

Mindfulness in Behavioral Health

Series Editor: Nirbhay N. Singh

Lynette M. Monteiro

Jane F. Compson

Frank Musten *Editors*

Practitioner's Guide to Ethics and Mindfulness-Based Interventions

 Springer

Mindfulness in Behavioral Health

Series Editor

Nirbhay N. Singh
Medical College of Georgia
Augusta University
Augusta, GA, USA

More information about this series at <http://www.springer.com/series/8678>

Lynette M. Monteiro • Jane F. Compson
Frank Musten
Editors

Practitioner's Guide to Ethics and Mindfulness-Based Interventions

 Springer

Editors

Lynette M. Monteiro
Ottawa Mindfulness Clinic
Ottawa, ON, Canada

Jane F. Compson
University of Washington
Tacoma, WA, USA

Frank Musten
Ottawa Mindfulness Clinic
Ottawa, ON, Canada

ISSN 2195-9579

ISSN 2195-9587 (electronic)

Mindfulness in Behavioral Health

ISBN 978-3-319-64923-8

ISBN 978-3-319-64924-5 (eBook)

DOI 10.1007/978-3-319-64924-5

Library of Congress Control Number: 2017956123

© Springer International Publishing AG 2017

This work is subject to copyright. All rights are reserved by the Publisher, whether the whole or part of the material is concerned, specifically the rights of translation, reprinting, reuse of illustrations, recitation, broadcasting, reproduction on microfilms or in any other physical way, and transmission or information storage and retrieval, electronic adaptation, computer software, or by similar or dissimilar methodology now known or hereafter developed.

The use of general descriptive names, registered names, trademarks, service marks, etc. in this publication does not imply, even in the absence of a specific statement, that such names are exempt from the relevant protective laws and regulations and therefore free for general use.

The publisher, the authors and the editors are safe to assume that the advice and information in this book are believed to be true and accurate at the date of publication. Neither the publisher nor the authors or the editors give a warranty, express or implied, with respect to the material contained herein or for any errors or omissions that may have been made. The publisher remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

Printed on acid-free paper

This Springer imprint is published by Springer Nature

The registered company is Springer International Publishing AG

The registered company address is: Gewerbestrasse 11, 6330 Cham, Switzerland

To all my teachers, friends, and family who bring clarity to the complex joys of values, morals, ethics, and their purpose as the emergence of love: the teachers and participants at the Ottawa Mindfulness Clinic whose trust make this work a joy; Jane Compson, Anne Schlieper, Cary Kogan, Mu Soeng, and Pierre Ritchie for their continuous support and embodied ethics. To Alexandra Monteiro Musten and Mike Valiquette for their love and dearest Amelia who fills us with hope. To Frank, for everything.

Lynette M. Monteiro

To my friends and teachers in the secular and Buddhist mindfulness communities. To Jay Schneller for tirelessly supporting me, and to Lynette Monteiro for making all this happen and being a wonderful model and guide in so many ways. To my wonderful colleagues at UW Tacoma who offer support, humor, and inspiration. To my lovely family (and other animals) who keep my feet on the ground.

Jane F. Compson

To the teachers at the Ottawa Mindfulness Clinic whose collaboration in designing and teaching our courses has enriched my awareness of the ethical space we create when we teach: to Marie-Andree Papineau and Caroline Douglas, my partners in bringing ethically based mindfulness programs into organizations; Alexandra who inspires me with her dedication to caring for those who live in the margins of society, her partner Mike whose imagination is a constant source of wonder, to Amelia whose constant smile can brighten any day, and to Lynette who is constantly striving to encourage the good in all of us. As always, thank you for being my North Star.

Frank Musten

Contents

1 Introduction: A New Hope	1
Donald McCown	
Part I Issues in the Ethics of Mindfulness	
2 Is Mindfulness Secular or Religious, and Does It Matter?	23
Jane F. Compson	
3 Ethics, Transparency, and Diversity in Mindfulness Programs	45
Candy Gunther Brown	
4 Professional Ethics and Personal Values in Mindfulness-Based Programs: A Secular Psychological Perspective	87
Ruth Baer and Laura M. Nagy	
5 Ethics and Teaching Mindfulness to Physicians and Health Care Professionals	113
Michael Krasner and Patricia Lück	
Part II Ethics in Mindfulness-based Interventions and Programs	
6 The Moral Arc of Mindfulness: Cultivating Concentration, Wisdom, and Compassion	143
Lynette M. Monteiro	
7 The Purpose, Mechanisms, and Benefits of Cultivating Ethics in Mindfulness-Integrated Cognitive Behavior Therapy	163
Bruno A. Cayoun	
8 Mindfulness-Based Symptom Management: Mindfulness as Applied Ethics	193
Lynette M. Monteiro and Frank Musten	

9 Promoting the Ethics of Care in a Mindfulness-Based Program for Teachers 229
 Patricia A. Jennings and Anthony A. DeMauro

10 Compassion as the Highest Ethic 253
 James N. Kirby, Stanley R. Steindl, and James R. Doty

11 Core Values in Mindful Self-Compassion 279
 Pittman McGehee, Christopher Germer, and Kristin Neff

12 Mindfulness, Compassion, and the Foundations of Global Health Ethics 295
 David G. Addiss

Part III Ethics of Mindfulness in Corporate and Military Organizations

13 Ethics of Mindfulness in Organizations 325
 Frank Musten

14 Paradoxes of Teaching Mindfulness in Business 345
 Shalini Bahl

15 Mindfulness and Minefields: Walking the Challenging Path of Awareness for Soldiers and Veterans 373
 Sean Bruyca

Index 409

Contributors

David G. Addiss, MD, MPH Task Force for Global Health, Decatur, GA, USA
Eck Institute for Global Health, University of Notre Dame, Notre Dame, IN, USA
Center for Compassion and Global Health, Atlanta, GA, USA

Ruth Baer, PhD Department of Psychology, University of Kentucky, Lexington, KY, USA

Shalini Bahl, PhD The Reminding Project and Downtown Mindfulness in Amherst, Amherst, MA, USA

Isenberg School of Management, UMass, Amherst, MA, USA

Sean Bruyea, MA Independent freelancer, Nepean, Canada

Bruno A. Cayoun, DPsych Mindfulness-integrated Cognitive Behavior Therapy Institute, Hobart, Tasmania, Australia

Jane F. Compson, PhD University of Washington, Tacoma, WA, USA

Anthony A. DeMauro, PhD CISE Department, Curry School of Education, University of Virginia, Charlottesville, VA, USA

James R. Doty, MD The Center for Compassion and Altruism Research and Education, Stanford University, Stanford, CA, USA

Christopher Germer, PhD Cambridge, MA, USA

Candy Gunther Brown, PhD Department of Religious Studies, Indiana University, Bloomington, IN, USA

Patricia A. Jennings, PhD CISE Department, Curry School of Education, University of Virginia, Charlottesville, VA, USA

James N. Kirby, PhD The University of Queensland, St Lucia, QLA, Australia

The Center for Compassion and Altruism Research and Education, Stanford University, Stanford, CA, USA

Michael Krasner, MD Olsan Medical Group, Rochester, NY, USA

Donald McCown, PhD, MAMS, MSS, LSW Center for Contemplative Studies, West Chester University of Pennsylvania, West Chester, PA, USA

Laura M. Nagy, PhD Department of Psychology, University of Kentucky, Lexington, KY, USA

Patricia Lück, MD, MA Olsan Medical Group, Rochester, NY, USA

Pittman McGehee University of Texas, Austin, TX, USA

Lynette M. Monteiro, PhD Ottawa Mindfulness Clinic, Ottawa, ON, Canada

Frank Musten, PhD Ottawa Mindfulness Clinic, Ottawa, ON, Canada

Kristin Neff, PhD University of Texas, Austin, TX, USA

Stanley R. Steindl, PhD The University of Queensland, St Lucia, QLD, Australia

About the Editors

Lynette M. Monteiro, PhD is a clinical psychologist and Director of Training at the Ottawa Mindfulness Clinic. She is trained in CBT, Cognitive Processing Therapy for veterans and active military personnel, several mindfulness-based interventions, and Buddhist chaplaincy. Her primary treatment interest is exploring the development of values through mindfulness programs; she also serves as a personnel selection psychologist for police and military units. As Clinical Professor at the University of Ottawa, she trains PhD clinical psychology candidates in Mindfulness-Based Symptom Management. She is coauthor of *Mindfulness Starts Here*, contributor to *Buddhist Foundations of Mindfulness*, and several articles and presentations on contemporary mindfulness, ethics, and treatment issues.

Jane F. Compson, PhD is an assistant professor in Interdisciplinary Arts and Sciences at the University of Washington, Tacoma. Her PhD is in comparative religion, and she has training in MBSR and Buddhist chaplaincy. She teaches in the topics of comparative religion and applied ethics and is a member of a clinical ethics committee. Her research interests are in the application of contemplative practices, particularly those associated with Buddhist traditions, to contemporary contexts. She has published articles in the journals *Contemporary Buddhism*, *Mindfulness*, *Journal of Nursing Education and Practice* and *Interdisciplinary Environmental Review*.

Frank Musten, PhD is a clinical psychologist and co-founder of the Ottawa Mindfulness Clinic. In private practice, he treats persons managing stress-related disorders and relationship issues. In the Ottawa Mindfulness Clinic, he has developed a Burnout Resilience program for executives, police, and military personnel and conducted mindfulness programs with various military units. Working with military and police services since 1970, he has developed various programs for dealing with stress and currently is involved with clinical and pre-deployment assessment and post-deployment treatment of military members, including using mindfulness-informed treatments to manage PTSD. He also trains and supervises health care professionals in developing ethics-based mindfulness for clinical treatment.

About the Authors

David G. Addiss, MD, MPH is a public health physician whose work has focused on the prevention and treatment of neglected tropical diseases—causes of immense suffering and disability. He has worked as a general medical practitioner in migrant health, an epidemiologist at the US Centers for Disease Control and Prevention, and a program director at the Task Force for Global Health. David completed the lay chaplaincy training program at Upaya Zen Center. He teaches global health ethics at the Eck Institute for Global Health, University of Notre Dame. His current interests include global health ethics and compassion in global health.

Ruth Baer, PhD is Professor of Psychology at the University of Kentucky, a licensed clinical psychologist, and an Associate of the Oxford Mindfulness Centre at the University of Oxford. She conducts research on mindfulness and teaches and supervises several mindfulness-based interventions. Her interests include assessment and conceptualization of mindfulness and compassion, effects of mindfulness-based programs, mechanisms of change, and professional training and ethics in the mindfulness field.

Shalini Bahl, PhD is an advocate of mindfulness in business, education, and society. She is committed to integrating the transformative potential of mindfulness in marketing, business, and policy to enhance consumer, employee, and societal well-being. Her research on self-awareness and mindfulness has been published in premier marketing and public policy journals. Through her organization, The Reminding Project, she designs and delivers mindfulness-based solutions that address workplace challenges. In her studio, Downtown Mindfulness, she is co-creating a community to promote mindful living. She has received professional training with the Center for Mindfulness at UMass Medical School and the Search Inside Yourself Leadership Institute.

Sean Bruyca, MA graduated from the Royal Military College in 1986. He served as an intelligence Officer in the Gulf War (1990–91) where he suffered disabling physical and psychological injuries. Since retiring from the military, Sean has

devoted himself to investigating, presenting, and writing extensively about injured serving and retired military. He has also been a frequent commentator in both Canadian and international media. In 2010, the Canadian government issued a rare official apology to Sean for widespread violations of his privacy carried out as a reprisal for his advocacy on behalf of disabled veterans. In 2016, Sean completed his Master's in Public Ethics focusing upon the obligations governments have to their military veterans.

Bruno A. Cayoun, DPsych is a clinical psychologist in private practice and principal developer of Mindfulness-integrated Cognitive Behaviour Therapy (MiCBT). He is Director of the MiCBT Institute, a leading provider of MiCBT training to mental health services since 2003. Dr. Cayoun co-supervises mindfulness research in collaboration with various universities. He has practiced mindfulness meditation and attended intensive training in the Burmese Vipassana tradition of S. N. Goenka in France, Nepal, India, and Australia since 1989. He is the author of three books, including *Mindfulness-integrated CBT: Principles and Practice* (Wiley, 2011) and *Mindfulness-integrated CBT for Well-Being and Personal Growth* (Wiley, 2015).

Jane F. Compson, PhD is Assistant Professor in the School of Interdisciplinary Arts and Sciences at the University of Washington, Tacoma, where she teaches religious studies and philosophy. She studies the application of contemplative techniques in contemporary secular contexts and has authored articles in journals including *Mindfulness*, *Contemporary Buddhism*, *Journal of Nursing Education and Practice*, *Interdisciplinary Environmental Review*, and in the books *Contemplative Approaches to Sustainability in Higher Education: Theory and Practice* (Eaton, Hughes and MacGregor, 2017) and *Meditation and the Classroom* (Simmer-Brown et al., 2011).

Anthony A. DeMauro, MS is a doctoral candidate at the University of Virginia's Curry School of Education in the Curriculum, Instruction, and Special Education Department. Anthony's research focuses on how teachers' personal mindfulness practice influences their professional teaching practice such as their abilities to build relationships with students, respond to students' needs, and manage their classrooms. He also works with pre-service teachers as an instructor for classroom management and in-service teachers as a CARE for Teachers training facilitator. Anthony previously worked as a Behavioral Specialist Consultant.

James R. Doty, MD is a professor of neurosurgery at Stanford University and the founder and director of the Stanford Center for Compassion and Altruism Research and Education. He works with scientists from a variety of disciplines examining the neural bases of compassion and altruism. His work also examines how being compassionate with intention affects peripheral physiology in regard to health, wellness, and longevity. He is the *New York Times* bestselling author of *Into the Magic Shop: A Neurosurgeon's Quest to Discover the Mysteries of the Brain and the Secrets of the Heart* now translated into 30 languages and is the senior editor of the *Oxford Handbook of Compassion Science*.

Christopher Germer, PhD is a clinical psychologist and lecturer on psychiatry (part-time) at Harvard Medical School. He is a co-developer of the *Mindful Self-Compassion (MSC)* program, author of *The Mindful Path to Self-Compassion*, and co-editor of *Mindfulness and Psychotherapy*, and *Wisdom and Compassion in Psychotherapy*. Dr. Germer is a founding faculty member of the Institute for Meditation and Psychotherapy as well as the Center for Mindfulness and Compassion, Cambridge Health Alliance, Harvard Medical School. He teaches and leads workshops internationally on mindfulness and compassion and has a private practice in Arlington, Massachusetts, USA, specializing in mindfulness and compassion-based psychotherapy.

Candy Gunther Brown, PhD (Harvard University, 2000) is Professor of Religious Studies at Indiana University. Brown is author of *The Word in the World: Evangelical Writing, Publishing, and Reading in America, 1789–1880* (University of North Carolina Press, 2004); *Testing Prayer: Science and Healing* (Harvard University Press, 2012); and *The Healing Gods: Complementary and Alternative Medicine in Christian America* (Oxford University Press, 2013). She is editor of *Global Pentecostal and Charismatic Healing* (Oxford University Press, 2011) and co-editor (with Mark Silk) of *The Future of Evangelicalism in America* (Columbia University Press, 2016). Her current book project is tentatively titled: “Secular AND Religious: Yoga and Mindfulness in Public Schools, and the Re-Establishment of Religion in America.”

Patricia A. (Tish) Jennings, MEd, PhD is an [Associate Professor of Education at the Curry School of Education at the University of Virginia](#). She is an internationally recognized leader in the fields of social and emotional learning and mindfulness in education. Dr. Jennings led the team that developed [CARE for Teachers](#), a mindfulness-based professional development program shown to significantly improve teacher well-being, emotional supportiveness, and sensitivity and classroom productivity in the largest randomized controlled trial of a mindfulness-based intervention designed specifically to address teacher occupational stress. She is the author of *Mindfulness for Teachers: Simple Skills for Peace and Productivity in the Classroom*.

James N. Kirby, PhD is a Lecturer at the School of Psychology at the University of Queensland. James is a practicing compassion-focused therapist and evaluates the impact of compassion-based interventions. He has published over 30 peer-reviewed journal articles and has presented at international conferences on his compassion research. James worked at the Center for Compassion and Altruism Research and Education at Stanford University as a Research Fellow to Dr. James R. Doty. He is also the co-founder of the Compassionate Initiative at the University of Queensland.

Michael Krasner, MD, FACP is a Professor of Clinical Medicine at the University of Rochester School of Medicine and Dentistry, practices internal medicine, and has taught mindfulness-based interventions to patients, medical students, and health professionals for over 16 years, with over 2200 participants and 800 health

professionals. He is engaged in several research projects including investigations of mindfulness on the immune system in the elderly, chronic psoriasis, and medical student stress and well-being. He was the project director of *Mindful Communication: Bringing Intention, Attention, and Reflection to Clinical Practice*, sponsored by New York Chapter of ACP and reported in *JAMA* in September, 2009.

Patricia Lück, MD, MA is a Palliative Care Physician, Certified MBSR Teacher, and Medical Educator. She worked for many years in palliative medicine in South Africa before moving to London, UK. She is a faculty member for the Mindfulness Certificate Program at the University of Stellenbosch Medical School, South Africa, as well as the Mindful Practice program in the Division of Medical Humanities at the University of Rochester School of Medicine. Her interest is in growing clinician capacity, a necessary component of heartfulness and deep listening within medicine in order to be present to the diversity of human suffering within a variety of complex settings.

Donald McCown, PhD is Associate Professor of Health and Co-Director of the Center for Contemplative Studies at West Chester University. Over the past two decades, he has taught mindfulness-based programs at Thomas Jefferson University, Won Institute of Graduate Studies, and in the postgraduate program in Family Therapy at Council for Relationships. He is primary author of *Teaching Mindfulness: A practical guide for clinicians and educators* and *New World Mindfulness: From the Founding Fathers, Emerson, and Thoreau to Your Personal Practice*; author of *The Ethical Space of the Mindfulness-Based Interventions*, and primary editor of *Resources for Teaching Mindfulness: An International Handbook*.

Pittman McGehee, PhD is a licensed psychologist in private practice in Austin, Texas. He received his doctorate from the University of Texas, Austin, focusing his research on the connection between psychological health and the concepts of mindfulness and self-compassion. In addition to his private practice, Dr. McGehee is a certified Mindful Self-Compassion teacher and teacher-trainer, is currently adjunct faculty at Seton Cove Spirituality Center, Austin, Texas, as well as teaching faculty in the Department of Educational Psychology at the University of Texas, Austin.

Lynette M. Monteiro, PhD is a psychologist, Clinical Professor (University of Ottawa), and co-founder of the Ottawa Mindfulness Clinic. Co-developer of Mindfulness-Based Symptom Management, she facilitates pain management and military-focused Operational Stress Injury programs. She coauthored the book, *Mindfulness Starts Here* (Friesen Press, 2013), journal articles in *Mindfulness* and *International Journal of Psychotherapy* on ethics in traditional and contemporary mindfulness, and contributed a chapter to *Buddhist Foundations of Mindfulness* (Springer, 2015). In private practice, she treats military and veterans experiencing PTSD and conducts personnel selection for police and military services. She is Director of Training at the Ottawa Mindfulness Clinic.

Frank Musten, PhD is a clinical psychologist in private practice and Director of Programs at the Ottawa Mindfulness Clinic. His work in applied organizational behavioral research began with the Canadian Armed Forces and then with the Royal Canadian Mounted Police at the Canadian Police College. His private practice primarily focusses on work stress and person-organization fit. In 2003, he co-founded the Ottawa Mindfulness Clinic where he and other clinic teachers have developed mindfulness-based interventions designed to foster burnout resilience as well as promote well-being among engaged high performers in various organizational contexts. He is the coauthor of *Mindfulness Starts Here* (Friesen Press, 2013) and several articles in the popular press and peer-reviewed journals.

Laura M. Nagy is a PhD candidate in clinical psychology at the University of Kentucky. Her research interests include mindfulness, borderline personality disorder, self-criticism, and rumination and her clinical work focuses on using mindfulness-based interventions.

Kristin Neff, PhD is currently an Associate Professor of Educational Psychology at the University of Texas at Austin. She is a pioneer in the field of self-compassion research, conducting the first empirical studies on self-compassion over a decade ago. In addition to writing numerous academic articles and book chapters on the topic, she is the author of the book “*Self-Compassion: The Proven Power of Being Kind to Yourself*,” released by William Morrow. In conjunction with her colleague Dr. Chris Germer, she has developed an empirically supported eight-week training program called Mindful Self-Compassion, and offers workshops on self-compassion worldwide.

Stanley R. Steindl, PhD is a clinical psychologist in private practice at Psychology Consultants Pty Ltd, Brisbane, Australia, as well as an adjunct associate professor at the School of Psychology, the University of Queensland, Brisbane, Australia. He is a researcher and teacher in compassion and compassion-based interventions, and in 2014 he established the UQ Compassion Symposium, an annual conference aimed at promoting compassion in society.

Chapter 1

Introduction: A New Hope

Donald McCown

How Shall I Begin?

This chapter starts in the first person, so that I am assuming responsibility for all nuances of expression. It starts from a question that is not merely academic, but also engages the well-being of the community of mindfulness-based practitioners. And it starts at the very beginning of ethical thought in the West, with Aristotle as a foundation of science and poetics—and the tension between them.

I'm writing here to satisfy my own curiosity, in hope that readers, particularly members of the mindfulness-based practitioner community, are curious, as well. In 2010, I became interested in the ethics of mindfulness-based programs (MBPs), and determined to make it the subject of my dissertation (McCown, 2013). When I spoke with colleagues then, I was mostly met with puzzled reactions, such as “Why are you thinking about that?” or some variant of “That’s inherent in what we do.” The implication was always that there were more pressing theoretical challenges, such as coming to clarity on a definition of mindfulness or ensuring quality in teacher training.

The mindfulness-based programs community seemed insulated against if not isolated from direct confrontation with ethical critiques, as year to year the empirical evidence mounted, and interest in and adoption of mindfulness continued to blossom, both inside and outside the therapeutic intervention context, and both with and without informed understanding (that definition problem!). By January of 2014, *Time* magazine’s cover was announcing the “Mindfulness Revolution.” The illustration on the cover was reflective of the less-informed manifestations in the culture, rather than of the MBPs on the ground. Not coincidentally, a backlash was

D. McCown, PhD, MAMS, MSS, LSW (✉)
Center for Contemplative Studies, West Chester University of Pennsylvania,
Sturzebecker Health Sciences Center, #312, West Chester, PA 19383, USA
e-mail: DMcCown@wcupa.edu

taking hold in parallel to this growth in popularity. The neologism “McMindfulness” for the often less-informed approaches to mindfulness, particularly in the corporate world, rapidly achieved currency through a *Huffington Post* blog entry (Purser & Loy, 2013).

This line of critique arose mostly within the Western Buddhist community, focused on a fear that mindfulness, presented as a “secularized” version of a Buddhist practice, is thereby unmoored from its ethical anchors in traditional and religious context, and available for exploitative and unethical applications. A central, politically tinged argument is that mindfulness training may be aimed to make corporate employees both more productive and more docile, while the image of the “mindful sniper” is a potent rhetorical device for incongruent applications of what may be considered an originally spiritual practice. The tone and temper of this criticism has ranged from sincere to withering, with Anne Harrington and John Dunne noting that, “The scorn evident in some of the criticisms is quite stunning” (2015, p. 662). A mere 4 years later, we can view this counter-blossoming of mindfulness through the lens of popular opinion by returning to *Time* magazine and the headline, “How we ruined mindfulness,” introducing an article replete with sniper fears (Krznicar, 2017).

Certainly, this 4-year slice of the popular history of mindfulness offers range for broad political, sociological, and other forms of interpretation. This is not my interest here. I am concerned with the much smaller community of the mindfulness-based programs, where critique also arose—in *Mindfulness*, its “journal of record”—beginning with a chapter by the editors of this volume (Monteiro, Musten, & Compson, 2015) and including, for example, contending views from Theravada Buddhist clergy (Amaro, 2015), academic and clinical psychology (Baer, 2015; Grossman, 2015), religious studies (Lindahl, 2015), and management (as well as Zen clergy) (Purser, 2015).

This was a rich and varied colloquy, opening avenues to be pursued further. The present volume begins this pursuit, bringing together theoretical and practical considerations of the ethics *of* and ethics *in* mindfulness—to use the convenient distinction employed by Lynette Monteiro (2017). In the *of* category, the questions surrounding the tensions of secular versus spiritual framings of mindfulness loom large, including the appropriateness of applying mindfulness—as a spiritually derived practice—with secular populations. I recommend to the reader Jane Compson’s insightful and inspiring Chap. 2 for grounding, and the succeeding chapters in Part One for valuable meditations on such issues from different disciplines. The *in* category ultimately reflects the strength and flexibility of the mindfulness-based practitioners who work from the community resources of scientific evidence, curriculum offerings, and pedagogical insights that have been shared within the MBPs across four decades. The questions here surround the place of ethics in the development and delivery of mindfulness-based programs—questions sensitively elaborated in Lynette Monteiro’s Chap. 6 and Frank Musten’s Chap. 13. The further chapters reflect the often-hidden glory of the MBP community—that is, the creativity and care taken in theory, curriculum, and pedagogy for programs that meet an ever-expanding range of participants where they are.

Toward a Productive Question

Conditions in the MBP community when the current ethical dialogue arose were perhaps different than in the broader culture, and motivations and intentions of the ethical critique might be seen as different, as well. It is the specific situation of the community in this “ethical moment,” and its response, that interest me in this essay. The question that I began to form was: Why this sudden eruption of ethical debate? Yes, of course, there was critique outside the community, but this was not directly targeted toward clinical applications, and, after all, leaders of the MBP community drew strong distinctions—for example, Jon Kabat-Zinn announced directly in an interview, “This is not McMindfulness by any stretch of the imagination” (Shonin 2016)—and held to the line that the MBPs have always had a strong implicit and embodied ethic (Crane, Brewer, et al., 2016).

It was not as if the MBP community had been rocked by financial or sexual scandals and needed to concentrate its thinking and resources on ethical reform in order to recover. This actually was the case in many American Buddhist and Hindu practice communities in the 1980s. Consider three high-profile cases:

1. Richard Baker Roshi inherited the leadership of the San Francisco Zen Center and its associated businesses from Suzuki Roshi at the latter’s death in 1971. In an austere community, Baker spent hundreds of thousands of dollars on personal expenses, and, among many other infidelities, had carried on a brazen affair with a student—the wife of a close friend and major donor. Finally, in 1983, the board pressed him to take an extended (ultimately infinite) leave of absence (Downing, 2001). Perhaps most distressing in trying to understand the situation is that even 10 years later Baker was both unreflective and unrepentant, stating “It is as hard to say what I have learned as it is to say what happened” (Bell, 2002, p. 236).
2. Osel Tenzin, Vajra Regent of the Shambhala organization and successor to its founder Chogyam Trungpa, was revealed in 1988 to be HIV-positive, and, although aware of his condition, to have continued his long practice of unprotected sex with male and female members of the organization. It further came to light that board members had been aware of his HIV status and had kept silent. On the advice of a senior Tibetan teacher, Tenzin went into retreat, and died soon after (Bell, 2002).
3. Asian Theravada teacher, Anagarika Munindra, teaching an Insight Meditation Society retreat, had sex with a participant—a woman who had been psychologically troubled, and now was further traumatized. While IMS guiding teachers were divided on approach, Kornfield pushed for complete disclosure and an immediate confronting of Munindra, noting, “If parts of one’s life are quite unexamined—which was true for all of us—and something like this comes up about a revered teacher, it throws everything you’ve been doing for years into doubt. It’s threatening to the whole scene” (Schwartz, 1995, p. 334).

These are simply examples. By 1988, Kornfield would write, “Already upheavals over teacher behavior and abuse have occurred at dozens (if not the majority) of the

major Buddhist and Hindu centers in America” (quoted in Bell, 2002). As the communities, directly affected and otherwise, coped with the aftermath of the scandals, they came to a new maturity—backing away from charismatic leadership into more distributed and democratic models, and adopting formal ethics statements and policies.

As these scandals arose and faded, MBSR was establishing itself. It is interesting to me that any mention of this time period or such incidents is missing from the detailed recounting of the history of the clinical application of meditation through which Harrington and Dunne (2015) attempt to understand the current arising of the “ethics” debate for the MBP community. Yet, there was certainly impetus and opportunity for the MBSR community to think through questions of ethics of this kind.

So, in considering my question, there is no current moral stain on the escutcheon of the MBPs to parallel the narratives above. As drivers for ethical thinking, any historical issues have been lost to memory, suppressed, or ignored. Still, a debate goes on inside the MBP community, under the banner of ethics. My question begins to sharpen: Why choose ethics as the category of critical thought? The questions about ethics *of* mindfulness might be included in the long-standing quandary about the definition of mindfulness and its relationship to secular or sacred derivations and framings (e.g., Brown, Ryan, Loverich, Biegel, & West, 2011; Grossman, 2011; Hölzel et al., 2011; Sauer, Lynch, Walach, & Kohls, 2011). The *in* questions, likewise, already have a pride of place in the community’s dialogues, particularly around ensuring quality in curriculum development and teacher training (e.g., Crane, Soulsby, Kuyken, Williams, & Eames, 2016; Cullen, 2011; Grossman, 2010; Kabat-Zinn, 2011; Santorelli, Goddard, Kabat-Zinn, Kesper-Grossman, & Reibel, 2011).

Why not maintain the continuity of these ongoing dialogues? Why hang a new banner if there is room under the old ones? In fact, the definition debate has been the site of a rare opening beyond the insularity of the science-driven MBPs, inviting voices from outside the community and beyond scientific disciplines (Williams & Kabat-Zinn, 2011, and the entire special issue of *Contemporary Buddhism* they introduce). Another case in point is the distinction now being made between “second-generation” mindfulness-based interventions, which explicitly reference Buddhist forms of mindfulness and worldview in their curriculum and pedagogy, and the first-generation, which is presented as secular (Van Gordon, Shonin, & Griffiths, 2015; Crane, Brewer et al., 2016). This distinction is made within the dialogues both on the definition of mindfulness and assurance of quality in curricula and teachers, rather than being framed in ethical terms. Even the strong charges by Candy Gunther Brown in Chap. 3 about the ethical ramifications of the duplicity of the (first-generation) MBPs showing a secular face to participants while heavily relying on Buddhist thought and practice behind the scenes might as easily be located within these already established dialogues. No thinker’s answers or positions are concrete or correct; all of these questions should be open for further exploration.

I am puzzled yet again, although my question is very much sharper: What *else* is going on in the choice of ethics as the banner for dissent? Yes, that’s it, precisely. I’d like to suggest that ethics is a repository for disappointment and frustration within the MBP community. Or, perhaps it’s a yearning to have more intellectual space in

which to explore, with different kinds of attention. Ultimately, it may be that the dialogue around ethics is a forum in which to keep the MBPs together—if not exactly unified—in a time of dramatic growth, transition, and potential fragmentation. To make this sensible, however, may require a different starting point.

Shall I Begin Again?

Let's run all the way back, past even Aristotle and *ethics*, to the *Iliad* and a metaphor employing the Greek root *ethos*. Describing Paris running through the halls of Troy to join his brother Hector in battle against the Greeks, Homer likens him to a stallion freed from the stable and racing toward his herd in the pasture, using for that destination the word *ethos*, meaning the place where an animal belongs with others and will thrive (Baracchi, 2008). For Aristotle,¹ when thinking about the ethical, place and time come together in a particular situation where the individual and community might flourish, if the appropriate actions are taken. The ethical is what a community disposed toward the good does in a specific space and time—a present moment (Baracchi, 2008). Perhaps there is something here for our shared (I hope!) curiosity.

Following Aristotle's conception, ethics as a category of philosophy is by necessity extremely imprecise. John D. Caputo (2003) notes that "Ethics stands alone among the sciences or disciplines by announcing right at the start that it is not possible as a science or, if you prefer, that its possibility is co-constituted by a certain impossibility" (pp. 169–170). This is because the ethical investigation is focused on the fullness of a situation among people gathered in community. Its subject is what is emerging within a web of relationships in the present moment. Aristotle uses the term *poiesis* in his descriptions, so we must understand the moment as a situation emerging through a process of artful creation (Baracchi, 2008). That is, the ethical situation emerges differently in each moment and is difficult to comprehend completely.

When people of virtuous character are gathered in the emerging moment, we may hope that what they are doing—what they create—is beautiful and just. For these ethical constructions, Aristotle favors the metaphor of the products of arts and

¹The fact that the MBPs are often presented as derived from Buddhist thought and practice suggests to many that we may look there for ethical discussions. However, the distinction of the moral versus the ethical complicates such an undertaking. Denotation of both words centers on appropriate behavior; however, the moral bears connotations of action in the workaday world, while the ethical connotes philosophical description and analysis of those actions. Western thinkers such as Plato and Aristotle write extensively about ethics, politics, and justice, yet scholars have not found Buddhist equivalents to the *Republic* or the *Nicomachean Ethics*. While Buddhism is one of the most moral of all the world's religions, technically, it may be described as lacking an ethics. The historical Buddha solved the fundamental problem of defining the good life and how to live it, and in his teachings detailed the "how to" of such a life. His followers simply had to live it, not reflect on it. Buddhism's essential pragmatism may account for the mismatch of categories with Western philosophy (Keown 1992, 2006). Mindful of this fact, my discussion proceeds with Western ethical conceptions.

crafts, which are handmade and never repeatable, yet each is bearing the potential to shine out with beauty (and justice) for all. This includes the idea that our understanding of a situation is an artifact in which we have captured something of the moment, and that can be saved for later—it is an artwork or, maybe better, a text, that can be reflected upon and shared in other times and places (Baracchi, 2008). It becomes possible, then, to see how the value of developing one's character, of coming to possess the virtues, does not ultimately lie in individual improvement, but, rather, in the flourishing of the *polis*—the community.

In this very brief description of the beginning of ethical thinking, I trust that I am making available some useful ideas for our current situation within the community of the MBPs. Now, as the main burden of this chapter begins to unfold, I'll be drawing on the essential *imprecision* of ethical thought as motivating and shaping the present discourse from which this entire volume springs. I'll be considering virtues and their cultivation from the perspective of their potential within a community, rather than their isolated value to an individual. And I'll center my own descriptions and conjectures in the *poiesis*, the formation, the making, indeed, the poetics of situations in particular places and times—pointing specifically to the MBP classroom, wherever it is to be found.

How Can the MBPs Go On?

As I've suggested, it is certainly possible to locate the bulk of the internal critique of the MBPs within longstanding categories of dialogue, such as the definition of mindfulness, and assurance of quality for curricula and teacher development. However, these critiques are quite often being engaged under the more provocative banner of ethics. To understand why, I believe we must particularly consider the imprecision, the poetic ambiguity of ethical investigation. It stands in direct opposition to the entire trajectory of the MBPs toward the current height of their popularity within health care and mental health care.

Inarguably, the nearly four-decade-long project of amassing an empirical evidence base for the MBPs has been central to their dramatic growth. Inevitably, the nature of the research conducted has recursively shaped the interventions, focused as it is on individual outcomes as measured by self-reported quantitative psychological tests, physiological measurements, and neuroscience imaging. Such an approach locates any pathology and any potential relief inside the patient's mind (or even more intense, the patient's brain). Individualistic and reductionistic assumptions are rampant. The typical becomes a substitute for the actual, and fails to add thickness to our understanding of the embodied experience of the intervention. The vast bulk of the data generated in the MBPs has therefore not been useful in ongoing development of the pedagogy, which relies on complex, poetic (to use our new designation) understandings of the moment of teaching in the community of the classroom. Rather, tending to the requirements of randomized controlled trials has tended to calcify curricula and restrict the options of the teacher in the service of ever more "reliable" data. Although there may be the beginning of a trend toward the use of

mixed methods to include qualitative data in larger studies, any such shift is concurrent with the ethical critique, and, in fact, might be interpreted as a response to it.

Opposition to the constriction of certain lines of thought and practice may be, then, what is behind the raising of ethics as the banner for critique. After all, ethics, as Aristotle describes it, is the most imprecise of the sciences, the least amenable to typical means of empirical investigation. Invoking it is a symbolic and concrete protest. As the disappointments of the hegemony of the scientific disciplines become more difficult for some MBP community members to bear, the new possibilities of ethical discourse offer consolation—and new opportunities. Ethics directs attention to the actions of the gathered community in the present moment, where we are better served by a poetic, as compared to a scientific, approach. Here, teachers and researchers can find more “elbow room” for their work; indeed, with the ethical critique, they might be seen as “elbowing a way in” to a space perceived to be closing down.

Ethical critique within the milieu of the MBPs opens new avenues of investigation—from wider theoretical reflections using resources as diverse as Buddhist conceptions of compassion and contemporary feminist care ethics, to creative adaptations of mindfulness-based curricula and pedagogy that accommodate revised views of the relationships and values vital to working successfully with an expanding range of participants. The present volume is representative of this poetic direction and the creative energy behind it. Many of the chapters are approached with sensitivity to the particular situation that is being engaged, such as the needs of medical practitioners in Chap. 5, business professionals in Chap. 14, or military personnel in Chap. 15. Many chapters go further, engaging the creative tasks of actually writing the poems, so to speak—specifying curricula and pedagogical approaches to mindfulness in health care and mental health care, such as Mindfulness-integrated Cognitive Behavior Therapy in Chap. 7, Mindfulness-Based Symptom Management in Chap. 8, and Mindful Self-Compassion in Chap. 11, as well as the CARE program for teachers in Chap. 9, culminating in explorations of compassion (Chap. 10) and self-compassion (Chap. 11).

Within these chapters—further, within the creative actions of MBP participants and teachers in their places in the moment in classes the world over—we may find a way forward that offers countermoves to individualism and reductionism. We may even find that the critical chorus singing under the banner of ethics offers a promise to keep the whole community of the MBPs together.

Pedagogical Discourse of the MBPs

Although their discourse has been subordinated to the overarching scientific discourse of the MBPs over the decades, teachers have a contrasting way of talking about what happens in the classroom with the participants, which colleagues and I have remarked upon and elaborated over many years (McCown, 2013, 2016; McCown, Reibel, & Micozzi, 2010; McCown & Wiley, 2008, 2009). With not too much reflection, it becomes evident that the MBPs, as group-based interventions, are complex situations in which networks of relationships develop from session to

session as the course progresses, in both the long stretches of silence and the interactive events of the curriculum.

With colleagues, I have also suggested that the discourse of MBP pedagogy fits very well with a social constructionist approach that reflects a radical interdependence of participants and teachers (Gergen, 2009, 2015; McCown et al., 2010). This approach differs in intensity from the relational understandings applied by others involved in pedagogical theory (Crane, Kuyken, Hastings, Rothwell, & Williams, 2010; Crane, Brewer, et al., 2016). These thinkers maintain the received individualistic view of participants, and grant the teacher a superior position from which to act on the class. More radically, our thinking proceeds from a view of the class as a “confluence” (Gergen, 2009) in which actions of participants are not structured by cause and effect, but rather are continually self-defining. That is, we do not posit a group of discrete participants and teachers who take actions based on directives (however gentle), but rather we see a confluence that continually co-creates its actions and dispositions from moment to moment. This is much like the creative actions of the community of Aristotle’s description—drawing us toward a poetics of the MBPs, and, with an expanded attention, perhaps toward a poetics of the MBP community itself. Monteiro and Musten, in the present volume, describe this poetics quite clearly in the context of their “second-generation” MBP, Mindfulness-Based Symptom Management (MBSM):

...MBSM is far from—and likely never will become—an intervention that is fixed and manualized. The essential truth is that nothing is permanent and everything is in constant state of change; it is both a spiritual claim of Buddhism and of physical science. But there is also a more immediate reason for the constant state of change: every program we offer is new simply because all those who come together are doing so for the very first time. In the space that each program is conducted, everything is happening for the first time. Even as teachers who have walked into that room hundreds of times over the years, we too are new because the relationship with everyone there creates us anew (p. XX).

The focus on ethics as a category of thought may be moving our thinking around or pushing it past the unreflective individualism and reductionism of the scientific focus of the MBPs. Therefore, it may be valuable to sketch—poetically, and with ample room for revisions—what the opposites of individualism and reductionism may look like in practice. In what follows, I am suggesting that on the other side of individualism we will find a healthy community that has been there all along, and that on the other side of reductionism we’ll find a rich diversity of participants and their contributions to the moment-to-moment life of the community. It may even happen that, just as Aristotle, I cannot resist proposing some very *uncertain* principles that may be of general use in our ethical thinking.

Community, Strong and Weak

An MBP class is a confluence dedicated to the pedagogy of mindfulness. The community is learning and changing as it moves from formal meditation practices to mindful dialogue about the practice to structured engagement with material in

specific curricular modules. Participants (I use the word because we don't really have the language to describe persons as *integrated parts* of a confluence) partake of the pedagogy actively or passively, by participating or observing, by speaking to others or remaining silent—they are all affected. Humans are sensitive creatures that “cannot not respond” to the activity around them (Shotter, 2011). In whatever mode they choose for participation, they are connected within the confluence—the ongoing dialogue is part of them as they are part of it. Gergen (2009) notes that what we call thinking may be recast as “unfinished dialogue,” so even our “inner self” can be seen as part of the outer confluence. Here we might come back to the idea mentioned above of experience as forming artworks or texts, where such texts—acknowledged in words or actions—become available to all and are generative of further texts, finished or unfinished, that nurture the confluence (McCown & Billington, under review).

An MBP class is, thus, a small community that develops a capacity to generate mindfulness, and to know how to go on together from moment to moment. It has a poetics, and, in fact, it has an ethics as well. Gergen (2009, 2011) describes that the shared meanings and values established through the actions of the confluence define the “good” for the group's life. When such a “first order morality” is present—even if it has never come into direct speech—it governs the sense-making of the group. To transgress it would place one outside the bounds of shared meaning. A simple example is that a participant would be extremely unlikely to sing (out loud!) during a silent sitting meditation—because it would make no sense to do so.

With such thinking, we move away from individualism, in which each participant is a self-contained agent who consults knowledge located “inside” him- or herself to decide how to go on in the group. Rather, within a confluence, knowledge of how to go on together is more sensibly seen as located in the group itself—it is community knowledge. We are certainly relational creatures, and are capable of being in different and possibly even competing confluences. Gergen's description (2009) is that we are “multi-beings” made up of ways of going on that have been instilled by experiences in many different confluences. That which has been instilled is available to us in not only within the originating confluences, but also in others as it is appropriate.

Seemingly, then, holding a confluence together requires bonding of the group, so that incongruous ways of going on do not arise and introduce “nonsense.” It may be that a strong community is what is needed to accomplish what seems to be tight control. The first-order morality of an organized crime family, for example, will be powerful, and deviation will be dramatically discouraged. This example also suggests that such a strong community may also choose to impose its will on others that are outside its bounds of sense-making. Clearly, a strong community may be a danger to dissenters within and anyone outside. Nevertheless, bringing a community together can have significant value, as suggested by our example of the MBP classroom.

Is it possible to bond a class tightly into a *weak* community? Is it possible to be both close and safe? Let's consider the actions that bond groups of any type, and then compare and contrast with the pedagogical actions of the MBPs.

For Gergen (2009), three mechanisms are involved in the bonding of any confluence—negotiation, narrative, and enchantment. In the context of the MBPs, all are important, and all must be seen in a particular view—as in a poetics.

Negotiation is the “co-creation of shared realities, and the comfort, reliability, and trust that accompany them” (Gergen, 2009, p. 175). This idea moves straightforwardly into MBP pedagogical thinking. In learning to produce moments of mindfulness together, participants find out how they can turn toward their experience in the present moment and find a way to be both with and in it in a non-judgmental, or, better, a friendly way. Within the setting and actions of the confluence, they are offered freedom to choose how they will respond in each moment. They are impressed with the need for confidentiality, which offers a feeling of safety in the confluence. There is also a high likelihood of positive physiological reinforcement through the early practices; consider the body scan and the relaxation (or sleep!) that often arrives as a side effect of doing it. Through actions of the pedagogy, participants quickly find that they share a common purpose, often feel more relaxed than when outside the class, and know that the actions in the classroom will unfold sensibly.

Narrative, the second mechanism of bonding, is specifically related to changing a story about “me” into a story of “we.” In an ongoing relationship, the individual is invited to soften self-boundaries and instead identify with, or become, the relationship. To say, for example, “in our school we do it this way,” or “on our team we always...” involves this kind of narrative. There are, of course, stories that are told within particular confluences to illustrate its special characteristics; Gergen refers to these as “unification myths” (2009, p. 177). The telling of such stories actually prompts actions that are congruent, and that bring the myths into reality. In the MBPs this happens through another kind of text—not a story but a lyric poem, a song, as it were. Through mindfulness pedagogy, participants actually step out of their stories and into the experience of the present moment. Thus, the confluence generates texts of present moment experiences that they share; there is not a storyline, but instead a collection of poems: “Songs from Our Group.” This is the burden of the practice of the pedagogy.

While Gergen’s description of narrative as a mechanism of bonding highlights the duration of being together—the longer the time, the better the bonding—the MBP view highlights individual moments. We might even see this through the ancient Greek distinction of *chronos*, for sequential, horizontal time, and *kairos*, for vertical time—the moment of opportunity, of significance. So, the group experience of *kairos* in abundance, as it were, may promote bonding, as a lyrical substitute for the long togetherness of a story.

Enchantment is Gergen’s third, critical mechanism (2009), through which the confluence takes on a “sense of transcendent importance” (p. 179). The sense is generated especially strongly through language, ritual, and emotion. Let’s look at each, within a typical group such as a team, and then see how it might also be applied to descriptions of MBP pedagogy.

Shared words that are performed as oaths, songs, or cheers, or are treated with gravitas, as in founding documents or ongoing records, bring any group together. In an MBP class, which spends much time in silence, we might weight non-verbal expression heavily in lieu of language. How participants hold themselves—posture, attitude, expression, maybe even eye contact—particularly in the moments after practice or while witnessing a moving inquiry dialogue between a classmate and the teacher truly speaks volumes. Messages about group cohesion, caring, and support come through.

Likewise, rituals reinforce the group's meaning to its members—for any group, think of anniversaries, commemorations, even happy hours. In an MBP class, think of meditation practice to start and end, maybe with a ringing bell—participants are called together as a “we” assembled in time. It happens in space as well, when the class is scattered to dyads or small groups for an activity, and then all are called back. Enacted again and again, the meaning arises that we can't go on until we are gathered together.

Emotional expressions at transitions—from simple moments of meeting and parting, to emergent moments of welcoming the new and mourning losses—are displays of commitment to group life and, perhaps, to something beyond. In the MBPs, these socially constructed forms of emotion may certainly take place, yet there is also something more subtle, a feeling tone that seems generated by the facts of being together. Although Gergen eschews physiological description, Steven Porges's (2011) polyvagal theory nevertheless may help in understanding the subtlety here. Porges's theory is based on the evolution of the autonomic nervous system in mammals—particularly the vagus nerves. Mammals adapt to life-threatening situations by “freezing,” to challenging situations with “fight or flight,” and (here's the new idea) to situations of safety with what Porges calls *social engagement*. In a situation in which others are calm and regulated (as in a class after meditation) and we feel safe, the new vagus nerve slows our heart rate, inhibits fight or flight, and prepares us for optimal sharing with others. Our eyes open wider, inner ears tune to the human voice, face and neck muscles gain tone to make subtle expressions and gestures, and muscles of speech gain tone for better articulation. Perhaps a key to the subtle emotion here is the associated release of oxytocin—the bonding hormone. Maybe the feeling is like coming home.

For a fuller understanding, Robert Frost provides two definitions of “home” through two different characters in his poem, “The Death of a Hired Man.” For full effect and understanding, the reader must hold both definitions simultaneously—one follows quickly on the other. First definition: “Home is the place where, when you have to go there, / They have to take you in.” The second does not correct this, but adds to it: “I should have called it/ Something you somehow haven't to deserve.”

So, as we allow the critical discourse of ethics to call attention to the poetics of the MBPs, the individualistic view of the science begins to fade, and what comes into focus is a bonded community. The community created through the pedagogy of the MBPs holds a healthy tension. Its bonding is strong enough to offer the sense of home, yet weak enough not to threaten those who dissent from inside—or who live outside.

Virtues in Community

To understand the healthy tension of MBP classroom communities, we need to view the pedagogy in the widest and most generous way possible. In each class, teacher and participants are learning together how it is possible for them to turn toward to be with and in the experience that is arising in the present moment. There are as many routes to this outcome as there are courses given. The actions within every classroom confluence are entirely contingent on its composition and its location. Each is rich and varied. None are alike. All are shaped by what we are calling poetics. In other words, the pedagogical process is not rote or conceptual learning, but rather is a co-creation of the participants in the moment. The “take away” is not information or knowledge. Instead, it is know-how—a capacity of the confluence that when called for is available as part of the “multi-beings” of participants.

The possible responses of the MBP class to actions of the pedagogy are infinite. As Aristotle states, there are no very useful ways of accounting for a specific choice of actions by applying principles or premises. The same is true for the unfolding of emerging classroom situations. Principles would be at best “navigational instruments” to steer the ship away from the rocks, while what truly matters is the disposition or posture of the participants, as a confluence. When the group is disposed toward the good, the response will promote the good. We are talking here about virtues. The reductionist cast of mind (including Aristotle’s) would locate virtues inside individuals, but we are critiquing such moves. What will we find if we locate virtues—the dispositions that produce the good—in the confluence? The confluence itself knows how to produce the good, then, and participants who enter into other, different confluences will have those dispositions available as needed.

What then are the virtues of the confluence of an MBP class? I have previously approached this from a different perspective (McCown, 2013), while creating a model of the space that is generated by the confluence when practicing the pedagogy. To take up the perspective of the critical discourse of ethics as it exists now, I am applying insights from that model to describe three important dispositions that are part of the discourse of the MBP community, and to gesture *very generally* toward a *telos*—a goal or end, to be Aristotelian about it—that the larger MBP community might embrace.

I am proposing these dispositions as virtues that are imbued through the pedagogy of the MBPs at its best, regardless of the structure or generation of the curriculum in use. I find it intriguing that what might be called virtues in Buddhist thought are negatively constructed; that is, they are dispositions *away from* rather than toward particular forms of action. According to Richard Gombrich (2009), the Buddha’s ethical process was pragmatic—simply to fix what was broken. Given that immoral behavior is driven by the “three poisons,” which are greed, hatred, and ignorance (*raga*, *dosa*, and *moha* in Pali), the three “cardinal virtues” then become non-greed, non-hatred, and non-ignorance (*araga*, *adosa*, and *amoha*). Via this same pragmatism, central dispositions of the MBPs have arisen from the perceived inhumanity of the medical and mental health care system with its labeling of pathol-

ogies, hierarchical power structure, and instrumental interventions that ignore the whole person. These may then be expressed the non-pathologizing, non-hierarchical, and non-instrumental virtues—not of individuals, but of the confluence.

Non-pathologizing

This virtue is constantly in tension within the MBPs, as many of them have target populations defined by specific medical or diagnoses, yet insist that they see the whole person. It is certainly easiest to maintain a non-pathologizing disposition within a program open to a heterogeneous population, such as mindfulness-based stress reduction, in which participants from all walks of life, with almost any medical and/or psychological diagnosis, or none at all, may come together as a confluence. In considering this disposition of non-pathologizing, Jon Kabat-Zinn (2011) describes how

it can be felt in the way the instructor relates to the participants and to the entire enterprise. Although our patients all come with various problems, diagnoses, and ailments, we make every effort to apprehend their intrinsic wholeness. We often say that from our perspective, as long as you are breathing, there is more ‘right’ with you than ‘wrong’ with you, no matter what is wrong. In this process, we make every effort to treat each participant as a whole human being rather than as a patient, or a diagnosis, or someone having a problem that needs fixing (p. 292).

Although this description comes from a perspective that valorizes the teacher and discounts the other participants, it does clearly suggest that no one needs to carry their specific diagnosis into the class. The nature of the group undercuts the power of diagnostic discourses—whether of medical conditions or psychiatric disorders. As Saki Santorelli suggests:

Medicine for the past 120 years has really developed tremendous acumen for the differential diagnosis. We give a single diagnosis and then we develop a single treatment modality to meet that diagnostic condition. In the Stress Reduction Clinic, we have done it the other way around. We’ve said that instead of making the groups homogenous, we will make them heterogeneous. Why? If people participate for the same reason—say heart disease—well, that’s what they have in common and where conversation will naturally gravitate. Sometimes this can be very useful, sometimes not. Conversely, if you have people in the room for 25 different reasons, their common ground becomes the work of developing their inner resources in service of whatever ails them. (quoted in Horrigan, 2007, p. 142)

The non-pathologizing disposition re-creates the participants, replacing their limited diagnostic identities with unlimited possibilities. In effect, all participants carry the same diagnosis—the “stress” or suffering of the human condition that everyone shares. They do not attend class with the intention to remove something unwanted from their experiences, but rather are there to learn to live their lives, as they are, to the fullest.

Also, non-pathologizing counters the tendency of participants to put themselves under surveillance—to subjectify themselves to their diagnosis, as Foucault (1995)

would put it. That is, a discipline, such as psychiatry or clinical psychology, establishes power through its discourse, its system of knowledge, which in science means a system of classifications. The categories of the Diagnostic and Statistical Manual (DSM) illustrate this well. The use of the DSM as expert knowledge exerts power over your life and identity. When you allow experts to observe, examine, and classify you, you are labeled nearly indelibly. You are made a subject of the power of a discipline—you are subjectified. It is difficult to escape such power. You don't have the power of expertise or social position to reject or overturn your diagnosis—it can follow you forever. Once depressed, for example, once you've been diagnosed as depressed, you are “a depressive” even when you are laughing, even when you've been happy for years. You live under surveillance: How's the depression? It seems like it's lifted, but it may come back. You are never free. And you are the source of much of that surveillance, says Foucault:

He who is subjected to a field of visibility and who knows it, assumes responsibility for the constraints of power; he makes them play spontaneously upon himself; it inscribes in himself the power relation in which he simultaneously plays both roles; he becomes the principle of his own subjection. (pp. 202–203)

Foucault encourages us to resist, and so do the MBPs—if we listen. The classroom is a site of resistance, and the confluence is a counter-culture in which it is possible to identify and experience other ways of being.

Non-hierarchical

This virtue, too, can be seen as contested. Coming from a culture of expertise, participants assume that the teacher is the expert with a repository of knowledge to share with those who lack. There is much work to be done in the pedagogy to shift this view. Seating the group in a circle is a useful move that sends a non-hierarchical signal—no one is lifted up, put forward, or preferred, not even the teacher. In fact, the pedagogy directs participants toward each other in the dialogue of the gathering. From the start, teachers ask that participants speak to the whole group, not just to the teacher, and reinforce this with nonverbal cues. Another useful strategy is to have participants regularly explore dialogue in dyads and small groups. There is a non-hierarchical message in the fact that the teacher is not privy to these conversations. Such actions work toward dissolving not only the hierarchy of teacher and participant, but also of the more extroverted and less extroverted participants.

The non-hierarchical disposition can also be revealed in the language choices of the teacher—which shape the dialogue of the confluence. Kabat-Zinn (2004) identified a list of difficulties that can be introduced through verbal and non-verbal communication. The one he calls “idealizing” is important to reflect on here. It describes an approach and tone of “I know how to do this and I'm going to teach you,” when the language should propose shared exploration, as in, “Let's try this together and see what happens.”