Digital Mindfulness: Exploring Buddhist Psychological Practices in Online Mental Health Communities

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Introduction

Buddhist psychology is fascinating in the digital technology encountering mental health. It is against this context of the escalating mental illness burden in the world; with the World Health Organization (2022) estimating nearly one billion individuals have a mental illness that virtual communities have become de-stigmatised and accessible sources of mental health care. Meanwhile, Buddhist-inspired interventions, including mindfulness-based stress reduction (MBSR) developed by Kabat-Zinn (1990), institutionalised in the domain of clinical psychology have been shown to have a high level of empirical support of their effectiveness in the treatment of anxiety, depression and pain (Hofmann et al., 2010; Khoury et al., 2013).

However, less has been researched concerning the adaptation of these practices into exclusively online contexts, not as part of formal clinical courses. Online mindfulness communities have become an important part of the culture in Sri Lanka, where Theravada Buddhism is a common practice. This notion of saṅgha (community of practitioners) is central to Buddhism and its online incarnation in the form of cyber saṅgha offers a valuable source of contemplation as to the concepts of authenticity, healing and commodification (Lövheim, 2013; Campbell, 2012).

This study examines the application of Buddhist psychology in digital mental health, and how this may affect the future of Buddhist counseling as a spiritual-psychological practice.

Theoretical Framework

Abhidhamma Piṭaka system of Buddhist psychology, as developed by such commentators as de Silva (1979) and Bodhi (2011) provide a complete model of the mind encompassing cognition, emotion, volition and consciousness. The practice of sati (mindfulness) that is in harmony with the practice of karuṇā (empathy) and upekkhā (equanimity) is the core of this system that generates a harmonious state of mind and compassionate initiation (Goleman, 1988).

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The theoretical basis of this research is based on Buddhist psychology, Foucauldian discourse analysis (Foucault, 1972) and virtual ethnography, as developed by Hine (2000). This allows one to consider the power relations, identity and discourse formation and subversion within digital space therapies. In addition, the concept of remediation (Bolter, Grusin, 1999) is applied to explain how archaic meditation methods are re-mediated in the modern digital media in a way that does not abolish aspects of the original methodology, but builds on new types of interaction.

Methodology

The study conducted a qualitative virtual ethnography conducted in three online communities of Buddhists practicing mindfulness, based on Facebook groups, WhatsApp communities and mindfulness apps in Sri Lanka, over eight months. Purposive sampling was used to select communities expressly applying Buddhist psychology principles leading to the selection of twenty-two meditation community members and six facilitators.

Scholars involved in data gathering conducted participant observation of an online interaction (social media platforms and apps), in-depth interviews (using video conferencing) and analysis of publicly accessible community posts and meditation tutorials. Thematic discourse analysis (Braun and Clarke, 2006) was performed based on Buddhist psychological categories to examine the narratives that pertained to healing, sense of community and efficacy. The ethics involved informed consent, anonymity and reflexivity of the researcher role in the cultural setting of the Buddhists (Markham and Buchanan, 2012).

Findings and Discussion

Online Mediation of Collective Healing and Ethics

The most important understanding in this case was that the Buddhist mindfulness communities online are not only the sources of information but also the areas of the collective healing with emphasis on shared moral values. Throughout, participants said that their use of mettā (loving-kindness) meditation in groups, through text, audio and video, created a feeling of interpersonal connectedness and not feeling alone. This observation agrees with the Neff (2011) article about self-compassion where she identifies common humanity as an element of well-being. We can observe that the online saṅgha is performing the same role as that of communal practice in general, but in a different relational structure.

Digitalising Buddhist Practices

The teachers were ingenious in modifying contemplative practices into the digital platform. The instruments of guided ānāpānasati (mindfulness of breathing) were presented in real-time, through a live stream, and asynchronous resources, including pre-recorded Dhamma talks and writing prompts, enabled flexible interaction with time zone. This agrees with Turkle (2011) observations of flexibility of practice and identity in networked environments. Notably, some of the facilitators stated that Buddhist psychological principles were modified to address psychological problems (anxiety, stress, grief) in contemporary society in complementary terms to conventional psychotherapy (Germer & Siegel, 2012).

Limits: Surface Level, Commodification and Distance

Irrespective of these opportunities, participants and facilitators identified challenges. One was the problem of superficiality, the adoption of mindfulness content as an instrument of digital health consumerism, not linked to the ethical and soteriological (salvation) practices of Buddhism. This is similar to McMahan (2008) observation of the modernist re-branding of Buddhism, whereby practices of contemplation are displaced in their settings and appropriated by secular therapies. What is more was the absence of embodied co-presence (the physical presence of the saṅgha) which was perceived as a withdrawal, diluting the strength of community and teacher-pupil relationships (Dreyfus, 2003). Monetization of religious practice by using subscription-based mindfulness apps was also challenged to have introduced marketing economy and capitalism into the realm of Buddhist practices and this is inconsistent with generosity (dāna) and detachment (virāga).

Digital Continuity and Rupture: mindfulness

Concept of the digital mindfulness that we will evolve here is a continuation of and a variation on the classical Buddhist counseling techniques. The theme of continuity can be traced through the primacy of sati and karuṇā and upekkhā as principles of guidance and continuity of transmission between teachers and students although through the medium of digital. The embodied, a-temporal and anonymising features of online communication can be seen to have rupture with the traditional concept of moral community. The present study is in line with the findings presented by Baer (2003) that mindfulness-based interventions are most effective when they are implemented in a broader ethical-relational context, which means that online contexts have to be thoughtfully constructed in this direction.

Conclusion

This study demonstrates that the online Buddhist mindfulness communities in Sri Lanka are novel therapeutic and spiritual ecosystems which reorganize Buddhist counselling. They introduce actual therapeutic, collective healing and new ethical and epistemological challenges concerning authenticity, commercialization and demarcation of digital rationality. The concept of digital mindfulness is both indicative and contradictory of this innovation.

In order to gain a clearer insight into the therapeutic benefits of online Buddhist groups, research in the future should focus on the long-term psychological benefits of such involvement, the role of digital literacy and socio-economic factors on the participation in the community and ethical issues surrounding digital Buddhist counseling. As online interventions gain more and more responsibility in mental health, the Buddhist psychological tradition, having been an advanced source of knowledge of mind, suffering and liberation, offers a valuable and timely contribution to the resources utilized to mitigate the worldwide mental health crisis.

Keywords - Buddhist Psychology, Compassion, Cyber Saṅgha, Digital Mindfulness, Mental Health

References

Baer, R. A. (2003). Mindfulness training as a clinical intervention: A conceptual and empirical review. *Clinical Psychology: Science and Practice*, 10(2), 125–143. https://doi.org/10.1093/clipsy.bpg015

Bodhi, Bhikkhu. (2011). What does mindfulness really mean? A canonical perspective. *Contemporary Buddhism,* 12(1), 19–39. https://doi.org/10.1080/14639947.2011.564813

Bolter, J. D., & Grusin, R. (1999). *Remediation: Understanding new media*. MIT Press.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology,* 3(2), 77–101. https://doi.org/10.1191/1478088706qp063oa

Campbell, H. A. (2012). *Digital religion: Understanding religious practice in new media worlds.* Routledge.

de Silva, P. (1979). *An introduction to Buddhist psychology*. Macmillan.

Dreyfus, G. (2003). *The sound of two hands clapping: The education of a Tibetan Buddhist monk.* University of California Press.

Foucault, M. (1972). *The archaeology of knowledge* (A. M. Sheridan Smith, Trans.). Pantheon Books.

Germer, C. K., & Siegel, R. D. (2012). *Wisdom and compassion in psychotherapy: Deepening mindfulness in clinical practice.* Guilford Press.

Goleman, D. (1988). *The meditative mind: The varieties of meditative experience.* Tarcher.

Hine, C. (2000). Virtual ethnography. SAGE Publications.

Hofmann, S. G., Sawyer, A. T., Witt, A. A., & Oh, D. (2010). The effect of mindfulness-based therapy on anxiety and depression: A meta-analytic review. *Journal of Consulting and Clinical Psychology,* 78(2), 169–183. https://doi.org/10.1037/a0018555

Kabat-Zinn, J. (1990). *Full catastrophe living:* Using the wisdom of your body and mind to face stress, pain and illness. Delacorte.

Khoury, B., Lecomte, T., Fortin, G., Masse, M., Therien, P., Bouchard, V., Chapleau, M.-A., Paquin, K., & Hofmann, S. G. (2013). Mindfulness-based therapy: A comprehensive meta-analysis. *Clinical Psychology Review,* 33(6), 763–771. https://doi.org/10.1016/j.cpr.2013.05.005

Lövheim, M. (2013). *Media, religion and gender: Key issues and new challenges.* Routledge.

Markham, A., & Buchanan, E. (2012). *Ethical decision-making and internet research: Recommendations from the AoIR Ethics Working Committee* (Version 2.0). Association of Internet Researchers.

McMahan, D. L. (2008). *The making of Buddhist modernism*. Oxford University Press.

Neff, K. D. (2011). Self-compassion: The proven power of being kind to yourself. William Morrow.

Turkle, S. (2011). *Alone together: Why we expect more from technology and less from each other.* Basic Books.

World Health Organization. (2022). *World mental health report: Transforming mental health for all.* WHO Press. https://www.who.int/publications/i/item/9789240049338