In addition to providing an overview of Buddhism, the primary focus of this chapter is on the expression of Buddhism within the United States. At the same time that Buddhism has a presence in the United States, it remains a vibrant religion and cultural force in many parts of Asia, and consideration is given to these traditions and to related immigrant groups in the United States. This chapter reviews some of the major tenets of Buddhism; the background and expression of key variants of Buddhism; and the interface of Buddhism with psychology, both conceptually and in regard to the research evidence that exists. Although meditation as a core Buddhist practice is primarily addressed in Chapter 17 in this volume, some reference to it as a spiritual and therapeutic practice central to Buddhism is explored here as well.

HISTORICAL BACKGROUND OF BUDDHISM

Siddhartha Gautama, who became known as Shakymuni, the sage of the Shakyas, and finally the Buddha, the Awakened One, was born about 486 B.C.E. in northern India into a wealthy Hindu family (Buswell, 2004). He left the folds of the family as a young man to pursue the life of an ascetic after encountering the suffering of poverty, illness, and death. After 6 years of studying and meditation, he reached a state of enlightenment in which the truth of human existence in relation to both the reality of suffering (dukkha) and the path to release from that suffering became clear to him. Over the next 45 years he taught the principles of what was to become Buddhism to an increasing group of followers (Amore & Ching, 2002; Smith & Novak, 2003).

Buddhism first spread east into Sri Lanka, Thailand, Burma, and other Southeast Asian countries, including Indonesia. Around the 1st century C.E., with the development of Mahayana Buddhism, it began moving north through China, then east into Korea and Japan, and south into Vietnam. Vajrayana Buddhism, drawing on the esoteric and Yogic aspects of Hinduism, also began developing around the 1st century C.E. and was brought into Tibet by Padmasambhava in the 700s, where it began blending with indigenous religious traditions. In India, after being spread throughout the Indian empire by King Asoka (ca. 272–232 B.C.E.), Buddhism largely melded back into Hinduism or was supplanted by Islam, as was also true in Indonesia. The three primary schools of Buddhism remain vibrant in the 21st century in Asia: Theravada, Mahayana, and Vajrayana or Tantric Buddhism (Fischer-Schreiber, Ehrhard, & Diener, 1991; Smith & Novak, 2003).

Theravada Buddhism (sometimes referred to as Hinayana, the “lesser vehicle,” in somewhat derogatory contrast to Mahayana, the “greater vehicle”) is dominant in Sri Lanka and Southeast Asia, particularly in Thailand and Burma, and remains the closest to the original teachings of the Buddha as laid out in the Pali sutras and the texts of the Abhidharma. Vipassana, insight or mindfulness meditation, associated with Theravada traditions, was codified by Buddhaghosa, an Indian Buddhist monk trained in Sri Lanka, in the treatise Visuddhimagga.
(Goleman, 1988), in the 5th century. In Theravada Buddhism, the emphasis is on liberation of the individual and attainment of wisdom. For the most part, Theravada Buddhism recognizes Shakyamuni as the only Buddha or consummately enlightened being, whereas Mahayana and Vajrayana recognize numerous Buddhas as incarnate beings who represent enlightenment. Buddhas, however, are not transcendent gods in the Judeo-Christian sense of God.

Historically, within Theravada Buddhism, importance has been placed on the meditative discipline of the monastic life. In contemporary Thailand, most young men are expected to attend at least brief retreat experiences, with symbolic ordination. This supports the continuity of a vibrant, active religious and spiritual tradition in Thailand, along with the plethora of temples often containing spectacular gold godlike images of the Buddha.

Mahayana Buddhism began to develop around the 1st century C.E., emphasizing the availability of liberation to all, with the Buddha as a savior and with more emphasis on the divine; at the same time, the focus was on the ability of all to find enlightenment. The primary virtue emphasized in Mahayana Buddhism is compassion for others, and a major concept introduced was that of the existence of bodhisattvas, or reincarnated figures who decline freedom from rebirth to assist others spiritually. Unlike Theravada, which has held to the primacy of the original teachings, Mahayana has produced elaborated texts or sūtras of substantial variation. Mahayana, as it spread into China, and then into east Asia, developed various sects that continue to the present day, including Ch‘an, T‘ien-t‘ai, and Pure Land in China, and their equivalent, Zen, Tendai, and Amidism (or Jōdo Shinshū/ Shin Buddhism [True Pure Land]) in Japan, respectively. Shinran, the founder of Shin Buddhism in the 1200s, was substantially responsible for breaking the tradition of celibacy among priests in Japan, leading in the 21st century to a largely hereditary succession within most Japanese Buddhist temples. Shin Buddhism remains the most prominent sect in Japan (Andreasen, 1998; Bloom, 2004). Within Zen, two branches were transmitted to Japan from China in the 1200s and survive in the 21st century: Rinzai, associated with use of the kōan in medita-

tion practice, and Soto Zen, emphasizing shikantaza, “just sitting,” which is more similar to mindfulness meditation of Vipassana traditions. Unique to Japan is Nichiren Buddhism, also developing in the 1200s, and intended to simplify access to enlightenment for all through recitation of the mantra Namu myōhō renge-kyō, the Lotus Sutra (Amore & Ching, 2002; Canston, 1989). In China and Japan, Buddhism has blended synergistically with other major religious, philosophical, and spiritual traditions, including Taoism and Confucianism in China, and Confucianism and Shinto in Japan (Ching, 2002), while maintaining its own identity.

Vajrayana or Tantric Buddhism, although identified primarily with Tibetan Buddhism, refers to the power of enlightened awareness, originally depicted as a thunderbolt (vajra) in Hinduism and dorje (the indestructible strength of a “diamond”) in Tibetan (Amore & Ching, 2002; Fischer-Schreiber et al., 1991). Originally linked with early Mahayana teachings, Vajrayana originated in northern India, with elements from Tantric Hinduism, drawing on Indian texts referred to as the Tantras. It was brought from northern India into Tibet by Padmasambhava in the 700s and into China in the 800s and carried onward from China through Korea and to Japan, where it continues to be represented in Shingon Buddhism (not to be confused with Japanese Shinran or Shin Buddhism). Vajrayana contains many esoteric elements, with complex meditative practices that include evocative use of symbolic mantras and visualization of mandalas that depict elaborate depictions of Buddha figures. In India, there was a limited resurgence beginning in the late 1800s and expanding more recently with the influx of Tibetan refugees.

Estimates of the number of practitioners of Buddhism within Asia vary considerably. One reason is that among the major religions, Buddhism may be unique in supporting individuals who blend a reverence for the teachings of the Buddha with observance of other religious traditions. Even up-to-date sources vary tremendously in their estimates (Buddhism by Country, 2011; World Factbook, 2011). In Mongolia and the Southeast Asian countries of Thailand, Burma, and Cambodia, about 90% of individuals are identified as practicing Buddhists,
with about 65% to 75% in Sri Lanka and Burma. In India, estimates range from 1% to 3%, with the higher number suggesting a recent upswing in identification with Buddhism. Elsewhere, secularization has had a major impact. Numbers in Vietnam and China range from less than 10% (reflecting the Communist prohibitions against religion) to more than 80% if traditional identity, along with more recent trends toward lifting the political restrictions, are taken into account. In both countries, with the shift in state Communism toward more openness, temples are being reopened and reinvigorated. In Korea, percentages range from 23% to 38%, about the same as for Christianity. In Japan, estimates vary hugely, from 20% to more than 90%; the lower number reflects that fewer and fewer individuals identify as active practitioners, whereas the higher number reflects a more general cultural identity. Traditional engagement primarily has focused on death rituals and funerals, and there is little sense of community around identity with local temples. The hereditary aspect of Buddhist temples is increasingly challenging to maintain in a modern society. For many, Buddhism may serve primarily as a cultural vehicle to engage in religious practices marking birth, coming of age, and death (Ando, 2008). Japanese psychologists have invested considerable scholarly and research interest in meditation practice, particularly in Zen Buddhism (e.g., Haruki & Takase, 2001; Kasamatsu & Hirai, 1963), have actively promoted international dialogue in these areas (cf. Kwee, Gergen, & Koshikawa, 2006), and in the case of psychologist Hayao Kawai (1996), hugely popularized a link between Buddhism and Jungian psychology in Japan.

**CORE BUDDHIST CONCEPTS**

The three core elements of Buddhism are the **Buddha**, the **Dharma**, and the **Sangha** (Smith & Novak, 2003). The **Buddha** is the person of Siddhartha Gautama, who laid out, over a course of 45 years, the principles of what was to become Buddhism. But to take refuge in the Buddha means to commit to looking for the Buddha within, guided by his teachings, rather than by worshiping him as a historical figure or savior. The **Dharma**, or the “way,” consists of these teachings, in content and spirit, as communicated and translated into practice. Regardless of the branch of Buddhism, the core teachings consist of the Four Noble Truths and the Noble Eightfold Path. The **Sangha** is the collective of individuals providing both spiritual leadership and support within a Buddhist community.

**Four Noble Truths**

The First Noble Truth states that all life and existence contain suffering or **dukkha**, which may also be translated as pain, dissatisfaction, or, in contemporary language, stress. Dukkha is not to be escaped or avoided, but rather it is to be engaged and understood. It is not framed as a punishment from God—or from the Devil—but rather as an inherent aspect of life. It encompasses the mild aversions, tensions, or frustrations that may show up repeatedly during the day as well as the traumas of illness, accidents, or catastrophes. That all life contains suffering is not intended as a pessimistic perspective on life, but rather as a statement of reality, which if not understood and dealt with, leads to pervasive unhappiness, greed, and further distress.

The Second Noble Truth addresses the origin of such suffering: that much of suffering is the result of our attachment to pleasure and craving, to our desire to avoid discomfort, and to our need to maintain an identity with a created sense of “self” that in reality is fluid and ephemeral. Suffering is therefore proportional to the attachments to these states.

The Third Noble Truth is that release from suffering comes from understanding the reality of these principles, understanding the insubstantial quality of both pleasure and discomfort, and understanding the illusionary nature of the concrete self.

The Fourth Noble Truth contains the instructions for learning how to experience a release from suffering: the Noble Eightfold Path.

**The Noble Eightfold Path**

Smith and Novak (2003) have referred to the Eightfold Path as a “course of treatment,” containing explicit guidelines for “curing” the “dis-ease” of life. The elements of the Eightfold Path overlap with but go beyond the Judeo-Christian Ten Commandments and are intended to be guidelines for training in pursuit of a better life not only in relation to the spiritual but also more broadly. The eight components
(Das, 1997; Keown, 1996; Smith & Novak, 2003) are laid out not as a ladder but as a wheel or a multipetalled flower, with each linked to another. Together they constitute the "middle way" of Buddhism, in contrast to the extreme denial of the Hindu ascetic or the indulgence and ignorance of the everyday life. These eight are divided into three sets: wisdom (understanding and intent), morality (speech, action, and livelihood), and meditation (effort, mindfulness, and concentration; Keown, 1996). Exercise of them is designed to allow the three poisons—ignorance, craving, and aversion—to diminish their hold on one's life. Lama Surya Das (1997) has built his entire book *Awakening the Buddha* within around exploring these eight steps—or spokes of a wheel—in highly approachable language that links the growth of the spiritual with the sensitivity of the personal. In following the Noble Eightfold Path, one is committing to working for the enlightenment of both oneself and all other living beings (Amore & Ching, 2002; Das, 1997; Smith & Novak, 2003).

The components of the Noble Eightfold Path classically are divided into three parts addressing wisdom, ethics, and meditation training.

**Wisdom Training:**
1. Right view or understanding: acceptance of Buddhist teachings, both intellectually and experientially.
2. Right intent or resolve: a commitment to developing right attitudes.

**Ethics Training:**
1. Right speech: telling the truth and speaking in a thoughtful and sensitive way.
2. Right conduct or action (the Five Precepts): abstaining from killing any living creature, stealing, sexual misconduct, false speech, and intoxication.
3. Right livelihood: not engaging in an occupation that causes harm to others.

**Meditation Training:**
1. Right effort: exerting the effort required to meet goals; gaining control of one's thoughts and cultivating positive states of mind.
2. Right mindfulness (*sati/smrti*): cultivating constant awareness; witnessing all thoughts, feelings, actions, and bodily sensations without reactivity.
3. Right concentration (*samadhi*): cultivating mental calm through concentrative training/meditation practices.

**Other Core Concepts**

Contained in the voluminous Pali Canon and the scholarly Abhidhamma are other core Buddhist concepts, including several of particular interest from a psychological and practice perspective. These include the concepts of "store or storehouse consciousness" (*ālaya-vijnāna*), interdependent arising or co-origination (*pratītya samutpāda*), no-self (*anatta*), and states of meditative absorption (the *jhānas*; Amore & Ching, 2002; Fischer-Schreiber et al., 1991). The first two concepts are noteworthy because of their compelling links to contemporary psychological constructs. Within the framework of this book, these concepts of psychological well-being are also of interest because they meld into spiritual growth and enlightenment.

**Storehouse consciousness.** Buddhism developed complex models of mind to explain both the experience of "knowing" and the development of attachment and aversion, projection of meaning, and distortion of reality that keep one bound up in *dukkha*, delusion, and self-absorption. Functionally, these models map surprisingly well onto developing models of the complexity of neuronal systems, the challenge of relearning entrenched habit patterns, particularly those sustained by long-hidden or unconscious attachments and aversions, and the extended impact of symbolic learning and trauma. The path to spiritual growth and enlightenment is viewed as lying within the gradual loosening of these interconnections, through the use of meditative practices (Sharp, 2011), first by bringing them into awareness, and then by practicing nonattachment.

**Interdependent arising or co-origination.** Every effect has a cause; everything is related to something else in a dynamic process. The significance of this is core to understanding other essential elements of Buddhism: impermanence, a lack of stable "self-identity," karma, and that happiness or satisfaction comes from letting go of desire or aversion. This core concept of fluid interdependency can be viewed as the original statement of conditioning.
theory—that the quality of our experience lies entirely in our relation to that experience, and that release from the power of experience is also more under conscious control than it is generally experienced as being.

No-self. Often misinterpreted as self-denying, this actually speaks to the risk and pain associated with searching for a single identity of self, rather than embracing the flexible, fluid nature of who we each are. “You are not your thoughts” is an expression of this aspect of Buddhism on an everyday level of understanding and experience; a corollary is that there is no single part of our experience that can—or should—drive how we see ourselves. This is a very powerful message to convey in a therapeutic context. This concept also speaks to the neurologically grounded experience of losing all sense of “self” during certain stages of meditation practice. Experiencing this can be disturbing or profoundly life changing. At a milder level, it may be the spiritual experience of sensing a profound connection with something “outside” the self, an element described in virtually all religious and spiritual traditions.

Compassion. Opening the heart, suspending negative judgment, both of the self and of others, is an element common to most religious traditions. More strongly identified with Mahayana and Vajrayana practices than with Theravada, it is an aspect of Buddhism that has garnered more recognition over the past 20 years, both because of the influence of teachings from the Dalai Lama and his associates and through the work of Thich Nhat Hanh, in communicating the simplicity and profound value of loving kindness meditations. Understanding the centrality of compassion also counters the perception of meditative practice as self-absorbed “navel gazing.” Although meditation is certainly a privately engaged process, evidence is growing that the suspension of self-engaged conditioning may open awareness to the needs of others, regardless of whether guided or directed meditations related to cultivating compassion are being utilized (Gilbert, 2009; Kristeller & Johnson, 2005).

Deep meditative states. As a spiritual practice, regardless of the Buddhist tradition, meditation is recognized as potentially producing profound levels of experience often identified as mystical or even as altered states. These altered states are identified as enlightenment experiences, such as kensho or satori in Zen practice, that signal increasingly attuned levels of “knowing” (prajna). Sophisticated neurological modeling has been applied to exploring such experiences (Austin, 1998, 2006, 2009; Lutz, Greischar, Rawlings, Ricard, & Davidson, 2004; Newberg, 2010). Traditional Buddhist texts acknowledge the development of such states, particularly within Tibetan Buddhist practices, identifying multiple levels of jhanas or levels of training in awareness and attention (Wallace, 2006), while at the same time cautioning that experiencing deeper states is more of a marker of cultivating the capacity for following the Noble Eightfold Path, rather than as goals in themselves. Much of the therapeutic value that has been identified with use of both meditation practice and engagement of other aspects of Buddhist teaching neither presumes the experience of such states nor suggests that such experiences are needed to gain value from practice.

Wisdom. The concept of wisdom from a psychological perspective, as informed by Buddhism, deserves further consideration. Wisdom has been examined as a psychological construct (Baltes & Staudinger, 2000; Sternberg, 1990) that extends beyond intellectual knowledge but still in a more limited way than within Buddhist psychology. In keeping with the notion of inherent wisdom found in Buddhism (Das, 1997; Gethin, 1998), the experiencing of “wisdom” can be considered an emergent process that occurs when conditioned habitual reactions are suspended, allowing integration of more complex processing, parallel to the traditional categories of “stillness” and “insight.” Stillness involves suspending the mind’s habitual patterns; insight refers to the more complex, creative, and “deeper” levels of processing that emerge. This type of “wisdom” need not entail intellectual processing, but it can occur within any capacity, experienced as a sense of “knowing”—that is, a sense of realizing a true or wise perspective. Such insight involves disengagement from habitual patterns and preoccupation with self, while seeing a problem, whether simpler or more profound, in a larger perspective;
thus, it is in continuity with the Buddhist concepts of insight, wisdom, and spiritual growth (Austin, 2009; Kornfield, 2000; Kristeller & Jones, 2006).

Many other core concepts associated with Buddhism are important to understanding religious beliefs, such as samsara, nirvana, and reincarnation. Those discussed earlier in this section are coming to play a more substantial role in understanding the interface of Buddhism with psychology. The concept of mindfulness (sati in Pali, smriti in Sanskrit), from the Eightfold Path, and clearly one of the most important concepts from a psychological perspective, are discussed further in the section Key Buddhist Concepts Entering Psychological Discourse later in this chapter.

**BUDDHISM WITHIN THE UNITED STATES**

Buddhism has entered the United States through a number of paths beginning in the late 1800s. Those practicing Buddhism in the United States have included both individuals with Asian backgrounds in Buddhism and non-Asian Americans who have found their way to Buddhism both through personal travels in Buddhist cultures and through the dissemination of Buddhist teachings within the United States.

**Traditions of Buddhism Within the United States**

Each of the schools of Buddhism has a presence within the United States, with remarkable growth over the past 2 decades (Amore & Ching, 2002; Coleman, 2001; Fields, 1992; Keown, 1996; Morgan, 2004; Smith & Novak, 2003). The distinction between Mahayana and Theravada Buddhism, however, particularly among non-Asian Americans, has blurred considerably over the past 20 to 30 years. At the same time, well-established Buddhist centers within these denominations (some founded in the late 1800s) that primarily serve Asian Americans continue to flourish.

Chinese Buddhist temples were well established on the West Coast by the late 1800s, but they served only the Chinese communities (Fields, 1992). Buddhist Churches of America (the BCA) grew out of Japanese efforts to provide services to immigrants beginning in the late 1890s in the San Francisco, California, area. The BCA represents Pure Land or Shin Buddhism (Bloom, 2004) and has developed services into a form similar to those of the Protestant church in structure; there are more than 60 temples in the United States, with about 20,000 members. Priests are trained at the Institute for Buddhist Studies in Berkeley, California. Membership in the BCA appears to be declining as acculturation increases, however (Morgan, 2004). Smaller groups from Cambodia, Thailand, and Laos exist but are less well established.

Buddhism first came to the attention of the Euro-American public in the late 1800s, largely via England and other parts of Europe, through the efforts of the transcendentalists. The first American English translation (from French) of a Buddhist text was completed in 1844 by Elizabeth Palmer Peabody, the editor of the transcendentalist journal, the Dial (although this translation is often credited to Henry David Thoreau; Sutin, 2006). Far more interest in Buddhism grew out of the World Congress of Religion in 1894, particularly because of a presentation by Roshi Soen Shaku, a Rinzai Zen monk. This presentation was notable as it provided a primary link to the development of Zen in the United States through his disciples, D. T. Suzuki, who first traveled to the United States in 1897, and Nyogen Sensaki, who founded Zen groups on the West Coast (Coleman, 2001; Fields, 1992; Morgan, 2004). There continue to be clear links from this Congress to contemporaneous interest in Zen Buddhism, fostered through Suzuki's direct influence on prominent scholars, such as Erich Fromm (Fromm, Suzuki, & DeMartino, 1970), Karen Horney (DeMartino, 1991), and Alan Watts (1957) following World War II, and their students, such as Jeffrey Rubin (1996). Other Zen monks came from Japan and from Korea, both to the West Coast and the East Coast, founding retreat centers and monasteries (Fields, 1992; Prebish & Tanaka, 1998). Among the more notable of these are the San Francisco Zen Center, founded in 1962 by Shunryu Suzuki (1973) in the Soto Zen tradition; the Zen Meditation Center of Rochester, New York, founded by Philip Kapleau (1970) in 1966; and the Cambridge Zen Center in Massachusetts, founded in 1973 by students of the Korean Zen Master Seung Sahn (Coleman, 2001; Sahn, 1997).
Contemporary interest in the Vipassana traditions can be traced primarily to individuals traveling to Southeast Asia during and following the Vietnam War, and as part of the Peace Corps, studying particularly in the Thai Forest tradition (Swearer, 1970) and in Burma. In 1974, the Insight Meditation Society was founded in Barre, Massachusetts, by Jack Kornfield, Joseph Goldstein, and Sharon Salzberg, who had studied Vipassana Buddhism in northern India, Burma, and Thailand and were ordained as monks. They then had returned to the United States to disseminate this wisdom more widely. Contemporary use of Vipassana (or insight) meditation has become one of the more accessible practices both within the United States and elsewhere through the teachings of Jack Kornfield, who later became a clinical psychologist, and his associates (Goldstein & Kornfield, 1987; Kornfield, 1993; Salzberg, 1999). On the West Coast, Kornfield, Goldstein, and Salzberg founded another center, Spirit Rock, just north of San Francisco, which also serves as a center for extended meditation retreats. Numerous other Vipassana centers exist. Some are monastic centers, such as the Metta Forest Monastery near San Diego, founded by Thanissaro Bhikkhu, an American who follows the Thai Forest tradition closely (Thanissaro, 2006). Others are in the community, such as the Cambridge Insight Meditation Center (Cadge, 2005). These centers have made the practices more accessible and somewhat less esoteric. Teachers within these communities have elucidated the value of mindfulness meditation training as a means to cultivating nonreactive attention in the service of becoming aware of—and managing—inner experience, an approach that has resonated widely within both Buddhist and, increasingly, secular circles.

Also in the Vipassana tradition are the teachings of S. S. Goenka (Hart, 1987), a Burmese teacher of Indian background, who, with his followers, has been leading traditional 10-day silent retreats for many years in India, in the United States, and throughout the world. He is particularly noted for bringing his work into prison environments, as documented in the film Doing Time, Doing Vipassana (1997), reflecting his work in India, and the film Changing From Inside (1998), of transformation in a woman’s prison in Seattle, Washington. Related research by Marlatt and his associates has also been carried out in Seattle (Bowen et al., 2006). The impact of Goenka’s work has been documented in a book of published letters written by prison inmates after their retreat experience (J. Phillips, 2008).

Exposure to Vajrayana traditions is largely a function of the flight of Tibetan monks, including the Dalai Lama, to Dharamsala, India, and Kathmandu, Nepal, after the invasion of Tibet by the Chinese in 1950. In 1974, Chogyam Trungpa Rinpoche (Trungpa, 1973) founded the Naropa Institute in Boulder, Colorado, which has since become an accredited full-service university. Although Naropa still maintains a Buddhist orientation, it is officially nondenominational, with a particular focus on programs in applied psychology. In addition, Americans who lived in Asia, including Robert Thurman, who became the first American to be ordained a Tibetan Buddhist monk (Thurman, 1998), Lama Surya Das (born Jeffrey Miller; Das, 1997), and Alan Wallace (Wallace, 2006; Wallace & Shapiro, 2006) have contributed in substantial ways to transmitting the value of Tibetan Buddhist teachings. The Dalai Lama has expanded awareness of the value of Buddhism and is a world leader in cultivating dialogue between religion and science, particularly in regard to psychological and neuroscience research (cf. Dalai Lama & Goleman, 2003).

Other Expressions of Buddhism Within the United States

One notable group of nondenominational Buddhists that emphasizes the importance of community, is Friends of the Western Buddhist Order (FWBO; now the Triatina Buddhist Community), originally founded in England by Sangharakshita (born Dennis Lingwood), now with affiliated groups in the United States (Coleman, 2001; Subhuti, 1995). Sangharakshita, a prolific scholar and teacher, was exposed to Buddhism as a young man and then converted after being stationed in northern India. After being ordained, he became involved with the movement to extend Buddhism to the untouchable (dalits) caste of Hindus, and he has been powerfully successful in his work both in India in that regard and in revitalizing interest in Buddhism in England.
Another relatively recent development is the Engaged Buddhism movement, committed to the manifestation of compassion through social action and transformation. Although often identified as representing the influence of Western thought on Buddhism, the early beginnings are also associated with Thich Nhat Hanh's social and political actions during the Vietnam War. Engaged Buddhism has expanded substantially to frame a wide range of socially committed activities across Buddhist groups and denominations, both within the United States and throughout Asia (King, 2005; Queen, 2000).

Scholarly interest in Buddhism continues to grow; Buddhist studies programs are increasingly available at major U.S. universities. Many of the newer programs explicitly address Buddhist psychology, including those at Harvard University, Emory University, Brown University, the University of Wisconsin, University of California (UC)—Santa Barbara, UC—San Diego, UC—Berkeley, UC—Los Angeles, UC—Davis, and the University of Michigan. The recent influence of the Dalai Lama on intellectual discourse is particularly striking. Several centers for study of Tibetan Buddhism have been established. Prominent among them are the Stanford University Center for Compassion and Altruism Research and Education and the Tibetan Studies Program at Emory. At the Massachusetts Institute of Technology, the Dalai Lama Center for Ethics and Transformative Values primarily provides education in Buddhism and western sciences. Under the auspices of the Dalai Lama, the Mind & Life Institute has successfully facilitated annual exchanges between leading scientists in various fields and Buddhist scholars. They also provide research grant support related to the study of various Buddhist practices.

**Numbers of Buddhists in the United States**

As in Asia, it is very challenging to identify how many individuals in the United States identify as Buddhist, much less within each of the Buddhist traditions. The 2008 Pew Forum report, the U.S. Religious Landscape Survey, based on random telephone sampling, identified 0.7% of the population as Buddhist, or about 2 million people, slightly more than self-identified as Muslim. Yet this survey did not report on the variant of Buddhism identified by the individual. Furthermore, specifying such numbers is complicated because three distinct categories of individuals must be considered: immigrant Buddhists (whether first generation or later) who come from traditionally Buddhist countries; “new Buddhists” who have been drawn to Buddhism, both through Buddhist teachers from these same traditions and through Americans or other Westerners who have spent substantial time studying in these countries; and uncountable numbers who might not label themselves as Buddhist but who are strongly influenced by Buddhist perspectives on understanding human wisdom, spirituality, and psychological well-being.

Of identified Buddhists in America, approximately 30% are immigrants or from an immigrant background (Pew Forum, 2008) and are associated with established temples within Zen, Nichiren Buddhism, Theravada, or Tibetan/Vajrayana traditions that are important sources of support for those individuals. They have relatively little interaction with Western Buddhist groups. Therefore, Buddhism is notable in the degree to which practice communities have been established in the United States that primarily serve nonimmigrant groups separate from immigrant groups.

Non–Asian Americans have tended to associate with or be drawn to meditation centers, both local sanghas (Buddhist religious groups) and regional retreat centers. Morreale (1998), in his comprehensive overview of Buddhist practice in the United States, pointed to the explosion of Buddhist meditation centers. Before 1965, only 21 Buddhist meditation centers had been founded in North America, in contrast to more than 1,000 between 1965 and 1995 (each of which is briefly described in his book). Of these centers, about 40% are in the Mahayana tradition, 33% Vajrayana, 14% Theravada, and the remainder are transdenominational (sometimes referred to as Buddhayana). In his terms, Morreale also noted that an increasing proportion of individuals practice primarily in the context of their daily lives, rather than focusing on extended retreat experiences or Buddhist living environments. The growing number of sanghas throughout the United States, within each of the traditions, provide community support, often along with residential and retreat opportunities.
BUDDHISM AND PSYCHOLOGY

It can be argued that Buddhism is as much a psychology as a religion. The Eastern traditions of which it is a part did not, for the most part, deem it necessary to clearly separate religion from philosophy and psychology, as has occurred in Western traditions. It is therefore somewhat artificial to draw such distinctions here, but nevertheless it is useful to identify ways in which Buddhist thought and practices are making substantial contributions to contemporary psychological science and practice.

Key Buddhist Concepts Entering Psychological Discourse

It can be argued that no religious tradition has had as much impact on contemporary psychology as has Buddhism. Buddhism contains within it an explicit psychology or understanding of the mind, which is seamlessly interwoven within the religious traditions of Buddhism. The primary interface with psychology is generally identified as the growing interest in, and acceptance of, meditation-based practices in therapy (see Chapter 17, this volume, and Volume 2, Chapter 10, this handbook). Interest in meditation, although practiced in various forms within virtually all world religions, has entered American culture almost entirely from Asia, both from Hinduism and as an influence of Japanese Zen Mahayana Buddhism, Thai and Burmese Vipassana Buddhism, and Tibetan Vajrayana Buddhism (Morreale, 1998; Seager, 2000; Smith & Novak, 2003).

Somewhat more subtle is the evolving recognition that Buddhist constructs such as mindfulness (sati/smirti), nonattachment, and dukkha (suffering) mesh extraordinarily well with current understanding of learning processes, emotional regulation, and the neuroscience of attention and awareness, indeed contributing over the past decade to scholarly thinking and research in these areas. Interest in the mind–body interface has been informed for a number of decades by Buddhist psychology; more recently, the role of spiritual well-being has become recognized as important to the psychological modulation of health and illness in ways that also link to Buddhist tenets. Much of the research in the area for the past 40 years has focused on the multiple domains in which meditation practices affect the mind and the body (Didonna, 2009; Kristeller, 2007; Shapiro & Walsh, 1984). It is important to consider broader ways that Buddhist concepts relate to psychology in general and the psychology of spirituality more specifically (Austin, 1998, 2006; Newberg & D’Aquili, 1998; Walsh, 1999) and to identify areas of congruence with contemporary psychological theory (Aronson, 2004; Wallace & Shapiro, 2006; Walsh & Shapiro, 2006).

Of particular significance is the concept of mindfulness, associated traditionally with Theravada/ Vipassana Buddhism, but also recognized as an aspect of Zen or Ch’an meditation. By learning to cultivate mindfulness as a means to observe and experience mental experiences as they are, rather than reacting to them automatically, one can learn to observe the busy mind, gaining a sense of choice and increasing a sense of internalized control. This contrasts with other contemporary psychological approaches in which one tries to replace maladaptive thoughts, feelings, and behavior with adaptive approaches even before establishing a working relationship with anxious thoughts and feelings as they arise.

The concept of mindfulness has been hugely popularized by Jon Kabat-Zinn who, although not a psychologist, created a meditation-based intervention, the mindfulness-based stress reduction (MBSR) program within a mind–body model originally designed to help chronic pain patients (Kabat-Zinn, 1990, 2005; Kabat-Zinn, Lipworth, & Burney, 1985). The program has been investigated in numerous empirical studies with individuals dealing with a wide range of clinical issues, including anxiety disorders and cancer (e.g., Carlson, Speca, Patel, & Goodey, 2003; Carmody, Reed, Kristeller, & Merriam, 2008; Kabat-Zinn et al., 1992) and currently is offered within more than 100 settings, primarily hospitals, in the United States and elsewhere. Furthermore, mindfulness is rapidly gaining credence as a viable psychological construct within the science of mind, contributing to understanding how certain qualities of attention and awareness may modulate emotional and behavioral self-regulation (Bishop et al., 2004; Rapgay & Bystritsky, 2009). Publications addressing the construct of mindfulness have been increasing exponentially over the
past 10 years, with more than 1,000 publications in English referencing this term between 2005 and 2010 (Williams & Kabat-Zinn, 2011). Although considerable debate remains regarding the original meaning of the term mindfulness (smriti) and the mapping of this onto its use as a construct in contemporary psychology, there is little debate regarding the value of the underlying processes from a therapeutic perspective. For extended discussion of the issues as they relate to Buddhism, see the core article by K. W. Brown, Ryan, and Creswell (2007) in a special issue of Psychological Inquiry and the related set of responses (e.g., Baer, 2007; Hayes & Plumb, 2007; Rosch, 2007). Also see a more recent set of articles by individuals from a range of disciplines, including philosophy of mind and Buddhist studies, in Contemporary Buddhism (e.g., Dreyfus, 2011; Dunne, 2011; Williams & Kabat-Zinn, 2011).

Other arenas of influence, such as the recognition of the inherent interaction between mind and body, are not unique to Buddhism. But along with influences from Hinduism, concepts regarding mind–body interaction have had substantial impact on research on biofeedback and psychophysiology, continuing to influence the development of 21st-century mind–body medicine. Cutting-edge research on the neurophysiology of emotion, particularly Davidson’s research with Buddhist monks (Davidson & Harrington, 2002; Lutz, Brefczynski-Lewis, Johnstone, & Davidson, 2008), has been informed by recognizing the unusual focus of Tibetan Buddhism on cultivating compassion and positive emotional states. The concept of self-acceptance is linked with cultivating compassion for oneself, but extends beyond it by engaging awareness of the pernicious effects of critical self-judgment, reflecting both explicitly Buddhist perspectives (Brach, 2003; Germer, 2009; Neff, 2004; Neff & Vonk, 2009) and implicit influences, as in Hayes’s Acceptance and Commitment Therapy (Hayes, Strosahl, & Wilson, 1999).

The central value to Buddhism of cultivating intentional awareness and attention on capacity for self-regulation (Wallace, 2006) is influencing contemporary thinking in areas of neurological processing of emotion and behavioral regulation (Goleman, 2003). Although these do not necessarily fall within what are considered spiritual or religious domains of experience, such capacities are generally framed within Buddhism as potentiating a capacity for spiritual growth and well-being. According to traditional Buddhism, these capacities are cultivated within the context of religious practice, much as other religions also address the value of ethical action and emotional well-being.

Often viewed as more esoteric and challenging to conceptualize within contemporary psychology are the rich traditions of Tibetan Vajrayana Buddhism. The complex mandala images of this tradition are visually engaging, with elaborate colorful images of various deities seated on stylized lotus blossoms, surrounded by richly colored smaller figures, swirls of patterns and figures, and spikes of fire. These images are easy to compartmentalize as primarily “religious” in nature. Therefore, in the context of the present discussion, it is useful to consider further how these images, and the practices related to them, are intended to engage both the psychological and spiritual aspects of human functioning and struggle. For example, each deity is intended to express an aspect of self, with the rich imagery of the mandala expressing the constant dialogue between these aspects of self and the complexity of the surrounding world, both inner and outer, which has been effectively tied to Jungian psychology (Jung, 1958/1970; Preece, 2006). For example, among the more prominent deities, Chenrezig represents enlightened compassion, Manjushri represents wisdom and clear intellect, and Vajrapani represents the power of enlightened activity. Each tantric deity “occupies a central position” on the threshold of the interface between the sacred and the relative, or in Jung’s terms, between the archetypal collective unconscious and the swirls of daily life, both conscious and unconscious (Jung, 1959/1981). Specific mantras associated with each deity are intended to evoke related capacities. On mani padme hum, “O the Jewel in the Lotus,” one of the best known mantras, is intended to evoke compassion associated with Chenrezig, whereas the wisdom mantra of Manjushri is om ah ra pa isa na dhih. The purpose of repeating the mantra is psychological and physical healing, associated not with the meaning of the words or sounds per se but with imputed shifts in internal “energy winds” associated with the distinct sounds of the mantra, when appropriately
practiced. Far less esoteric, but also exploring the potential interface of Vajrayana Buddhism with psychology, are the eloquent dialogues between the Dalai Lama and prominent psychologists, including Daniel Goleman, Richard Davidson, and others, that engage more accessible psychological themes, such as emotional intelligence and neuroplasticity (Goleman, 2003; Sharp, 2011).

Influence on Contemporary Psychotherapeutic Traditions
Buddhist tenets are compatible with various theoretical perspectives within both basic and applied psychology (Didonna, 2009; Mruk & Hartzell, 2003). Within clinical psychology, each of the major theoretical clinical traditions—psychodynamic, humanistic, and cognitive–behavioral—have identified fruitful ways to draw on the traditions of Buddhism to inform and engage productive dialogue. Within psychodynamic theory, the dialogue could be argued to have begun with Jung’s interest in Buddhism (Daniel, 2007). Interest then expanded in the United States, with Karen Horney’s and Erich Fromm’s involvement with Japanese Zen Buddhism in the 1950s, and continues through the work of Rubin (1996, 1999), Epstein (Epstein, 1990, 1995, 2001), D. Brown and Engler (1984), Germer and his associates (Germer, Siegel, & Fulton, 2005), and others, influenced broadly by Zen, Vipassana, and Tibetan traditions.

Humanistic–transpersonal psychology has embraced each of the traditions—including Zen (e.g., Mathers, Miller, & Ando, 2009; Rosenbaum, 1998), Vipassana (e.g., Kornfield & Walsh, 1993), and Vajrayana—at Naropa University (e.g., Wegela, 2009) and elsewhere, informing approaches to both individual and group psychotherapy. Within this arena, issues of spiritual engagement have been particularly salient and are consistently respected as core to individual growth and well-being (Brach, 2003; Marlatt & Kristeller, 1999; Walsh, 1999).

Mindfulness meditation practice has been particularly influential within cognitive–behavioral perspectives, as melded into the MBSR, mindfulness-based cognitive therapy (MBCT; Segal, Williams, & Teasdale, 2002), mindfulness-based relapse prevention (MBRP; Bowen et al., 2009; Marlatt et al., 2004), and mindfulness-based eating awareness therapy (MB-EAT; Kristeller & Wolever, 2011) programs, among others (for clinical overview, see Sears, Tirch, & Denton, 2011) and as an explicit contributor to dialectical behavior therapy (Linehan, 1993). Moving outside these three traditional schools and drawing on other directions for therapeutic change are a number of other programs informed by Buddhist perspectives and practices. These include spiritual self-schema therapy (Avants & Margolin, 2004) for individuals struggling with drug addictions and vulnerable to HIV, the melding of Buddhism with the Twelve Step approach to treating alcohol and drug addiction developed by Kevin Griffin (Griffin, 2004), and the link that Daniel Siegel has created between attachment theory and mindfulness approaches (Siegel, 2010; see also Volume 2, Chapter 10, this handbook), among others. The question also needs to be considered as to why Buddhism would have so much continuing, and even deepening, influence on psychology and in the broader community. It can be argued that (a) Buddhist perspectives are consistent with a complex view of human functioning yet one that remains compatible with, and respectful of, the process of science; (b) Buddhism presents a framework that is compatible with a nondualistic approach to understanding the interaction of the mind and body; (c) Buddhism provides a framework within which spirituality and related processes are respected, yet one that does not necessarily entail belief in particular religious structures or emanations of God or gods; and (d) Buddhism supports community in the form of sanghas and retreat environments, yet it also provides structure for meaningful individual practice in the form of meditation practice, reading, and clear ethical guidelines.

One powerful dimension that is being integrated increasingly into therapeutic approaches is the concept of cultivating nonjudgmental acceptance of both self and others as reflected in acceptance and commitment therapy (Hayes et al., 1999) and dialectical behavior therapy (Linehan et al., 1999). Loving-kindness meditations, simple guided practices introduced through the writings of Thich Nhat Hanh (Hanh, 1975, 1991) and others (Chodran, 1996; Kornfield, 1993), have been increasingly
integrated into other mindfulness-based interventions, such as MBRS, MBRP, MBCT, and Mindfulness-Based Eating Awareness Training (MB-EAT). They reflect the compassion perspective of Mahayana Buddhism and are spiritually engaging yet secular in content. Thich Nhat Hanh is also notable for having actively engaged in a dialogue between the meditative and spiritual traditions of Buddhism and Christianity in his book Living Buddha, Living Christ (1995), as has J. W. Jones (2003) in his reflections on the commonalities between Christianity and Buddhism when applied more holistically to the purposes of psychotherapy.

The fact that Buddhism can be considered a well-developed psychological system, distinct from the religious tenets, is essential not only to understanding the influence of Buddhist perspectives on current psychological models but also in representing Buddhism to the general public. In particular, the interweaving of psychology, philosophy, and religious belief within Buddhism can lead to confusion in the course of application of Buddhist principles psychotherapeutically. Part of the difficulty lies in the marked efforts within Western intellectual traditions over the past 500 years to draw sharp lines between religion and philosophy, and more recently, psychology. Clients, upon hearing of meditation-based treatments, may feel that engaging in them somehow confuses their therapeutic efforts with their allegiance to their own religious beliefs. One common approach to this quandary is to secularize the practices as much as possible, avoiding any mention of Buddhism or even spirituality. An alternative approach is to acknowledge the linkage with Buddhism, but to note that meditation (and related practices) are drawn from Buddhist perspectives on psychology and on ways to promote general well-being, while at the same time acknowledging that meditation practices are used within all religions as a means to engage “inner wisdom” and cultivate spiritual well-being.

Impact of Buddhist Practice on Well-Being: Empirical Evidence

Despite the explicit engagement of fundamental spiritual issues in much of the Buddhist-informed literature on psychotherapy, a paradox exists regarding research on Buddhist practice and psychological well-being. Research on the psychological and physical effects of meditation practice has exploded over the past 20 years, much of it drawn from Buddhist traditions (see Chapter 17 in this volume), yet much of this work also has explicitly disengaged itself from any religious context. Conversely, spiritual or religious-based coping has been investigated within the context of other traditions, yet rarely within Buddhism. Researchers are beginning to call for this obvious gap to be addressed (Dimidjian & Linehan, 2003; Kristeller, 2007). Only a modest amount of research has explored the impact of Buddhism on psychological adjustment and well-being outside of research on meditation as an intervention component. Leaving the review of that literature to Chapter 17 in this volume, the following summary focuses on research that more explicitly explores Buddhist experience or spiritual effects within Buddhist-related practices.

One creative study (Cook, Sandage, Hill, & Srawn, 2010) compared Cambodian immigrants in the United States who self-identified as Buddhists with those who had converted to Christianity. A Euro-American Christian group was also included for further comparison. The study combined qualitative and quantitative methods to explore the interaction of culture and religion on understanding of everyday virtues. There were a number of themes similar for both Cambodian groups: the importance of duty and responsibility as distinctive motivations, the interrelatedness of the virtues, and the domains of their influence (societal in collectivist perspectives, narrower in individualist perspectives). Warmth-based virtues, such as compassion and forgiveness, generally were described in religious terms and were ranked relatively high by all groups. In contrast, conscientiousness-based virtues, such as self-control and justice, were described in religious terms by the Buddhists but as cultural by Cambodian Christians. The Buddhists also more highly valued conscientiousness-based virtues than did the Euro-American Christians, with the Cambodian Christians at an intermediate level.

Another study investigated the noted resilience of Tibetans in the face of persecution by the Chinese. Informed by the presumption that Buddhist beliefs and practices would serve to modulate and
protect against posttraumatic stress, 102 Tibetans who had survived torture and imprisonment by the Chinese before fleeing to India were interviewed using qualitative approaches (Elsass & Phuntsok, 2009). In general, they identified both their political beliefs and engagement and their Buddhism as important coping strategies.

A recent exploratory study (R. E. Phillips et al., 2009) utilized qualitative interviews, informed by grounded theory methodology, with 24 practicing Buddhists (all but one were American Buddhists who converted as adults) to investigate how they drew on their understanding of Buddhism to help cope with stress. The most common theme was “right understanding,” drawing on the principle that experience of stress and related suffering often was due to inaccurate perceptions of the world; Buddhist concepts of impermanence, compassion, karma, interbeing, dharma, and “not-self” were mentioned. The second primary theme (21 of 24 participants) was use of meditative techniques to deal with stress; the way meditation was used varied from tension reduction, to distraction, to engaging the spiritual value of a particular mantra (such as a loving kindness meditation). The third domain (20 of 24) was use of mindfulness, separate from meditation practice, as an active way to observe, rather than react to, distressful thoughts and emotions, and to cultivate acceptance of things as they are. In addition, most made explicit reference to Buddhist precepts and the Eightfold Path for guidance to act in helpful, rather than self-centered, ways. Less frequently (seven out of 24), individuals reported drawing on Buddhist friends, mentors, or a sangha (Buddhist community) for emotional or instrumental support. The low frequency was hypothesized to be both a function of sociocultural isolation in this group of primarily converts and of the low density of Buddhists in the United States. In truth, the Buddhist community within the United States places far less emphasis on the social support of a faith congregation than do most Judeo-Christian groups. Interestingly, the equivalent of negative religious coping or religious struggle (see Chapter 25 in this volume) was voiced by 14 of 24, taking the form of self-blame (“if I practiced more/better, then I wouldn’t be as distressed”), or as experiencing the burden of staying true to Buddhist precepts in the face of misfortune.

As noted earlier, a number of treatment programs that incorporate mindfulness-based meditation, generally modeled on Kabat-Zinn’s MBSR program (Kabat-Zinn, 1990), draw on Buddhist principles of mindfulness, loving kindness, and cultivating non-reactive observation of thoughts, emotions, body feelings, and behavior. The aim of these programs is to help individuals cultivate a higher level of functioning and inner wisdom in the face of a variety of issues. Although each of these programs is informed by Buddhist theory and practice, they are neither explicitly Buddhist nor spiritual in their content (for more details on meditation, see Chapter 17 in this volume) except in limited ways. For example, in the MB-EAT program (Kristeller & Wolever, 2011), participants are encouraged to cultivate both “inner wisdom” and “outer wisdom,” drawing on higher capacities to inform their intentions and choices in relation to food, consistent with the conative or motivational element of Wallace and Shapiro’s model of meditative processes (2006). Spirituality is not explicitly mentioned until late in the MB-EAT program, and then in the context of a guided wisdom meditation. At that point, participants often reflect that they realize they have been increasingly drawing on their spiritual selves in rebalancing their relationship to eating and food. The MBSR program, without explicitly engaging spirituality, has been shown to increase scores on a measure of spiritual well-being; furthermore, this increase showed a strong relationship to improvement on measures of physical health (Carmody et al., 2008).

Spiritual self-schema therapy (often referred to as 3-S+; Avants & Margolin, 2004), developed at Yale University School of Medicine for the treatment of HIV-positive individuals or those at risk for drug addiction, was designed explicitly to engage the “spiritual self.” Although it is tailored to each participant’s own spiritual and religious beliefs, it draws systematically on Buddhist principles. As noted, a Buddhist framework was chosen because of its compatibility with cognitive–behavioral principles and the appropriateness of drawing on the Noble Eightfold Path for individuals struggling with drug addiction and those at high risk for HIV infection.
A randomized study of chronic heroin and cocaine abusers (Margolin, Beitel, Schuman-Olivier, & Avants, 2006) found substantially stronger effects for those enrolled in the spiritual self-schema therapy than in standard care on decreases in drug use, and in a shift in personal identification from "addict self" to "spiritual self." In a randomized study with individuals who were HIV positive (Margolin et al., 2007), there was a decrease in impulsivity and intoxicant use; greater use of spiritual practices; and higher levels of motivation for HIV prevention, drug abstinence, and medication adherence. This research, therefore, supports the value of explicitly drawing on spiritual expression, and the value of a framework for informing therapy that blends a cognitive-behavioral approach with Buddhist principles while respecting and supporting individual's own religious beliefs.

SUMMARY AND CONCLUSION

The range and depth of the influence of Buddhism on U.S. religious culture and on the psychology of spirituality and well-being has been reviewed. Buddhism has been a significant world religion for more than 2,000 years. It first came to the attention of the U.S. public through the efforts of the transcendentalists of the mid-to late 1800s, who perceived the unique value of a religious tradition that also spoke to the psychological validity of the spiritual experience. Buddhism has continued to influence psychology in increasingly substantive ways, since the early development of psychology as a discipline. It can be argued that Buddhism has uniquely and in many identifiable ways enriched psychological thinking and practice in this country. Buddhism also has, and will continue, to enrich the dialogue regarding the distinctions and complex interactions between psychological well-being, religion, and spirituality.

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