

Mindfulness for Just About Everything
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First of all, I'd just like to say it is a real pleasure to be here. It's twenty-five years since I was last in San Francisco, and I wasn't at the Buddhist Center there on that occasion, so it is lovely to be here.

I am going to talk a bit about mindfulness and various health-related issues. The short title is: 'Mindfulness for Just About Everything' – which sums it up.

Certainly in the UK there has been a great surge of interest in mindfulness, although I suspect actually we might be a bit behind the US, because I think over here there has been a longer history of interest in mindfulness for health-related issues. In the UK it has been taken up pretty widely for stress, pain, anxiety, depression, personality disorder and addiction, and we have been running courses at our Centre in London for the last two years.

So what I want to do in this talk is have a look at this phenomenon of mindfulness and how it is applied to various health-related conditions, and particularly look at its relationship to the Buddhist tradition – where it comes out of, how it relates to the Buddhist tradition. Over the weekend (for those of you coming on the weekend) it will be much more practical. This is a much more conceptual background to mindfulness for health-related conditions, and where it comes out of the Buddhist tradition.

I am going to start with a bit of therapeutic history of meditation and Buddhism – this is not comprehensive, but I just want to draw out a few strands.

Meditation first became popular in the West in the 1960's when initially it was seen as something of a cure-all. People started doing studies in the '70s and '80s on meditation, particularly meditation with an emphasis on concentration and relaxation – particularly a lot of transcendental meditation studies. These studies showed that T.M. (transcendental meditation) was beneficial for anxiety, for high blood pressure, for cannabis addiction and for general well-being.

There were some problems, though, with these early studies. When you did a comparison it showed there actually wasn't much difference between just sitting quietly and other forms of relaxation. In other words, although there was some benefit it wasn't very specific to the meditation.

Then there was another strand which looked at the Buddhist suttas, and looked at how the Buddha behaved as a therapist. Somebody looked at how you could see him, in effect, doing behaviour therapy.

There are a couple of stories to give you examples of this. There is a story of a particular king who had a problem: his problem was that he slept a lot and he couldn't get up. Eventually it got so bad that he... well, I was going to say he went to see the Buddha but of course he couldn't go to see the Buddha because he couldn't get up!... [LAUGHTER] ...but he got the Buddha to come and see him, and the Buddha diagnosed his problem as over-eating (which of course, with the modern epidemic of obesity, is relevant today perhaps...).

What the Buddha did is he gave a little prescription for the king, which was that when he was served his food he wasn't allowed to eat the last mouthful. He was supervised by the prince, and when the prince was supervising this, just as the king was going to – you know – elbow in and get that last mouthful, the Buddha gave him a verse to remind him of why he was not to have that last mouthful.

So each day he had a little bit less food, and in time of course he became lean and healthy and had no problems with sleep, and he could get up.

Seen from a modern point of view, that would be a bit of behaviour therapy: the Buddha examined the king's behaviour, diagnosed his behavioural problem, and gave a treatment.

There's another story which is probably better known: the story of Kisa Gotami. Kisa Gotami suffered from what we might think of today as a pathological grief reaction. She was a lady who had had quite a difficult background. She became married – and in those days in India when you were married you went to the husband's family, and as a woman you were at the bottom of the pile: you were a bit of a skivvy, you were pushed about... that is, until you gave birth to a child. And, particularly if the child was a son, then your social status was raised.

So she gave birth to a son and she was very happy and of course very attached to her son. Unfortunately, when her son wasn't very old he died... one account says he was bitten by a snake... and she was grief-stricken; she just couldn't believe that this had happened to her. And she went around not believing that her baby was dead, asking people for medicine for her baby to make him well again.

Eventually someone said, 'go and see the Buddha', and the Buddha said, 'yes, I can give you medicine for your baby; the medicine is a mustard seed – however, the mustard seed must come from a house where nobody has died.'

So Kisa Gotami was very happy; she went rushing off, and she went to house after house after house... Everywhere people were very happy to give her a mustard seed, but at each house she came to an uncle had died, a daughter had died, a husband had died... somebody had died.

And eventually she realised, of course, that death happens – it's inevitable. And she realised her own son was, of course, dead – couldn't be brought back to life. And she

became a disciple of the Buddha and, according to tradition, became enlightened.

So, coming from our particular perspective, again you could see that as a behavioural experiment which, in this case, was very efficacious for Kisa Gotami understanding what was going on.

There has been a whole line of thought like this, looking at the suttas in terms of the Buddha acting like a behaviour therapist, and it has been suggested that – particularly if you are working with people from an ethnic Buddhist background – that could be quite useful.

I haven't seen anybody, though, who has applied it in another way, to Westerners – but it is an interesting line of thought.

Then another line, which is more the topic that we're looking at today, is mindfulness. Mindfulness was particularly taken up, first of all, by John Kabat-Zinn in Massachusetts. He set up a 'stress clinic', as it was called, but what he predominantly took was people with chronic pain. He took people who had pain that Western doctors couldn't do anything for any more; any sort of pain. So in a way they didn't have anything to lose by going to see Kabat-Zinn.

What he set up was an eight-week mindfulness meditation course, with some yoga exercises in it and a one-day retreat during the course of it. And what he found was that two-thirds of the people benefited from this, and, even more remarkably, four years later when they did a follow-up people were still benefiting from it, particularly if they had continued with the meditation, or even if they had continued with informal practice (which I will refer to later).

He also did work with anxiety and then later other conditions, like psoriasis, and this came to be called 'mindfulness-based stress reduction'.

So in a way Kabat-Zinn started this off, and then mindfulness started being used much more in other things; it started being used as part of other sorts of therapy. It is used in 'acceptance and commitment therapy' which is being developed by someone called Steven Hayes, in Utah (I think!), and he has found that helpful for depression and anxiety and for some other conditions. It is also being used in 'dialectical behaviour therapy' (D.B.T.) which was developed by Marsha Linehan particularly for working with people with borderline personality disorder, although it has also been adapted for use in substance use.

In these things, mindfulness is just one component of the therapy. More recently there's something called 'mindfulness-based cognitive therapy' (M.B.C.T.) which is for recurrent depression, and this is really built on Kabat-Zinn's work and is shown to be effective for people who have had more than three episodes of depression – people with recurrent depression.

In Britain, we have this thing called the 'N.I.C.E. Guidelines' from the National Institute of Clinical Excellence, which says what are the effective treatments, and recently M.B.C.T. has been put into the N.I.C.E. Guidelines for the treatment of recurrent depression.

So, that's M.B.C.T... and then there is M.B.R.P. – 'mindfulness-based relapse prevention' – which is using the same sort of stuff for preventing relapse into addictive disorders. There have been some theoretical papers written about this, and here and there people are starting to do work with it... I started running courses on it at the Centre where I teach and in the Health Service where I work as well, basically adapting the mindfulness-based cognitive therapy for addiction.

So what has come out of all this, which is just a sort of overview of Buddhism and meditation used therapeutically, is that mindfulness in particular seems to have come out as being something that is very important, or very useful, as a therapeutic tool. And it seems to be more specific than just meditation in general, which might have a calming or relaxing effect.

If we now turn to the Buddhist tradition and have a look at mindfulness there, we find that mindfulness is very important in the Buddhist tradition. You get it as one of the aspects of the Noble Eightfold Path; it is one of the Seven Factors of Enlightenment... (Buddhists like lists, as many of you I am sure will know) ...it is one of the Five Spiritual Faculties – the central one of those, that harmonises the others – and it particularly occurs in something called the *Satipatthana* Sutta, which is the central sutta that really talks a lot about mindfulness, and which I will be referring to quite a bit. Two very good commentaries came out in 2003: one by Sangharakshita called '*Living with Awareness*' (which is probably in your bookshop), and one by Bhikku Analayo, which again is a very good commentary on it (which might also be in the bookshop).

I'll just say a few words about this sutta. Quite often in Buddhist suttas you have a whole story before you get on to the main teaching, but in this one the Buddha just goes straight to the point: he gets the monks' attention, and then he says to them:

'Monks – this is the direct path for the purification of beings, for the surmounting of sorrow and lamentation, for the disappearance of pain and grief, for the attainment of the true way, for the realisation of Nirvana – namely, the Four Foundations of Mindfulness.'

Actually the Buddha is making a very big claim here. He is saying it is the 'direct way'. Other translations translate it as the 'only way', although that probably isn't correct – it's more that it takes you straight there, straight to Enlightenment, rather than being the exclusive way of getting there.

So, let's have a look at what mindfulness is. There are two main words to use to translate mindfulness, and they are used a bit synonymously but they have slightly different meanings: one is *sati* and the other is *sampajanya*.

Sati particularly refers to awareness of the present moment, or 'bare awareness' as it is sometimes talked about; but it also has the meaning of 'recollection' or 'memory'. In other words, you understand what is going on in the present partly because you are able to recollect the past, and particularly you understand the ethical significance of what you are about.

And then there is *sampajanya*, which means 'mindfulness of purpose', or clear comprehension, and this is more future-regarding – in particular it is mindfulness with respect to what you are trying to do, what your goal is (which might be to gain Enlightenment, for example).

Sometimes the two are put together – they are in the '*Satipatthana Sutta*' quite a bit as *sati-sampajanya*, which is usually translated as 'mindfulness and clear knowledge' – in other words, it is knowing what you are doing and why you are doing it. You are completely and fully and utterly present, but you also know what you are about – where you are off to – and you also deeply understand the significance of what you are doing. A very rich word.

In the suttas you get various analogies for *sati*, or mindfulness, and I'll talk you through a few of those...

One is the idea of climbing a tower. You go up this tower and you get perspective – you can see. You know, like climbing Half Dome or something like that (I was in Yosemite yesterday!). You get up really high and you can see a long way. There is also a sense of detachment inherent in that analogy as well.

Then there is the idea of 'the surgeon's probe'. The surgeon's probe is going into things to gather information, to find out, 'is that a cyst? Is that a hard tumour? What's going on there?'

Then there are a couple more to do with the idea of balance. One is 'a skilled charioteer', and one is 'carrying a bowl of oil on your head'; the idea of not spilling a drop of this perfectly full... you know... you're probably walking on a tightrope as well...
[LAUGHTER]

...Then another one is 'the gatekeeper of a town'. The idea of the gatekeeper is that they allow bona-fide citizens in but they keep out unwanted individuals – so this is the idea of guarding the mind, and having a bit of an overview of the mind.

Finally, another analogy is having wild animals tied to a strong post. This is the idea that [mindfulness] has a stabilising effect; an 'unshakeable' effect.

So there are lots of rich associations with this idea of mindfulness.

If we look at the *Satipatthana Sutta*, it covers mindfulness in four main areas usually referred to as 'Foundations', which are:

1. Body
2. Feeling (in the sense of whether something is pleasurable or unpleasurable)
3. Mental States (like anger, jealousy, love...)
4. Doctrinal Formulations (referred to as '*dhammas*' – such things as the 'Four Noble Truths')

And it covers, particularly, applying those doctrinal formulations to your mind – using them as a guide to get a sense of what is going on in your mind.

After each bit of description of these Foundations, the Buddha says this:

'In this way, in regard to the body [...or the feeling, or whichever one it is...] he abides contemplating the body internally, externally, both internally and externally. He abides contemplating the nature of arising, of passing away, of both arising and passing away in the body. Mindfulness that there is a body is established in him to the extent necessary for bare knowledge and continuous mindfulness, and he abides independent, not clinging to anything in the world. That is how, in regard to the body, he abides contemplating the body.'

...So there are quite a few little bits there, which I'll run through:

First of all, he contemplates it internally, externally, or both... so in other words, when we are practicing mindfulness we are aware of ourselves but we're also aware of other people – so we're aware 'internally' and 'externally' – and perhaps the latter is the bit that's not being explored so much in contemporary Dharmic practice.

And then the advice is to contemplate the nature of arising, passing away, and both. In other words it's looking at what brings things into being, and what leads to things going away – how come something comes into our experience? How come it goes away from our experience?

And then there is awareness just for the sake of knowledge and continued mindfulness. I think what this is getting at is about not getting lost in lots of associations (which, again, I will come back to later).

And then finally, 'abiding independently'; not clinging to anything in the world. In a way this is where it all leads to, from the Buddhist point of view – the eventual state of complete detachment and freedom – whereas the first three are methods of how to get there.

So, that's a bit of a background on mindfulness from the Buddhist tradition; I now want to move on to looking at how this is useful therapeutically. Basically, I think you can think of it in terms of being four main areas, or four aspects of mindfulness that are helpful:

1. Clocking what is going on

2. Staying with experience
3. Having a bigger perspective
4. Choice

1. Clocking what is going on

When we're doing mindfulness meditation – particularly if I'm teaching mindfulness for depression or addiction – the instruction is that each time you get distracted (because of course the mind wanders off all the time) just to gently note where the mind has gone to, and then bring it back to whatever the object of the meditation is, whether that is the body or the breath.

So, in doing that, it's like you are just noting where the mind has gone – so you start getting a hang of where your mind habitually goes off to. But then, each time you come back to the breath or the body, you are stepping out of just getting caught up in whatever is going on.

A lot of the time we run around on automatic pilot. I don't know if you have had the experience of driving home, and you were going to stop at the supermarket, and you find yourself already gone past the supermarket because you went on the habitual route home... or you walk into the sitting room and you can't remember what on earth it was you were going to very importantly get there... I see one or two nods there...

[LAUGHTER]

In a sense it's great, isn't it, that we can do things on automatic pilot? It's fantastic. Remember what it was like (those of you who drive) when you first learned to drive? It was just like... [DEMONSTRATES!] ...I felt a bit like that only a few days ago when I was pulling out of the car-hire in downtown San Francisco, trying to navigate by myself... driving on the wrong side of the road... [LOUD LAUGHTER]... in a car where I couldn't work out how it worked; it was complete scary monsters! But – you know – a couple of days later I'm driving around like I've lived here all my life... so it is really good that we can do automatic pilot.

...But it can be a real nuisance as well. For example, sometimes there might be something that is niggling away at you and you just don't clock it – and it might be that you are in a bit of a bad mood. But actually, because you've not clocked it, and not really faced it, then it can control *you*, because we get pushed around by our mental states if we are not aware of them.

Particularly if you suffer from, or are prone to, depression, what can happen is that maybe your mood has just gone down a bit for some reason or other, and then that can start triggering negative thoughts, and then that can lead to the mood going down a bit more, and it gets into a downward spiral... and that can very quickly escalate out of control if it's not caught. If it has just been going on on automatic pilot, then you can find yourself in a really depressed state and not quite understand why.

Similarly with addiction, there might be something that is distressing you, and that can trigger thoughts of: 'I really need a drink to cope with this', which can go on, again, a bit out of awareness... and then before you know it you're suddenly having really strong urges to have a drink, which are very difficult to fight.

There's another one that is sometimes called in the trade 'seemingly irrelevant decisions'. 'Seemingly irrelevant decisions' are where you make a series of apparently innocent decisions in themselves – like, 'it's a beautiful evening; it would be lovely to go out for a walk with the dog; I haven't been out for a walk; I must see the daffodils in the park because it's springtime and they're so beautiful...' – and guess what, on the other side of the park there is an off-licence, and before you know it you've got a bottle.

So that is the same sort of thing. It just sort of goes on a bit outside awareness.

So, automatic pilot is a very habitual way of being, and actually we need it in order to operate, but it can also be quite dangerous, actually for everyone but particularly if you are prone to things like depression and addiction; whereas if it can be caught early – like a change in mood – that will be much, much easier to deal with than when you've really spiralled down.

And also there is this thing of 'clocking what is going on' – starting to learn the links – so for example you might discover that you are particularly prone to negative thoughts if you're tired, or premenstrual, or something like that. In other words, this thing is about noting the nature of arising: under what conditions do these unhelpful thoughts particularly arise, and therefore you particularly need to be 'on the ball'?

So that is all part of 'clocking our experience' and really noticing what is going on.

2. Staying with experience

The second thing is 'staying with experience' – particularly staying with negative experience. We could see this as a bit like both the surgeon's probe, investigating what is going on, and this idea of climbing the tower; of being a bit detached from our experience, in the sense of not being caught up in it.

What we are trying to do when we're trying to 'stay with our experience' is we are *not* trying to change the experience – that is very important – if anything, we are trying to deepen into the experience, but avoiding the extremes of either reacting to it or pushing it away (suppressing it). Basically, pushing things away doesn't work. It's like: 'don't think about a pink elephant'... you all think about pink elephants. So when we try and do that – like, 'I've got a negative thought – don't – don't – don't think it!' or, you know, 'I need a fix... don't think about it!' – pushing it away just brings it back, rebounds it back into awareness. So suppression is very unhelpful. But, equally, other habitual reactions may also be unhelpful.

So the instruction instead, when we notice something difficult arising, is to try and open up to it; to try and soften towards it; to try and have, as best we can, a sense of acceptance.

There is a very nice Rumi poem which gives a bit of the flavour of this. It's called '*The Guesthouse*':

*'This being human is a guest house
Every morning a new arrival.
A joy, a depression, a meanness,
some momentary awareness comes
as an unexpected visitor.
Welcome and entertain them all!
Even if they are a crowd of sorrows,
who violently sweep your house
empty of its furniture,
still treat each guest honourably.
He may be clearing you out for some new delight.
The dark thought, the shame, the malice,
meet them at the door laughing,
and invite them in.
Be grateful for whoever comes,
because each has been sent
as a guide from beyond.'*

...So, it's about just accepting, as best we can, whatever it is – whatever, whatever is happening; and also with kindness, as best as we are able. It is important to try and find a flavour of mindfulness that isn't cold. I think mindfulness, when it is fully there, is not cold. It's got a kindly aspect to it; a metta-ful aspect to it.

So we just keep practicing that. We just keep practicing, again and again, being with difficult experience, so that we are increasingly able to tolerate difficult experience; so that increasingly we feel confident of being able to handle whatever comes our way – as opposed to a more habitual reaction, which might be a sense of 'I can't cope with this'.

When we have that thought – 'I can't cope with this' – that immediately sets off anxiety, depression... it just increases the distress, or it can lead to substance use as a way of avoiding it, or, if we think in terms of actual physical pain, if you think, 'oh, I can't cope with this!' then automatically you tense up around the pain, which actually makes the pain worse. So that 'can't cope' reaction sort of spirals it, in a way.

If you remember, there was part of that refrain that the Buddha was describing where he says:

'Mindfulness that there is a body is established in him to the extent necessary for bare knowledge and continuous mindfulness.'

What I was alluding to earlier is very relevant here: in other words there isn't a whole mental proliferation – your mind doesn't just go off, and off, in a whole chain reaction, depending on what has just happened.

So, to do that, body awareness is particularly helpful to try and really investigate exactly what is going on; to find out just exactly what is happening; to really explore pain rather than just putting a label on it of: 'this is pain; I can't bear it'. To find out just what [the pain] is like – a whole myriad of changing sensations – and even to become interested in what is going on.

In that way, we don't fall into getting anxious about being anxious, or getting depressed about being depressed, or getting angry about being depressed, and so on. It is like cutting through – staying with our experience enables us to cut through a lot of this proliferation. I think particularly this 'staying with' is the really central key to making a change to things like anxiety and depression, and relapse into addiction.

3. Having a bigger perspective

If we look at mindfulness-based cognitive therapy for depression, which is perhaps the thing I am most familiar with... it was set up originally to find a way of using C.B.T. [cognitive behavioural therapy] to help prevent relapse, but that could be delivered in a group format.

In C.B.T. you get people to challenge their negative thoughts. For example, there might be a scenario where somebody is walking down the road and they recognise someone on the other side of the road and they wave at them, and the other person doesn't respond.

Someone who is prone to depression might immediately fall into thinking, 'oh, what have I done? They obviously hate me!' as an interpretation of that. So what you do in C.B.T. is you notice, and you write all that down – 'I believe that they hate me' – and then you look for alternatives, like, 'maybe they didn't see me', 'maybe they were in a bad mood', and 'well, if that's the way they treat me, do I want them to be my friend anyway, if they do hate me?' So there might be all these alternative ways of thinking about it.

What happens in C.B.T., if it is successful, is that you keep doing these diaries and you keep challenging these beliefs, and what eventually happens is you get a change on an implicit level where basically you don't take the thoughts so seriously. You might still have this thought of, 'she hates me because she didn't wave at me', but you think, 'oh, well...' – you see it much more as provisional.

What is implicit in C.B.T. is made explicit particularly in mindfulness-based cognitive therapy (or M.B.C.T.). The people who developed M.B.C.T., as I said, were cognitive

therapists – they set out to develop this group version of C.B.T.; they got interested in Kabat-Zinn's work, and they thought, 'oh, mindfulness, that could be quite useful – let's try and put a bit of mindfulness into our C.B.T.' – but actually what they ended up with, in the end, was really a mindfulness training with a bit of C.B.T. thrown in.

A key part of this is making very explicit what is implicit in C.B.T. – so thoughts are just seen as thoughts, rather than necessarily as facts. It is so easy to believe what goes on our mind – it is so easy to get caught up in it – you know, we have a thought, 'I'm rubbish', and we think, 'argh!' – or, 'she did that because I'm a terrible person, and again: 'argh!' – it has that sinking feeling. It is amazing how sticky our thoughts are: we just hold onto them and get caught up in them. Again, for those of you who have meditated, which I imagine many of you have done... it is so easy, isn't it, to get caught up in a train of thought, and before you know it, woof, you've gone off somewhere...

So what we train to do in M.B.C.T. is really to see thoughts just as passing phenomena. We just recognise, in a way, that we have all got lots of garbage in our heads – you know... put the cards on the table, let's face it... [LAUGHTER] ... it's true for me. I sometimes think, 'I can't believe I'm thinking that again!'... anyway... [LAUGHTER] ... but you just recognise that that's what the mind does – it just sort of throws up this sometimes rather tedious, repetitive and very, very occasionally interesting stuff, which yet we so easily get caught up in.

So, what we do is we just see it, as I said, as passing phenomena – so we just see thoughts: they just arise, they pass away, we don't need to take them seriously. And, again, that is a real key learning, if we can not take our thinking so seriously. So each time we return to the breath, each time we return to the body, it's like we step out of taking our thoughts so seriously.

Again, it's a bit like this idea of climbing the tower that I've mentioned; and, in the refrain, this idea of things arising, passing away, and both: in other words, seeing that things are impermanent. We can increasingly recognise that things will pass: so negative thoughts, though they arise, though sometimes they can feel absolutely torrential, they will pass. Similarly, urges to engage in unhelpful behaviour may be very, very strong, but they will pass. And the more we can see that, the more confidence we can have in that.

In the refrain [the Buddha] talks about 'internally and externally', so we can reflect on how it happens to other people as well – that it doesn't just happen to 'me' – that actually these thoughts, this stuff, it's just an impersonal process, depending on conditions. Our particular thoughts will be to do with our own personal conditioning: it may be our childhood; it may be recent events; it may simply be that we just keep thinking in that way. If you look at addiction, for example, quite often there may be particular early events that have led someone towards, say, using drink, but once it gets established then actually you suddenly find you need a drink because you are depressed; because you are anxious; because you've had a row; because you're watching television; because you're celebrating the World Cup... and it's like, you know, you always need a drink in every situation – it gets associated with more and more things.

So that's 'perspective' – in other words particularly changing our perspective on our thoughts and the other phenomena that happen in our minds.

4. Choice

The final one is 'choice' and really that follows on from the other things, so that actually once we have clocked what's going on, once we have learnt to be with difficult experience rather than to flee from it psychically, or to get rid of it by reaching for a substance, we are then in a much better position to decide what is the best thing to do – and this is 'mindfulness of purpose'.

Meditation, again, can be very useful from that point of view, because it can sometimes create a space for what people sometimes talk of as 'wise mind' to arise. If we can just sit with something, then sometimes a helpful solution will just manifest, will just arise.

Conclusion

So, what I am suggesting is that there are four useful things to help with various health conditions: clocking what's going on; learning to be with our experience, particularly difficult experience; changing our perspective on what is going on; and allowing wiser choice and choosing wisely dependent on that.

They are really useful skills. They can help with recurrent depression, with anxiety, with pain, with preventing relapse into addiction, but they can also be just very useful for life in general, because all of us at times get anxious, feel depressed, avoid our experience when perhaps that is not the most helpful thing to do.

In a way it is an investigation of our experience, a way of being with our experience, that can just go deeper and deeper. It is said that after the Buddha gained Enlightenment he continued practicing *satipatthana*, he continued deepening his understanding... and he enjoyed it; that's why he did it.

So – for whatever reason – we can deepen our awareness. Again, returning to this refrain – noticing things arising and passing away – we can notice more and more just how things change, until we really get in our bones this sense of impermanence in ourselves and in other people, that we can see more and more fully and know more and more fully how we are in flux; how we are a set of processes.

And we can even, in a way, more and more *enjoy* that sense of play – of how things just arise and pass away. The more we can do that, the less we will actually hold tightly to our experience, and we then won't be so pulled around by it; we won't be so controlled by it; we won't be so fooled by it. We can see it for what it is.

So, *sati-sampajanya* – mindfulness and clear knowledge – basically, from a Buddhist perspective, leads to vision and knowledge of things as they are. It's another way of saying the same thing: in other words it eventually leads to freedom, because, as I said, you're just not controlled by your experience in the same way.

So as the Buddha said, this is *'the direct path for the purification of beings; for the surmounting of sorrow and lamentation; for the disappearance of pain and grief; for the attainment of the true Way; for the realisation of Nirvana, namely the Four Foundations of Mindfulness'*. In other words, what we get from the Buddha is an invitation to take this path as far as we want, whether that is to surmount particular sorrows of recurring depression or anxiety, or to help overcome and deal with physical pain, or whether it is to move towards complete awakening, until eventually one is 'abiding independent, and no longer clinging to anything in the world'...

There are lots of places in the Suttas where you can get a bit of the sense of that, but when I was writing this talk it reminded me sometimes of the songs of realisation you get, where people, when they gain Enlightenment, give this little verse which expresses their sense of freedom.

So I thought I would just end with one of those. This is by Kottitha: his song of realisation was this...

*'Dead to the world and its troubles
he recites mantras
mind unruffled
shaking distractions away
like the wind god
scatters a few
forest leaves'*