovering the underlying emotional states that drive thought processes and that maintain cathexis to old reified religious attachment, images, and the self states associated with such image (2010, 35).

For the Buddhist, this process would lead the practitioner to let go of “the false notion that Zen and its associated practices. . .are simply techniques. . .[which] defeats the emotional impulse so essential to religious practice” (2010, 32). Here Cooper is clearly taking an adopting religion approach to Buddhist traditions; his “Zen psychoanalysis” serves to “facilitate an individual’s religious practice.”¹⁸⁹ When he speaks of this “Zen psychoanalysis” and its place in history, he begins to exemplify a third major way that psychotherapists have adopted Buddhist traditions.

¹⁸⁹ Cooper’s theories here are not exclusive to Buddhists. He mentions how Christians can use the concept of cathexis in analysis to sort out, for example, when “internalized images of Jesus” are “used properly, [to] further the salvational goals for Christian practitioners” and when “unconscious attachment to these internalized object images and to identifications with, or relationship to, these objects, along with associated feelings, such as guilt, shame, or humiliation, can engender resistance to new religious forms” (2010, 34).

Transplanting Religion: Adopting Buddhist Traditions as the Basis for Psychotherapy

In this section, I analyze the third main way that psychotherapists have taken adopting religion approach to Buddhist traditions. Here clinicians fully and transparently adopt Buddhist teachings and practices as the very basis of their psychotherapies. Some describe their Buddhist psychotherapies as new Buddhist schools. They compare them to those developed by previous communities newly introduced to Buddhist traditions.

A psychiatrist, author, speaker, leader of an explicitly Buddhist organization, and Buddhist studies scholar, Joe Loizzo (2001), is a strong representative of this approach.¹⁹⁰ Loizzo's route toward becoming a Buddhologist runs in the inverse to that of the Harvey Aronson. Aronson became a clinician after years of working as a Buddhist studies scholar. Loizzo, meanwhile, earned an additional PhD in Tibetan Buddhist Studies from Columbia University after decades working as a psychiatrist. Loizzo views his psychotherapy to be fundamentally Buddhist and he explicitly introduces Buddhist elements in sessions. Karen Kissel Wegela might structure a section of a book around the Four Noble Truths. But she never speaks of them in therapy sessions. In our personal interviews, Loizzo indicated that "I feel that it's important for me to be transparent about what my sources are both for the sake of responsibility but also for the sake of fidelity. So it can just be clear I say, 'Here are the Four Noble Truths. That's really what I'm trying

¹⁹⁰ When I asked Karen Wegela if she knew of anyone that resembled a "Buddhist psychotherapist," as I was defining it at the time, Loizzo was the first individual that came to her mind. Wegela thought that Loizzo might qualify because, she said, "he does teach people to visualize deities. . . He's basically teaching what I would regard as sacred teachings publicly" (Wegela 6/12/14). I found that Loizzo will indeed teach visualization of deities or about writings that he views as "sacred teachings" in therapy sessions. But his understanding of how literally to take this activity requires clarification.

to say” (Loizzo 10/3/14).¹⁹¹ This approach is exactly what people seek Loizzo out for: “most people who come to see me want Buddhist therapy. They like the fact that I say ‘oh well, Tibetans say this” (Loizzo 10/3/14).

It is not difficult for people who “want Buddhist therapy” to find Loizzo. He publically identifies himself as a clinician who provides such therapy in a number of ways. Loizzo founded a consortium of therapists in the Manhattan area who are also influenced by Buddhist traditions.¹⁹² He named it “The Nālandā Institute” after the ancient Buddhist education centers where the “historical” Shakyamuni Buddha himself is said to have taught. As both a Buddhologist and a psychiatrist, Loizzo sees himself as “not only translating the Nālandā curriculum” (scriptural material Loizzo believes contains superior healing knowledge and that Tibetan Buddhists believe date back to the Nālandā schools). He believes that he is “also *transplanting* [his emphasis] its living practice” (2012, xxii). The term “transplant” suggests that Loizzo does more than assimilate Buddhist traditions for new audiences; instead he transmits them whole. If Loizzo is “transplanting” Buddhist teachings and practices, then perhaps he does nothing more than transfer them to a new location and plant them in new ground.

Loizzo’s adopting religion approach appears to be oriented very differently towards the categories religion and secular than most we have looked at in the previous chapters of this dissertation. On the one hand, like those who take translating religion approaches to Buddhist traditions, Loizzo will on occasion “tone down the Buddhist rhetoric” depending on setting or audience. He too also gives voice to the idea that “there

¹⁹¹ Interviews were first by Skype on 10/3/14 and then in person in Manhattan on 10/8/14.

¹⁹² The Institute actually began in 1998 as the Center for Meditation and Healing at the Columbia University Medical Center Department of Psychiatry. For more on its evolution see <http://www.nalandainstitute.org/pages/a-history.html>

are so many places in western science and psychology and neuroscience that dovetail and relate to Buddhist theories. You can almost really talk about all the principles without having to say the word ‘Buddhism’” (Loizzo 10/3/14).¹⁹³ However, Loizzo stresses that even when he does “tone down the Buddhist rhetoric,” “I always say, ‘this is mindfulness practice; it comes from the Buddhist tradition. I was trained in the Tibetan way’” (Loizzo 10/3/14). Loizzo reassures people that it is not necessary that they become Buddhists to benefit from Buddhist wisdom. But this is because he is strongly convicted about the universality of this wisdom.

Loizzo has a far more optimistic perspective on scientific research than therapists like Cooper or Magid.¹⁹⁴ Where Cooper predominantly describes the dehumanizing “hegemony” of the “scientific/medical model,” Loizzo envisions an alignment between scientific and Buddhist truths.

I think one of the big things that’s really changed dramatically in just recent decades is that science has come around and instead of really downgrading any kind of sense of human potential it’s really challenging us in the other direction and pushing us to see maybe we’ve underestimated human potential, maybe we

¹⁹³ The full quote on this topic from our interview: “I teach some people certainly in hospitals in a more de-identified cultural way. Although even in the hospital setting I always say, ‘this is mindfulness practice; it comes from the Buddhist tradition. I was trained in the Tibetan way.’ The amazing thing is that there is so many places in western science and psychology and neuroscience that dovetail and relate to Buddhist theories. You can almost really talk about all the principles without having to say the word ‘Buddhism’. There is a Buddhist sitting on the wall of my office so nobody is wondering what my affiliation is you know what I mean, but I do think that some people really need to be assured that it doesn’t have to be Buddhist and that either they can approach this as a secular scientific healing process or that they can bring their own religious tradition if that be Jewish, Christian whatever it is. That my interest in Buddhism doesn’t require them to subscribe to some other worldview or some other set of religious practices.”

¹⁹⁴ Though Loizzo does believe that “an illness-based model” of psychotherapy remains severely limited. His model of health and care shifts between the common discourse of alternative, complementary, and integrative physicians before ultimately discovering identity between his psychology and authentic Buddhist teachings: “I believe that in terms of positive health. I see a continuum from various serious problems that really can be approached quite medically. By the way that would be within the Buddhist tradition as well, right? There’s the more average human suffering, more serious neurosis or whatever but then there’s average human suffering and right up to the higher reaches of positive human potential. I think that spiritual traditions become increasingly relevant if you want to have a positive psychology because they offer these higher reaches of ways of understanding and approaching general suffering and also the higher, if you will, spiritual or existential or whatever positive development” (Loizzo 10/8/14).

can transform more, maybe we can have these positive experiences. . . I think we're in the realm of a kind of secular understanding of enlightenment as integration of the highest level of human potential. That's very much within the Buddhist approach to enlightenment from my point of view, right? (Loizzo 10/3/14)

Importantly, Loizzo does not view himself as participating in the submission of religious truths to scientific validation. Following in the tradition of Asian Buddhist leaders ranging from Ledi Sayādaw to the Dalai Lama, Loizzo believes that science can only prove the truth of Buddhist teachings.¹⁹⁵ Loizzo describes an ongoing revision of the category science that moves it away from the “conventional definition.” And he thinks that scientific research is destined to provide support to those who take up Buddhist practice.¹⁹⁶

Loizzo is not only unafraid to have Buddhist teachings and practices evaluated by scientific study. He also seems far less animated than colleagues like Magid or Cooper about the use of Buddhist elements as biomedical treatment interventions. Loizzo, like some therapists already introduced, trusts so fully in the transformative power of Buddhist practices in-of-themselves that he believes they will bring Buddhist enlightenment even when initially imparted for symptom reduction.¹⁹⁷ Nonetheless, Loizzo also does express concern about those who “think that we need to extract some

¹⁹⁵ Loizzo has, for example, been an active participant in the Mind & Life Institute initiated to create dialogue between Tibetan Buddhists and scientists in the U.S.

¹⁹⁶ Loizzo even believes that the doctrine of karma has been validated by scientific research. Loizzo views the inclusion of teachings on karma to be a kind of litmus test showing whether modern Buddhist teachings have been denatured. Those that eschew discussion of karma, in his eyes, do not offer an authentic Buddhist perspective. He meanwhile offers a fascinating explanation of how evolutionary biology validates the concept, though not as literally understood by the majority of Buddhists throughout history (2012, 19-22, 109-120).

¹⁹⁷ Or regardless of setting. Loizzo's Institute is actually an active participant in bringing Buddhist practices into corporate settings with its “Nalanda Institute for Mindful Business.” Loizzo is well aware of the concerns about such activity, but believes that Buddhist traditions have the ability to transform politico-economic spheres from the inside.

things from Buddhism that are interesting and relevant without there being a living incorporation” (Loizzo, 10/8/14). He says that those “who appropriate mindfulness,” for example, “are missing out and doing a disservice to Buddhism” (Loizzo, 10/3/14). In his own “Buddhist therapy” then, when Loizzo incorporates Buddhist practices he will share about the sources of those practices. Loizzo will even teach those who come to see him how to practice visualizations of Buddhist deities. And yet, Loizzo often seems fairly comfortable with clinicians who employ decontextualized and translated versions of Buddhist practices like mindfulness techniques.

To understand his thinking on this topic, it’s important to remember that his views are infused with experiences working simultaneously as both clinician and Buddhist studies scholar. Loizzo voices frustration that as a psychiatrist, “I can teach the actual practice of how to use meditation to heal yourself, but I can't teach the ethical precept or the philosophical principles because that's religion.” Meanwhile, within a religious studies department, he could present those principles to his students “as long as I don't practice it. . .I can teach the teachings about the ethics as a dead thing. I can teach the concepts as just information” (Loizzo, 10/8/14).¹⁹⁸ In Loizzo’s experience, whether practices or teachings are more or less coded as religious depends on the setting. In a hospital, a practice can be used as a neutral, secular technique, decontextualized from

¹⁹⁸ Loizzo explains this to be the result of secularization processes wherein education was split off from its historical place within religious institutions: “Our academic world is premised on dis-integrating knowledge or dis-entangling knowledge from contemplation and ethics. That's what the modern university is all about. It's all about taking the knowledge-making engine out of the basically monastic contemplative tradition in which it grew. . . Ironically, the secular academy has to fragment these things to be sure that we're taking out the spirit or any religious essence or anything that actually addresses a deeply personal, deeply held conviction that isn't just a cerebral obstruction or just a technical intervention. What that tells me, there's no way to transplant that culture as a living thing right now into the Western academy” (Loizzo 10/8/14).

religious frameworks. In a university, teachings can be imparted (estranged from a profession of belief), but a practice like meditation would cross the borderline.

Loizzo does not feel beholden to these constraints in his work in The Nālandā Institute. Confident that there are many who desire it, he now offers an unabashedly “Buddhist therapy.” His approach rests on a largely positive evaluation of religion. From his perspective, religious traditions can be sources of healing that are frequently superior to conventional psychotherapies. By adopting Buddhist teachings and practices as the basis of his psychotherapy

people have something besides me and our conversation where they can go out and study or pursue. Part of my view about religious traditions is that they offer ongoing learning and healing alternatives that psychotherapy doesn't. They're free or less expensive, they're readily available, there's community support and not just an individual therapist. (Loizzo, 10/3/14)

Here Loizzo characterizes his therapy as a conduit which allows for future increased engagement with Buddhist traditions. And the therapeutic outcomes he includes for his Buddhist therapy include the soteriological: a salvific liberation or enlightenment, a total ethical transformation. Here one achieves a transcendence of the self that is often gained through deepening commitment to the ethical prescriptions of the Eightfold Path, Five Precepts, and beyond (e.g., 2012, 107-147). All of this, Loizzo says, is meant to bring people to the “higher reaches of positive human potential.” Loizzo’s frequent evocations of such a phrase, the “higher reaches of human potential,” reveals influences worth fuller introduction.

Psychotherapists’ adopting religion approaches to Buddhist traditions (as well as the integrative approaches we will look at in Chapter Six) are heavily shaped by the perspectives of humanistic and transpersonal therapists of the 1960s and 1970s. In the

next section, I argue that the developments of such clinicians are foundational not only for psychotherapists' adopting religion approaches, but contemporary views of Buddhist traditions in the United States.

Humanistic and Transpersonal Psychotherapists: The “Secularizing Of All Religion And The Religionizing Of All That Is Secular”

In this section, I consider the work of formative humanistic and transpersonal psychotherapists like Abraham Maslow (1964) and interlocutors like Alan Watts (1961). I explain that many clinicians who take adopting religion approaches to Buddhist traditions follow in the lineage of these therapists. It is from them that they inherit ways of conceiving the categories religion and secular that generate their approaches to Buddhist teachings and practices. Examining these histories is also useful because many of the most prevalent understandings of Buddhist traditions in the United States today were heavily shaped by the popular rhetoric of transpersonal and humanistic psychotherapists.

Therapists who take adopting religion approaches tend to come from psychotherapeutic orientations derivative of, and sometimes reactive to, psychoanalytic schools. As briefly discussed in the Introduction, Parsons (2009, 2010) has outlined the factors that allowed for changes in what he calls “the Buddhism and psychoanalysis dialogue.” Chief among these factors is “the emergence of more religion-friendly theories (e.g., ego-psychology, object-relations theory, the neo-Freudians)” (Parsons 2010, 110). Cooper referenced these shifts above though he was not entirely supportive of all the directions they have taken. With the development of new ideas more “friendly to religion,” the once solid boundary between religion and secular science upon which

Freud built psychoanalysis becomes more porous. In some cases, this borderline is so blurred that the analytic process becomes capable of “facilitat[ing] an individual’s religious practice” (Cooper 2010, 13) or achieving religious-defined aims.

Other communities of psychotherapists broke off from psychoanalytic schools, in part, over the question of the value of religious traditions. Within these communities one heard talk of Loizzo’s “positive human potential” as far back as the 1960s. Prominent figures like Maslow (1964), Carl Rogers (1961, 1980), and Fritz Perls (1969, 1973) sought to radically alter their psychotherapies’ classification under categories like science and religion. Further, many actively experimented with Asian religious teachings and practices in a manner that paved the way for adopting and integrating religion approaches to Buddhist traditions.¹⁹⁹

Though they each had their own unique take, humanistic therapists like Carl Rogers and Abe Maslow were highly disturbed by a perceived dominance of positivist science among psychotherapists through the 1960s. They believed in “the standard secularization narrative” in which a disenchanted society saw important aspects of human experience neglected or suppressed. Rejecting what Cooper above called “the scientific/medical model,” Rogers (1961, 1980) proposes that clinicians adopt a holistic view of humanity. He advocates a therapy that focuses on fostering human flourishing rather than diagnosis and cure. Rogers believes that humans will naturally thrive if given a safe and affirming environment. People incline towards growth, including moral and

¹⁹⁹ This section relies heavily on two major sources that provide extremely helpful introductions and commentary on communities of humanistic psychotherapists: Jeffery Kripal’s *Esalen: America and the Religion of No-Religion* (2007) and Jessica Grogan’s *Encountering America: Humanistic Psychology, Sixties Culture, and the Shaping of the Modern Self* (2012).

ethical growth, and the therapists' main task is to provide the unconditional positive regard that can facilitate this cultivation.²⁰⁰

A number of other humanistic modalities of this period, including Fritz Perls' gestalt psychotherapy (1973), shared many features of Roger's person-centered methodology. These clinicians were outspoken about their intention to revise common views of psychotherapy. Once framed in terms of the curing of disease, psychotherapy now becomes a means of positive growth, of a self-realization that can transition from the mundane and into the transcendent. For Rogers and Perls, self-actualization occurs through natural processes that are always accessible if clinicians simply "get out of the way." Perls believes that humans open up to their full capabilities when they fully connect to the present moment. The goal is to "be here now" (Perls, Hefferline and Goodman, 1951; Perls 1973; also see Grogan 2012, 197-210).

A number of early humanistic psychotherapists believed that the most profound depictions of these natural process were to be found in Asian religious traditions. By the early 1960s, Daoist, Buddhist, and Vedanta teachings, as explicated by thinkers like Alan Watts, were standard fare among communities of humanistic therapists. Watt's descriptions of "Eastern philosophy" seemed ancient, arcane wisdom that supported the psychotherapeutic theories of Perls and others (Kripal 2007, 157-164). It is hard to overstate the influence this rhetoric has had on prevailing understandings of Buddhist and other Asian traditions in the United States. Many of the qualities commonly assumed to define "Buddhism" were core components of humanistic psychotherapies in general and Perls' gestalt psychotherapy in particular. The ideal therapeutic stance that Perls

²⁰⁰ For more on Rogers see especially Grogan 2013, 27-29, 47-79.

advocated is a “bare attention” that would seem quite familiar to mindfulness practitioners.²⁰¹

And yet, Perls, for one, remained as suspicious of Asian religious traditions as he was all others. Perls remained a stridently and vocally atheist throughout his career. He believed that religious traditions were inherently oppressive. In an assessment similar to Fromm’s,²⁰² Perls thought that religious traditions furthered the forces of totalitarianism by teaching humans to submit to higher authorities. Watts and others protested that Buddhist traditions were exceptions to this rule because they were atheistic. But Perls was unconvinced. Perls may have occasionally appropriated, in a tongue-in-cheek fashion, the language of Zen enthusiasts. (He would at times refer to “mini-satoris. . .to describe those sudden flashes of awareness that gestalt psychology attempts to catalyze” (Kripal 2007, 164)). But he verges on contemptuousness for those who perceive Zen practice as means for achieving self-actualization. As Kripal notes,

one of Fritz’s most oft quoted blurbs involves his memories of visiting Zen monasteries in Japan. This kind of meditation, Fritz insisted, was a form of constipation. It’s like sitting on the pot: one just sits there, neither shitting nor getting off (Kripal 2007, 164).

Rather than Asian religious traditions, Perls prefers the sources from which he borrows his therapy’s name.

Imported from Europe through the 1950s, holism, Gestalt psychology, phenomenology and existentialism were all major influences on communities of

²⁰¹ Another specific notable influence from humanistic and transpersonal psychotherapeutic communities on mindfulness practitioners in particular is the controversial Werner Erhard and his EST program. For years, EST was a mainstay at the Esalen Institute to be discussed further below. Erhard was especially influential on Steven Hayes. In fact, Chris Germer actually described Hayes’ ACT to me as a reconstruction of EST.

²⁰² A notable shared attribute of both Fromm and Perls and many other of these clinicians was that they were European Jews, survivors of the Nazi menace.

humanistic psychotherapists (Grogan 2012, 37-57). Clinicians like Perls and Rollo May (1950, 1953; Grogan 2012 72-92, 282-296) were inspired by this thought to develop their new psychotherapeutic views of humans and human experience. Existentialist philosophy seemed especially ripe with resources for meaning-making. In these therapists' view, finding meaning in life was essential for human growth. But modern society was dangerously devoid of tools for meaning-making. Like many of the psychotherapists we've looked at in previous chapters, humanistic therapists often perceive religious traditions to have evolved out of the search for meaning. But, where they once might have served this purpose, the corrupt institutions of today's religious authorities now often subjugate people and inhibit their natural growth. Here we see a common tension among communities of humanistic psychotherapists.

Humanistic clinicians were often conflicted on the subject of religion. Many challenged the dismissive appraisal of religious traditions by psychoanalytic predecessors. But they were often still critical of aspects of contemporary religious activity. Their reasons to be critical, however, were themselves frequently different from those of psychoanalysts. Humanistic psychotherapists were taught in psychoanalysis-dominated training programs that religious observance was pathological. But many clinicians were more concerned about religious institutions they perceived to be complicit in societal injustice such as the perpetuation of patriarchal or racist oppression. Humanistic psychotherapists were deeply embedded within larger countercultural communities of the 1960s and 1970s. The "counter-culture," as it is still often simply called, was highly suspicious of religious authorities perceived as maintaining politico-economic power structures (Grogan 2012, 275-288). And yet, for many humanistic

therapists, however corrupt “organized religion,” religious *experience* remained of paramount importance.

Abraham Maslow (1964) is one of the strongest and most influential voices for taking this approach to the category of religion. He built off redefinitions of the term by forbearers like Jung and contemporaries like Fromm. Like Fromm, he made a distinction between healthy and unhealthy aspects of religion. Maslow was sympathetic to those attracted to atheism. But he stated that society was placed less at risk by religious traditions than by indiscriminate secularization.²⁰³ “Traditional, conventional religion” (1964, xiii), as he called it, had gone astray from its true mission. But religiosity itself was absolutely indispensable to human flourishing. In Maslow’s version of the tactics of Jung or Fromm, a lack of organization and institutionalism become the central determinant of positive forms of religiosity. Kripal names him as a singularly significant player in the 20th-century development of a now culturally ubiquitous concept: “the distinction between organized ‘religion’ and personal spirituality” (2007, 150). “If he did not then actually coin the phrase ‘spiritual but not religious,’” Kripal states, “Maslow did as much as anyone in the modern era to lay the psychological foundations for the present prominence of these notions” (2007, 150).

Maslow believed that the problem with “traditional, conventional religion” was that it actually suppressed true religious experience. The prime way this was accomplished was through the creation of binary views of religious and secular. Like

²⁰³ His “critique,” he wrote, was “not only of traditional, conventional religion, but also of traditional, conventional atheism. As a matter of fact, I am addressing myself much more to the latter than to the former. Religion is easy to criticize but difficult to explain. It begins to be clear to me that in throwing out *all* [his emphasis] of religion and everything to do with it, the atheists have thrown out too much” (1964, xiii).

Fromm, Maslow attributed the commonly accepted split between “sacred and profane” to the inculcation of religious authorities. But Maslow thinks that it is institutionalism itself that establishes this split by perpetuating the notion that religiosity belongs within religious institutions rather than permeating the lives of the individuals. The “places of worship” of religious institutions become prisons restricting religious experience from every-day life.

Being religious, or rather feeling religious, under these ecclesiastical auspices seems to absolve many (most?) people from the necessity or desire to feel these experiences at any other time. ‘Religionizing’ only one part of life secularizes the rest of it. This is in contrast with my impression that ‘serious’ people of all kinds tend to be able to ‘religionize’ *any* part of life, *any* day of the week, in *any* place, and under all sorts of circumstances [his emphases]” (1964, 31).

Maslow says he seeks “the resacralization” (1964, 31) of human existence in the modern age. And he believed that a new science would be key to achieving this goal.

Maslow does not only propose redefinitions of the terms religion and secular. He also advocates for a revision of what defines the category of science. Maslow declares that “it is because both science and religion have been too narrowly conceived, and have been too exclusively dichotomized and separated from each other, that they have been seen to be two mutually exclusive worlds” (1964, 11). By *re-conceiving* both terms, science can actually further the preservation of an authentic religiosity. Scientific theory could explain the nature and function of religiosity. Research could establish the existence of religious experience and provide evidence of its positive effects. Maslow has a name for this core religious essence: “peak experiences,” or, as he explains, “secularized religious or mystical or transcendent experiences; or, more precisely, peak-experiences are the raw materials out of which not only religions can be built but also philosophies of any kind” (1964, xii).

Maslow anticipates the criticism that he reductively submits religion to science when he argues that the essence of religions is “well within the realm of nature, and can be investigated in an entirely naturalistic way.”²⁰⁴ He preempts this accusation by advocating for an authentic religiosity that is accessible to all people at all times, regardless of practice, affiliation, or belief system. If the discovery of a universal and scientifically-validated religious essence “is a secularizing of all religion, it is also a religionizing of all that is secular” (1964, xiii). As Kripal concludes:

Maslow clearly wanted to imagine what he calls a ‘noninstitutionalized personal religion.’ Such a nonreligious religion would obliterate the distinction between the sacred and the profane rather like the meditation exercises of Zen monks whom Maslow explicitly compares to humanistic and transpersonal psychologists (just as Spiegelberg had identified Zen as the closest analogue to the religion of no religion). (Kripal 2007, 150).

As Kripal observes, throughout his writings, Maslow references Asian religious traditions generally and Buddhist traditions specifically as a counterpoint to “traditional, conventional religion.” And, of course, when Maslow speaks of “conventional religion,” he refers to the Christian traditions dominant in United States. Maslow believes he and his colleagues reform common definitions of religion, secular, and science for a new age. As a consequence, he discloses that at times “I am myself uneasy, even jittery, over the semantic confusion which lies in store for us – indeed which is already here – as all the concepts which have been traditionally ‘religious’ are redefined and then used in a very different way” (1964, 45). But he saw this un-grounding as necessary for the growth of

²⁰⁴ The full quote here is worth footnoting: “This thesis that religious experience are natural experiences could be seen by churchmen with dismay, as simply and only a further instance of science carving another chunk out of the side of organized religion – which of course, it is. But is also possible for a more perceptively religious man to greet this development with enthusiasm, when he realizes that what the mystics have said to be essential to the *individual’s* [his emphasis] religion is now receiving empirical support and no longer needs rest only on tradition, blind faith, temporal power, exhortation, etc. If this development is a secularizing of all religion, it is also a religionizing of all that is secular” (1964, xiii).

humankind. It is a sign of a coming convergence between religious and scientific spheres that the theories of “sophisticated theologians and sophisticated scientists) seem to be coming closer and closer together” (1964, 56). Maslow writes at length about the “conflict between religion and science.” But he reports that there is

A new situation in the history of the problem in which a “serious” Buddhist, let us say, one who is concerned with “ultimate concerns” and with Tillich’s “dimension of depth,” is more co-religionist to a “serious” agnostic than he is to a conventional, superficial, other-directed Buddhist for whom religion is only habit or custom, i.e., “behavior.” (1964, 56)

The vision Maslow conjures is of an evolutionary development of humanity. This is not surprising given that he innovated a developmental psychology that, even as much of his thought has fallen out of favor, still holds sway even in academic psychology.

Figures like Rogers and Perls expand the treatment goals of psychotherapy to include states of self-actualization. Maslow theorizes how to organize these new treatment aims. In his famous “hierarchy of needs,” people are conceived as having a range of life tasks. At times, therapists assist people to meet basic physical and psychological needs. Once these aims have been achieved, however, they can turn their attention to higher impulses. Here they help people reach their full “human potential.” Maslow predicts that psychotherapists will increasingly open up treatment outcomes to include forms of self-actualization that go beyond the personal to the “transpersonal.” Humanistic psychologies had offered a “third force” that was alternative to clinicians’ binary choice between psychoanalysis and behaviorism as therapeutic orientations. He foresees a growing “transpersonal psychology” that would be a “fourth force” to replace this “third force.” It wasn’t long before communities of clinicians indeed named themselves transpersonal psychotherapists.

The above review of the development of humanistic and transpersonal psychotherapies demonstrates how heavily these frames influenced psychotherapists' adopting religion approaches to Buddhist traditions. When, for example, Loizzo speaks of "higher positive reaches of human potential" he speaks a language advanced by communities of humanistic psychotherapists like Maslow. Adopting (and integrating) religion approaches to Buddhist teachings and practices thus rest on general theoretical foundations established by humanistic and transpersonal therapists. More directly, humanistic therapists also experimented with new approaches to Buddhist and other Asian religious traditions. Where Perls remains skeptical, many of his contemporaries positioned Asian religious traditions as superior alternatives to the Christian or Jewish traditions with which they were raised. No single thinker likely had more influence over such perspectives on Asian religious teachings and practices than the aforementioned Alan Watts.

An ordained Episcopalian minister, Watts had "declared himself a Buddhist at the age of fifteen." Just four years later, he wrote his first book, *The Spirit of Zen* (1936) - which, as Donald Lopez notes, is "largely a summary of the writings of D.T. Suzuki" (Lopez 2002, 159). Watts was a leading advocate of viewing Asian thought (particularly Zen and Daoist thought) as third alternative to both traditional religion and secularism. Watts was never a psychotherapist himself, but he spent an inordinate amount of time in conversation and collaboration with therapists. The cross-currents of influence are evident in 1961's *Psychotherapy East and West*. Watts opens his seminal work by proclaiming that

if we look deeply into such ways of life as Buddhism and Taoism, Vedanta and Yoga, we do not find either philosophy or religion as these are understood the

West. We find something more nearly resembling psychotherapy. (3)²⁰⁵

Watts' text is an early instance of a form that remains prevalent today for psychotherapists: comparative analyses between psychotherapeutic and Buddhist concepts. One of Watts' central conclusions is that, whatever their differences, psychotherapies and Asian religious traditions both hold the common goal of "bringing about changes of consciousness, changes in our ways of feeling our own existence and our relation to human society and the natural world" (1961, 4). In his own vision of human evolution towards "consciousness-changing," Watts pursues a synthetic integration of multiple sources: psychotherapeutic, Asian religious, and many others.

A number of humanistic and transpersonal psychotherapists designed approaches to Buddhist traditions shaped by Watts' thought. In the case of therapists like Dick Price and Richard Murray, these approaches were generated under Watts' direct tutelage.²⁰⁶ Price and Murphy were founders of the influential Esalen Institute in Big Sur, California.²⁰⁷ Esalen offered training in curricula like "The Human Potential

²⁰⁵ Watt's continues to grant that "this may seem surprising," to readers who have mis-classified both the traditions of "Eastern cultures" as religions and psychotherapy as science. "We think of the latter as a form of science, somewhat practical and materialistic in attitude, and of the former as extremely esoteric religions concerned with regions of the spirit almost entirely out of this world. This is because the combination of our unfamiliarity with Eastern cultures and their sophistication gives them an aura of mystery into which we project fantasies of our own making. Yet the basic aim of these ways of life is something of quite astonishing simplicity, besides which all the complications of reincarnation and psychic powers, of superhuman mahatmas, and of schools for occult technology, are a smokescreen in which the credulous inquirer can lose himself indefinitely. In fairness it should be added that the credulous inquirer may be Asian as well as Western, though the former has seldom the peculiarly highbrow credulity of the Western fancier of esotericism. The smoke is beginning to clear, but for a long time its density has hidden the really important contributions of the Eastern mind to psychological knowledge" (1961, 3).

²⁰⁶ Price and Murphy both heard lectures from Watts as students. For a time, Price took up residence at the writer's American Academy of Asian Studies where he studied modern(ist) Buddhist texts like Nyanaponika Thera's *The Heart of Buddhist Meditation* (Kripal, 2007, 47-82).

²⁰⁷ The Esalen Institute retreat and education center established in Big Sur, California in 1961 was a major site for this first generation of transpersonal and humanistic psychotherapies. All of the humanistic figures named in this dissertation spoke and taught at Esalen at various times which was dedicated to the development of methods for the activation of human potential and "spiritual growth." Esalen receives a fair amount of attention today as a pivotal location in U.S. cultural history. This is in part because it indeed

Development Program” (long-directed by Virginia Satir who helped establish the entire field of family therapy) (Grogan 2012, 232).²⁰⁸ Esalen was also instrumental in popularizing the therapeutic use of Asian religious teachings and practices. Price and Murphy, for example, sought integrative syntheses of scientific and religious elements. But Asian items like “transcendental meditation” (TM) held places of privilege. Price’s gestalt practice, an off-shoot of Perls’ work, and Murray’s encounter groups often incorporated yoga or meditation. At one point in his life, Murray meditated for eight hours a day. Both clinicians studied comparative religion and were especially attracted to the writings of authors like D.T. Suzuki and Sri Aurobindo.²⁰⁹ Kripal claims that the academic discipline of comparative religion was in fact a major source of inspiration for humanistic and transpersonal psychotherapists. He notes that thinkers like Joseph Campbell (Kripal 2007, 188-193) and Houston Smith (Kripal 2007, 122-129) were frequent visitors and lecturers at Esalen. Humanistic therapists, Kripal suggests, took up the morphological and perennial theories of religious studies scholars. If a common essence – like “peak-experiences” – is discernable across traditions then perhaps they can be integrated into singular forms. In this way psychotherapists like Murphy and Price took integrating religion approaches to Buddhist traditions. Their work clearly opens up the adopting religion approaches of Buddhist traditions of a psychiatrist like Loizzo. But their eclecticism is also causes him concern. In the final section of this chapter, I begin

embodied many influential strands of the 1960s and 1970s counter-culture and, in part, because this point has been highlighted by prominent scholars like Jeffrey Kripal who names it “one of America’s most sophisticated mystical expressions” (2007, 24).

²⁰⁸ For more on the “human potential movement,” an offshoot of humanistic psychotherapies aimed at raising the consciousness of society and releasing humanity’s untapped potential, see Grogan 2012, 159-176 and Kripal 2007, 207-208.

²⁰⁹ Like Suzuki had with Zen Buddhist traditions, Sri Aurobindo presented reconstructed versions of Hindu teachings for his U.S. audience in reference to the same sources that influenced humanistic psychotherapies: William James, holistic philosophy, etc (Kripal, 2007, 47-82).

by explaining why this is the case. Examining how therapists like Loizzo distinguishes himself from transpersonal therapists clarifies important aspects of adopting religion approaches to Buddhist traditions.

Mixed Feelings: Preserving Authentic Buddhist Practice in Adopting Religion Approaches

A clinician like Loizzo follows in the tradition of early humanistic and transpersonal psychotherapists. However, he also seeks to distance himself from many in this lineage. In this section, I argue that there are the two main reasons that therapists like Loizzo and Cooper express aversion to the eclecticism of transpersonal psychotherapists. Exploring them is useful in part because it clarifies distinctions between adopting and integrating approaches to Buddhist traditions. But it also illuminates an important quality of many therapists who adopt Buddhist traditions: they are often invested in helping to establish an authentic Buddhist practice in the United States.

First, Loizzo and Cooper appear to me to be swayed by widespread cultural critiques of transpersonal and humanistic psychotherapies. The underlying ideologies of humanistic and transpersonal psychotherapies were maligned from their very inception. They were even criticized by clinicians associated with these communities. Fromm's critique of the "spiritual marketplace" (reviewed in Chapter Four) was directed towards what he called "the California movement." What is often ignored by commentators on the topic is that, while Fromm was more of an ancillary figure, even key participants like Maslow became disillusioned in the end (Grogan 2013, 287-288). Today, scholars of religion and psychology like Jeremy Carrette (2007) lodge ever stronger condemnations of humanistic and transpersonal psychologies. Commentators like Don Browning (1987,

57-86) once drew on the work of Christopher Lasch (1978) to cast these counter-cultural communities as mired in narcissism. Their experimentation with gender and sexual mores or illicit drugs was characterized less as subversive protest than, at best, frivolous and superficial hedonism.

Carrette now casts Maslow's theories as perpetuating the neo-liberal ideologies of *laissez-faire* capitalist power structures (Carrette 2007, 138-163). Humanistic psychologies are not only fixated on the individual self, a problem of all talk therapies to a thinker like Philip Cushman (1995). To Carrette, when humanistic therapists promote the liberation of the self from regulations that impede its natural growth, they reproduce the rhetoric of the free market. With Richard King, Carrette (2005) also critiques the eclecticism that humanistic psychotherapists endorse. Such eclecticism, they argue, is instance of an imperialist cafeteria approach to cultural elements spread by global capitalism. Kripal, however, looks at his ethnographic research on Esalen and counters that "I find the whole language of the spiritual marketplace and the cultural essentialism it implies to be unreflective, if not distorting, of the human beings I know, read, and talk to" (2007, 512). Writing like a true believer, Kripal asks

can we also see that this same democratic vision of the religion of no religion will inevitably result in a free combination and recombination of ideas and beliefs that some might decry as a form of spiritual capitalism or as a debasement of religion itself but that others will recognize as the familiar and necessary evolutionary pattern of every new religious creation?" (Kripal 2007, 465).

Whichever position in this debate is more accurate, psychotherapists like Loizzo and Cooper find critiques of humanistic and transpersonal psychotherapists to be persuasive. Their adopting religion approaches to Buddhist traditions are meant to avoid the mistakes of predecessors.

Loizzo and Cooper are more motivated, however, by a second concern about the integrative approaches of many humanistic and transpersonal therapists. Both worry that Watts and his progeny denature and degrade the integrity of an authentic Buddhist path. Loizzo told me that twenty years ago, while living in California, he became pessimistic that the sort of

integration [he sought] was going to happen because it really felt like it was very diluted on the West coast. There was really nothing. It was the transpersonal people. There wasn't anything really where you could say "*this* is Buddhism" or you could say, with any rigor, "this is how people mediate or these are the principles by which they practice" (Loizzo 10/3/14).

Loizzo chose to take up doctoral work in Buddhist studies to acquire a more accurate understanding of these questions. Cooper, meanwhile, explained that he reads Buddhist studies literature in a similar effort. He then reports on his research in his writings for audiences of psychoanalysts. His hope is that they will learn to recognize authentic Buddhist practice. For example, he cites the work of Buddhologists like Bernard Faure, to explain that the roots of Franz Alexander's pathologizing of Buddhist teachings lie in the distortions of the 16th-century Jesuit missionaries who first engaged with Zen Buddhist communities in Japan (2007, 55-62).

At the same time, it is Cooper and Loizzo's familiarity with Buddhist studies literature that makes it impossible for them to ignore that they too reconstruct historical Buddhist teachings and practices. Cooper derides those who deny that "Zen" is a religion. But he also states that it should be classified as such "within the parameters of a specific definition" (2007, 3). Ultimately, Cooper supports a redefinition of the concept religion that is similar to thinkers like Fromm. True religiosity, to Cooper's mind, is not defined by the "theistic-supernatural," but by more ethereal transformative or mystical

experiences, what he calls the “salvational intention” towards “a way of liberation” (2007, 3). Loizzo, meanwhile, wants to “transplant” whole Tibetan Buddhist teachings and practices for new audiences. He does not only teach mindfulness practices of “bare awareness,” but intricate visualizations of deities and bodhisattvas. But he does not believe in the literal supernatural existence of those beings; he sometimes refers to these exercises as working with “role-modeling imagery” (e.g., 2012, 267-308). He is convinced that Buddhist truths will largely be shown to be aligned with scientific findings. But he too cites the Dalai Lama’s (in)famous statements that, if disproven by scientific method, Buddhist doctrine should be revised.

The relationship that adopting religion approaches seem to arrange between what is religious and what is secular remains inherently unstable. On the one hand, therapists like Loizzo and Cooper fully adopt Buddhist teachings and practices as the very bases of their psychotherapies. They explicitly offer “Buddhist therapy” to people who explicitly seek out “Buddhist therapy.” In this effort, they can earn doctorates in Buddhist studies, learn to translate Buddhist texts, and seriously study the work of Buddhologists. All of this can appear to completely upend the relationship between religion and secular that so many therapists in the preceding chapters operate on. At times here religious traditions are presented as superior to conventional secular psychotherapy. However, to many of the Buddhist studies scholars that Cooper reads intently, he too participates in the denaturing of Buddhist traditions. Cooper may appear to privilege the religious above the secular. But to a thinker he quotes like Faure (see, for example, his *Unmasking Buddhism* (2009)), the views that Cooper holds are part of the secularization of Buddhist teachings.

In our interviews, I asked Cooper and Loizzo about this tension. I reflected that, in their writings, they express both the conservative intention to protect Buddhist traditions and the transformative intention to reform them. Cooper explained that on, on the one hand, he is invested in “maintaining the religious structure of Buddhist tradition and understanding the role of the different practices within that structure and not ripping them out of the larger fabric.” But he also voiced “mixed feelings” because he believes

Buddhism is very flexible and malleable and usually takes on characteristics of the culture that it comes to. For example, in China, it influenced a lot. Zen has lots of Confucian elements and Daoist elements. In Japan, we see Shinto elements in some of the Buddhist traditions so why wouldn't there be a secular or psychological elements in American Buddhism. (Cooper 5/21/14)

Cooper reproduces an understanding that dates back to the “European discovery of Buddhism.” Buddhism was defined by those who first used the word as uniquely “flexible and malleable” in contrast to a purportedly eternal and singular “Christianity.” What might be mistaken as the universality of Buddhist traditions (a prime qualification to be designated a “world religion”) was actually only the opportunism of followers willing to compromise principles for new audiences (Almond 1988; Masuzawa 1995).

Loizzo, meanwhile, argues that it is actually the “flexibility and malleability” of Buddhist traditions that makes them superior religious forms. In his view, Buddhist teachings remain contemporary by sloughing off the oppressive outdated prejudices inherent in religious institutions of the past. Loizzo calls for a “living incorporation” of Buddhist teachings and practices. He believes in the preservation of Buddhist truths for future generations, but he also wants to “overcome any kind of rigid formalism or purism that either the traditional Tibetan practitioners or Buddhist practitioners would want it to keep or Western scholars would like it to keep as an ‘other’ thing” (Loizzo 10/8/14).

Loizzo has spent considerable time in the company of such “Western scholars.” He became intimately aware that “certainly most academics have a problem with the kind of work that I’m doing.” His retort is that this is “part of a guild issue to some extent. It’s part of a sort of wish to preserve a kind of ownership of culture and not to have this very, very robust and popular culture of Buddhism coming into the West kind of escape their control as academic censors” (Loizzo 10/3/14). Loizzo has written that those who are opposed to new clinical usages of Buddhist traditions “impose our Western ideas of intellectual property, cultural specificity, or sacrosanct purity onto Buddhist teaching and practice” (Loizzo 2012, 512).

Loizzo’s priorities here are clear. As a Buddhist studies scholar, he was trained in a discipline that puts a heavy emphasis on the accurate translation of Buddhist texts. But Loizzo is far more invested in, as he italicizes, “*transplanting* the living practice” of Buddhist traditions.

You can understand it in words, you can have good, clear reconciliation of terms. But is it connected to the actual living practice, like, does it help people? How does it help people? Is it helping people as much as it could? That’s what Buddhism is all about, right, to eliminate suffering. If it’s not connected to practice, then it’s not really transplanted. It’s not even really translated. Just translating it as a book is not really translating Buddhism. (Loizzo, 10/8/14)

The most precise translation of Buddhist teachings may be obtainable by Buddhologists, he says, but then “you just have a good book that’s accurate, and it’s dead” (Loizzo, 10/8/14). Even highly accurate translations of Buddhist texts do not offer the “living incorporation” Loizzo pursues. Loizzo does study such translations but they remain “dead.” Ever the physician, he means to resuscitate them.

For Loizzo, the ultimate criteria for determining whether a Buddhist form is authentic is whether it “helps people.” The question, of course, is what it means to “help

people” exactly. Many psychotherapists who take adopting religion approaches to Buddhist traditions mean to fully ground their therapies in Buddhist doctrine. In this chapter, we met clinicians like Loizzo and Wegela who base their work on the Four Noble Truths and their teachings of suffering. But their notions of what constitutes true suffering, much less its literal causes, are very different from those of most Buddhists on the planet. Loizzo fully adopts Buddhist teachings and practices but does not aim to “help” people to find release from *samsara* as a cycle of rebirth. He believes that theories of evolutionary biology validates the concept of karma. But he would not tell a couple grieving over the loss of a child that this has befallen them as the karmic consequence of a cosmic process of action and reaction. The death of a child after all is not new. Is the pain a parent feels over the death of a child free from social construction in a way that the pain we now refer to as “major depressive disorder” is not? If this is a timeless, universal sort of pain are their timeless, universal means for easing this pain? If so, what would this “help” consist of? Should the parents ultimately pursue liberation from karmic ensnarement above all else? Would they be helped more from experiencing a psychoanalyst’s “emphatic attunement” or a Buddhist’s *karuṇā*?

Psychotherapists interested in Buddhist traditions have at times attempted to answer these questions. When clinicians take integrating religion approaches to Buddhist traditions they often prioritize multiple kinds of “help” in a manner similar to Maslow. Whether defined in terms of karma or not, Buddhist enlightenment is portrayed as the ultimate purpose of life. Psychological healing is then made a prerequisite for starting on the path to this enlightenment. Many debate whether the resulting forms should be defined as authentically Buddhist. Are they adopting Buddhist traditions for their

psychotherapies? Or are they naming something “Buddhism” that does not qualify for the designation. Therapists’ positions are based on beliefs about what is, as Lopez wrote (2012), “essential” to be included in Buddhist traditions before they cease to be identifiable as such.

Therapists like Loizzo and Cooper clearly have an investment in the authenticity and accuracy of the “Buddhist therapy” or “Zen psychoanalysis” they practice. But, as signaled by the very names they use here, they recognize that they could be creating something that is new. Another clinician to take adopting religion approaches to Buddhist traditions, Mark Epstein, stated this plainly over two decades ago. He opens his *Thoughts Without A Thinker* (1995), still a central text for psychotherapists interested in Buddhist traditions, by describing what he sees as the final outcome of these activities.

People are attracted to the Buddhist approach, but it remains enigmatic; they know that it speaks to them, yet they have trouble translating the message into a form applicable to their daily lives. Still approached as something exotic, foreign, and therefore alien, the power of the Buddhist approach has not really been tapped, and its message has not yet been integrated. The situation is analogous to that of China two thousand years ago, when Taoism was the prevailing philosophy and Buddhism was first introduced. It was up to those Taoist scholars who also became adept at Buddhist meditation to accomplish the “Sinification” of Buddhism, producing a new hybrid- Chinese Buddhism, or Zen. In our culture, it is the language of psychoanalysis, developed by Freud and carefully nurtured by generations of psychotherapists over the past century, that has seeped into general public awareness. It is in this language that the insights of the Buddha must be presented to Westerners. (1995, 7)

There is much about the history that Epstein tells here that a scholar of medieval Chinese religious traditions like Robert Ford Campany would find more than a little odd. At the same time, Epstein’s take on “Zen” might lead us to remember John McRae’s first rule of Zen studies: “it’s not true, and therefore it’s more important” (McRae 2003, xix).

Perhaps, what is more important than the historical accuracy of Epstein’s narrative is the

way he tactically employs it. That it does matter to *Epstein*, however, that he accurately represents history is evidenced by the fact that he hopes its precedent will legitimate his behavior.²¹⁰

Scholars have argued that psychotherapists' treatment of Buddhist traditions is consistent with previous instances when they were introduced into new communities. But my research illuminates that this is the actual stated intention of therapists like Epstein, Cooper and Loizzo. They too often refer to the same historical precedents as scholars like Wilson and Cho. Epstein explains psychotherapists' approaches to Buddhist traditions similarly to the way Cooper did above. But Epstein uses an important term to speak of the Buddhist therapy he practices: hybrid. Epstein names his psychotherapy a "hybrid," a mixture of "Buddhism and psychotherapy." He compares it to "Chinese Buddhism, or Zen" which he also sees as a hybrid mixture of "Buddhism and Taoism." Religious studies scholars have employed the concept of hybridity to explain religious mixing. Some have, like Epstein, applied it to the way Medieval Chinese communities blended Buddhist and Daoist teachings and practices. However, Epstein defines the hybrid "Zen" as an amalgam of Buddhism and Daoism, both typically defined as "world religions." He then says this is an analogue for a new hybrid between "Buddhism and psychotherapy." But psychotherapy is traditionally classified as a secular form. What does it tell us that Epstein would make such an analogy? Perhaps, the constructions of Loizzo and Cooper are not religious or secular, but hybrids of the two. A number of the psychotherapists we will meet in the next and final chapter do indeed believe that they

²¹⁰ Notably, Epstein utilizes the metaphor of language here, indicating that psychoanalysis is simply a new language through which Buddhism is now communicated or, perhaps, translated, for new audiences who otherwise would find it incomprehensible.

practice mixtures of religious and secular elements. They design integrating religion approaches to theorize how best to go about this mixing.

CHAPTER 6

OVER THE BORDERLINE: INTEGRATING RELIGION APPROACHES

From a certain perspective, all of the approaches that psychotherapists take to Buddhist traditions can be described as “integrating” psychotherapeutic and Buddhist elements. When clinicians personalize or translate Buddhist teachings and practices they are taking a certain approach to integrating Buddhist teachings and practices into therapy. They, for example, translate practices to make them more compatible for secular psychotherapy. Even those who therapize Buddhist traditions integrate their conclusions. Franz Alexander, for example, may have only found pathology in Buddhist experience, but he integrates those findings into his psychoanalytic theories. The *integrating religion* approaches I discuss in this chapter, however, are distinguished from these other kinds of integration by two main features.

We can see the first of these features in the way that a therapist like Paul Cooper discusses his approach to integration. Cooper states that his goal is “not the integration of techniques, beliefs, language structures, or values” (2010, 15). He instead seeks to combine the insights of “the medical/scientific model” (as exemplified by psychoanalytic traditions) with “the spiritual/mystical model” (as exemplified by Zen Buddhist traditions) to produce a better understanding of human beings - and all of reality.

Does representation of experience derive from the medical/scientific model, from the spiritual/mystical model, or from some hybrid language that evolves through the cross-fertilization that might occur through the continuing conversation? . . . How does one struggle beyond them until what evolves no longer resembles Buddhism or psychoanalysis yet remains decidedly both? (2010, 14)

The approaches to Buddhist traditions previously examined might also engage in Cooper's "cross-fertilization." But the therapists introduced in the chapter that follows largely seek integrations that, as Cooper says, "resemble Buddhism or psychoanalysis" and "remain decidedly both." When therapists take integrating religion approaches to Buddhist traditions they incorporate Buddhist elements into psychotherapy in such a way that they are still recognizable. Psychotherapists casually integrate Buddhist and psychotherapeutic items in just this way on a daily basis. They often do this without overt deliberation on what determines their eclecticism. They do not contemplate what values dictate why they include some Buddhist items rather than others. But, because I focus on *published* clinicians, the therapists discussed in this chapter have often put concerted effort, and filled many pages, into making sense of how they integrate Buddhist and psychotherapeutic frames.

This is the second main feature that distinguishes the integrating religion approaches to Buddhist traditions that will be discussed in this chapter. In the pages that follow, a wide range of integrating religion approaches to Buddhist traditions are reviewed as intently theorized by representative and influential published psychotherapists. These clinicians discuss best practices methods for bringing together Buddhist and therapeutic items or suggest the ideal conditions under which a new Buddhist teaching can enter a therapy session. Furthermore, many therapists even directly address whether "integrating religion" is actually the correct phrase to refer to these approaches: they reflect on whether their approaches should be portrayed as "integration." Some will express aversion to this word and prefer thinking of their work

in terms of others concepts such as “synthesis.”²¹¹ Meanwhile, others examine the other term in this phrase; they ask whether Buddhist traditions should be categorized as religion. For some therapists we will meet in this chapter, part of taking this sort of approach is considering how to integrate not only “Buddhism and psychotherapy,” but “religion and secular.”

I begin by introducing a core dynamic that generates psychotherapists’ integrating religion approaches to Buddhist traditions. I explain that the starting point for most clinicians is comparing Buddhist and psychotherapeutic frames to establish whether they are “compatible” for integration. Transpersonal and integral psychotherapist Ken Wilber (2000) is representative of clinicians who believe that there are not only similarities, but common essential elements in Buddhist and psychotherapeutic traditions (and many, many others) that allow them to be merged together. I then note that most clinicians today do not find only affinities between Buddhist and psychotherapeutic thought. Many find numerous differences. The majority of integrating religion approaches are developed in order to reconcile these differences. As a case example, I highlight a particular dissonance that some therapists see as so crucial as to be nearly insurmountable - understandings of the self. We will see how this seeming incommensurability generates

²¹¹ Such therapists seeking synthesis are but examples of those who might feel that the word “integrating” insufficiently or inaccurately names their approaches. To psychotherapists I interview, such as Jan Surrey, integration does not fully capture the synthesis or unification they seek. Surrey spoke of uncovering (rather than developing) a place in which all difference is removed, revealed to be illusion (Surrey 4/15/15). Others, meanwhile, are averse to terms like synthesis or integration precisely because they fear these terms imply a removal of differences. Clinicians speak of “bringing together,” “combining,” “incorporating” “reconciling,” “blending,” “mixing,” and “unifying” Buddhist and psychotherapeutic frames. They express a desire to “find common ground” or walk the “two paths.” I ultimately utilize the word “integrate” to name these approaches because it is the term that surfaces most frequently and prominently in clinicians’ own discussions of these approaches, appearing even in the titles of books and chapters on this topic.

a variety of integration approaches from therapists like feminist and relational-cultural psychologist Jan Surrey (2005).

Finally, I introduce therapists that address whether they are developing “hybrids” not only of “Buddhism and psychotherapy,” but the religious and the secular.

Throughout this discussion, I continue to consider therapists and scholars’ claims that such “integrations” are best explained as consistent with “religious mixing” throughout history. We heard Mark Epstein specifically cite the “religious borrowing” of medieval Chinese communities as his example at the end of Chapter Five. Meanwhile, others believe these activities are something new: the mixture of the religious and the secular. I introduce therapists like relational psychoanalyst Pilar Jennings (2010) who directly addresses these questions. In contrast to those discussed in earlier chapters, these approaches may seem to cross back and forth over the borderline between religion and secular. But therapists intentionally inject instability into such an interpretation as they contemplate what defines these terms.

Regardless, we should not forget an important truth here. Explaining what shapes religious “syncretism” or “bricolage” might seem a significant and thorny theoretical question to religious studies scholars. But within other communities, as exemplified by psychotherapists, the subject is clearly both practical and consequential. The way that clinicians work through what organizes their integration of Buddhist and psychotherapeutic elements impacts their treatment of the actual people who come to them for care.²¹²

²¹² Of course, religious studies scholars are people too and they engage in their own forms of “syncretism” that also have practical impact on the lives of the communities they live in.

Buddhism and Psychotherapy: Chips and Salamanders?

In this section I consider a major source of discussion among psychotherapists that often generates or shapes their integration of Buddhist teachings and practices. When psychotherapists develop their integrating religion approaches to Buddhist traditions they usually begin by considering whether “Buddhism and psychotherapy” are “compatible.” As Ryo Imamura, asks, “Buddhism and psychotherapy. Do they go together like chips and salsa? Or are they less related like chips and salamanders?” (1998, 229). The implicit assumption here is that the way to establish whether “Buddhism and psychotherapy. . .go together” is to demonstrate that they are similar. The idea is that if they are similar, then they are compatible, and if they are compatible then they can be integrated together.

As mentioned in Chapter Three, therapists have produced an immense body of literature over the decades devoted to cataloguing affinities between Buddhist and psychotherapeutic elements. Some divine similarity or even identity between clinical and Buddhist practices. An influential paper by psychoanalyst Melvin Miller (2002), for example, discovers remarkable correlation between therapeutic and Zen postures of “neutrality.” Some find confluence between Buddhist meta-psychologies and psychotherapeutic theories. Raul Moncayo’s 2012 volume *The Signifier Point at the Moon* is just one recent example of a book-length comparative exercise of this kind. He expounds at length on how Zen Buddhist thought aligns with Lacanian psychoanalytic theory. Clinicians who are especially invested in being classified as scientific practitioners will often broaden their comparative exercises. They compare and discern resonances between “Buddhism and Science” that, they believe, make them compatible.

Of course, as we've already seen on a number of occasions, Buddhist studies scholars like Donald Lopez (2008, 2012) strongly challenge claims to similarity or alignment between "Buddhism and Science" or "Buddhism and Psychoanalysis."²¹³ In their own comparative analyses, they find multiple differences between these frames. At times, commentators seem to accede to the assumption of psychotherapists that the compatibility of Buddhist and psychotherapeutic elements is determined by their similarity or difference. Of course, we saw that clinicians like Jung or Fromm do not view this to be the case. Jung and Fromm believe that there were cases of not just similarity, but identity between Buddhist and psychotherapeutic ideas. But they do not believe that this proves their compatibility. In fact, Jung and Fromm suggest that psychotherapeutic and Buddhist practice are *incompatible*.²¹⁴ At the same time, many psychotherapists enthusiastically announce similarities between "Buddhism and psychotherapy" or "Buddhism and science." But they also rarely fail to acknowledge multiple areas of dissonance as well. The question shifts then from whether differences exist between Buddhist and psychotherapeutic traditions to the import of those differences. Are differences only at the level of their forms or do these traditions differ at their very essence?

²¹³ As for as "Buddhism and Science," Harrison (2010) has provided an excellent reading of Lopez's work that is based on the discussion of the construction of the category "science" in the Introduction. He contextualizes claims that Buddhist doctrine anticipates or is compatible with scientific truth. Harrison suggests that it is not a coincidence that, as Lopez observes, such claims are now "150 years" old. "If we go back 150 years," he explains, "we find ourselves in the second half of the nineteenth century at precisely the time when the trope 'science and religion' was first emerging" as described in the above summary (2010, 864). Among other possible consequences of this concurrence, Buddhist popularizers were primed to claim that their traditions, classified as religion, also had access to science's "universal applicability."

²¹⁴ Jung, of course, is far stronger on this question than Fromm. Fromm did not propose integration himself, but he did not speak out against all of who did.

We can see the seeds of one sort of integration approach that answers this question embedded within the work of analysts ranging from Alexander to Fromm. Alexander suggests that Freud and the Buddha both experimented with similar practices though their aims were very different. Fromm, meanwhile, concludes that Buddhist and psychoanalytic traditions contain highly divergent methodologies. But they have the same objective of assisting people to self-actualize. For some therapists, the similarities between the methods or goals of Buddhist and psychotherapeutic frames are so essential that their differences become inconsequential. Ken Wilber advances a psychotherapy that is both representative and influential for asserting that there exists a core essence across therapeutic and religious traditions that allows for their integration.

Ken Wilber's Synthesis

Wilber's "Integral Psychology" (2000) is a direct descendent of the humanistic and transpersonal psychotherapies described in Chapter Five. Wilber takes up Maslow's call for a "fourth force" in psychotherapy that fully integrates religious or spiritual wisdom. He too is suspicious of religious institutions, but believes they once gave expression to human beings' religiosity or spirituality. A "holistic" psychotherapy that treats the whole person would be unable to ignore these aspects of life. "A truly integral psychology," writes Wilber, "would surely wish to include the religious or spiritual dimensions of men and women" (2000, 57). Wilber's approach is sweepingly synthetic, absorbing everything in its path. In a unified theory of humanity based in part on the "standard secularization narrative," he divides history into three periods. (1) "Premodern" religion falls before (2) "modernity's" science. But Wilber also observes (3) "a postmodern turn"

of his own time that exposes the errors of scientific positivism. Wilber evaluates the discoveries and advancements of each of these three periods. Within each he sees both misconceptions and ultimate truths. He sorts one from the other to assimilate into his psychological theories.

Chief among those aspects he revives from the “premodern” age is humanity’s experience of religiosity. Wilber incorporates religious experience into his “spectrum model of consciousness” (2000, 129-142) which is based in part on the developmental concepts of his humanistic and transpersonal predecessors. Wilber’s claims are often intricately systemized and he is fond of using charts to support them. His books include thick sections of appendices with these charts where content from a wide range of seemingly unrelated sources are synthetically organized. For example, Wilber imagines readers could be dubious of his unified theory that individual “spiritual growth” occurs universally across the same developmental stages. He refers them to a labyrinthine graph consolidating the (apparently all equally relevant) developmental theories of thinkers ranging from “St. Gregory Nyssa” and “Muhyiddin Ibn ‘Arabi” to James Fowler (2000, 209-212). Included on this same chart are Buddhist teachings on progressive contemplative states.

Wilber positions Buddhist traditions as just one more additional source of evidence for his system (e.g., Wilber 2000, 131-2). Generally, Asian religious traditions receive special (and exoticizing) mention in his writings. They are often raised up as revealing the true transpersonal aptitude of human beings in an exceptional way (e.g., Wilber 2000, 2). Of course, Wilber does not attend to Buddhist teachings and practices with any depth; particularity is largely irrelevant in Wilber’s integration approach. It is

the universal that most interests Wilber, the perennial. His integral psychology is the product of his search for a “perennial psychology” to match the perennial philosophy (Wilber 2000, xi) of influences like Aldous Huxley (1944). A perennial psychology, Wilber believes, could explain universal psychological realities that exist across time and space. Wilber looks for these essential truths in the teachings of figures across culture or language he considers to be especially spiritually-developed. This evidences Kripal’s theory that the academic discipline of comparative religion had significant influence on transpersonal psychotherapists. Comparative religionists like Joseph Campbell are regularly cited in Wilber’s writings to support his perennial view of religious traditions (e.g., 2000 245n. 17, 248-49n. 27, 270n. 14, 271n. 15). Wilber bases his developmental psychology on a popular piece of cultural rhetoric about religious difference: religions are “many paths leading to the same place,” different languages for speaking the same core truths.

In synthetic integration approaches of clinicians like Wilber, individual differences between elements from psychotherapeutic, Buddhist, and all other traditions can become incidental. Wilber detects within all traditions the same essential insights about human consciousness or the nature of reality. These shared ultimate truths transcend the differences between the traditions from which he derives them. Singular systematic psychologies, like Wilber’s Integral psychology, are then designed to synthesize those elements that are deemed to be essential. As we will see multiple examples of throughout the rest of this chapter, recent decades have found Wilber’s sort of integration approach to fall out of favor. And yet, the notion that traditions have similarities that are more important than their differences remains at the core of many

psychotherapists' integrating religion approaches to Buddhist teachings and practices. In the next section, I examine clinician's treatment of dissonances between Buddhist and psychotherapeutic frames.

Jeffrey Rubin's Antithesis

Many clinicians develop integration strategies based on perceived affinities between Buddhist and psychotherapeutic traditions. The following section explains that these same therapists typically also list differences as well. The integration approaches they then formulate are generated out of methods for working through these areas of disagreement.

Clinicians often locate points of divergence when therapizing Buddhist teachings and practices. Here psychotherapists will therapize a particular Buddhist element and conclude that it is counter to good psychological health. They will express concern about Buddhist doctrine they fear encourages inhibition of emotions (e.g., anger) or drives (e.g., sexual desire) that they interpret to be healthful (e.g., Jennings 2010, 77-79, 163-165).²¹⁵ As I discuss more below, comparisons are clearly based on therapists' inherited assumptions about what defines "Buddhism." For example, to some, a Buddhist path defined by silent meditation practice strongly contrasts with the "talking cure" of therapy. Some therapists declare that there is not only disagreement between Buddhist and psychotherapeutic frames, but ways in which they are antithetical. Of course, neither single point of dissonance nor fundamental incommensurable seems to dissuade these

²¹⁵ Again, these readings habitually assume a monolithic "Buddhism" with a unified voice on a variety of issues. But, of course, for every Pali Canon teaching on release from sexual desire through meditations on decaying flesh, one also finds "Tantric Buddhist" writings that instruct cultivation of sexual desire as a liberative technique.

therapists from designing methods of integration. Areas of difference produce new integration approaches to overcome the dissonances perceived as obstacles.

Jeffrey Rubin was motivated to develop his now prominent integration approach, in part, by a desire to expose differences between Buddhist and psychotherapeutic traditions. In 1996, Rubin published what would become a seminal book for therapists interested in Buddhist teachings and practices. Its subtitle heralds a movement *Toward an Integration between Psychotherapy and Buddhism*. Rubin explained in personal interviews²¹⁶ that he had become dissatisfied with the treatment of Buddhist traditions by humanistic and transpersonal psychotherapists like Wilber.²¹⁷ Rubin believes that his colleagues often overenthusiastically and indiscriminately appropriate Buddhist content. He seeks an integration approach that moves past the “Eurocentrism” of early psychoanalytic readings like Franz Alexander’s, but also avoids this overenthusiasm, what he dubs “Orientocentrism.” Orientocentrism, Rubin indicates, is a romanticization of Buddhist teachings and practices at the expense of psychotherapeutic insights. He explains that people fall sway to this way of thinking because they live in a “disenchanted” world (e.g., Rubin 1996, 1).²¹⁸

Like so many others previously introduced, Rubin believes that Buddhist traditions are attractive to people in a modern secularized society. Psychoanalytic “prejudice” against religion has contributed to this secularization (1996, 62). But humanistic and transpersonal clinicians have gone too far, in Rubin’s estimation, by idealizing Buddhist teachings and practices (Rubin 1996, 33-57). Rubin summarizes his

²¹⁶ Interviews were conducted in Manhattan on May 10, 2014 and by phone on June 15, 2014.

²¹⁷ Though, in *Psychotherapy and Buddhism*, he wrote that “Wilber’s model does not achieve genuine integration” (1996, 51), he also cited it as the best of the few options then available (1996, 34-54).

²¹⁸ Rubin directly cites Max Weber as his source for the theory of the disenchantment of society.

approach to resolving disagreements between psychotherapeutic and Buddhist ideas using capitalistic metaphors that would excite critics:

The Eurocentrism of traditional Western psychology and the “Orientcentrism” of more recent writings on psychotherapeutic and contemplative disciplines both inhibit the creation of a contemplative therapeutics or an analytic meditation because they establish an intellectual embargo on commerce between Asian and Western psychology. An alternative perspective is necessary for the genuine insights of each tradition to emerge. In contrast to the Eurocentrism of psychoanalysis and the “Orientcentrism” of much recent discourse on psychoanalysis and Buddhism, I will be recommending a more egalitarian relationship in which there is mutual respect, the absence of denigration or deification, submission or superiority, and a genuine interest in what they could teach other. (Rubin 2003a, 41)

Rubin’s “egalitarian” approach is intended to avoid privileging either Buddhist or psychotherapeutic theories and grant both “mutual respect.”

Without “denigration or deification, submission or superiority, and a genuine interest in what they could teach other,” Rubin believes that psychotherapists should conduct more clear-eyed comparative analyses between “psychotherapy and Buddhism” (1996, 51). Doing so would reveal “elements that are – depending on the specific topic- antithetical, complementary *and* synergistic [his emphasis]” (1996, 51). Rubin concludes that “psychotherapy and Buddhism” can sometimes “complement” each other: Therapists can acquire new ways of listening in sessions through regular Buddhist meditation practice. Meanwhile, psychoanalysis can remove blocks that prevent Buddhist practitioners from achieving higher meditative states (1996, 51). Following a thinker like Wilber, Rubin continues to explain that both “psychoanalytic and Buddhist strategies for facilitating transformation,” meanwhile, “are, in some ways, synergistic” (1996, 51). But Rubin also stresses that there are aspects of Buddhist and psychotherapeutic frames that are far from synergistic; they are “antithetical.”

Where “psychotherapy and Buddhism” are antithetical, to Rubin and many other clinicians, are their “goals” (1996, 51). Figures like Watts and Fromm had previously looked to the ultimate aims of Buddhist and psychotherapeutic practice to form their conclusions. But where Fromm found identity between Buddhist and psychotherapeutic goals, other therapists see a divergence that seems insurmountable. The most frequent point of disagreement named here is conceptions of self. In explaining how “psychotherapy and Buddhism” have “antithetical” aims, Rubin states that “the former focuses on strengthening one’s sense of self, while the latter views such an enterprise as the very cause of psychological suffering” (1996, 51). Rubin’s characterizes the ultimate aim of a Buddhist path to be awakening to “non-self,” to the reality that there is no permanent self.²¹⁹ Doctrine of non-self is central to the teachings of most Buddhist communities. But for most Buddhists the insight of non-self is an ultimate step towards an enlightenment that means liberation from the cycle of rebirth. If one is looking for aims antithetical to psychotherapeutic treatment goals, one does not have to look much further than “release from rebirth.” But when Rubin declares that “the goals of psychoanalysis and Buddhism are antithetical” (1996, 51), it is not rebirth that he discusses. This is not surprising given a point worth emphasizing about nearly all psychotherapists’ integrating approaches to Buddhist traditions.

The “Buddhisms” that clinicians compare to their psychotherapies are the same highly specific U.S. Buddhist forms discussed throughout this dissertation.

Psychotherapists seek to integrate Buddhist practices they learn within the Zen Buddhist communities of Philip Kapleau’s Rochester Center. They integrate the Shambhala

²¹⁹ Rubin is especially concerned with what was then a more prevalent discussion in U.S. convert Buddhist communities about the suffering caused by narcissistic overemphasis on “the ego.”

Tibetan Buddhist teachings of Chogyam Trungpa. These Buddhism traditions are already heavily shaped by psychotherapeutic ideas. As a result, comparative analyses between this sort of “Buddhism and psychotherapy” are bound to yield multiple similarities. When clinicians raise points of dissonance, meanwhile, they are usually differences on philosophical or anthropological rather than metaphysical matters. Clinicians do not struggle to square their psychotherapies with doctrines of a bodhisattava path that activates supernatural and superhuman abilities. They instead seek to reconcile various ideas of how to conceive human-ness. They argue, for example, that dispassion should not always be sought, that anger serves a healthy emotional function. This explains why Rubin does not name “release from rebirth” as the Buddhist goal that is antithetical with psychotherapy.

Many psychotherapists ardently believe that enlightenment, the ultimate level of human “health,” is defined by awakening to the reality of non-self. Consequently, most psychotherapists taking integrating religion approaches to Buddhist traditions persevere at length on this seeming incompatibility. How can therapists assist others to realize their sense of self is an illusion when so many present for therapy precisely because they feel a broken sense of self. Many people seeking therapists’ care express a sense of deep “emptiness” that is very different from a Buddhist “emptiness of all forms”? Clinicians often conceive of psychotherapy to be oriented towards healing a whole healthy self, while Buddhist enlightenment as waking up to the reality of this emptiness.²²⁰ It would seem impossible to accomplish both of these goals simultaneously.

²²⁰ Although in need of updating, a good survey of this discourse can be found included in Metcalf’s (2001) larger literature review.

Both therapists and scholars like C.W. Huntington (2015) debate the impact of differing objectives (about the role of the self or otherwise) on borrowing between communities of psychotherapists and Buddhists. Accepting the idea that similarity legitimates integration, some outside observers stress differences between “Buddhism and psychotherapy.” Perhaps these frames are incompatible and integration thus impossible. Other scholars have argued, however, that integration or assimilation is still possible despite enormous dissonances. Francisca Cho (2012) suggests that there is historical precedent for the way that communities ignore seeming incompatibilities. The implication is that present-day activities should be normalized because religious borrowing has occurred in the past. But of course integration is *possible* to the extent that some kind of borrowing does occur in therapists’ approaches to Buddhist traditions.²²¹ The question I believe is ultimately under contention here is not whether integration is possible; it is whether integration *should* be performed. We will see, however, over the course of the following sections, that many appear to answer one of these questions with the other. In the next section, I explain more fully how both therapists and scholars appeal to historical precedent to explain/legitimate integration approaches.

Somebody and Nobody: Perceived Dissonances Between Buddhist and Psychotherapeutic Understandings of the Self

We have already seen that multiple therapists above believe that integration of Buddhist and psychotherapeutic frames is possible because of their affinities. But, again, most of those therapists acknowledge differences between “Buddhism and psychotherapy.”

²²¹ (Of course, I suppose one could claim that the Buddhist traditions from which therapists borrow or not actually authentic Buddhist traditions. If so, then perhaps an integration does not take place here.)

Some differences appear to them to be so large as to become incommensurable – chief among these being dissonant views on the self. A scholar like Cho’s position on this subject begins by granting that claims to similarity between “Buddhism and science” or “Buddhism and psychology” require the repression of important differences. But she suggests that these differences are no greater than those that existed between Buddhist and Chinese worldviews when Buddhist traditions were introduced to medieval China. Here too the question of rebirth was critical. Cho explains that “the interaction between Buddhism and Chinese ancestor worship highlighted a dissonance between the two cultures’ views of what happens after death” (2012, 281-2). The Buddhist concept of rebirth could appear incommensurable with Chinese understandings of lingering spirits that required the assistance of living family members. But if the medieval Chinese could find a way to reconcile their dissonant worldviews with Buddhism, then perhaps so can “Western science.”

Cho then explains how cultural assimilation occurs. If we remember from Chapter Three, Cho does not think that there were common essential cores between Buddhist and Chinese worldviews that allowed for the transcendence of differences between them. Although medieval Chinese thinkers themselves made precisely this argument in a way that a therapist like Wilber dramatically echoes centuries later.²²² Cho, however, believes that “*praxis precedes theory.*” Theories of common essences are invented post hoc as a tactic for legitimating integration or religious mixing. Cho thus

²²² As I discuss at length in Helderman (2015), Ken Wilber and comparative religion scholars are far from the first thinkers to turn to perennial theories to explain difference. Communities in medieval China, who, again, clinicians often cite as models, frequently claimed that Daoist and Buddhist elements might be different in appearances but have an identical “true original form” (Kohn 2008, 159). These perennialist theories may have reached their culmination in concepts such as the “Unity of the Three Teachings” which proposed a sort of synthesis between Buddhist, Daoist, and Confucian paths.

advances a theory of Buddhist transmission here, and, more than that, cultural diffusion at large intended to explain contemporary phenomena. In her case example of medieval China, she says Buddhists gained adherents by offering aid to Chinese communities' concerned about the needs of dead loved ones. Medieval Chinese were highly committed to the concept of "filial piety." They believed it their duty to care for family both living and dead. Buddhist elements like monasticism, for example, was thus an "offensive social institution" because it appeared to necessitate a withdrawal from the family. But in the doctrine of merit and the innovation of karmic transfer, methods were created by which monks' positive karma could be used to the benefit of family members. Even monasticism, Cho states, "was [thus] brilliantly transformed by the Buddhist cosmology of rebirth into a most potent site for the practice of filial piety. What is particularly noteworthy here is both the fact and irrelevance of the clashing conceptual structures brought about by this blending of Buddhist and Confucian practice" (2012, 277).

But psychotherapists do not view "clashing conceptual structures" to be "irrelevant" at all. Clinicians actively deliberate on how to "blend" Buddhist and psychotherapeutic practice in a way that works through "clashes" such as the antithetical goals of "healing the healthy self" and "awakening to non-self." One of the most famous solutions to this perceived problem was formulated by humanistic therapist Jack Engler. Engler forwards a new stage or developmental model meant to organize these dissonant aims. Again, many therapists deeply value both healing the self and an ultimate transcendence of the self. In an oft-quoted summation of his answer to this dilemma, Engler pronounces that "you have to be somebody before you can be nobody" (1983, 1986, cf. 2003). Here psychological health is made a precondition to the cultivation of

Buddhist enlightenment. Clinicians begin by ensuring that people's sense of self is healthy enough to pursue enlightenment. They assess a person's stage of maturation based on factors like ego-strength and interpersonal functioning. A journey towards enlightenment would only begin after necessary psychotherapeutic healing is complete.

Engler's integration approach has become so prominent that it regularly acts as a foil for therapists presenting what they present as improved methods for integration. In interviews and his writings, Rubin critiques Engler's formulation because he views it to create a "hierarchical" relationship wherein Buddhist aims are positioned above the psychotherapeutic (e.g., 2003a, 38-41). Perhaps, he sees in it Maslow's pyramid illustration of a "hierarchy of needs" with psychotherapists at the base and Buddhist experience placed at the top as a "higher state of human potential." Joe Loizzo, meanwhile, also calls Engler's approach "very naïve," but for the the exact opposite reasons (10/3/14). To Loizzo, Engler privileges psychotherapists' assumptions and ignores Buddhist understandings of psychological health. He observed in our interviews that "people like Jack Engler say, 'you have to be somebody before you're nobody. And Western psychology is the way to be somebody.'" Loizzo is confident that his colleagues will be ultimately be freed from their cultural biases:

I think it's going to change in my view. I had a conversation with the Dalai Lama at some point in context of some debate or panel or something in which he was saying he feels that Buddhist culture is ahead of Western culture in terms of psychology but behind in terms of physical science. I very much agree with that. . . . Buddhist psychology is at least as rigorous, in my view in some respects, more rigorous; intellectually, philosophically, methodologically. I just think it is at least a very equal partner and people minimize that. (Loizzo 10/3/14)

Both Loizzo and Rubin seem to want an “egalitarian relationship” between “equal partners.” Even if they disagree on the nature of the hierarchy that currently reigns in communities of psychotherapists interested in Buddhist traditions.

But, again, what the contestation over best practices for integration demonstrate is that psychotherapists do not view “conceptual clashes” to be “irrelevant.” Cho may not be wrong, however, to seek historical precedent for the intentional adaptation that we see here. Psychotherapists’ struggle over how to reconcile new cultural elements with their existing beliefs may indeed be consistent with that of medieval Chinese communities. Stephen Bokenkamp’s (2007) book-length study of “the birth of rebirth in China” could provide evidence for the idea.²²³ Bokenkamp explanation for how medieval Chinese came to accept the notion of rebirth bears a resemblance to Cho’s representation.²²⁴ He means to revise depictions of medieval Chinese communities as passive empty vessels into which the new wine of Buddhism was poured.²²⁵

Buddhist accounts of rebirth and the afterlife did not come to be accepted in China by default, or through ideological poverty, or by fiat. Instead, they were gradually adapted into preexisting Chinese conceptions of how to deal with the dead because they helped to solve particular problems among the living. (10)

Clearly, therapists like Engler and Loizzo also do not accept new Buddhist teachings by “fiat.” They actively “adapt” them with their “preexisting conceptions.” However,

²²³ Bokenkamp took up this project after being struck by the degree to which Buddhist understandings of the afterlife were embedded in the Daoist Lingbao scriptures he studies. He was left asking: “how was it possible that such a thorough-going acceptance of the idea could suddenly make its appearance in these texts written at the beginning of the fifth century?” (2007, 13).

²²⁴ Though not without important differences - e.g., Bokenkamp differentiates Chinese communities’ understandings of karma from those of Indian Buddhist doctrine pivoting on the axis of individual vs. collective responsibility.

²²⁵ Challenging the once entrenched scholarly practice of analyzing Chinese texts for signs of “Buddhist influence” or “Chinese sinicization,” Bokenkamp seeks to demonstrate “how the texts [he] survey[s] engage, deny, or appropriate Buddhist ideas, rather than... how those ideas influenced these texts” (2007, 11).

Bokenkamp's observation here raises an additional important question. Bokenkamp clarifies that Buddhist notions like karma and merit-transfer were not only new solutions to the existing problems that motivated Chinese ancestor worship. These solutions brought with them new problems that hadn't been of concern to these communities previously, namely, rebirth. From this perspective, "influence" is never uni-directional. Communities can not appropriate new elements without preexisting conditions significantly changing those elements. Neither can those elements be remade into something completely familiar.

The question then is what new problems psychotherapists adopt when they treat Buddhist teachings and practices as solutions to their old ones? Certainly not rebirth. For most, the Buddhist traditions they integrate into psychotherapy have already excised literal beliefs on that subject. Our next example of psychotherapists integrating religion approaches to Buddhist traditions may answer this question. In the next section, I introduce clinicians like Jan Surrey who argues that Buddhist conceptions of the self (as she understands those conceptions) should be *integrated* with those of psychotherapists.

Integrating Interdependence

Jan Surrey is a pivotal figure in the development of feminist psychotherapies and one of their more recent offshoots, relational-cultural therapy. She began her career as a collaborator of Jean Baker Miller and was one of the founding members of the initial Stone Center Theory Group. The Stone Center Theory Group was crucial for exposing and challenging the encoded patriarchal foundations of traditional psychologies and

psychotherapies.²²⁶ Surrey and her colleagues bring attention to the social construction of core therapeutic concepts like “health,” or, indeed, the “self.” They observe that the criteria used to define these ideas were based on male experience. They raise up the healing power of relationship, rather than individuation and self-actualization. With this background, Surrey was not predisposed to preserve existing psychotherapeutics of the self. She had already participated in the critique of those theories. When she first read Buddhist teachings she found them to be utterly transformative; new, superior means to carry forward this project.

Surrey and other relational-cultural therapists mean to replace old psychotherapeutic understandings of an individuated self with a “relational self.” In our personal interviews,²²⁷ Surrey indicated that, to her mind, Buddhist doctrine is the best expression of a relational self she has encountered.²²⁸ From her perspective, Buddhist teachings amount to a thousands-years-old articulation of the interconnection, inter-relationship of all things. In her commentary on “the relational revolution in psychology,” journalist and author Christina Robb (2006) writes that

Surrey psychologizes the Buddhist notion of ‘dependent co-arising,’ the idea that everything comes to be in relationship with everything else. Everything emerges in relationship, she says; relationships are present and necessary for the birth of everyone, every encounter, every decision” (2006).²²⁹

²²⁶ For more on the history feminist and relational-cultural psychology and psychotherapy begin with Robb 2006.

²²⁷ Interviews were conducted by phone on April 9, 2015, April 15, 2015, and April 29, 2015.

²²⁸ Some clinicians, informed by feminist psychotherapy, have taken issue with incorporating Buddhist concepts of non-self into treatment because they believe that women living in an androcentric society, particularly women who have experienced trauma, already feel a fragmented sense of self or pervasive feeling of “emptiness.” From this perspective, a stage model like Engler’s might look attractive. For example, and in reference to Judith Herman’s work on trauma, see Robb 2006, 306.

²²⁹ For a further account of this shift in Surrey’s thinking on the self after attending a meditation retreat with Thich Nhat Hanh see Robb 2006, 211-213.

True enlightenment thus comes not through self-realization or self-actualization, but an awakening to inter-relatedness. Coming to an awareness of non-self means seeing through individualistic ideologies with their illusion of the separate isolated self.

Surrey exemplifies the shifts that Ann Gleig (2012, 2014a, 2014b, 2015) and others have charted among many U.S. Buddhist communities influenced in part by feminist thought. Through the end of the twentieth-century, Buddhists began to shift their attention away from self-liberation to inter-relatedness. Teachings on interconnection or “interdependence” form the foundation of Surrey’s integrating religion approach. Further, such ideas are extremely important to many of the therapists discussed throughout this dissertation. David McMahan has traced the genealogy of these depictions of inter-relatedness in what he calls “Buddhist modernism” (McMahan 2008, 149-180). He elucidates that these representations, and, thus, definitions of non-self and Buddhist enlightenment, surfaced relatively recently. Moreover, they stand in strong contrast with how inter-connection was previously viewed by Buddhist communities. “Early classical formulations,” he writes

took a view of the significance of interdependence that that was nearly opposite to that of their contemporary successors. The monks and ascetics who developed the concept of dependent origination and its implications saw the phenomenal world as a binding chain, a web of entanglement, not a web of wonderment. (McMahan 2008, 153).

For centuries, Buddhists have conceived of nirvana as liberation from the “binding chain” of the inter-related cycle of rebirth. Today, many seek a deeper enmeshment within this web.

Surrey told me that she is well aware that she participates in a reconstruction of Buddhist doctrine. In her view, Buddhist traditions, like many other “organized

religions,” are much in need of reforming, particularly by feminists.²³⁰ Surrey believes that reconstructed Buddhist teachings on interconnection are highly compatible with her own relational-cultural therapy. Again, they thus seem ripe for integration (although as I will discuss more below she has aversion to this word). With contributions from another feminist and relational-cultural therapist, Judith V. Jordan (2012), Surrey developed a new clinical modality around these integrations named “Relational mindfulness.”²³¹ To Surrey, the integrative approaches of Engler or other “self psychologists” are still grounded in an illusory, and not fully Buddhist, view of the self.²³² (As to Engler, she

²³⁰ Her latest book *The Buddha's Wife: The Path of Awakening* (2015) employs the figure of Yashodhara, the wife the Buddha left when he began his journey to enlightenment (“she who stays” Surrey calls her), as signifier for a feminist-inspired relational Buddhist practice. That I am unable to delve more deeply into the gender dynamics of psychotherapist’s approaches to Buddhist traditions is a limitation of this dissertation. Scholars like Ann Gleig (e.g., 2015) have called for greater attention to the role of gender in the study of Buddhist practice in the U.S. The majority of psychotherapists who attended the conferences I observed were women, but the majority of speakers, and the majority of published authors on this subject, continues to be men (though this has equaled out more and more over time). Wilson has discussed how therapeutic usages of Buddhist-derived practices like mindfulness meditation tend to be highly gendered in their marketing – the typical magazine cover or advertisement depicts a young, blond-haired white woman sitting in meditation (2014 71-73; 142-147). Gender has played a not-so-subtle role from the very first of psychotherapists’ approaches to Buddhist traditions (and perhaps religious traditions in general). Psychoanalysts studying Buddhist doctrine nearly always find it necessary to respond to Freud’s denigration of “the ocean feeling” he believed Asian meditative experiences were meant to elicit. Freud’s critique was explicitly connected to a mistrust of the “feminine.” According to Freud, “the oceanic feeling” was, at base, a narcissistic wish for return to maternal union. Jan Surrey suggests that psychotherapists’ investment with being classified as secular practitioners is itself gendered. When she was in graduate school, she told me, “religion was just one of the things that psychology looked down on like women, like ethics, like minority groups, like gays, like religions. It was lumped in with a lot of these things” (Surrey 4/9/15). Though I have attempted to draw attention to gender dynamics throughout this dissertation, it would be worth delving into more deeply in the future.

²³¹ As apparent in her methodology’s name, Surrey initially framed her integration as bringing together mindfulness and relational-cultural therapies. This demonstrates how much mindfulness movements have become traditions unto themselves that can be integrated with psychotherapeutic frames.

²³² Surrey appears to use term “self-psychology” to refer not only to specific psychoanalytic schools that are typically given the name, but all therapies she views as focused on individualistic conceptions of the self. Although she is a board member of the Institute of Meditation and Psychotherapy that arranged the “Uprooting Our Traditions” conference discussed in the last chapter (where I initially met her), Surrey does not stop from challenging even close colleagues like Chris Germer for publishing numerous books on “the mindful path to *self*-compassion.” “I notice with some concern,” she said, “the way self-development, self-compassion, and perhaps a self-centered psychology could harness the power of meditation to the self. . . Like self-compassion, I disagree with Chris Germer. That feels to me like a co-opting, of going to the culture using self-compassion to really lift that up. I understand it. I understand why people like it, but I disagree with the language of that. . . I’m pretty sensitive to the whole idea of self psychology because of my

notes: “he’s said so many times that he’s sorry he said that” (4/29/15)). Surrey and Jordan are concerned that many Buddhist practices incorporated into psychotherapy are easily misunderstood and misused to further self-focusedness or self-isolation. Relational mindfulness, meanwhile, integrates Buddhist teachings and practices meant to cultivate an awakening to inter-relatedness. She teaches a number of Buddhist and mindfulness-based practices aimed at increasing one’s relationality.

Summarizing her approach in our interviews, Surrey said “I feel like, for me, my particular place is exploring relational practice and some interface between psychology and social justice and healing. Transformation in this world. Being part of that, and perceiving the Buddhist community and teachings as having something tremendously important to offer culturally. . .It feels like such an antidote really.” (Surrey 4/15/15). For Surrey, Buddhist teachings and practices provide new, previously unavailable openings to what she calls “liberation through relationship” (4/29/15) or “the path of awakening through relationship” (with Samuel Shem 2015, xxxiii). Her passion for this work ultimately led her to become a “dhamma teacher.” When she speaks today about her approach to integration, she often refers to how she embodies both identities. She attends as much to how she brings a therapeutic sensibility to her work as a meditation teacher as to how she brings her Buddhist experiences into therapy.

Each has something to offer and there’s something bigger for both in each domain. The intersection with the other can grow something better. . .it’s really interesting to stand in both worlds and see what I bring from each world. . .I guess more than anything I guess I think of it as a mutuality. Mutual impact, mutual influence, mutual unfolding. . .I stand in those fields and sort of see how they work together, see how it co-arises in that field of meeting, those different traditions. (Surrey 4/15/15)

own historical location doing relational psychology and that’s why I was really drawn to Buddhist psychology because it seemed to me it was pointing to the freedom, emancipation from self as a crucial value and practice” (Surrey 4/9/15).

Surrey is not alone in bringing the recent emphasis on relationality found in many psychotherapeutic communities to integrating religion approaches to Buddhist traditions. While Surrey comes out of a feminist and relational-cultural background, Pilar Jennings (2010) is more informed by relational psychoanalytic schools. Perhaps not surprisingly then, Jennings also integrates Buddhist teachings on interdependence.

An author and therapist in private practice, Jennings was trained in a clinically-based “psychiatry and religion” PhD program at Union Theological Seminary (affiliated with Columbia University). Jennings’ program was explicitly oriented towards questions of how to relate religious and clinical practice. Jennings agrees with Surrey that “relationship. . .is indeed the goal of awakening” (2010, 233). And she emphasizes that the “highly divergent yet harmonious healing traditions” of both “Buddhism and psychoanalysis” (2010, 230) help achieve this goal *through* relationship (analyst/analysand and teacher/student). In discussing this dynamic in her writings, Jennings at one point discloses that she “hope[s her writing] has in some way reassured the reader that relationships – *between traditions* [my emphasis] and between healers and those seeking healing – while forever imperfect, are worth our every effort” (2010, 233).

Jennings does not only attribute relationality to people here (“between healers and those seeking healing), but “between traditions.” This is a major feature of Jennings integrating religion approach to Buddhist traditions. She applies psychoanalytic relational theories to the “relationship” between “Buddhism and psychoanalysis” to ensure that it is a healthy one. For example, to Jennings, a number of integration approaches are simply based on what is commonly referred to as “poor boundaries.” She is wary of the “many theorists who propose an integration of these two contrasting

systems in which the boundaries are collapsed and the methods merged” (2010, 232). Here relational theory teaches Jennings the importance of maintaining some differentiation between Buddhist and psychotherapeutic frames just as it is important to avoid codependent enmeshment in relationships. So far this chapter has surveyed integrating religion approaches to Buddhist traditions based on findings of similarities or working through differences between Buddhist and psychotherapeutic frames. In the next section, I explain this dynamic further. Psychotherapists like Jennings seek integration approaches intended to actually preserve differences between Buddhist and psychotherapeutic traditions.

In the “Between”: Preserving Difference Between Buddhist and Psychotherapeutic Traditions

Influenced by relational theories, Jennings states that she has “come to learn that each tradition [“Buddhism and psychoanalysis”] has evolved out of a unique, complex, and previous history that cannot be altered. They are changing and malleable traditions, with room to learn from and adapt to the experience of their current and diverse practitioners, but they are nonetheless effective only insofar as they remain bound to their origins” (2010, 232). In our personal interviews, Jennings suggested that this sensitivity was emphasized in the “religion and psychiatry” program she attended.²³³

A big part of my training was to continuously appreciate and respect the radical differences between religious practice and clinical work and to be curious about the common ground and the ways in which these different traditions could be mutually supportive, but never to seek to conflate them and to really honor the differences in origin, the differences in intention, the differences in modality. (Jennings 5/21/14)

²³³ Interviews were conducted by telephone on May 16, 2014 and May 24, 2014.

As psychotherapists turn to religious traditions for healing resources, the continued existence of academic specializations that instill this sort of critical thinking becomes increasingly important (even as they are becoming increasingly scarce – Jennings’s program, for example, is now defunct).²³⁴

In her writings, Jennings can often make discerning and preserving differences between Buddhist and psychotherapeutic traditions her first priority. Harvey Aronson, introduced in Chapter Five, also takes issue with those who would elide differences between contemporary U.S. Buddhist practice and Asian Buddhist traditions of the past. Time and again, he returns to this theme. He explains that “it is helpful to clarify differences between Buddhist cultures and our own in order to make explicit the differences in cultural values and how deeply they insinuate themselves into our experience, including the spiritual” (2004, 2). The comparative exercises of so many other therapists focus on similarities and only mention differences. But Aronson and Jennings exemplify those that warn against the erasure of difference. In fact, in Aronson’s eyes, the tendency to absorb cultural difference is itself specific to contemporary society. This is only one social norm he believes new Buddhist communities should be aware of in their “assimilation” of Buddhist teachings. Aronson believes that what he calls “modern” Buddhist communities encounter difficulties because they do not consider their cultural differences with the societies which originated Buddhist traditions.²³⁵

²³⁴ Currently, PhD students in Religion at Columbia can “minor” in “Practical Theology” which includes a “Psychology and Religion” sub-speciality. Jennings is an adjunct professor in classes still labeled as on the subject “psychiatry and religion.”

²³⁵ It should be again reemphasized here that Aronson is primarily speaking to and about communities of “convert” Buddhists in the U.S. There are populations of Asian “generation” Buddhists practicing in the

Aronson seems persuaded by sociological theories of a contemporary “therapeutic culture.” It would be this culture that leads today’s practitioners to approach Buddhist teachings and practices as therapeutics or to be surprised when Asian teachers are unprepared to meet their emotional needs. Without gaining familiarity with the difference between their own cultural values and those of what he calls “traditional” Buddhist culture, practitioners often do not find the “feelings of belonging and attunement” they search for in Buddhist practice. They instead experience “alienation, a subtle sense of disconnection, and in the worst cases, shame” (2004, 2). Aronson believes that greater intercultural literacy and sensitivity is thus indispensable for new Buddhist communities.

We may initially prefer to ignore such cultural differences and go after the spiritual rewards of meditation. . . [but] over time, with more prolonged contact with the tradition, we cannot help recognizing the differences in what is emphasized traditionally and what we consider valuable. Culture is the container within which our most basic daily decisions about life are made. (2004, 11-12)

Aronson’s language here shows the influence of anthropologist Clifford Geertz. He at one point quotes Geertz for challenging a “Western” “dominant model of self-as-separate-from-other.” (2004, 20).

Building upon the above foundational theses, Aronson develops an integrative approach based on theories of “cross-cultural reflection” and “cross-cultural dialogue.” He presents a detailed explanation of cultural psychologist Richard Shweder’s four-fold process of “thinking through culture” (2004, 35-38). Within Shweder’s process, Aronson

States who might not experience the cultural dissonance he speaks of. Aronson is aware of this and mentions that even Buddhist practitioners of Asian descent who have grown up in the States may still be inculcated with the broad cultural norms he delineates. Though he does not explicitly say so, I suspect that it is for this reason that he uses the categories of “traditional” and “modern” rather than, say, “European-Americans” and “Asian and Asian-Americans.”

finds a method “that facilitates understanding the other more fully and leaves us richer as human beings” (2004, 35). The work of Jeffrey Kripal (who teaches with Aronson’s wife, Anne Klein, at Rice University in Houston) provides the coda to Aronson’s integration approach. Aronson explains that

To the extent that spirituality involves enhancing the meaning of our lives and transcending restricted visions of ourselves and others, the process of cross-cultural reflection becomes a spiritual enterprise. As Jeffrey Kripal so eloquently states, ‘Thinking through others thus leads to a kind of postmodern religious experience in which transformation and transcendence are discovered not within a particular tradition or culture but *between* at least two.’ (2004, 40)

Kripal suggested that academic practices of comparative religion influenced the religious forms of locations like Esalen. Kripal’s theory now comes full circle as his own practices of comparative religion provide direct guidance for the work of Aronson. Of course, again, Aronson is not so interested in integrating Buddhist teachings and practices into psychotherapeutic work. In his clinical practice as a therapist, Aronson largely takes personalizing and translating approaches to Buddhist traditions. Aronson’s goal is to integrate psychotherapeutic and Buddhist frames to help Buddhist communities better achieve Buddhist aims. Again, the apparent dominance of “therapeutic culture” makes this a necessity for all Buddhist communities.²³⁶

Therapists like Jennings and Surrey do take integrating religion approaches to Buddhist traditions, but, like Aronson, they are also quite wary of doing so. In fact, both Jennings and Surrey expressed an instinctive aversion to the word “integration” itself when they heard me use it (though it appears in their writings). I noticed this when speaking with Surrey and inquired about her response: “Why I have trouble with

²³⁶ To be clear, Aronson did not use this phrase “therapeutic culture” in our discussions, rather I interpret his perspective using this rubric.

integration?” she responded, “I don’t know why. It just seems like such a non-vital, alive word to me. I love things that sound really alive, and not conceptual, I guess.” When I explained what I was thinking of when I used the word she did believe that she belonged in this chapter. But she also thought her work was something closer to what she called “creative inter-emergence, rather than integrating this and that” (Surrey 4/15/15).

Meanwhile, “integration,” to Jennings’ ears, sounds too close to “conflation” for comfort.

In our interviews, she explained that

I see what you mean by integration. I come at it maybe as an expansion of what’s possible. I do think it’s extremely important for young clinicians to understand that when they’re working with patients there’s an opportunity to help the patient contact their own Buddha nature right, their own deepest essence, however you want to configure it. And in that way really augment the sense of what’s possible or you could talk about finding their own inner transcendence, their own self nature to use a Jungian term. So I guess you could think of that as integration. I think of it more of as really helping clinicians expand their notion of what’s possible. . .I don’t feel personally called to integrate these traditions. I feel personally led to just be honest and authentic and real about . . .What I understand is available to people who are trying to enjoy life more and suffer less. I personally have suffered less as a result of my Buddhist practice. And that has something to do with certain modalities that I’ve experienced over time. It has something to do with ideas and perspective and an expanded notion of what’s real and true. And so, I think as I mature as a clinician, I simply find myself bringing more of myself into the clinical space. It’s less about integrating these traditions and it’s more about simply offering what I know to be helpful and just being honest about what I think and how I think. (Jennings 5/21/14)

Consequently, Jennings takes a careful approach to bringing together Buddhist and psychotherapeutic elements in her work. So careful in fact that she sometimes sounds as if she is taking more of what I have called a “personalizing” approach to her Buddhist experiences, “simply. . .bringing more of [her]self into the clinical space.” Jennings gives concerted attention to how she chooses what she does intentionally bring into therapy session from Buddhist traditions. In the next section, I look more at the question

of what determines psychotherapists' integration approaches. I also consider whether religious studies scholarship on "religious eclecticism" could help answer it.

Religious Repertoires and Therapeutic Toolkits

When I spoke with clinicians who take integrating religion approaches to Buddhist traditions, I always asked them how their mixing of Buddhist and psychotherapeutic elements functioned in practice. Since my interviewees are published authors, most had already thought about the principles that guide their intentioned processes of incorporation. Nonetheless, many appeared to have difficulty putting these guiding principles into words. Rubin, for example, told me that theorizing how or when he might explicitly use Buddhist teachings and practices in sessions would be counter-productive. He described bringing predetermined methodologies to clinical work as a kind of "imprisonment" (Rubin 6/16/14) that ossifies the therapeutic process. Instead, Rubin said,

It comes out of the listening, so out of the listening and sort of hearing where the person's at and what's crucial to them and what they might need slowly emerges or instantaneously emerges a response and that response might be inflected more with one or the other [Buddhist and psychotherapeutic] traditions or both. But it's really a case by case thing. . . drawing on each in different ways at different moments. . .and then trying to notice the impact of all that and then. . .gauging whether my hypothesis was confirmed or not; whether the tactic was helpful and further altering it based on the feedback I was getting at that moment. (Rubin 6/16/14)

Rubin compares himself to a "jazz improviser" who can only be successful if they have a firm grounding in "the basics" (Rubin 6/16/14). He told me that "if I had to comment on [a session] later and you were watching it through a one-way mirror, I might say, 'well, the Buddhist hat was on at that moment,' or, 'the meditation teacher's hat was on at that

moment.’ And then the next moment, I might say, ‘What do we think that means?’ And then the analyst's hat would be on. So it would probably be a tacking back and forth” (Rubin 6/16/14).

Rubin’s perspective here is representative of many of the therapists I spoke to for this project. (And I would hypothesize that many unpublished clinicians would also state that they bring Buddhist teachings and practices into therapy sessions on a case-by-case basis.) Psychotherapists frequently describe themselves to be driven by a pragmatism of “whatever works.” They would thus integrate new elements when it seems likely to “help” in a particular session (remembering our discussion of what “help” means exactly from Chapter Five). Perhaps, scholarship on religious eclecticism explains this dynamic. We saw above that scholars of medieval China like Bokenkamp have long sought to make sense of how communities mix teachings and practices. Cho argues that there is historical precedent for therapists’ pragmatic “religious borrowing.” Indeed, perhaps it is the fact that such activities are so commonplace that scholars now have a surfeit of phrases to describe them beyond those I have used so far (e.g., eclecticism, religious borrowing, and hybridity). These sorts of phenomena have also variously been called ritual mixing, syncretism, bricolage, and creolization. Campany offers a new take on these questions in his model of “religious repertoires.”

Like Cho and Bokenkamp, Campany observes that therapists’ practical concerns are not new. As reflected in the literature produced during this period, for medieval Chinese communities “the overriding concern [was]. . .how to draw upon Buddhism’s practical efficacy in life and after death” (2012a, 31). Campany challenges those who would ascribe “syncretism” or “hybridity” to texts in which Buddhist-designated

elements appear alongside those decreed to be “Daoist” or “popular.”²³⁷ Scholars comb over texts to identify and label the clearly demarcated Buddhist or Daoist items that have been mixed together. All of this, Company argues, assumes that these items have been drawn out of clearly demarcated closed containers called “Buddhism” and “Doaism.” A hybrid would be an amalgam of these distinctly delineated entities. This conceptualization, Company says, is generated out of “a Geertzian emphasis on culture as all-encompassing ethos and . . . religions as ‘cultural systems’. . . as containers into which persons, ideas, practices, and texts may be fit without remainder” (2012b, 107). But, of course, “Buddhism” and “Daoism” are constructed categories used to name wide swaths of cultural material. And the activities of medieval China demonstrate that the boundary-lines between, for example, what is “Buddhist” and what is “Daoist” are very much artificial.

Company advocates a model that would supplant these understandings replacing them with a vision

not of a ‘common religious culture’ but a common *field* of religious activity, a field populated by multiple religious repertoires. Elements of the repertoires operated in certain characteristic styles, modes, or idioms; they also served distinct functions, or were good for addressing certain sorts of problems (2012b, 139; cf. Hymes 2003).

In this formulation, communities respond to the new teachings and practices of religious traditions, “not as tightly organized, logically coherent systems, but as something closer to tool kits: the many kinds of tools inside might not fit smoothly together— some might even be metric, others English—but each is useful for doing some particular kind of job” (2012b, 107). The metaphor of toolkit as model for communities’ eclecticism would

²³⁷ In the case of Chinese Buddhist forms, Sharf delivers some of the more formative critiques of the classification ‘syncretism.’ See especially Sharf 2002b, 17-21; 2002a.

resonate with many contemporary psychotherapists. Psychotherapists use this same metaphor on a daily basis to describe their “therapeutic toolkit”; the way that they eclectically mix therapeutic theories and treatment interventions drawn from multiple sources.

In the United States, “eclectic” or “integrative” psychotherapy is currently the most commonly endorsed treatment modality by clinicians (Stricker 2010: 3-4), far more than any other single orientation (psychoanalytic, behavioral, humanistic, etc). In psychoanalytic or behavioral systems one finds seemingly incommensurable views of what it means to be human, what determines personality, suffering, flourishing and healing. And yet, every day, therapists intentionally mix and match both theories and techniques drawn from these sources. Thus accustomed to such eclectic or integrative approaches, psychotherapists are primed to treat mindfulness meditation or Buddhist teachings on mutual co-arising as simply new additions to their “toolkit.” Of course, there could a key difference between the mixing that Campany analyzes and that of a therapist employing both psychotherapeutic and Buddhist teachings in their work. While the so-called hybrids that Campany examines might have elements taken from disparate religious traditions, the hybrid Mark Epstein named in Chapter Five is made up of religious and *secular*-designated spheres.

Contemporary scholar of religion and medicine, Susan Sered (2008) has attempted to bridge this gap. She expresses consternation at developing a new terminology for these types of activities that is untainted by the now discredited language of “syncretism.” The treatment of Buddhist traditions by many psychotherapists would exemplify to Sered that “while syncretism typically is conceptualized as boundary

crossings within an institutional sector (mixing of elements from various religious traditions), ritual mixing also occurs across sectors (such as medicine and religion)” (Sered 2008, 225). Psychotherapists’ mixing of items between their therapeutic schools would be an example of *intrasectoral* mixing, while their drawing from Buddhist traditions would be *intersectoral* (Lee 2005). Intersectoral mixing could require new explanations as alternatives to those of “combinativeness” that religious studies scholars are familiar.

For the therapists doing the borrowing, however, this question frequently appears a new challenge. As we’ve seen throughout this dissertation, the matter of whether clinicians are engaged in intersectoral mixing between the “sector” of secular medicine and the “sector” of religion can be of great import. Therapists taking integrating religion approaches to Buddhist traditions sometimes directly address whether their mixing is intra or intersectoral. They consider whether therapy is properly classified as belonging to the “medicine” sector, whether Buddhist traditions to “religion.” In the final section, I describe therapists’ conclusions as further illustrating how these terms function in the lives of communities.

Religious? Secular? . . . Spiritual?

I have argued that psychotherapists’ diverse approaches to Buddhist traditions are generated from their understandings of the categories religion and secular. This is the case even though many therapists never explicitly define these terms. And yet, for some, contemplating what is religious and what is not is a constituent part of developing their integrating religion approaches. In the following section, I survey some of these

deliberations. Where Surrey or Jennings were not fully comfortable with the idea that they “integrate,” here they interrogate whether Buddhist traditions are “religion.” And whether psychotherapy is “secular.”

Jennings (2010) goes so far as to title a chapter of her book, *Mixing Minds: The Power of Relationship in Psychoanalysis and Buddhism*: “Is Buddhism a religion? Is psychoanalysis a scientific system?” (35-65). In such formulations, Buddhism’s identification with religion (and psychoanalysis’ identification with science) are at once reinforced while being called into question. Of course, as we have already seen multiple examples in the preceding chapters, therapists taking integrating religion approaches to Buddhist traditions answer Jennings’ questions in a plethora of ways. Some point to the same modern(ist) Buddhist discourse that finds compatibility or identity between “Buddhism and science.” They cite sutras that seem to advocate an empiricist worldview by stressing the importance of testing theories or gathering evidence. They discuss Buddhist cosmographical beliefs that appear to anticipate quantum physicists’ theories of a “multiverse.” Others may distance Buddhist traditions from the category of religion by declaring it philosophy or “way of life.” If Buddhist traditions are closer to science or philosophy than religion, then perhaps this is not a case of intersectoral mixing. Clinicians might not be “integrating religion” at all. And if Buddhist traditions are already scientific then approaches like “translating” them become superfluous. There is no need translate Buddhist practice into scientific terms if they are not fully religious to begin with.

Clinicians will also examine the classification of psychotherapy as secular here. Some believe that their integrations are possible because psychotherapies are not

completely scientific, are not completely secular. The preceding chapters illustrate how vibrant this tradition has been carried forward by therapists from Jung to Fromm to Cooper. It has also been highly consequential, contributing to the growth of new communities of clinicians like humanistic and transpersonal psychotherapists. Therapists frequently challenge the pure secularity of psychotherapy in their integration approaches. Jennings, for instance, describes an inherent “sacredness” to psychotherapeutic experiences. What occurs in the relational space between analyst and analysand is something “more” than the everyday. If psychotherapy is less than wholly secular, then there is no need to paint Buddhist traditions as anything other than religious. Further, hearing the above rhetoric about “secular Buddhism,” therapists like Cooper or Magid actually express a strong investment in upholding their Buddhist traditions’ classification as religion. Jennings shared this sentiment in her own approach.

When I wrote *Mixing Minds* I felt very strongly that it was so obvious that Buddhism is a religion. It fits all the criterion and it has all of the healing potential *because* it’s a religion. What a shame really to try to secularize it. (5/21/14)

Jennings thus seeks an integrating religion approach that would not “lose sight of the history, the evolution” (Jennings 5/21/14).²³⁸

In these conversations we hear therapists actively maneuvering with the terms religion and secular and their definitions. While all clinicians’ approaches to Buddhist traditions arise out of these maneuvers, many psychotherapists behave as if an active engagement with these definitions is a constituent part of taking an integrating religion approach. One increasingly hears an old tactic resurface here, represented by a new term:

²³⁸ Of course, like her colleagues, Jennings criteria for defining Buddhist teachings as religious focuses less on the supernatural or cosmological and instead on historico-cultural context and the healing power of community.

“spirituality.” This word has periodically appeared in the preceding chapters. Fromm referred to a “spiritual revolution” and Linehan to “spiritual traditions.” At times, the term has been used as simply a synonym for religion, the two concepts conflated. Kripal claimed that Maslow was a singular figure in the concept’s twentieth-century construction as differentiated and, in some ways, even opposed to religion. A growing number of therapists, like relational psychoanalyst Jeremy Safran (2003) and Lacanian psychoanalyst Raul Moncayo (2012), have suggested that integration between Buddhist and psychotherapeutic traditions is possible because they are neither religious or secular in nature; they are spiritual.

Moncayo and Safran see themselves as part of a new phase in the evolutionary development of what they often refer to as the “Buddhism and psychoanalysis dialogue.” Moncayo’s approach begins by updating the standard secularization narrative. He notes the durability of secularizing agents such “the scientific paradigm” (Moncayo 2012, 2). But he also cites sociological data from Wade Clark Roof and Robert Wuthnow showing that predictions of the secularization of society have not come to pass (Moncayo 2012, 1). Repeating a vision that goes back to Jung, both Safran and Moncayo assert that humanity is not completely eliminating religion, but transforming it.

Perhaps not surprisingly given that he is a psychoanalyst, Safran portrays a society in conflict. The forces of secularization remain powerful, but have yielded two cultural responses that he calls “a type of return of the repressed” (Safran 2003, 20). First, “some more traditional cultures,” he says, perceiving secularity “as a form of oppression and an assault,” have turned to fundamentalism (Safran 2003, 20). A second trend, meanwhile, has been “the emergence of New Age spirituality, which involves a

syncretic blend of various traditional Eastern and Western spiritualities with pop psychology” (Safran 2003, 21). Safran and Moncayo view Buddhist traditions as an alternative that both resists secularization, but does not resort to either fundamentalism or New Age “syncretism.” The former they perceive to be tribalistic and violent; the latter, a narcissistic frivolity of which humanistic and transpersonal therapists partake. Moncayo sees Buddhist teachings and practices as representing a different kind of “spirituality.” Buddhist traditions evade the failings of religion, but, far from frivolous, hold deep ancient wisdom.

Unlike most of the therapists who use the word, Moncayo defines the term (Moncayo 2012 18-28). In his definition, he mentions many of the same qualities that are detailed in recent scholarship on the category by scholars like Courtney Bender (2010) and Nancy Ammerman (2013). Moncayo believes that spirituality’s defining quality is “intrinsic” subjective experience. Oppressive organized religion, meanwhile, offers only “extrinsic” institutional enforcement of the pathological practices that Freud had diagnosed (Moncayo 2012, 3-28). Moncayo states that the “European Enlightenment” set secularization in motion, but also initiated the growth of spiritual (rather than religious) forms. “The Enlightenment of humanity promised by the natural and social sciences,” he writes, “sought not only the elimination of religion but also a more evolved form of spirituality and/or religiosity” (Moncayo 2012, 2). Psychoanalysis is one outgrowth of this movement.

Both Moncayo and Safran describe psychoanalysis as “a secular and nontheistic spirituality” (Moncayo 2012). Safran states that “psychoanalysis is not a science in the same sense that physics or chemistry are, but rather a secular form of spirituality. In

some ways it functions to fill the void that was once filled by religion” (2003, 30). We have heard the argument that psychotherapy will “fill the void” of religion from the earliest days of the discipline’s formulation. Safran and Moncayo now use the concept of “spirituality” to express how this could work. Safran believes that shifts within communities of psychoanalysts have honed psychoanalysis’ function as “a secular form of spirituality.” He notes that psychoanalysts have progressively moved further away from positivist science and developed the the “religion friendly theories” observed by Parsons. With reference to thinkers like Philip Rieff (2003, 2-4), Christopher Lasch (2003, 6), and Philip Cushman (2003, 7), Safran outlines a series of “crises” among psychoanalysts. These crises, he says, have led analysts to increasingly turn away from, among other things, ideologies of individualism. With the arrival of what he calls “the postmodern turn,” analysts embraced the new frames of communalism, constructivism, and the multiple, relational self (2003, 21-25).

If both psychotherapeutic and Buddhist traditions belong to the same “cultural sector,” if they should both be classified as “spiritualities,” then therapists do not integrate religion and secular after all. In fact, their integration would be, in some ways, seamless if they are both similarly-oriented spiritualities. Moncayo and Safran’s specific integration approaches are both more about integrating Buddhist and psychotherapeutic theories than incorporating actual practices into sessions. Moncayo’s believes that “Zen Buddhism” offers new ways to conceptualize Lacan’s “Real.” Safran notes “Buddhism, like psychoanalysis, is a heterogeneous tradition with different schools and conflicting and seemingly contradictory beliefs” (2003, 22). He delineates a number of different Buddhist traditions and corresponds the teachings of each with the aforementioned

“crises” of contemporary psychoanalysts. For example, he discusses “the move toward a constructivist epistemology within psychoanalysis [that] has opened the doors for a reconsideration of the relationship between reality and fantasy” (2003, 26). He cites the analyst Stephen Mitchell (who appears in the volume Safran-edited *Psychoanalysis and Buddhism: An Unfolding Dialogue* (2003)) for expressing reservations about this “move.” He then turns to Buddhist traditions for the answer:

Is it possible to achieve some degree of reenchancement of the world in which we experience a sense of participating consciousness, without an act of denial or self-deception? The Tibetan Buddhist approach to integrating practices and rituals of a more magical nature with a constructivist epistemology provides some leads. The Tibetan culture in which such practices were originally developed was a prescientific, traditional culture in which magic and supernatural reality existed as a part of everyday experience, just as they did in Western culture prior to the Enlightenment and the dawn of the scientific era. (2003, 26)

I choose this as my example of Safran’s method for integrating Buddhist and psychotherapeutic ideas with purpose. Safran envisions a pre-modern past that was homogenously religious. Only after modernity was the world stricken with the splitting of “enchantment” from “everyday experience.”

In the Conclusion, I examine this vision which we have heard psychotherapists imagine time and again over the preceding pages. It expresses a wish that many clinicians disclose feeling: to be freed from the necessity of classifying their work as religious or secular science. That therapists’ express this desire, I will note, only further evidences the entrenchment of these categories in the everyday life of communities. Psychotherapists’ integrating religion approaches may seem to most fully display the maneuvers clinicians make between religion and secular. When therapists intentionally blend the Buddhist and psychotherapeutic, the religion and the secular, they seem to fully blur the lines between these categories. We thus heard some claim to create “hybrids” or

“mixtures.” And yet, like all the other approaches therapists take to Buddhist traditions, this configuration between religious and secular remains unstable and in flux. I begin the Conclusion by drawing this point out in order to reiterate the core findings of the preceding chapters.

CONCLUSION

In this dissertation I employ new methodological and theoretical lenses to examine U.S. psychotherapists' interest in Buddhist traditions. I attended closely to the voices of psychotherapists, both in their publications and through personal interviews and ethnographic observation. My study is grounded on recent scholarship demonstrating that categories like "religion" and "secular," often used to interpret these activities, are social constructions.

This approach has, first and foremost, generated a more accurate description of these phenomena. I have shown that psychotherapists do not uniformly treat Buddhist teachings and practices in the same way. Instead, clinicians take a multiplicity of approaches to Buddhist traditions. Franz Alexander (Chapter One) views Buddhist practice very differently from Marsha Linehan (Chapter Three) who views it very differently from Erich Fromm (Chapter Four). There are surely also commonalities between therapists' various positions on Buddhist doctrine. Chief among them may be the particular Buddhist traditions that psychotherapists have taken up. The Buddhist teachings and practices that clinicians study or adapt for clinical use are introduced to them by very specific modern(ist) Buddhist figures and communities. My new treatment has found that U.S. psychotherapists' diverse approaches to Buddhist traditions are generated by their understandings of "religion" and "secular" and relative degrees of investment in preserving their own secular status.

This dissertation thus also informs larger questions in religious studies. Examining psychotherapists' understandings of "religion" and "secular" over the course of the preceding chapters has yielded a number of findings not only about the interpretive

utility of these categories, but their function in the lives of communities. To summarize at the outset of this Conclusion, my findings are:

1. The instability of therapists' imagined relationships between "religion" and "secular" illustrates the futility in seeking definitive interpretations of phenomena as cases of secularization or religious transmission.
2. Nonetheless, questions of how to define what is religious and what is secular are deeply entrenched and highly consequential in peoples' lives. Therapists adjust their approaches to Buddhist traditions to meet the demands of multiple, overlapping institutional authorities.
3. These adjustments are often based on concerns about "purity and pollution." Such anxieties rise up in the face of "ritual mixing" of differentiated religious and secular items into what one clinician calls a "syncretic blend."
4. This remains the case even as cultural rhetoric (exemplified by many of the therapists I have studied) increasingly calls for the dismissal of these categories precisely because they are "social constructions." The perceived need for such proclamations, however, only further demonstrates these categories' entrenchment.
5. And yet, however entrenched boundaries are between religion and secular, whatever powers enforce them, psychotherapists not only reproduce, but blur these boundaries in their approaches to Buddhist traditions. The borderlines between religion and secular are "impermanently permanent."

In the remainder of this Conclusion, I explain each of these findings in detail.

1. If a Christmas Tree Falls in a Forest. . . : Seeking Definitive Interpretations of Phenomena as Cases of Secularization or Religious Transmission is Futile

First, my analysis illustrates the futility of searching for definitive answers on whether to classify activities like psychotherapists' approaches to Buddhist traditions as religious or secular. Therapists' integration approaches may make this dynamic especially visible.

Here clinicians' methodologies mix Buddhist and psychotherapeutic elements so that they, as Paul Cooper stated, "remain decidedly both" (2010, 14). The translating religion approaches of Jon Teasdale et al. produced a Mindfulness-Based Cognitive Therapy

which they declared to be fully secular and scientific (Chapter Three). The MBCT team believe they have successfully translated items like meditation practices into secular treatment interventions. When clinicians take adopting religion approaches to Buddhist traditions, meanwhile, they offer what Joe Loizzo called “Buddhist therapy” (Chapter Five). Such a “Buddhist therapy” or “Zen psychoanalysis” are intended, in part, to “facilitate an individual’s religious practice” (Cooper 2010, 13).

Perhaps, we should take psychotherapists at their word when they say their psychotherapies are secular or, at their essence, authentically Buddhist. But, of course, as I will say more about below, psychotherapists may not be viewed as authorities on what should be classified as religious or secular. Joe Loizzo or Harvey Aronson (Chapter Five and Six) may believe they walk an authentic Buddhist path, but, to some Buddhist studies scholars, it is a path paved with decades of denaturing and secularization. The bricks were laid before them by multiple figures who were under the influence of secularist ideologies. Their names have surfaced throughout the preceding pages: Anagarika Dharmapala (Chapter Two), Thomas Rhys-Davids (Chapter Three), D.T. Suzuki (Chapter Four), Nyanaponika Thera (Chapter Three and Four), Jack Kornfield (Chapter Five). That this is the case further demonstrates the difficulty in describing some approaches to Buddhist traditions as religious or secular and others as “mixtures” or “hybrids.” Therapists who take integrating or adopting religion approaches explicitly characterize their work as a blend of Buddhist and psychotherapeutic frames. But they actually give support to long-standing critiques of terms like “syncretism.” For the kinds of Buddhism integrated or adopted here are clearly already mixtures, and, of course, so are the psychotherapies.

Psychotherapy's status as religious or secular has been questioned since the inception of the discipline. Perhaps, Buddhist practices are not secularized by their incorporation into psychotherapy if psychotherapy was not-so-secular to begin with. Historians like Harrington (2008a) indicate that psychotherapeutic practices were developed out of the ongoing reconstruction of multiple religious rituals. From confession and exorcism through mesmerism and the manipulation of subtle energies, the "talking cure" of Sigmund Freud may only be religious practice in disguise. And we can go back further than this. Freud sought to pattern his therapy after modern science - "to furnish a psychology that shall be a natural science" (Freud "Project for a Scientific Psychology" (1895), 281). Contemporary cognitive and behavioral therapists carry forward this tradition in their search for "evidence-based treatment modalities" (as discussed in Chapter Three). But a scholar like Harrison (2015) elucidates that modern science itself was based on a Protestant prototype and detects Christian theological beliefs encoded within the concept.

When does a practice or idea cease to truly belong to one of Sered's sectors (as discussed in Chapter Six) and become one of another? (Or, as I will say more about below, before that: when and how do these "sectors" take hold at all?) How "Buddhist" are mindfulness meditation practices for the multiple generations of clinicians who today utilize them and, more importantly, teach them to others, without any awareness of their past? At what point do mindfulness practices cease to be Buddhist and become something different? As an analogy, at what point did the Christmas tree lose its connection to its "Pagan" origins and become Christian exactly? And if a historian

stands alone in the woods shouting that mindfulness practices or Christmas trees are hybrids, and no one is there to hear the revelation, do they make a sound?²³⁹

How do we determine whether a psychotherapy is religious or secular; authentically Buddhist or authentically therapeutic? The measure could be quantitative, the sheer number of Buddhist-identified practices used in a given session. Or it could be more important that the psychotherapy adopts select aspects of Buddhist doctrine. There could be specific beliefs - such as the belief in the existence of karma as an organizing principle of the universe - that a psychotherapist must operate under to be described as practicing a truly “Buddhist therapy.” We could rely on historical precedent; we have heard both therapists and their observers refer to it throughout this dissertation. Perhaps, as Wilson claims, there is historical precedent for the radical transformation of Buddhist teachings. Or, perhaps, as Lopez implies, there are aspects of Buddhist traditions that have been too fundamental throughout history to be removed. And if there is anyone qualified to determine what “the exalted monks and ordinary laypeople who have gone for refuge to the Buddha over the course more than two thousand years” have “deemed essential” surely it is Donald Lopez (2008, xiii).

What we see here is that, in the end, the real question may not be *how* we determine what is religious and secular, Buddhist and therapeutic, but *who* - and what forces support their authority. Psychotherapists interact with multiple institutional and organizational authorities in developing their approaches to Buddhist traditions. Each of these authoritative figures, or authoritative bodies, holds differing views on what defines

²³⁹ My appropriation of the cultural artifact ‘if a tree falls in the woods does it make a sound?’ seems especially apt here. The saying is often popularly described as a Zen Buddhist koan. In truth, it is actually a physics problem that sounded “Zen” and, over time, acquired the story that its historical origins are Buddhist.

the religious and the secular. And these views have significant impact on the daily activities of psychotherapists.

2. Authority and Authenticity: Questions of Definition Remain Entrenched and Highly Consequential Enforced by Multiple Institutional Authorities

The search for definitive answers about what is religious or secular may be futile. But the question of how to define these terms can often be vitally important to communities bound within systems of institutional power. We have seen in the preceding chapters that psychotherapists are embedded within multiple social spheres, each of which they conceive of as separate from the other. Critical theorists from Michel Foucault (2006) to Pierre Bourdieu (1990) have theorized the socio-cultural dynamics of such systems of power. Some therapists may be unconscious of the true nature of their entanglement within such systems. They might find the interpretations of these analysts useful to bring their predicament to consciousness. However, on a daily basis, therapists interact with the actual human beings who represent institutional power. These authoritative figures police the boundaries of what is religious and secular, what is authentic and inauthentic. And Freud himself noted the way these boundaries are often internalized, maintained by the private practice clinician sitting alone outside the apparent surveillance of institutional authorities.²⁴⁰

Psychotherapists' behaviour is shaped by the multiple professional authorities that govern and organize their own communities. These include the training programs and credentialing boards that allow them to advertise under professional designations like "licensed clinical social worker." But, we have also seen that, clinicians are dramatically

²⁴⁰ This would be Freud's theory of the super-ego (1923).

shaped by the social norms of their own therapeutic lineages. We saw in Chapter Four that psychoanalytic therapists are loath to make “personal disclosures” in therapy sessions. Because they define religion by private beliefs and practices, psychoanalysts are thus more likely to take personalizing religion approaches to Buddhist traditions. As discussed in Chapter Three, communities of cognitive and behavioural therapists, meanwhile, are more intent on maintaining status as biomedical and scientific practitioners. They are more prone to take translating approaches to Buddhist traditions. In just these two examples, we also see how psychotherapists are influenced not only by the accepted norms of their therapeutic orientations. They are also often beholden to scientific and biomedical authorities.

For Jon Kabat-Zinn, the boundary-line between religious and secular was set by the administrative boards of the University of Massachusetts Medical Center. This borderline was not theoretical. Hospital authorities hold economic and institutional power that directly affects what sort of treatment people receive for cancer, chronic pain, or panic attacks. And yet, Kabat-Zinn devised methods to both appease and subvert the borderlines of biomedicine. These subversions have allowed Kabat-Zinn to amass a good deal of politico-economic power of his own. Selling books, audio files, and trainings on the practice of MBSR, Kabat-Zinn now himself stands as an institutional authority for a growing organizational force. The organizing structures of Kabat-Zinn’s modality has considerable impact on growing communities not only of physicians and therapists, but lay practitioners.

The majority of the psychotherapists introduced in these pages, however, do not only feel beholden to therapeutic, scientific, or medical authorities. Most are committed

Buddhists and serve various functions within Buddhist communities. In these communities, the thought of Kabat-Zinn or psychotherapists like Jack Kornfield are often referenced to determine the authenticity of Buddhist doctrine. As in each of these spheres, race plays a key factor here. Therapists belong largely to “convert” Buddhist communities populated by practitioners of European descent. Merit-making or deity-propitiation practices are just as invisible in these communities as the people that take them up daily in contemporary (much less pre-modern) Thailand. Participants in these U.S. communities may not even know of the existence of such practices in Thailand. Meanwhile, an exoticized “Asian-ness” of Buddhist leaders like Chogyam Trungpa or the Dalai Lama lends these figures additional authoritative stature for ascertaining what is authentic Buddhist practice. We thus heard Paul Fulton in Chapter Three single out Thich Naht Hanh to legitimate the claim that “every country need[s] to find its own way of practice” (9/13/14).²⁴¹

Drawing on my authority as a practicing psychotherapist, I interpret authoritative academic figures to often find such phenomena frustrating. A scholar like Lopez observes the romanticization of Tibet by peoples in the U.S. (and lamas who trade on this romanticization) and declares them all to be *Prisoners of Shangri-La* (1998). He is troubled when the Dalai Lama, a Buddhist authority so large as to have once ruled a nation-state, submits Buddhist doctrine to scientific validation (2008). Psychotherapists

²⁴¹ A limitation of this dissertation is that, though I have noted the role of race periodically, I have been unable to more fully delve into the racial dynamics of these activities. Though ignored for some time, scholars like Ann Gleig and Jeff Wilson have begun to examine this issue. Using, for example, the case of therapeutic mindfulness practices, Wilson considers how traditions that originate in Asian communities, minorities in the U.S., are treated by people of European descent in positions of power and privilege (2014, 61-71). I have also found that psychotherapists *themselves* have begun to express concern about what one speaker at the Institute of Meditation and Psychotherapy conference I observed called the “monochromatic” nature of the attendees.

interact directly with academic authorities like Lopez on a more frequent basis than he seems to know. At the February 2014 colloquium I observed at the White Society, historian of science Anne Harrington (2006, 2008) quoted the research of Buddhologist Robert Sharf. Harrington “co-headlined” the colloquium with Zen Jungian psychoanalyst Polly Young-Eisendrath (2002) to provide historical perspective to a curious audience. The analysts there were surprised to learn Sharf’s explanation, for instance, of how D.T. Suzuki actively adjusted Buddhist doctrine for European ears. And Sharf has not waited for others to speak for him to clinicians. He presents papers at conferences alongside therapists like Harvey Aronson. These papers are then disseminated in publications like *The Journal of Transcultural Psychiatry* (2014b). Harrington has also published material aimed at audiences of psychotherapists (one such article co-written with the Buddhologist John Dunne (2016) was just published in *The American Psychologist*). For decades now, clinicians and scholars, Buddhist practitioners and cultural commentators have interacted in the pages of journals and texts, on internet message boards and conference panels.

Buddhist studies scholars thus become additional authorities that evaluate the authenticity of Buddhist communities. It is overstating to imply that the bookshelves of a majority of psychotherapists in the United States interested in Buddhist traditions contain Buddhist studies scholarship. But the findings of my research significantly complicates visions of a clear separation between observer and observed. Academics might be encouraged to know that their work is actually being read, but it also means they are implicated in these processes. They do not hover context-free above the microscope analyzing these activities. Instead, academic authorities wield significant influence not only within their own institutional spheres. This influence radiates outwards to the

communities they study. (Or, more correctly, they *participate* in the activities of these communities by playing the role of observer). In the same talk in which he quoted Thich Naht Hanh, Paul Fulton also cited Buddhist studies literature from writers like Melford Spiro to legitimate his perspective. Most dramatically, as discussed in Chapter Three, Candy Gunther Brown gives expert testimony in legal cases as a religious studies scholar trained to assess what is religious and what is secular. She testifies that public school teachers who use secularized religious items like yoga or meditation should be prosecuted for violating the Establishment Clause of the First Amendment. By extension, so should psychotherapists who utilize mindfulness practices in state-run or publically funded hospitals.

As suggested by this final example, it should finally be noted that clinicians also interact with state authorities on a regular basis. The clinicians discussed in this dissertation speak of the state less often than the other authorities listed above. However, psychotherapists follow the regulations of state boards that allow them to retain licensure. They are required to take state-administered ethics “jurisprudence” exams. And they are subject to civil malpractice lawsuits and criminal prosecution for violation of the state and federal laws governing “healthcare service providers.” Whether working in a Veterans Administration or sitting alone in their private practice offices seemingly hidden from the eyes of the state, therapists modulate their behaviors to adhere to state codes.

Therapists operate with definitions of religion and secular that they inherit, and are sometimes enforced, by these institutional authorities. But these authorities—both individual authoritative figures and governing bodies—do not draw borderlines between what is religious and what is secular in the same way. We have seen that

psychotherapists' diverse approaches to Buddhist traditions are generated out of their interactions within these fluctuating boundary-lines. Clinicians are more apt to translate a Buddhist practice when working for a state-run hospital (Chapter Three). But, when aligned with a consortium like "The Nālandā Institute," they may feel more free to share Buddhist doctrine in sessions (Chapter Five). Unless, of course, they are a classical psychoanalyst (Chapter Four). Multiple, overlapping positions on whether to classify psychotherapy as religious or secular shape therapists' approaches to Buddhist teachings and practices. At times, these positions will even seem to contradict or conflict. The same clinicians will personalize their deeply held Buddhist beliefs in one setting and provide public lectures on them in another. They will therapize an aspect of Buddhist doctrine in a "psychoanalytic study group" on a Wednesday and lead instruction in meditation practice at a conference for humanistic therapists over the weekend.

A clinician like Joe Loizzo was exasperated by his experience of operating within multiple spheres simultaneously (Chapter Five). He shifts his stance to conform to the expectations of first academic, then biomedical, then psychotherapeutic authorities. Psychotherapists often fancy themselves to practice a uniquely "liminal" or hybrid discipline - part art, science, medicine, spirituality, etc. But clinicians are not unique in holding multiple identities. So too, for example, do institutional authorities. Clinicians operate within the boundary-lines between religious and secular that these authorities set. But those lines are drawn based on those authorities' own experiences entangled in multiple institutional settings and within multiple communities. The head of a hospital administrative board may also belong to a Buddhist meditation group in their "personal

life.” The chair of an academic department may also receive care from a practitioner of “alternative medicine” or therapist who provides mindfulness-based therapy.

Further, both therapists and the authoritative figures with whom they interact, hold differing positions not only on how to define religious and secular.²⁴² They also have varying perspectives on the positive or negative value of “mixing” between them. This is a third major finding of my study.

3. Purity and Pollution: Behavior is Often Shaped by Views on the “Mixing” of the Religious and the Secular

Throughout this dissertation, we have seen that therapists’ approaches to Buddhist traditions are driven by differing views on the value of “mixing” religious and secular. Psychotherapists like Barry Magid and Steven Hayes argued for the importance of differentiating Buddhist from psychotherapeutic practice in order to better preserve the integrity of both (Chapters Three and Four). At times, therapists are extremely vigilant against the infection of personal theological beliefs in their secular therapeutic work.²⁴³ Perhaps therapists’ efforts to maintain imagined borderlines between public and private, religious and secular, reflect a basic human psychological drive. Clinicians could simply be exhibiting the same anxieties about “purity and pollution” that cultural theorist Mary Douglas (1966) found to be a universal quality of human society. And yet, while some therapists strive to preserve a pure and authentic psychoanalysis or pure and authentic Buddhism, others, like Pilar Jennings (Chapter Six), call into question whether an

²⁴² Of course, again, therapists themselves often hold positions as authoritative figures in various communities.

²⁴³ As I’ve briefly discussed in this context (Helderman 2015, 89-91), academics can be just as wary of “theological” rhetoric infiltrating their scholarly work.

absolute differentiation is ever actually possible. Carl Jung (Chapter One) may have held a posture of “look but don’t touch” with his study of Buddhist traditions, but was his therapy truly “untouched”? Do all encounters result in influence? For a psychotherapist like Joe Loizzo (Chapter Six), blending teachings and practices from multiple traditions seems to offer “the best of all worlds.”

Such therapists may receive their positive view of eclecticism from particular communities in the U.S. (mentioned in Chapter Two). These communities have been said to participate in “U.S. liberal religious movements” (Schmidt 2012); or, the perhaps appropriately Christocentric, “unchurched spirituality” (Parsons 2009). They have been named “metaphysicals” (Albanese 2007) and “new metaphysicals” (Bender 2012). We have heard members of these communities describe scientific and secularist ideologies to be a blight on society. They have attempted to revise the conventional definition of religion. They also have frequently raised up eclecticism and perennialism as means for release from the conflict between the religious and the secular. Whether Transcendentalist or Theosophist, participants in these movements often construct new religious or spiritual forms that are intentionally eclectic. From the William James-favored New Thought and Mind-Cure modalities to the counter-cultural Esalen Institute, psychotherapists have been both influenced by and participated within these movements.

Some scholars have characterized “combinativeness” to be a special characteristic of communities in the United States (e.g., Albanese 2007). But others observe that “religious borrowing” has always existed throughout history and across cultures. Such conversations sometimes take on the form of debate as academics too take differing positions on the positive or negative value of mixing. Terms like “syncretism” and

“crypto-religion” for example, have been critiqued for assuming a negative view of religious blending. Protestant anthropologists once denigrated the religious mixing of communities as syncretism. They declared the Christian conversions of others as inauthentic, as “crypto-religion.”²⁴⁴ Post-colonial theorists, meanwhile, observe that bricolage or creolization has often been practiced as a way of subverting imperial oppression. Indigenous religious elements have been preserved under colonial rule by mixing them with those of Christian missionaries (e.g., Sered and Barnes 2005).

Psychotherapists are marginalized in the scientific or biomedical communities to which many seek admission. Their actions could be viewed as, on the one hand, a subversive protest against dominant biomedical institutions. On the other, they can be seen as reproducing the “white privilege” of “cultural appropriation.” The cultural elements therapists assimilate are attributed to minority Asian communities in the United States. To some, their adoption seems less “religious borrowing,” and more “theft.” (Or at least that therapists participate in larger processes of such theft. Again, most clinicians first learn Buddhist teachings and practices within “convert” communities of European descent.) Sered and Barnes critique cultural appropriation in the mixing of religious and medical elements. They define such activity to be present “when members of a dominant culture borrow from the practices of a minority community,” in a way that “reflect[s] and perhaps perpetuate[s] the status and power imbalances of the wider social structure” (Sered and Barnes 2005, 21). What is important to remember is that psychotherapists themselves engage in these sorts of debates about how to classify their mixtures. We hear the influence of academics’ positive or negative valuation of such activities within

²⁴⁴ For more on this history and the concept of crypto-religion start with Robbins 2011.

these conversations. Jeremy Safran belittles “New Age spirituality” for being a “*syncretic* blend [my emphasis]” (2003, 21) of religious and secular elements. At the IMP conference I observed, participants deliberated on which of their approaches are responsible and which are, what one speaker called, “neo-colonial.”

As long observed by scholars then, the mixing of religio-cultural elements is not new. But perhaps the particularly modern challenge that psychotherapists face is the merging of religious and secular. This dissertation is premised on the scholarly observation that concepts like religion and secular are relatively recent social constructions. A fourth finding of this dissertation is that clinicians sometimes believe this releases them from their classificatory power.

4. Definitions of No-Definition: Calls to Dismiss Categories as “Social Constructions” Only Further Demonstrates their Entrenchment

I have shown that clinicians remain beholden to institutionally-enforced boundaries between religion and secular even as they subvert them. Therapists also often voice a longing to be free from these categories and imagine spaces where they do not hold sway. And yet, this only further demonstrates the entrenchment of these classifications.

Throughout this dissertation, we have examined psychotherapists’ revisions to the “conventional definitions” of terms like religion and secular. At times, however, they advance a new tactic. They suggest dismissing the terms altogether. If the terms religion and secular are only social constructions then perhaps they are more trouble than they are worth. When reading and conversing with clinicians a constant refrain emerges. Classifications like science and medicine are artificial or, as Wegela said in Chapter Five, “empty forms.” Jon Kabat-Zinn protested the need to use Buddhist language (Chapter

Three). Erich Fromm muses that silence might be better than the indeterminacy of language (Chapter Four). When I questioned therapists about their definitions of terms like religion and secular, I elicited a nearly universal groan.

When I asked Loizzo about the terms religious and secular he stated that “those are just conceptual categories” (10/8/14). Jan Surrey, meanwhile, told me “I don’t think there are categories. . .Religion is a category” (4/15/15). Karen Kissel Wegela stated that typically such distinctions do not even occur to her. “I don’t really think in terms of religion or not religion,” she said “I don’t think that there's a secular or not a secular either. It's kind of all one thing” (6/10/14). Gay Watson agreed: “I don’t try to stick labels on anything” (3/31/14). Magid will translate his beliefs about people’s pain and its cessation into biomedical terms. Without doing so, those who come to see him for analysis cannot receive reimbursement. But, in the end, he views his therapy to thwart conceptualization.

Look, I smuggle what I do into a medical model for people who have insurance and want that to pay for what I do. I'll tell them they've got anxiety and depression. Well, I can give them a number for that, OK. We can fit it into that niche to a certain extent, right? But I think that to really think about what we're doing, or what I'm doing, it blurs across a lot of different fields as they are now conceptualized, but I think that's. . .Those things are. . .I think that it should get blurrier, not more distinct, right? (2/6/14)

Magid references here a common belief among many of the therapists I spoke to. They view Buddhist doctrine itself to teach detachment from classification. They present Buddhist truths as resisting the conceptual or cognitive-linguistic. And they seek meditative states of unmediated experience.

In Chapter Two, the early psychologists of religion presented Buddhist traditions as a challenge to common definitions of religion. They believed Buddhist traditions were

both religion and atheistic. A conventional definition of religion that includes personal belief in higher powers thus could not stand. Some therapists similarly position Buddhist traditions to prove the inadequacy of definitions altogether. Here Buddhist traditions are said to defy classification. They are not purely religion, philosophy, or science. Paul Cooper has pondered this topic in his writings. He examines Buddhist studies commentary from scholars like Steven Heine for answers. Cooper finds conflicting interpretations of “Zen” here. He describes, on the one hand, “Zen’s radical iconoclasm articulated through apophatic discourse [that] constantly ‘speaks away’ anything that might be said to define Zen” (2010, 53). But he cites the Buddhologist Robert Buswell who argues that this quality can itself be used to define what should be named “Zen.” Cooper writes “it is this directness of language and its apophatic structure that contributed to Zen’s uniqueness and, as Robert Buswell notes, accounts for its ‘autonomous sectarian identity’” (2010, 53). As I detailed in Chapter Three, Cooper is averse to misperceptions that “Zen” is a science or philosophy. He seeks to preserve Zen’s classification as religion. And his retort to those who describe Buddhist traditions to be beyond definition: “Belief in no-belief is a belief; a no-definition is a definition” (2010, 54). But, in his final analysis, Cooper also concludes that definitions are unimportant.

Zen is what it is, no more and no less, whether or not we call it a philosophy, science, religion, or a spiritual path. In this regard, I don’t care how Zen comes to be defined. Zen still is what it is – its practices, beliefs (nonbeliefs), experiences, rituals, and prayers. (2010, 53-54)

Joe Loizzo, meanwhile, told me that “Buddhism .. defies categorization.” And he believes this quality to have important effects.

Buddhism [is] a wrench or whatever in the science or religion war. It's like throwing a wrench in there because what is it? Is it a science? Is it a religion? It defies categorization in both terms. It's neither a science nor a religion yet it has scientific elements and religious elements. It has a very different relationship to knowledge in both contexts. (10/8/14)

Loizzo believes that the indefinability of “Buddhism” disrupts a conflict between science and religion. If Buddhism is both religion and science, perhaps the truths of both can be accessed while evading a “war” between them; an armistice can be declared. We have previously seen that some psychotherapists have an explanation for why Buddhist traditions resist classification. Some have said that they originate from a time and/or space “before religion.”

I explained in the Introduction that scholars have described a pre-modern period before the invention of the concepts religion, science, and medicine. Francisca Cho compares the “interaction between Buddhism and Chinese ancestor worship” to dissonances between “Buddhism and Western science.” Buddhist and Chinese worldviews held “very different views about the organization of life.” But the major obstacle that participants in our contemporary activities confront, she says, is an attachment to “a defining characteristic of Western modernity. . .its distinction between the religious and the secular” (2012, 282). What goes unmentioned is that the communities Cho observes also speak of this new distinction “of Western modernity.” If binary understandings of these terms is particular to “modernity” or “the West” than they are contingent and, thus, escapable.

Psychotherapists have often imagined an “Ancient East” free of the sickness of binary understandings of religion and secular science. When we left Jeremy Safran, at the end of Chapter Six, he was describing a world “before science”: “The Tibetan culture

. . .was a prescientific, traditional culture in which magic and supernatural reality existed as a part of everyday experience, just as they did in Western culture prior to the Enlightenment and the dawn of the scientific era (2003, 26).” This same vision stretches back to Jung who declared (as previously quoted in Chapter One) that “there is no conflict between religion and science in the East, because no science is there based upon the passion for facts, and no religion upon mere faith; there is religious cognition and cognitive religion” (1954, 480). In his larger critique of colonialism, Jung (1928/1958) decries the export of religion/secular binaries to “the East,” spoiling once idyllic, and benighted, primitive lands. From this perspective, that religious and medical elements are split off from each other is an ailment of our modern age. Or, perhaps, this illness’ etiology began with the European “invention of world religions.” The construction may not only bring with it the notion of the secular, but religious affiliation, the belief that elements are the intellectual property of certain religions that thus can be borrowed or stolen. Anxieties about “ritual mixing” and “syncretism” could be purely the creation of scholars who project them onto the communities they analyze.

Of course, again, a thinker like Douglas would dispute the notion that boundary maintenance is an invention of moderns. As far as religious affiliation, certainly something close to this concept existed before the European Enlightenment. And one can find such phenomena in the pre-modern “East” as easily as anywhere else. For example, “Daoists” and “Buddhists” may be English words, but communities in medieval China were quite capable of differentiating teachings. Scholars like Bokenkamp (1996; 2004) and Mollier (2008) study so-called “apocryphal” Buddhist texts (later re-designated “hybrids”) because they mix Buddhist and Daoist elements. But these texts themselves

were often written to draw lines between communities that we would today think of as Buddhist and Daoist. These scriptures frequently outline what is pure and impure, authentic and inauthentic doctrine. Their authors also voice outrage about what we would today call “cultural theft.” They deride rivals who write their own blended texts that contain ideas that don’t belong to their authors’ traditions.

Further, there is disagreement over whether a comparable differentiation between religious, medical, and scientific spheres existed among these medieval Chinese communities. Historians of Chinese religions ranging from Michel Strickmann (2002) to Marc Kalinowski (2004) describe classes of “scientific” technicians and “medical” healers that were distinct from Buddhist or Daoist practitioners. As far as the Tibet referenced by Safran, Janet Gyatso (2015) has quite recently suggested that Tibetan Buddhists always recognized distinct, and somewhat competing, ways of knowing that could be analogical to a modern differentiation between religion and medicine.

Whether historically accurate or not, however, psychotherapists have often imagined an “East” liberated from the “disenchantment” of modernity or “the science or religion war.” They seek a model or historical precedent for leaving these categories in the past. Of course, this only further exhibits how bound communities feel to questions of definition. The argument that definitions should be dismissed altogether is itself a rhetorical tactic to respond to their entrenchment. This is in part because therapists continue to interact with institutional authorities who may not accept the idea that we should no longer distinguish religious from secular. An academic authority may read the above discourse of liberation from classification and decree it all to be inherently capitalist or Protestant (if there is a difference). Meanwhile, as Magid mentioned above,

to receive reimbursement from an insurance carrier he is compelled to diagnose those who come to see him. He may be asked to prove that he utilized secular “evidence-based” treatment methods. The lawyers defending the public school teachers in Candy Brown’s case would probably be unsuccessful if they argued that yoga is no more religious than all pedagogical methodologies, based as they all are on a Christian scholastic model.

Therapists mold their behavior in response to the expectations of these authorities (internalized and otherwise). Wegela says that she does not think in terms of definitions, but (as noted in Chapter Five) she told me at another point in our interview that she does not meditate in sessions because it would be “moving into the area of religion. . .maybe it’s analogous to a therapist teaching a client to pray.” Loizzo sees “conceptual categories” as ultimately inconsequential, but he also indicated that he “tones down the Buddhist rhetoric” for certain audiences (Chapter Five).

And yet, that there is no exit from classification is not only a consequence of systems of power. As noted in the Introduction, not only thinkers like Jacques Derrida (1976), but a Buddhist or two have observed that this is a basic function of human language. To speak is always to name and differentiate. As Cooper has succinctly stated “a definition of no-definition is still a definition.” When psychotherapists profess to eschew categories they create a particular relationship between themselves and those categories, a relationship of divorce or estrangement. But, like all the relational configurations that clinicians have arranged between themselves and these categories (and between the categories themselves), this relationship remains unstable. This is the last finding of my study.

5. Permanently (Im)permanent: Borderlines Between Religion and Secular are Simultaneously Reproduced and Blurred

There is no exit from the categories religion and secular and the way they shape communities' lives. And yet, we have seen that psychotherapists subvert imagined boundary-lines between what is religious and what is secular on a daily basis. Whenever a clinician incorporates a practice they understand to be/have once been Buddhist into clinical work, they undermine social norms about what is and is not acceptable in so-called secular psychotherapy. At times, we have seen that they do this with intention. They advance revisions of conventional definitions of religion, science, secular, Buddhism, and psychotherapy itself. But, of course, these re-definitions reproduce the conventional definitions in need of revision. When therapists subvert boundary-lines between religion and secular science, they reproduce such boundary-lines that would require subversion.

Psychotherapists imagine relational configurations between categories like religion and the not-religious science or biomedicine. And they imagine themselves to have relationships with(in) these categories. Some seem to create a hierarchy where scientific validation determines the truth value of religious ideas. Others appear to reverse this hierarchy portraying religious wisdom to be superior to a dehumanizing "medical model." These clinicians believe themselves to be defenders of Buddhist traditions, adherents to evidence-based psychotherapy, or both. But these imagined relationships remain inherently unstable because the classifications themselves are inherently unstable. Religious, then secular, a mixture of the two, or neither: the

relational configurations psychotherapists generate between these terms remain unstable as they draw and redraw boundaries between them that are impermanently permanent.

Further, psychotherapists contribute to the ongoing reconstruction of terms like religion and Buddhism. Present-day conceptions of what defines these concepts are both rooted in their “invention” and under constant transformation. The traces of Thomas Rhys-Davids’ handiwork are still present in the word “mindfulness’ association with Buddhism. But his portrayal of this Buddhism as an “ethical psychology” is overlaid with new glosses of a Buddhism defined by non-judgment (Chapter Three).

Psychotherapists contribute to these ongoing processes of definition and re-definition. Erich Fromm reworks dominant understandings of the word religion extricating healthy from unhealthy forms (Chapter Four). He passes on his criteria to contemporary practitioners who, in turn, revise them under the rubric of “spiritual but not religious” (Chapter Six).

The indeterminacy of classificatory definitions are a basic feature of these activities in a way that is far from purely theoretical. The same therapist can in one moment imagine their practice to be religious, the next secular, and will adjust their treatment of a couple grieving after the death of a child accordingly. This brings us back to the vignette this dissertation opened with and the clinical work of our “typical therapist” with “Sylvia.” If we remember, Sylvia had reached a point where it seems the only path to liberation from her suffering is suicide. Our typical therapist responds to Sylvia based on how they define the source of that suffering and how they define what “helps” (Chapter Five). Subject to the restrictions of multiple institutional powers, they innovate methods for working within those strictures to care for Sylvia. The managed

health system that our therapist works for may forbid talk of religions in clinical settings. But our therapist decides they can impart Buddhist truths to Sylvia without mentioning the source of that wisdom. Our therapist reads an academic authority on the Huffington Post who writes that the use of mindfulness practices is a cultural appropriation that furthers the ills of global capitalism. But the aid they perceive it to offer Sylvia makes those practices still seem worth utilizing. In a lecture from a founder of a Buddhist community, they hear that there is a way to teach Buddhist practices to Sylvia without secularizing them. They feel relieved as they are not only a therapist, but committed Buddhist practitioner. They seek to uphold the integrity of the Buddhist community they belong to. But their primary commitment is to provide care to Sylvia.

Again, to this therapist, the stakes are quite high. Our typical therapist has witnessed that actual human beings die from suicide and addictions. They are aware that actual human beings die from disordered eating and self-harm that accidentally goes too far. Perhaps they only treat the symptoms of larger societal ills. But those symptoms are not insignificant. Driven by this awareness, many therapists utilize any available method that could be of service to people like Sylvia. They may maneuver that method to fit within the multiple institutional and intellectual lines they weave within moment-by-moment in their clinical practice. And yet, in the final analysis, precisely theorizable or not, a desire to bring healing to people like Sylvia remains paramount.

BIBLIOGRAPHY

- Adamek, Wendi. 2005. "The Impossibility of the Given: Representations of Merit and Emptiness in Medieval Chinese Buddhism." *History of Religions* 45 (2): 135-180.
- Adamek, Wendi. 2007. *The Mystique of Transmission: On an Early Chan History and Its Contexts*. New York: Columbia University Press.
- Alexander, Franz. 1931. "Buddhistic Training as an Artificial Catatonia (The Biological Meaning of Psychic Occurrences)." *Psychoanalytic Review* 18: 129-145.
- Alexander, Franz. 1942. *Our Age of Unreason: A Study of Irrational Forces in Social Life*. New York: Lippincott.
- Alexander, Franz. 1960. *Western Mind in Transition: An Eyewitness Story*. New York: Random House.
- Alexander, Franz and Sheldon Selesnick. 1966. *The History of Psychiatry: An Evaluation of Psychiatric Thought and Practice from Prehistoric Times to the Present*. New York: Harper.
- Almond, Philip. 1988. *The British Discovery of Buddhism*. Cambridge: Cambridge University Press.
- Ammerman, Nancy T. 2013. "Spiritual But Not Religious? Beyond Binary Choices in the Study of Religion," *Journal for the Scientific Study of Religion*. 52(2): 258-278.
- Ando, Osamu Ando. 2009. "Psychotherapy and Buddhism: A Psychological Consideration of Key Points of Contact." In *Self and No-Self: Continuing the Dialogue Between Buddhism and Psychotherapy*, edited by Mathers et al, 8-19. New York: Routledge.
- Aronson, Harvey. *Buddhist Practice on Western Ground: Reconciling Eastern Ideals and Western Psychology*. 2004. Boston: Shambala.
- Asad, Talal. 1993. *Genealogies of Religion: Disciplines and Reasons of Power in Christianity and Islam*. Baltimore, MD: Johns Hopkins University Press.
- Asad, Talal. 2001. "Reading a Modern Classic: W.C. Smith's *The Meaning and End of Religion*." *History of Religions* 40: 205-22.
- Asad, Talal. 2003. *Formations of the Secular: Christianity, Islam, Modernity*. Stanford: Stanford University Press.

- Bailey, Michelle. 2011. *Parenting Your Stressed Child: 10 Mindfulness-Based Stress Reduction Practices to Help Your Child Manage Stress and Build Essential Life Skills*. New Oakland, CA: Harbinger Publications.
- Ian Barbour, *Religion and Science: Historical and Contemporary Issues*. San Francisco: Harper San Francisco, 1997.
- Barnes, Linda. 2011. "New Geographies of Religion and Healing: States of the Field." *Practical Matters* 4: 51-70.
- Bell, Sandra. 1998. "British Theravada Buddhism: Otherworldly Theories, and the Theory of Exchange." *Religion Today* 13(2): 149-170.
- Bender, Courtney. 2010. *The New Metaphysicals: Spirituality and the American Religious Imagination*. Chicago: University of Chicago Press.
- Courtney Bender, "Pluralism and Secularism," in *Religion on the Edge: De-Centering and Re-Centering the Sociology of Religion*, eds. Courtney Bender, Wendy Cadge, Peggy Levitt, and David Smilde, eds. (Oxford: Oxford University Press, 2013).
- Benson, Herbert. 1976. *The Relaxation Response*. New York: William Morrow.
- Bhikkhu, Thānissaro. 2002. "Romancing the Buddha." *Tricycle* 12(2).
- Bhikkhu, Thānissaro. 2008. "Mindfulness Defined." *Access to Insight*, accessed December 13, 2013.
<http://www.accesstoinsight.org/lib/authors/thanissaro/mindfulnessdefined.html>
- Bielefeldt, Carl. 2009. "Expedient Devices, the One Vehicle, and the Life Span of the Buddha." In *Readings of the Lotus Sutra*, edited by Stephen Teiser and Jacqueline Stone, 62-83. New York: Columbia University Press.
- Bingaman, Kirk A. 2014. *The Power of Neuroplasticity for Pastoral and Spiritual Care*. Lanham, Maryland: Lexington.
- Bishop, Donald. 1974. "The Carus- James Controversy," *Journal of the History of Ideas* 35 (3): 509-20.
- Bodhi, Bhikkhu. 2011. "What Does Mindfulness Really Mean? A Canonical Perspective." *Contemporary Buddhism* 12(1): 19-39.
- Blanchot, Maurice. 1989. *The Space of Literature*, translated by Ann Smock. Lincoln: University of Nebraska.
- Bokenkamp, Stephen. 1996. "The Yao Boduo Stele as Evidence for the 'Dao-Buddhism' of the Early Lingbao Scriptures." *Cahiers d'Extreme Asia* 9: 55-67.

- Bokenkamp, Stephen. 2004. "The Silkworm and the Bodhi Tree: The Lingbao Attempt to Replace Buddhism in China and Our Attempt to Place Lingbao Taoism." In *Religion and Chinese Society: Ancient and Medieval China Volume I*, edited by John Lagerway. Hong Kong: Chinese University of Hong Kong Press and Ecole française d'Extrême-Orient: 317-341.
- Bokenkamp, Stephen. 2007. *Ancestors and Anxiety: Daoism and the Birth of Rebirth in China*. Berkeley: University of California.
- Bourdieu, Pierre. 1984. *Distinction: A Social Critique of the Judgement of Taste*, trans. Richard Nice. Cambridge, MA: Harvard University Press.
- Bourdieu, Pierre. 1990. *The Logic of Practice*, translated by Richard Nice. Cambridge, UK: Polity Press.
- Erik Braun. 2009. "Local and Translocal in the Study of Theravada Buddhism and Modernity," *Religion Compass* 3(6): 935-950.
- Braun, Erik. 2013. *The Birth of Insight: Meditation, Modern Buddhism, and the Burmese Monk Ledi Sayadaw*. Chicago: University of Chicago.
- Brooke, John Hedley. 2010. "Science and Secularization." In *Cambridge Companion to Science and Religion*, ed. Peter Harrison, 103-123. Cambridge: Cambridge University.
- Brown, Candy Gunther. 2013. *The Healing Gods: Complementary and Alternative Medicine in Christian America*. New York: Oxford University.
- Brown, Candy Gunther. 2014. "Mindfulness Meditation in U.S. Public Schools." Paper, annual meeting of American Academy of Religion, San Diego, November 24, 2014.
- Browning, Don, and Terry Cooper. 2004. *Religious Thought and the Modern Psychologies*. Minneapolis: Fortress Press.
- Cadge, Wendy. 2004. *Heartwood: The First Generation of Theravada Buddhism in America*. Chicago: University of Chicago.
- Cadge, Wendy. 2012. *Paging God: Religion in the Halls of Medicine*. Chicago: University of Chicago.
- Campany, Robert Ford. 1993. "Buddhist Revelation and Taoist Translation in Early Medieval China." *Taoist Resources* 4: 1-29.
- Campany, Robert Ford. 2003. "On the Very Idea of Religions (in the Modern West and in Early Medieval China)." *History of Religions* 42 (4): 287-319.

- Campany, Robert Ford. 2005. "Two Religious Thinkers of the Early Eastern Jin: Gan Bao and Ge Hong in Multiple Contexts." *Asia Major*, 3rd ser., 18: 175–224.
- Campany, Robert Ford. 2009. *Making Transcendents: Ascetics and Social Memory in Early Medieval China*. Honolulu: University of Hawai'i Press.
- Campany, Robert Ford. 2012a. *Signs from the Unseen Realm: Buddhist Miracle Tales from Early Medieval China*. Honolulu: University of Hawai'i Press.
- Campany, Robert Ford. 2012b. "Religious Repertoires and Contestation: A Case Study Based on Buddhist Miracle Tales." *History of Religions* 52 (2): 99-141.
- Carrette, Jeremy. 2007. *Religion and Critical Psychology: Religious Experience in the Knowledge Economy*. New York: Routledge.
- Carrette, Jeremy and Richard King. 2005. *Selling Spirituality: The Silent Takeover of Religion*. New York: Routledge.
- Casanova, José. 2006. "Rethinking Secularization: A Global Comparative Perspective." *The Hedgehog Review* 8(1-2).
- Chidester, David. 1996. *Savage Systems: Colonialism and Comparative Religion in Southern Africa*. Charlottesville and London: University Press of Virginia.
- Chidester, David. 2014. *Empire of Religion: Imperialism and Comparative Religion*. Chicago: University of Chicago Press.
- Cho, Francisca. 2012. "Buddhism and Science: Translating and Re-translating Culture." In *Buddhism in the Modern World*, edited by David McMahan, 273-289. Oxon: Routledge.
- Cook, Joanna. 2010. *Meditation in Modern Buddhism: Renunciation and Change in Thai Monastic Life*. Cambridge: Cambridge University Press.
- Cooper, Paul. 2010. *The Zen Impulse and the Psychoanalytic Encounter*. New York: Routledge.
- Cox, Collett. 1992. "Mindfulness and Memory: The Scope of *Smṛti* from Early Buddhism to the *Sarvastivādin Abhidharma*," In *The Mirror of Memory: Reflections on Mindfulness and Remembrance in Indian and Tibetan Buddhism*, edited by Janet Gyatso, 67-108. Albany: SUNY Press.
- Davids, T. W. Rhys, trans. 1881. *Buddhist Suttas*. Oxford: Clarendon Press.
- Davids, T. W. Rhys, trans. 1890. *The Questions of King Milinda*. Oxford: Clarendon Press.

- Davids, T. W. Rhys, trans. 1910. *Dialogues of the Buddha*. London: Pali Text Society.
- DeMartino, Richard. 1991. "Karen Horney, Daisetz T. Suzuki, and Zen Buddhism." *The American Journal of Psychoanalysis* 51.3: 267-283.
- Derrida, Jacques. 1976. *Of Grammatology*, translated by Gayatri Chakravorty Spivak. Baltimore: The Johns Hopkins University Press.
- Dharmapala, Anagarika. 1965. "Memories of an Interpreter of Buddhism to the Present-Day World." *Return to Righteousness: A Collection of Speeches, Essays and Letters of the Anagarika Dharmapala*, edited by Ananda Aruge, 681. Ceylon: The Government Press.
- Dreyfus, Georges. 2011. "Is Mindfulness Present-Centered and Non-Judgmental? A Discussion of the Cognitive Dimensions of Mindfulness." *Contemporary Buddhism* 12(01): 41-54.
- Dryden, Windy, and Arthur Still. 2006. "Historical Aspects of Mindfulness and Self-Acceptance in Psychotherapy." *Journal of Rational-Emotive & Cognitive-Behavior Therapy* 24(1): 3-28.
- Dudley-Grant, G. Rita. 2003. "Buddhism, Psychology and Addiction Theory." In *Psychology and Buddhism: From Individual to Global Community*, edited by Kathleen Dockett, G. Rita Dudley-Grant, and C. Peter Bankart. New York: Kluwer Academic.
- Dunne, John. 2011. "Toward an Understanding of Non-Dual Mindfulness." *Contemporary Buddhism* 12(1): 71-88.
- Eco, Umberto. 1986. *Semiotics and the Philosophy of Language*. Bloomington: Indiana University Press.
- Engler, Jack. 1983. "Vicissitudes of the Self According to Psychoanalysis and Buddhism: A Spectrum Model of Object Relations Development," *Psychoanalysis and Contemporary Thought* 6: 29-72.
- Engler, Jack. 1986. "Therapeutic Aims in Psychotherapy and Meditation: Developmental Stages in the Representation of Self." In *Transformations of Consciousness*, edited by Ken Wilber, Jack Engler, and Dan Brown. Boston: Shambhala.
- Engler, Jack. 2003. "Being Somebody and Being Nobody: A Reexamination of the Understanding of Self in Psychoanalysis and Buddhism." In *Psychoanalysis and Buddhism: An Unfolding Dialogue*, edited by Jeremy Safran. Somerville, MA: Wisdom Publications.

- Tim Ford, "Interacting with Patients of a Different Faith: The Personal Reflection of a Buddhist Chaplain," *Southern Medical Journal* 99:6 (June 2006).
- Epstein, Mark. 1996. *Thoughts Without a Thinker: Psychotherapy from a Buddhist Perspective*. New York: Basic Books.
- Epstein, Mark. 1998. "Beyond the Oceanic Feeling: Psychoanalytic Study of Buddhist Meditation." In *The Couch and the Tree: Dialogues in Buddhism and Psychoanalysis*, edited by Anthony Molino, 119-131. New York: North Point Press.
- Epstein, Mark. 2007. *Psychotherapy Without The Self: A Buddhist Perspective*. New Haven, Connecticut: Yale University Press.
- Faure, Bernard. 1993. *Chan Insights and Oversights: An Epistemological Critique of the Chan Tradition*. Princeton: Princeton University Press.
- Fields, Rick. 1981. *How the Swans Came to the Lake: A Narrative History of Buddhism in America*. Boston: Shambala.
- Finn, Mark. 2003. "The Persistence of Spiritual Shyness in Psychoanalysis." In *Psychoanalysis and Buddhism: An Unfolding Dialogue*, edited by Jeremy Safran, 122-13. Somerville, MA: Wisdom Publications.
- Fitzgerald, Timothy. 2000. *The Ideology of Religious Studies*. New York: Oxford University Press.
- Fitzgerald, Timothy. 2007a. *Discourse on Civility and Barbarity: A Critical History of Religion and Related Categories*. New York: Oxford University Press.
- Fitzgerald, Timothy. 2007b. *Religion and the Secular: Historical and Colonial Formations*. London: Equinox Publishing.
- Foucault, Michel. 1999. *Religion and Culture*, edited by Jeremy Carrette. New York: Routledge.
- Foucault, Michel. 2006. *Psychiatric Power: Lectures at the Collège de France, 1973—1974*, translated by Graham Burchell. New York: Picador.
- Freud, Sigmund. 1895. "Project for a Scientific Psychology." *The Standard Edition of the Complete Psychological Works of Sigmund Freud, Volume I (1886-1899): Pre-Psycho-Analytic Publications and Unpublished Drafts*, edited and translated by James Strachey, 281-391. London: Hogarth Press.
- Freud, Sigmund. 1907. "Obsessive Actions and Religious Practices." In *The Standard*

Edition of the Complete Psychological Works of Sigmund Freud, Volume IX (1906-1908): Jensen's 'Gradiva' and Other Works, edited and translated by James Strachey, 115-128. London: Hogarth Press.

Freud, Sigmund. 1923. "The Ego and the Id." In *The Standard Edition of the Complete Psychological Works of Sigmund Freud, Volume XIX (1923-1925): The Ego and the Id and Other Works*, edited and translated by James Strachey, 115-128. London: Hogarth Press.

Freud, Sigmund. 1927. *The Future of an Illusion*. In *The Standard Edition of the Complete Psychological Works of Sigmund Freud, Volume XXI (1927-1931): The Future of an Illusion, Civilization and its Discontents, and Other Works*, edited and translated by James Strachey, 1-56. London: Hogarth Press.

Freud, Sigmund. 1929. Letter from Sigmund Freud to Oskar Pfister, February 16, 1929." *International Psycho-Analytical Library* 59: 128-129.

Freud, Sigmund. 1939. *Moses and Monotheism*. In *The Standard Edition of the Complete Psychological Works of Sigmund Freud, Volume XXIII (1937-1939): Moses and Monotheism, An Outline of Psycho-Analysis and Other Works*, edited and translated by James Strachey, 1-138. London: Hogarth Press.

Sigmund Freud and C.G. Jung. *The Freud / Jung Letters: The Correspondence between Sigmund Freud and C.G. Jung*, edited by Willam McGuire, 1974. Princeton: Princeton University.

Friedman, Lawrence. 2013. *The Lives of Erich Fromm: Love's Prophet*. New York: Columbia University.

Fromm, Erich. 1947. *Man For Himself: An Inquiry Into the Psychology of Ethics*. New York: Ballantine.

Fromm, Erich. 1941. *Escape From Freedom*. New York: Avon Books.

Fromm, Erich. 1950. *Psychoanalysis and Religion*. New Haven: Yale University.

Fromm, Erich. 1955a. *The Sane Society*. New York: Henry Holt.

Fromm, Erich. 1955b. *The Dogma of Christ and Other Essays on Religion, Psychology and Culture*. New York: Holt, Rinehart, Winston.

Fromm, Erich. 1960. "Psychoanalysis and Zen Buddhism." In *Zen Buddhism and Psychoanalysis*, ed. Erich Fromm et al., 77-141. New York: HarperCollins.

Fromm, Erich. 1992. *The Art of Being*. New York, NY: Continuum.

- Fromm, Erich. 2009. "Buddhism and the Mode of Having vs. Being (1975)." *Fromm Forum*: 31-24.
- Fromm, Erich, D.T. Suzuki, and Richard DeMartino, eds. 1960. *Zen Buddhism and Psychoanalysis*. New York: HarperCollins.
- Fronsdal, Gil. 1998. "Insight Meditation in the United States: Life, Liberty, and the Pursuit of Happiness." In *The Faces of Buddhism in America*, edited by Charles Prebish and Kenneth Tanaka, 163-183. Berkeley: University of California.
- Frye, Northrup. 1957. *Anatomy of Criticism: Four Essays*. Princeton, NJ: Princeton University Press.
- Fuller, Robert. 1989. *Alternative Medicine and American Religious Life*. Oxford: Oxford University Press.
- Funk, Rainer. *Erich Fromm: His Life and Ideas, An Illustrated Biography*. New York: Continuum, 2000.
- Garfield, Jay, trans. 1995. *The Fundamental Wisdom of the Middle Way: Nagarjuna's Mulamadhyamakakarika*. Oxford: Oxford University Press.
- Gay, Volney. 1979. *Freud on Ritual*. Missoula: Scholars Press.
- Gay, Volney. 1982. *Freud on Sublimation*. Albany: SUNY Press.
- Germer, Christopher, Ronald Siegel, and Paul Fulton, eds. 2005. *Mindfulness and Psychotherapy*. New York: Guilford.
- Germer, Christopher, and Ronald Siegel, eds. 2012. *Wisdom and Compassion in Psychotherapy: Deepening Mindfulness in Clinical Practice*. New York: Guilford.
- Gernet, Jacques. 1995. *Buddhism in Chinese Society: An Economic History from the Fifth to the Tenth Centuries*, translated by Franciscus Verellen. New York: Columbia.
- Gethin, Rupert. 2011. "On Some Definitions of Mindfulness." *Contemporary Buddhism* 12(1): 263-279.
- Giles, Cheryl and Willa Miller. 2012. *The Arts of Contemplative Care: Pioneering Voices in Buddhist Chaplaincy and Pastoral Work*. Somerville, MA: Wisdom.
- Girard, Rene. 1986. *The Scapegoat*. Translated by Yvonne Freccero. Baltimore: The Johns Hopkins University Press.
- Gleig, Ann. 2011. "Enlightenment after the Enlightenment: American Transformations of Asian Contemplative Traditions." PhD diss., Rice University.

- Gleig, Ann. 2012a. "Wedding the Personal and Impersonal in West Coast Vipassana: A Dialogical Encounter between Buddhism and Psychotherapy." *Journal of Global Buddhism* 13: 129-146.
- Gleig, Ann. 2012b. "Queering Buddhism or Buddhist De-Queering? Reflecting on Differences amongst Western LGBTQI Buddhists and the Limitations of Liberal Convert Buddhism," *Journal of Theology and Sexuality* 18(3): 198-214.
- Gleig, Ann. 2013. "From Tantra to Theravada: The Making of an American Buddhist Tantra," *Contemporary Buddhism: An Interdisciplinary Journal* 14(2): 221-238.
- Gleig, Ann. 2014a. "Dharma Diversity and Deep Inclusivity at the East Bay Meditation Center: From Buddhist Modernism to Buddhist Postmodernism?," *Contemporary Buddhism: An Interdisciplinary Journal* 15(2): 312-331.
- Gleig, Ann. 2014b. "From Buddhist Hippies to Buddhist Geeks: The Emergence of Buddhist Postmodernism?" *Journal of Global Buddhism* 15.
- Gleig, Ann. 2015. "Prominent Buddhist Women in the West." In *Oxford Bibliographies in Buddhism*, edited by Richard Payne. New York: Oxford University Press.
- Goleman, Daniel. 1985. *Inquiring Mind* 2(1).
- Gomez, Luis. 1995. "Oriental Wisdom and the Cure of Souls: Jung and the Indian East." In *Curators of the Buddha: The Study of Buddhism Under Colonialism*, edited by Donald Lopez, 197-251. Chicago: University of Chicago.
- Gorski, Philip, David Kyuman Kim, John Torpey, and Jonathan VanAntwerpen, eds. 2012. "The Post-Secular in Question." In *The Post-Secular in Question: Religion in Contemporary Society*, edited by Philip Gorski et al., 1-23. New York: NYU.
- Goss, Robert E. 1999. "Buddhist Studies at Naropa: Sectarian or Academic?," In *American Buddhism: Methods and Findings in Recent Scholarship*, edited by Duncan Ryuken Williams and Christopher Queen, 215-236. Surrey: Curzon Press.
- Graham, Barbara. 1991. "'In the Dukkha Magnet Zone' An Interview with Jon Kabat-Zinn." *Tricycle* (Winter). <http://www.tricycle.com/interview/dukkha-magnet-zone>
- Grogan, Jessica. 2013. *Encountering America: Humanistic Psychology, Sixties Culture, and the Shaping of the Modern Self*. New York: HarperCollins.
- Gunther Brown, Candy. 2013. *The Healing Gods: Complementary and Alternative Medicine in Christian America*. New York: Oxford University.

- Gunther Brown, Candy. 2014. "Mindfulness Meditation in U.S. Public Schools." Paper, annual meeting of American Academy of Religion, San Diego, November 24, 2014.
- Gunther Brown, Candy. 2015a. "Explicit Ethics Essential to Skillful Speech, Right Intention, and Informed Consent." Paper, annual meeting of American Academy of Religion, Atlanta, November 21, 2015.
- Gunther Brown, Candy. 2015b. "Marketing Mindfulness-Based Stress Reduction and Reiki to Hospitals and Hospices as Secular, Scientific, Cost-Effective Therapies." Paper, annual meeting of American Academy of Religion, Atlanta, November 21, 2015.
- Guttman, Samuel, Stephen Parrish, and Randall Jones, ed. 1984. *The Concordance to the Standard Edition of the Complete Psychological Works of Sigmund Freud*. New York: International Universities Press.
- Gyatso, Janet. *Being Human in a Buddhist World: An Intellectual History of Medicine in Early Modern Tibet*. Columbia University Press, 2015.
- Habermas, Jurgen (2008): "Notes on Post-Secular Society", *New Perspectives Quarterly*, 25(4): 17-29.
- Habermas, Jürgen. *An Awareness of What is Missing: Faith and Reason in a Post-Secular Age*. Malden, MA: Polity Press, 2010.
- Hacking, Ian. 1999. *The Social Construction of What?* Cambridge, MA: Harvard University Press.
- Haidt, Jonathan. 2006. *The Happiness Hypothesis: Finding Modern Truth in Ancient Wisdom*. New York: Basic Books.
- Hanada-Lee, Julie. 2006. "Shandao's Verses on Guiding Others and Healing the Heart," in *Buddhism and Psychotherapy Across Cultures*, edited by Mark Unno, 195-209. Somerville, MA: Wisdom Publications.
- Christopher Harding, Iwata Fumiaki, and Yoshinaga Shin'ichi, eds. 2015. *Religion and Psychotherapy in Modern Japan*. New York: Routledge.
- Harrington, Anne. 2005. "Uneasy Alliances: The Faith Factor in Medicine, The Health Factor in Religion." In *Science, Religion, and the Human Experience*, edited by James Proctor, 287-309. New York: Oxford University.
- Harrington, Anne. 2008a. *The Cure Within: A History of Mind-Body Medicine*. New York: Norton & Company.

- Harrington, Anne. 2008b. "Buddhist Brains: A Case Study in the Reenchantment of the Brain Sciences," *Philoctetes: The Journal of the Multidisciplinary Study of Imagination* 3.
- Harrington, Anne. 2011. "The Placebo Effect: What's Interesting for Scholars of Religion?." *Zygon* 46(2): 265-280.
- Harrington, Anne and John Dunne. 2016. "When Mindfulness Is Therapy: Ethical Qualms, Historical Perspectives." *American Psychologist* 70(7), 621-631.
- Harrington, Anne and Arthur Zajonc, eds. 2006. *The Dalai Lama at MIT*. Cambridge, MA: Harvard University Press.
- Harrison, Peter. 1990. "*Religion*" and the Religions in the English Enlightenment. Cambridge: Cambridge University Press, 1990.
- Harrison, Peter. 2001. *The Bible, Protestantism and the Rise of Science*. Cambridge: Cambridge University Press.
- Harrison, Peter. 2006. "'Science' and 'Religion': Constructing the Boundaries." *The Journal of Religion* 86(1): 81-106.
- Harrison, Peter. 2007. *The Fall of Man and the Foundations of Science*. Cambridge: Cambridge University Press,.
- Harrison, Peter. 2010. "A Scientific Buddhism?," *Zygon* 45(4): 861-869.
- Harrison, Peter. 2015. *The Territories of Science and Religion*. Chicago: University of Chicago Press.
- Harrison, Simon. 1999. "Cultural Boundaries." *Anthropology Today* 15, 5: 10-13.;
- Hayes, Steven. 2002. "Acceptance, Mindfulness, and Science." *Clinical Psychology: Science and Practice* 9(1): 101-106.
- Hayes, Steven. 2004. "Acceptance and Commitment Therapy and the New Behavior Therapies: Mindfulness, Acceptance, and Relationship." In *Mindfulness and Acceptance: Expanding the Cognitive-Behavioral Tradition*, edited by Steven Hayes, Victoria Follette, and Marsha Linehan, 1-30. New York: Guilford Press.
- Hayes, Steven, and Kirk Strosahl, eds. 2004. *A Practical Guide to Acceptance and Commitment Therapy*. New York: Springer.
- Heuman, Linda. 2013. "'Context Matters,' An Interview with Buddhist scholar David McMahan," *Tricycle* 23(2). <http://www.tricycle.com/interview/context-matters>.

- Hickey, Wakoh Shannon. 2008. "Mind Cure, Meditation, and Medicine: Hidden Histories of Mental Healing in the United States." PhD diss., Duke University.
- Hickey, Wakoh Shannon. 2010. "Meditation as Medicine: A Critique." *CrossCurrents* 60(2): 168-184.
- Holifield, E. Brooks. 1983. *A History of Pastoral Care in America: From Salvation to Self-Realization*. Nashville: Abingdon.
- Homans, Peter. 1995. *Jung in Context: Modernity and the Making of a Psychology*. 2nd ed. Chicago: University of Chicago.
- Horney, Karen. 1945. *Our Inner Conflicts: A Constructive Theory of Neurosis*. New York: W.W. Norton.
- Horney, Karen. 1987. *Final Lectures*, edited by Douglas H. Ingram. New York: W.W. Norton.
- Hsiu-fen, Chen. 2005. "Wind Malady as Madness in Medieval China: Some Threads from the Dunhuang Medical Manuscripts." In *Medieval Chinese Medicine: The Dunhuang Medical Manuscripts*, ed. Vivienne Lo and Christopher Cullen, 345-362. London: RoutledgeCurzon.
- Huntington, C.W. 2015. "The Triumph of Narcissism: Theravāda Buddhist Meditation in the Marketplace." *Journal of the American Academy of Religion* 83(3)3: 624-648.
- Hymes, Robert. 2003. *Way and Byway: Taoism, Local Religion, and Models of Divinity in Sung and Modern China*. Berkeley, University of California Press.
- Imamura, Ryo. 1998. "Buddhist and Western Psychotherapies: An Asian American Perspective." In *The Faces of Buddhism in America*, edited by Charles Prebish and Kenneth Tanaka, 228-238. Berkeley: University of California.
- Ishu Ishiyama, "Morita Therapy: Its Basic Features and Cognitive Intervention for Anxiety Treatment," *Psychotherapy: Theory, Research, Practice, Training* 23(3) (1986): 375-381.
- Jaini, Padmanabh. 1992. "Smṛti in the Abhidharma Literature and the Development of Buddhist Accounts of Memory of the Past." In *The Mirror of Memory: Reflections on Mindfulness and Remembrance in Indian and Tibetan Buddhism*, edited by Janet Gyatso, 47-60. Albany: SUNY Press.
- Jakobsen, Janet and Ann Pellegrini. 2008. "World Secularisms at the Millennium: Introduction," *Social Text*, 64(3): 1-27.

Jakobsen, Janet and Ann Pellegrini. 2008. "Times Like These." In *Secularisms*, edited by Janet Jakobsen and Ann Pellegrini. 1-39. Durham: Duke University Press.

James, William. (1902). *The Varieties of Religious Experience: A Study of Human Nature (Being the Gifford Lectures on Natural Religion Delivered at Edinburgh in 1901-1902)*. 2010 First Library of America Edition. New York: Penguin.

Jennings, Pilar. 2010. *Mixing Minds: The Power of Relationship in Psychoanalysis and Buddhism*. Boston: Wisdom Publications.

Jonte-Pace, Diane and William B. Parsons, eds. 2001. *Religion and Psychology: Mapping the Terrain*. New York, NY: Routledge.

Jung, C. G. (1928a). "Psychoanalysis and the Cure of Souls." Translated by R.F.C. Hull. In *Psychology and Religion: West and East. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 11*, 348-355. Princeton: Princeton University Press, 2nd ed., 1969.

Jung, C. G. (1928b). "The Spiritual Problem of Modern Man." Translated by R.F.C. Hull. In *Civilization in Transition. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 10*, 74-94. Princeton: Princeton University Press, 1964.

Jung, C. G. (1932). "Psychotherapists or the Clergy." Translated by R.F.C. Hull. In *Psychology and Religion: West and East. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 11*, 327-348. Princeton: Princeton University Press, 2nd ed., 1969.

Jung, C. G. (1933). "The Meaning of Psychology for Modern Man." Translated by R.F.C. Hull. In *Civilization in Transition. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 10*, 134-156. Princeton: Princeton University Press, 1964.

Jung, C. G. (1934). "The State of Psychotherapy Today." Translated by R.F.C. Hull. In *Civilization in Transition. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 10*, 157-173. Princeton: Princeton University Press, 1964.

Jung, C. G. 1937. "Psychology and Religion". In *Psychology and Religion: West and East. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 11*, 3-107. Princeton: Princeton University Press, 2nd ed., 1969.

Jung, C. G. (1939). "Foreword to Suzuki's *Introduction to Zen Buddhism*." Translated by R.F.C. Hull. In *Psychology and Religion: West and East. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 11*, 538-558. Princeton: Princeton University Press, 2nd ed., 1969.

Jung, C. G. (1948). "The Psychology of Eastern Meditation." Translated by R.F.C. Hull. In *Psychology and Religion: West and East. Bollingen Series, No. XX. Collected*

Works of C. G. Jung. Volume 11, 558-576. Princeton: Princeton University Press, 2nd ed., 1969.

Jung, C. G. (1952). "Answer to Job." Translated by R.F.C. Hull. In *Psychology and Religion: West and East. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 11*, 355-475. Princeton: Princeton University Press, 2nd ed., 1969.

Jung, C. G. (1953). "Psychological Commentary on *The Tibetan Book of the Dead*." Translated by R.F.C. Hull. In *Psychology and Religion: West and East. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 11*, 509-529. Princeton: Princeton University Press, 2nd ed., 1969.

Jung, C. G. 1954. "Psychological Commentary on *The Tibetan Book of the Great Liberation*." In *Psychology and Religion: West and East. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 11*, 475-509. Princeton: Princeton University Press, 2nd ed., 1969.

Jung, C. G. (1956). "The Undiscovered Self (Present and Future)." Translated by R.F.C. Hull. In *Civilization in Transition. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 10*, 245-307. Princeton: Princeton University Press, 1964.

Jung, C. G. (1957). "Commentary on *The Secret of the Golden Flower*." Translated by R.F.C. Hull. In *Alchemical Studies. Bollingen Series, No. XX. Collected Works of C. G. Jung. Volume 13*, 1-56. Princeton: Princeton University Press, 1967.

Kabat-Zinn, Jon. 1998. "Toward the Mainstreaming of American Dharma Practice." In *Buddhism in America: The Official Record of the Landmark Conference on the Future of Buddhist Meditative Practices in the West, Boston, January 17-19, 1997*, edited by Al Rapaport and Brian Hotchkiss, 478-528. Rutland, VT: Charles E. Tuttle Co.

Kabat-Zinn, Jon. 2000. "Indra's Net at Work: The Mainstreaming of Dharma Practice in Society." In *Psychology of Awakening: Buddhism, Science, and Our Day-to-Day Lives*, edited by Gay Watson, Stephen Batchelor, and Guy Claxton, 225-49. York Beach, ME: Samuel Weiser.

Kabat-Zinn, Jon. 2003. "Mindfulness-Based Interventions in Context: Past, Present and Future." *Clinical Psychology: Science and Practice* 10(2): 144-156.

Kabat-Zinn, Jon. 2011. "Some Reflections on the Origins of MSBR, Skillful Means, and the Trouble With Maps." *Contemporary Buddhism* 12:1: 281-306.

Kabat-Zinn, Jon, and Richard Davidson, eds. 2011. *The Mind's Own Physician: A Scientific Dialogue with the Dalai Lama on the Healing Power of Meditation*. San Francisco: New Harbinger.

- Marc Kalinowski. 2004. "Technical Traditions in Ancient China and *Shushu* Culture in Chinese Religion," In *Religion and Chinese Society: Ancient and Medieval China Volume I*, edited by John Lagerway, 223-248. Hong Kong: Chinese University of Hong Kong Press and Ecole française d'Extrême-Orient.
- Kapstein, Matthew. 2000. *The Tibetan Assimilation of Buddhism: Conversion, Contestation, and Memory*. Oxford: Oxford University Press.
- Kemper, Steven. 2015. *Rescued from the Nation: Anagarika Dharmapala and the Buddhist World*. Chicago: University of Chicago.
- Thomas Kilts. 2008. "A Vajrayana Buddhist Perspective on Ministry Training." *The Journal of Pastoral Care & Counseling* 62(3), 273-282.
- King, Richard. 1999. *Orientalism and Religion: Postcolonial Theory, India and 'The Mystic East.'* Abingdon: Routledge.
- King, Richard. 2014. *Eastern Philosophy and Western Consumerism*. Taylor & Francis.
- Klassen, Pamela. 2005. "Ritual Appropriation and Appropriate Ritual: Christian Healing and Adaptations of Asian Religions." *History and Anthropology* 16(3): 377-391.
- Klassen, Pamela. 2011. *Spirits of Protestantism: Medicine, Healing, and Liberal Christianity*. Berkeley: University of California.
- Kohn, Livia. 2008. *Laughing at the Dao: Debates among Buddhists and Daoists in Medieval China*. Magdalena, NM: Three Pines Press.
- Kondo, Akihisa. 1991. "Recollections of Dr. Horney," *The American Journal of Psychoanalysis* 51(3): 255-266.
- Kornfield, Jack. 2008. *The Wise Heart: A Guide to the Universal Teachings of Buddhist Psychology*. New York: Bantam.
- Kripal, Jeffrey. 2007. *Esalen: America and the Religion of No Religion*. Chicago: University of Chicago.
- Kripal, Jeffrey and Glenn W. Shuck. 2005. *On the Edge of the Future: Esalen and the Evolution of American Culture*. Bloomington: Indiana University Press.
- Kuan, Tse-fu. 2008. *Mindfulness in Early Buddhism: New Approaches through Psychology and Textual Analysis of Pali, Chinese and Sanskrit Sources*. New York: Routledge.
- Lakoff, George and Mark Johnson. 1980. *Metaphors We Live By*. Chicago: University of Chicago Press.

- Langan, Robert. 2003. "The Dissolving of Itself" In *Psychoanalysis and Buddhism: An Unfolding Dialogue*, edited by Jeremy Safran, 131-169. Somerville, MA: Wisdom Publications.
- Lasch, Christopher. 1978. *The Culture of Narcissism*. New York: W.W. Norton.
- Lee, Justin. 2005. "Investigating the Hybridity of 'Wellness' Practices," *Theory and Research in Comparative Social Analysis* 28.
(<http://repositories.cdlib.org/cgi/viewcontent.cgi?article=1033&context=ucclasoc>.)
- Leuba, Henry James. 1896. "A Study in the Psychology of Religious Phenomena." *The American Journal of Psychology* 7(3): 309-385.
- Leuba, Henry James. 1912. *A Psychological Study of Religion: Its Origin, Function, and Future*. New York: MacMillan Company.
- Leuba, Henry James. 1921. "The Meaning of 'Religion' and the Place of Mysticism in Religious Life." *The Journal of Philosophy* 18(3): 57-67.
- Lincoln, Bruce. 2012. *Gods and Demons, Priests and Scholars: Critical Explorations in the History of Religions*. Chicago: University of Chicago.
- Linehan, Marsha. 1993. *Cognitive-Behavioral Treatment of Borderline Personality Disorder*. New York: Guilford.
- Loizzo, Joseph. 2001. "Candrakīrti and the Moon-Flower of Nālandā: Objectivity and Self-Correction in India's Central Therapeutic Philosophy of Language." PhD diss., Columbia University.
- Loizzo, Joseph. 2009. "Kalacakra and the Nālandā: Tradition: Science, Religion, and Objectivity in Buddhism and the West." *As Long as Space Endures: Essays on the Kalacakra Tantra in Honor of HH the Dalai Lama*: 333-367.
- Loizzo, Joe. 2012. *Sustainable Happiness: The Mind Science of Well-Being, Altruism, and Inspiration*. New York: Routledge.
- Lopez, Donald, ed. 1995. *Curators of the Buddha: The Study of Buddhism Under Colonialism*. Chicago, IL: University of Chicago.
- Lopez, Donald. 1998. *Prisoners of Shangri-La: Tibetan Buddhism and the West*. Chicago, IL: University of Chicago.
- Lopez, Donald, ed. 2002. *A Modern Buddhist Bible: Essential Readings from East and West*. Boston, MA: Beacon Press.

- Lopez, Donald. 2008. *Buddhism and Science: A Guide for the Perplexed*. Chicago, IL: University of Chicago.
- Lopez, Donald. 2012. *The Scientific Buddha: His Short and Happy Life*. New Haven: Yale University Press.
- Lowith, Karl. 1949. *Meaning in History*. Chicago: University of Chicago Press.
- Ludwig, David and Jon Kabat-Zinn. 2008. "Mindfulness in Medicine." *JAMA: The Journal of the American Medical Association* 300(11): 1350-1352.
- Chris Mace, *Mindfulness and Mental Health: Therapy, Theory and Science* (New York: Routledge, 2008
- Maex, Edel. 2011. "The Buddhist Roots of Mindfulness Training: A Practitioners View." *Contemporary Buddhism*, 12(1): 165-175.
- Magid, Barry. 2002. *Ordinary Mind: Exploring the Common Ground of Zen and Psychoanalysis*. Somerville, MA: Wisdom Publications.
- Magid, Barry. 2003. "Your Ordinary Mind." In *Psychoanalysis and Buddhism: An Unfolding Dialogue*, edited by Jeremy Safran, 251-293. Somerville, MA: Wisdom Publications.
- Magid, Barry. 2009. *Ending the Pursuit of Happiness: A Zen Guide*. Somerville, MA: Wisdom Publications.
- Magid, Barry. 2013. *Nothing is Hidden: The Psychology of Zen Koans*. Somerville, MA: Wisdom Publications.
- Mair, Victor. 2012. "What is Geyi, After All?" *China Report* (48): 29-59.
- Manne, Joy. 1997. "Creating a Contemporary Buddhist Psychotherapy." In *The Authority of Experience: Essays on Buddhism and Psychology*, edited by John Pickering, 99-123. Surrey: Curzon.
- Maslow, Abraham H. 1973. *Religions, Values, and Peak-Experiences*. New York: Viking Press.
- Maslow, Abraham H. 1968. *Toward a Psychology of Being*. New York: D. Van Nostrand Company.
- Masuzawa, Tomoko. 2005. *The Invention of World Religions, or, How European Universalism Was Preserved by in the Language of Pluralism*. Chicago: University of Chicago.

- Masuzawa, Tomoko. "What Do the Critics Want?—A Brief Reflection on the Difference between a Disciplinary History and a Discourse Analysis" *Method and Theory in the Study of Religion* 20 (2008) 139-149
- May, Rollo. 1953. *Man's Search for Himself*. New York: W.W. Norton.
- May, Rollo. 1977. *The Meaning of Anxiety*. New York: Ronald Press Company.
- McCutcheon, Russell T. 1995. "The Category 'Religion' in Recent Publications: A Critical Survey." *Numen* 42(3):284–309.
- McCutcheon, Russell T. 1997. *Manufacturing Religion: The Discourse on Sui Generis Religion and the Politics of Nostalgia*. New York: Oxford University Press.
- McCutcheon, Russell T. 2003. *The Discipline of Religion: Structure, Meaning, Rhetoric*. New York: Routledge.
- McCutcheon, Russell T. 2015. "The Category "Religion" in Recent Publications: Twenty Years Later." *Numen* 62: 119-141.
- McDaniel, Justin. 2011. *The Lovelorn Ghost and the Magical Monk: Practicing Buddhism in Modern Thailand*. New York: Columbia University Press, 2011.
- McMahan , David. 2002. "Repackaging Zen for the West." In *Westward Dharma Buddhism Beyond Asia*, edited by Charles Prebish and Martin Baumann, 218-229. Berkeley: University of California Press.
- McMahan, David. 2008. *The Making of Buddhist Modernism*. Oxford: Oxford University Press.
- McMahan , David. 2010. "From Colonial Ceylon to the Laboratories of Harvard." In *Handbook of Religion and the Authority of Science*, edited by James Lewis and Olav Hammer, 117-141. Boston: Brill.
- McMahan, David. 2012. "The Enchanted Secular: Buddhism and the Emergence of Transtraditional 'Spirituality'." *The Eastern Buddhist* 43: 205-223.
- McRae, John. 2003. *Seeing Through Zen: Encounter, Transformation, and Genealogy in Chinese Chan Buddhism*. Berkeley: University of California Press.
- Meckel, Daniel and Robert Moore. 1992. "Introduction: The Dialogue Between Jungian Psychoanalysis and Buddhist Spirituality." In *Self and Liberation: The Jung/Buddhism Dialogue*, edited by Daniel Meckel and Robert Moore, 1-11. Mahwah, NJ: Paulist Press.

- Mellor, Philip. 1991. "Protestant Buddhism?: The Cultural Translation of Buddhism in England." *Religion* 21(1): 73-92.
- Metcalf, Franz Aubrey. 2001. "Buddhism and Psychology: A Perspective at the Millennium." *Religious Studies Review*: 349-354.
- Miller, Melvin. 2002. "Zen and Psychotherapy: From Neutrality, Through Relationship, to the Emptying Place." In *Awakening and Insight: Zen Buddhism and Psychotherapy*, edited by Polly Young-Eisendrath and Shoji Muramoto, 79-91. East Sussex: Brunner-Routledge.
- Miller, Melvin. 2009. "Buddhism and Psychotherapy: A Dialogue." In *Self and No-Self: Continuing the Dialogue Between Buddhism and Psychotherapy*, edited by Dale Mathers, Melvin E. Miller, and Osamu Ando, 3-8. New York: Routledge.
- "The Mindfulness Business." 2013. *The Economist Schumpeter Blog*, November 16. <http://www.economist.com/news/business/21589841-western-capitalism-looking-inspiration-eastern-mysticism-mindfulness-business>.
- Molino, Anthony, ed. 1998. *The Couch and the Tree: Dialogues in Psychoanalysis and Buddhism*. New York: North Point Press.
- Christine Mollier. 2008. *Buddhism and Taoism Face to Face: Scripture, Ritual, and Iconographic Exchange in Medieval China*. Honolulu: University of Hawai'i Press.
- Moncayo, Raul. 2003. "The Finger Pointing at the Moon: Zen Practice and the Practice of Lacanian Psychoanalysis." In *Psychoanalysis and Buddhism*, edited by Jeremy D. Safran, 331-386. Somerville, MA: Wisdom Publications.
- Moncayo, Raul. 2012. *The Signifier Pointing at the Moon*. London: Karnac.
- Mikel Monnett, "Developing a Buddhist Approach to Pastoral Care: A Peacemaker's View," *The Journal of Pastoral Care & Counseling* Vol. 59 (Spring-Summer 2005).
- Morvay, Zoltan. 1999. "Horney, Zen, and the Real Self: Theoretical and Historical Connections." *The American Journal of Psychoanalysis* 59.1: 25-35.
- Muramoto, Shoji, Polly Young-Eisendrath, and Jan Middelorf, trans. 2002. "The Jung-Hisamatsu Conversation. Translated from Aniela Jaffe's Original German Protocol." In *Awakening and Insight: Zen Buddhism and Psychotherapy*, edited by Polly Young-Eisendrath and Shoji Muramoto, 105-119. East Sussex: Brunner-Routledge.
- Naoki, Nabeshima. 2006. "A Buddhist Perspective on Death and Compassion: End-of-Life Care in Japanese Pure Land Buddhism". In *Buddhism and Psychotherapy Across Cultures*, edited by Mark Unno, 229-253. Somerville, MA: Wisdom Publications.

- Nongbri, Brent. 2013. *Before Religion: A History of a Modern Concept*. New Haven, CT: Yale University Press.
- Ozawa-de Silva, Chikako. 2006. *Psychotherapy and Religion in Japan: The Japanese Introspection Practice of Naikan*. New York: Routledge.
- Ozawa-de Silva, Chikako and Brendan Ozawa-De Silva. 2010. "Secularizing Religious Practices: A Study of Subjectivity and Existential Transformation in Naikan Therapy." *Journal for the Scientific Study of Religion* 49(1): 147–161.
- Overmyer, Daniel. 1990. "Buddhism in The Trenches: Attitudes Toward Popular Religion in Chinese Scriptures Found at Tun-Huang." *Harvard Journal of Asiatic Studies* 50(1): 197-222.
- Parsons, William. 1998. "The Oceanic Feeling Revisited." *The Journal of Religion* 78: 4: 501-23.
- Parsons, William. 1999. *The Enigma of the Oceanic Feeling: Revisioning the Psychoanalytic Theory of Mysticism*. New York: Oxford University Press.
- Parsons, William. 2001. "Themes and Debates in the Psychology-Comparativist Dialogue." In *Religion and Psychology: Mapping the Terrain*, edited by Diane Jonte-Pace and William B. Parsons, 229-253. New York: Routledge Press.
- Parsons, William. 2009. "Psychoanalysis Meets Buddhism: The Development of a Dialogue." In *Changing the Scientific Study of Religion: Beyond Freud?*, edited by Jacob Belzen, 179-209. New York: Springer.
- Parsons, William. 2010a. "Of Chariots, Navels, and Winged Steeds: The Dialogue between Psychoanalysis and Buddhism." In *Disciplining Freud on Religion: Perspectives from the Humanities and Social Sciences*, edited by Gregory Kaplan and William Parsons, 107-146. Lanham, Maryland: Lexington.
- Parsons, William. 2010b. "On Mapping the Psychology and Religion Movement: Psychology as Religion and Modern Spirituality." *Pastoral Psychology* 59(1): 15-25.
- Parsons, William. 2013. *Freud and Augustine in Dialogue: Psychoanalysis, Mysticism, and the Culture of Modern Spirituality*. Charlottesville: University of Virginia Press.
- Parsons, William , and Jeffrey Kripal. 2010. "Psychology and Religion at Rice University: A Brief History." *Pastoral Psychology* 59(1): 9-14.
- Payne, Richard. 2006. "Individuation and Awakening: Romantic Narrative and the Psychological Interpretation of Buddhism." In *Buddhism and Psychotherapy Across Cultures*, edited by Mark Unno, 31-51. Somerville, MA: Wisdom Publications.

- Perls, Frederick. 1973. *The Gestalt Approach and Eye Witness to Therapy*. Science and Behavior Books.
- Perls, Frederick. 1969. *In and Out of the Garbage Pail*. Lafayette, California: Real People Press.
- Prothero, Stephen, 1996. *The White Buddhist: The Asian Odyssey of Henry Steel Olcott*. Indiana University Press.
- Pratt, James Bissett. 1915. *India and its Faiths: A Traveler's Record*. New York: Houghton Mifflin Company.
- Pratt, James Bissett. 1920. *The Religious Consciousness*. New York: MacMillan Company.
- Pratt, James Bissett. 1928. *The Pilgrimage of Buddhism and A Buddhist Pilgrimage*. New York: MacMillan Company.
- Purser, Ron, and David Loy. "Beyond McM mindfulness." *Huffington Post* (2013).
- Pye, Michael. 2003. *Skillful Means: A Concept in Mahayana Buddhism, 2nd ed.* New York: Routledge.
- Rawls, John. 1997. "The Idea of Public Reason Revisited." *University of Chicago Law Review* 64(3): 765-807.
- Ricoeur, Paul. 1970. *Freud and Philosophy: An Essay on Interpretation*, trans Denis Savage. New Haven: Yale.
- Rieff, Philip. 1966. *The Triumph of the Therapeutic: Uses of Faith after Freud*. Chicago: University of Chicago.
- Philip Rieff, *Freud: The Mind of a Moralizer* (Chicago: University of Chicago Press, 1979)
- Robb, Christina. 2006. *This Changes Everything: The Relational Revolution in Psychology*. New York: Picador.
- Robbins, Joel. 2011. "Crypto-Religion and the Study of Cultural Mixtures: Anthropology, Value, and the Nature of Syncretism." *Journal of the American Academy of Religion* 79(2): 408-424.
- Robins, Clive, and Henry Schmidt, and Marsha Linehan. 2004. "Dialectical Behavior Therapy: Synthesizing Radical Acceptance with Skillful Means." In *Mindfulness and Acceptance: Expanding the Cognitive-Behavioral Tradition*, edited by Steven Hayes, Victoria Follette, and Marsha Linehan, 30-45. New York: Guilford.

- Robson, James. 2014. "From Buddhist Monasteries to Mental Hospitals: Meditation, Violence, and Tending to the Insane in Traditional and Modern Japan." Paper, Numata Conference in Buddhist Studies: Violence, Nonviolence, and Japanese Religions: Past, Present, and Future, University of Hawai'i, March 20, 2014.
- Rogers, Carl Ransom. 1961. *On Becoming a Person: A Therapist's View of Psychotherapy*. New York: Houghton-Mifflin.
- Rogers, Carl Ransom. 1980. *A Way of Being*. New York: Houghton-Mifflin.
- Rogers, Scott. 2009. *The Six-Minute Solution: A Mindfulness Primer for Lawyers*. Miami Beach, FL: Mindful Living Press.
- Rubin, Jeffrey. 1996. *Psychotherapy and Buddhism: Toward an Integration*. New York: Plenum Press.
- Rubin, Jeffrey. 2003a. "Close Encounters of a New Kind: Toward an Integration of Psychoanalysis and Buddhism." In *Encountering Buddhism: Western Psychology and Buddhist Teachings*, edited by Seth Robert Segall, 31-61. Albany: State University of New York Press).
- Rubin, Jeffrey. 2003b. "A Well-Lived Life: Psychoanalytic and Buddhist Contributions." In *Psychoanalysis and Buddhism: An Unfolding Dialogue*, edited by Jeremy Safran, 387-418. Somerville, MA: Wisdom Publications.
- Rubin, Jeffrey. 2011. *The Art of Flourishing: A New East-West Approach to Staying Sane and Finding Love in an Insane World*. New York: Random House.
- Said, Edward. 1978. *Orientalism*. London: Routledge.
- Safran, Jeremy, ed. 2003. *Psychoanalysis and Buddhism: An Unfolding Dialogue*. Somerville, MA: Wisdom Publications.
- Safran, Jeremy. 2003. "Psychoanalysis and Buddhism As Cultural Institutions." In *Psychoanalysis and Buddhism: An Unfolding Dialogue*, edited by Jeremy Safran, 1-35. Somerville, MA: Wisdom Publications.
- Salguero, Pierce. 2009. "The Buddhist Medicine King in Literary Context: Reconsidering an Early Medieval Example of Indian Influence on Chinese Medicine and Surgery." *History of Religions* 48(3): 183-210.
- Salguero, Pierce. 2010a. "'A Flock of Ghosts Bursting Forth and Scattering': Healing Narratives in a Sixth-Century Chinese Buddhist Hagiography," *East Asian Science, Technology, and Medicine* 32: 89-120.

Salguero, Pierce. 2010b. "Mixing Metaphors: Translating the Indian Medical Doctrine Tridosha in Chinese Buddhist Sources." *Asian Medicine* 6(1): 55-74.

Salguero, Pierce. 2014. *Translating Buddhist Medicine in Medieval China*. Philadelphia: University of Pennsylvania Press.

Sangarakshita Bhikshu. 1964. *Anagarika Dharmapala: A Biographical Sketch*. Buddhist Publication Society

Kevin Schilbrack. 2010. "Religions: Are There Any?" *Journal of the American Academy of Religion* 78(4): 1112–1138.

Schireson, Grace. 2009. *Zen Women: Beyond Tea Ladies, Iron Maidens, and Macho Masters*. Somerville, MA: Wisdom Publications.

Schoeberlein, Deborah and Suki Sheth. 2009. *Mindful Teaching and Teaching Mindfulness: A Guide for Anyone Who Teaches Anything*. Somerville: Wisdom.

Schmidt, Leigh Eric. 2008. "A Religious History of American Neuroscience." *The Immanent Frame* blog. <http://blogs.ssrc.org/tif/2008/06/24/a-religious-history-of-american-neuroscience>.

Schmidt, Leigh Eric. 2008. "History and the Historyless." *The Immanent Frame* blog. <http://blogs.ssrc.org/tif/2011/01/14/history-and-the-historyless>.

Segal, Zindel, J. Mark G. Williams, and John Teasdale. 2001. *Mindfulness-Based Cognitive Therapy for Depression: A New Approach to Preventing Relapse*. New York: Guilford.

Segal, Zindel, John Teasdale, and J. Mark G. Williams. 2004. "Mindfulness-Based Cognitive Therapy: Theoretical Rationale and Empirical Status." In *Mindfulness and Acceptance: Expanding the Cognitive-Behavioral Tradition*, edited by Steven Hayes, Victoria Follette, and Marsha Linehan, 45-66. New York: Guilford.

Sered, Susan. 2008. "Taxonomies of Ritual Mixing." *History of Religions* 47 (2/3): 221-238.

Sered, Susan and Linda Barnes. 2005. "Introduction." In *Religion and Healing in America*, edited by Linda Barnes and Susan Sered, 3-29. Oxford: Oxford University Press.

Sharf, Robert. 1995a. "Buddhist Modernism and the Rhetoric of Meditative Experience." *Numen* 42(3): 228-283.

- Sharf, Robert. 1995b. "The Zen of Japanese Nationalism." In *Curators of the Buddha: The Study of Buddhism Under Colonialism*, edited by Donald Lopez, 107-161. Chicago: University of Chicago.
- Sharf, Robert. 1998. "Experience." In *Critical Terms for Religious Studies*, edited by Mark C. Taylor, 94-117. Chicago: University of Chicago Press, 1998.
- Sharf, Robert. 2002. *Coming to Terms with Chinese Buddhism: A Reading of the Treasure Store Treatise*. Honolulu: University of Hawai'i Press.
- Sharf, Robert. 2014a. "Mindfulness and Mindlessness in Early Chan." *Philosophy East and West* 64(4): 933-964.
- Sharf, Robert. 2014b. "Is Mindfulness Buddhist? (And Why It Matters)." *The Journal of Transcultural Psychiatry* 52(4): 470-484.
- Shore, Jeff. 2002. "A Buddhist Model of the Human Self: Working Through the Jung-Hisamatsu Discussion." In *Awakening and Insight: Zen Buddhism and Psychotherapy*, edited by Polly Young-Eisendrath and Shoji Muramoto, 29-43. East Sussex: Brunner-Routledge.
- Siegel, Daniel. 2007. *The Mindful Brain: Reflection and Attunement in the Cultivation of Well-Being*. New York: Norton & Company.
- Siegel, Daniel. 2010. *The Mindful Therapist: A Clinician's Guide to Mindsight and Neural Integration*. New York: Norton & Company.
- Smith, Wilfred Cantwell. 1963. *The Meaning and End of Religion*. Minneapolis: Fortress Press.
- Smith, Jonathan Z. 1982. *Imagining Religion: From Babylon to Jonestown*. Chicago: University of Chicago Press.
- Smith, Jonathan Z. 1998. "Religion, Religions, Religious." In *Critical Terms for Religious Studies*, edited by Mark C. Taylor, 269-284. Chicago: University of Chicago Press.
- Smith, Jonathan Z. 1990. *Drudgery Divine: On the Comparison of Early Christianities and the Religions of Late Antiquity*. Chicago: University of Chicago.
- Smith, Jonathan Z. 2004. *Relating Religion: Essays in the Study of Religion*. Chicago: University of Chicago Press.
- Snodgrass, Judith. 2003. *Presenting Japanese Buddhism to the West: Orientalism, Occidentalism, and the Columbian Exposition*. Chapel Hill, NC: University of North Carolina.

- Spiegelberg, Frederic. 1948. *The Religion of No-Religion*. Stanford, CA: James Ladd Delkin.
- Starbuck, Edwin Diller. 1908. "The Child-Mind and Child-Religion: Stages in Religious Growth." *The Biblical World* 31(2): 101-112.
- Stewart, Tony K. 2001. "In Search of Equivalence: Conceiving Muslim-Hindu Encounter Through Translation Theory." *History of Religions*: 260-287.
- Stricker, George. 2012. *Psychotherapy Integration*. Washington, DC: American Psychological Association.
- Surrey, Jan. 2005. "Relational Psychotherapy, Relational Mindfulness." In *Mindfulness and Psychotherapy*, edited by Christopher Germer, Ronald Siegel, and Paul Fulton, 91-110. New York: Guilford.
- Surrey, Jan and Judith V. Jordan. 2012. "The Wisdom of Connection." *Wisdom and Compassion in Psychotherapy: Deepening Mindfulness in Clinical Practice*, edited by Christopher Germer and Ronald Siegel, 163-176. New York: Guilford.
- Surrey, Jan and Samuel Shem. 2015. *The Buddha's Wife: The Path of Awakening Together*. New York: Artia.
- Suzuki, D.T. 1964. *Introduction to Zen Buddhism* (1927). New York, NY: Grove.
- Strickmann, Michel. 2002. *Chinese Magical Medicine*. Edited by Bernard Faure. Stanford: Stanford University Press.
- Taves, Ann. 1999. *Fits, Trances, & Visions: Experiencing Religion and Explaining Experience from Wesley to James*. Princeton: Princeton University.
- Taves, Ann and Courtney Bender. 2012. "Introduction: Things of Value." In *What Matters? Ethnographies of Value in a Not So Secular Age*, edited by Courtney Bender and Ann Taves, 1-34. New York: Columbia University Press.
- The Buddha*. 2010. Directed by David Grubin. Los Angeles, CA: PBS, DVD.
- Thera, Nyanaponika. 1954. *The Heart of Buddhist Meditation: A Handbook of Mental Training Based on the Buddha's Way of Mindfulness*. New York: Columbo.
- Trungpa, Chogyam. 1973. *Cutting Through Spiritual Materialism*. Boston: Shambhala.
- Trungpa, Chogyam. 1978. *Shambhala: The Sacred Path of the Warrior*. Boston: Shambhala.

- Trungpa, Chogyam. 2005. *The Sanity We Are Born With: A Buddhist Approach to Psychology*. Compiled and edited by Carolyn Rose Gilman. Boston: Shambhala.
- Tweed, Thomas. 1992. *The American Encounter with Buddhism: Victorian Culture & the Limits of Dissent*. Indianapolis: Indiana University Press.
- Tweed, Thomas. 1999. "Night-Stand Buddhists and Other Creatures: Sympathizers, Adherents, and the Study of Religion." *American Buddhism: Methods and Findings in Recent Scholarship*, 71-90. Surrey: Curzon Press.
- Van Waning, Adeline. 2002. "A Mindful Self and Beyond: Sharing in the Ongoing Dialogue of Buddhism and Psychoanalysis." In *Awakening and Insight: Zen Buddhism and Psychotherapy*, edited by Polly Young-Eisendrath and Shoji Muramoto, 91-103. East Sussex: Brunner-Routledge.
- Wampold, Bruce. 2001. *The Great Psychotherapy Debate: Models, Methods, and Findings*. Mahwah, NJ: Lawrence Erlbaum.
- Watson, Gay. 1998. *The Resonance of Emptiness: A Buddhist Inspiration for Contemporary Psychotherapy*. London: Routledge.
- Watson, Gay. 2008. *Beyond Happiness: Deepening the Dialogue Between Buddhism, Psychotherapy and the Mind Sciences*. London: Karnac.
- Watson, Gay, Stephen Batchelor, and Guy Claxton, eds. 2000. *Psychology of Awakening: Buddhism, Science, and Our Day-to-Day Lives*. York Beach, ME: Samuel Weiser.
- Watts, Alan. 1957. *The Way of Zen*. New York: Pantheon.
- Watts, Alan. 1961. *Psychotherapy: East and West*. New York: Pantheon.
- Watts, Alan. 1995. *Buddhism: The Religion of No-Religion*. Boston: Tuttle Publishing.
- Weber, Sara. 2003. "An Analyst's Surrender." In *Psychoanalysis and Buddhism: An Unfolding Dialogue*, edited by Jeremy Safran, 169-189. Somerville, MA: Wisdom Publications.
- Westkott, Marcia. 1998. "Horney, Zen, and the Real Self." *The American Journal of Psychoanalysis*. 58(3): 287-301.
- White, Christopher. 2008. "Mind Sciences and Religious Change in America." *The Immanent Frame* blog. <http://blogs.ssrc.org/tif/2008/09/20/mind-sciences-and-religious-change-in-america>.

- White, Christopher. 2009. *Unsettled Minds: Psychology and the Search for Spiritual Assurance, 1830-1940*. Berkeley: University of California.
- Whorton, James. 2002. *Nature Cures: The History of Alternative Medicine in the United States*. Oxford: Oxford University Press.
- Wick, Nancy. 2005. "Dangerous Minds: A UW Professor's New Therapy Is Being Hailed as a Breakthrough in Treating Self-Destructive Patients Who Live Their Lives on the Borderline." *Columns*. Accessed December 13, 2013, <http://www.washington.edu/alumni/columns/dec05/dangerous02.html>
- Wilber, Ken. 2000. *Integral Psychology: Consciousness, Spirit, Psychology, Therapy*. Boston: Shambhala.
- Williams, J. Mark G., John Teasdale, Zindel Segal, and Jon Kabat-Zinn. 2007. *The Mindful Way through Depression: Freeing Yourself from Chronic Unhappiness*. New York: Guilford.
- Williams, J. Mark G. and Jon Kabat-Zinn. 2011. "Mindfulness: Diverse Perspectives on its Meaning, Origins, and Multiple Applications at the Intersection of Science and Dharma." *Contemporary Buddhism* 12(1): 1-18.
- Wilson, Jeff. 2012. *Dixie Dharma: Inside a Buddhist Temple in the American South*. Durham: University of North Carolina Press.
- Wilson, Jeff. 2014. *Mindful America: The Mutual Transformation of Buddhist Meditation and American Culture*. New York: Oxford University Press.
- Wittgenstein, Ludwig. 1961. (1921) *Tractatus Logico-Philosophicus*, trans. Pears and McGuinness. Oxford: Routledge.
- Wise Ways to Happiness. 2012. "Improve Your Golf Game through Mindfulness." Accessed August 6. <http://www.wisewaystohappiness.com/improve-your-golf-game-through-mindfulness>.
- Wright, Dale. 1992. "Historical Understanding: The Ch'an Buddhist Transmission Narratives and Modern Historiography." *History and Theory* 31(1): 37-46.
- Wulff, David. 1998. "Rethinking the Rise and Fall of the Psychology of Religion ." In *Religion in the Making: The Emergence of the Sciences of Religion*, edited by Arie Molendjik and Peter Pels, 181-202. Boston: Brill.
- Wulff, David M. 1999. "Psychologists Define Religion." *The Pragmatics of Defining Religion: Contexts, Concepts, and Contests* 84: 207.

Wulff, David. 2001. "Psychology of Religion: An Overview." In *Religion and Psychology: Mapping the Terrain*, edited by Diane Jonte-Pace and William B. Parsons, 15-30. New York: Routledge.

Wulff, David. 2003. "A Field in Crisis: Is it Time for the Psychology of Religion to Start Over?." In *One Hundred Years of Psychology and Religion: Issues and Trends in a Century Long Quest*, edited by Peter H. M. P. Roelofsma, Jozef M. T. Corveleyn, and Joke W. van Saane, 11-32. Amsterdam: VU University Press.

Yamaoka, Seigen. 2006. "Shin Buddhist Ministry: Working with Issues of Death and Dying." In *Buddhism and Psychotherapy Across Cultures*, edited by Mark Unno, 209-229. Somerville, MA: Wisdom.

Young, James and Conrad G. Brunk, eds. 2009. *The Ethics of Cultural Appropriation*. West Sussex: Blackwell.

Young-Eisendrath, Polly and Shoji Muramoto, eds. 2002. *Awakening and Insight: Zen Buddhism and Psychotherapy*. East Sussex, UK: Brunner-Routledge Press.

Ziff, Bruce and Pratima Rao. 1997. "Introduction to Cultural Appropriation: A Framework for Analysis." In *Borrowed Power: Essays on Cultural Appropriation*, edited by Bruce Ziff and Pratima Rao, 1-31. New Brunswick, New Jersey: Rutgers University.

Zurcher, Erik. 1959. *The Buddhist Conquest of China*. Leiden: Brill.

Zurcher, Erik. 1980. "Buddhist Influence on Early Taoism: A Survey of Scriptural Evidence." *T'oung Pao* 66: 84-147.