Pleasing to behold: healing and the visualized body

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ABSTRACT  Techniques of mental visualization, and the visualization of the body of the Buddha in particular, are central to many Buddhist meditational practices. The paper begins with a description of a Tibetan healing ritual centred on the visualization of the Buddha in his healing form. This is followed by two accounts of the meaning of this practice: first as elucidated within the Buddhist philosophical framework, and second, from a sociological standpoint. Core elements of the Buddhist philosophy of the body underpinning this practice are elucidated: ideas relating to the provisional nature of reality, interdependence and the central concept of the mutability of the self. Recent theorizing within the sociology of the body views the self as being charged with emotions, discusses body image and aims to deconstruct our notions of materiality. The paper draws out the similarities between aspects of Buddhist philosophy and current sociological thinking about the body. It calls for the need to understand these practices in their own terms in order to fully appreciate their importance.

Introduction

Recently we have witnessed an exponential growth in the literature focusing on the issue of how we should conceptualize the body; this is true not just within the discipline of sociology, but also in philosophy (Bury, 1995; Kelly & Field, 1996; Shilling, 1996; Williams, 1996). Some of this work has discussed the importance of Christianity in forming our ideas about the body and corporeality (Turner, 1994; 1995). Rarely, however, has this work considered Eastern conceptualizations of the body, although ideas about the nature of the body have formed a central concern within Buddhist and Hindu religious philosophy (Govinda, 1969; Inagaki, 1994; Singh, 1976).

I believe some interesting parallels can be drawn between current sociological thinking and Eastern philosophical ideas, and further analysis of such similarities will help advance and clarify theoretical thinking in this area. A good way to accomplish this task is to consider meditation practices directed towards healing, both of physical and mental problems. If we first review the current literature on the body in relation to meditation practice most of the interest has come from
psychologists (Fasko et al., 1992; Kwee, 1990; Ornstein, 1977; Shapiro & Giber 1978). In terms of general health researchers have found that meditation produces decreases in respiration, heart rate, blood pressure and muscle tension (Benson 1977; Shapiro & Giber, 1978; Wallace & Benson, 1972). There is also evidence to suggest that meditation can help patients with bronchial asthma (Honsberger & Wilson, 1973). If we turn to meditation’s possible effects on mental health, studies have shown that it may reduce insomnia (Woolfolk et al., 1976) and some symptoms of psychiatric syndromes (Glueck & Stroebel, 1975). Recent work has corroborated such findings (Benson et al., 1990) and produced further research in this area. Studies have shown: reduced levels of psychological symptomatology (Astin, 1997), enhanced coping (Edwards, 1997; Emavardhana & Tori, 1997; Leifer 1999), statistically significant improvements in both subjective and objective symptoms of anxiety and panic (Miller et al., 1995) and reduction in pulse rate (Suduang et al., 1991). Work has also been done on psoriasis (Kabat-Zinn et al., 1998).

All of this work is written within a particular psychological and empirical paradigm. The distinction to be drawn is between positivist and interpretative frameworks (Benson & Hughes, 1983; Schwartz & Jacobs, 1979). The current paper attempts to use the interpretative sociological approach to move forward on these issues. This approach takes the philosophical ideas underpinning meditation practice seriously and aims not to be reductionist, as psychological approaches have often been (Silverman, 1985).

This article attempts to remedy the situation by considering one Buddhist healing meditation, approaching it both from the Eastern philosophical and the Western sociological viewpoints [1]. I will first describe the Tibetan Buddhist healing meditation practice in its shortest and simplest form. This practice involves the creative visualization of the Medicine Buddha, Vaidurya in Sanskrit, Sanje Menla in Tibetan. As Buddhism developed and spread beyond its birthplace in India increased emphasis was placed on its devotional side and focus shifted from a concern with the details of the life of the historical Buddha towards the cosmic expression of the Buddha nature. Within the schools of Mahayana and later Vajrayana Buddhism there developed a pantheon of celestial Buddhas and Bodhisattvas (enlightened beings) who were believed to reside in various universal pure realms (Conze, 1988). These represent various aspects of the absolute Buddha-nature. Among the laity practices often centred round numerous cults and petitionary forms of worship took place. Various Buddhas and Bodhisattvas were seen to have the power to relieve both physical and mental suffering in its various forms (Bokar Rinpoche, 1991; Clifford 1992; Zopa, 1994). One of the most popular and prevalent of these cults within devotional Buddhism is the Medicine Buddha. It is believed that in the medicine pure realm called Tanatuk: ‘Pleasing to Behold’, the Buddha in his mystically altered bodily form of Vaidurya expounded the medical treatises (Donden, 1986). Praying to the Medicine Buddha and reciting his mantra is believed to have health giving effects.

The method used in this paper is a combination of textual analysis, both of the root text and the elucidation of the text, both from books and oral instruction,
amplified by reflection on my personal experience of taking part in similar meditation practices over a number of years. Social scientists have analysed texts in numerous ways and trace slightly different theoretical lineages. I am working within the field of discourse analysis and the stance that I adopt in this paper has close similarities to what Manning and Cullum-Swan (1998) have termed semiotic discourse analysis. Here the aim is not just to focus on the meaning, structure and content of the documents but also to show how these features relate to our conceptions of self and other in the social world.

The article begins by describing the visualization of the Medicine Buddha. This will be followed by two accounts of the meaning of this practice: first as elucidated within Buddhist teaching, and second, from a sociological standpoint. I will conclude by highlighting similarities between the two approaches and drawing out the implications for further work in this field.

**Description of the healing meditation**

Like most devotional prayer (*puja*) within Eastern religious traditions, the service can be analysed by breaking it down into its constituting parts (Humphrey & Laidlaw, 1994; Laderman & Roseman, 1996). Detailed variants of the text can be obtained from Buddhist centres world-wide and even from the World Wide Web (Gyatso, 1998); simplified forms are given in Clifford (1992) and Zopa (1994). The practice of the Medicine Buddha can be divided into four sections (Figure 1). The first is described as preparatory, is common to most Buddhist practices and involves the chanting of prayers covering the two elements of going for refuge in the Buddha, the Dharma (the Buddhist teaching), the Sangha (the community of Buddhist monks and nuns) and the wish to engender the enlightened compassionate mind.

The second section consists of the main practice, which is the meditation on the Medicine Buddha. In its simplest form this involves the two aspects of visualizing the Deity and the recitation of his protective name or mantra. At the commencement of this stage the visualization is generated and depending on the version of the practice this is done either in a sudden or an elaborate fashion. In its simplest form the practitioner would visualize the Deity appearing instantly seated on a lotus flower and a moon disk about nine inches in height about four inches above their head. He is iconographically depicted as sitting cross-legged, the left hand resting in his lap and holding a bowl containing *amrita*, the elixir of long life, the right hand is resting on his knee, palm outward holding a shoot of the medicinal Myrobalan plant between forefinger and thumb. Detailed iconographic representations can be seen in the collections of Avedon and Bradley (1998) and Parfionovich *et al.* (1953). His colour is deep blue, the colour of lapis lazuli. It is always insisted that the visualization should not be solid but translucent filled with light and similar in appearance to a rainbow. Again depending on which version of the practice is described the practitioner would chant either a short or elaborate set of devotional and petitionary prayers to the Buddha in his healing form, for example:
I beseech you, compassionate Medicine Guru, holding in your right hand the king of medicines, symbolising your vow to help all pitiful sentient beings plagued by the four hundred and twenty-four diseases, please grant me your blessings. (Gyatso, 1998)

At the end of these prayers multicoloured light is visualized as emanating from the body of the Buddha, this light radiates in all directions and is imagined as purifying all beings in all realms of the universe:

Granting your request, from the heart and holy body of the King of Medicine, infinite rays of light pour down completely filling your body from head to toe. They purify all your diseases and afflictions due to spirits and their causes, all your negative karma and mental obscurations. In the nature of light, your body becomes clean and clear as crystal. (Gyatso, 1998)

As this is being visualised the practitioner would commence to chant the mantra: Teyata: Om Bekanze Bekanze Mahabekanze Bekanze Raza Samudgate Swaha (see Clifford, 1992). As this section progresses everything in the practitioners surroundings, and indeed in the universe, is imagined to be in the process of change and being transformed into the Medicine Buddha’s realm of Tanatuk, ‘Pleasing to Behold’. Indeed the practitioner may also visualize that their own body and that of others is transformed into the appearance of the Buddha. This section will continue for some time with the practitioner attempting to stabilize the visualization while continuing to recite the mantra.
Once this has been accomplished a very important section follows. Just as the visualization has been gradually built up so now it is dissolved. It is recommended that the practitioner rest in this awareness for a short period of time. The final section involves the dedication of any merit gained by the practice to all sentient beings and again is common to all Buddhist practices. As the practitioner rises from meditation s/he is exhorted, at all times, to see all thoughts as sharing the medicine Buddha’s mind, perceive all sounds as his mantra and all forms as his manifestation (Clifford, 1992, p. 87).

**Buddhist meaning**

How can we relate the major points of this description to Buddhist religious philosophy? First, an important philosophical idea central to both Mahayana and Vajrayana Buddhism is that of skilful means. The concept of skilful means (upayakausalya) is:

the ability to bring out the spiritual potentialities of different people, by statements or actions which are adjusted to their needs and adapted to their capacity. (Conze, 1988, p. 50)

The presentations of celestial Buddhas and Bodhisattvas within the Mahayana are often seen as expedients which, though ultimately untrue, from the relative standpoint provide a focus for devotion and are given to help practitioners ultimately leading them towards salvation and enlightened understanding, in particular to overcome the inner sickness of attachment, hatred and ignorance. The presentation of celestial Buddhas in Mahayana texts is also linked to the cosmological idea of the decline and decay of the age and thus the degeneration of the true teachings. In different traditions the current age is often described as Mappo or Kala Yuga (see Conze, 1988; Inagaki, 1994). As stated in the sutra of the Medicine Buddha:

In the future when your Dharma and general spiritual practice are in decline, when the human beings in this world are spiritually impoverished, when their attachment, anger and ignorance are so strong and difficult to control that they experience continual physical suffering, mental pain, fears, and dangers, and many incurable diseases, who will release them from this suffering and protect them from danger? Who will help them to overcome the three mental poisons? (Gyatso, 1998: 2)

The central Buddhist focus on attachment, anger and ignorance is thus seen to be directly related to mental and physical illness.

The meditation practice under discussion can thus be described within the context of skilful means. It is a skilful means for harnessing the mind’s general business by letting it become preoccupied with the details of the visualization.
This draws it from the outside world and its concerns, so that it can calm down of its own accord. The colours and content of the visualization provide interest but at the same time lead to stability. Often one is told that if the mind is excited to focus on the lower parts of the Buddha’s form or on the lotus or throne. By contrast if one then becomes mentally dull then one is encouraged to focus on the upper parts of the Buddha’s body, for example, on the face or between the eyebrows.

A second point to note is that the bodily form of the Buddha is extremely important particularly as it relates to the central Buddhist religious doctrine of the three bodies or kayas of the Buddha. In Mahayana Buddhist religious philosophy (which encompasses not just elements of Tibetan, but also of Chinese, Korean and in particular Japanese schools), the distinctions are between the Nirmanakaya the historical Buddha, the Sambhogakaya, which encompasses the whole range of celestial Buddhas and Bodhisattvas, and finally the Dharmakaya, which because of its absolute and formless nature cannot be conceptualized or indeed visualized (Dalai Lama, 1975). The Dharmakaya is often called the enlightenment body, the state of Buddhahood itself: it is the nature of Mind, or emptiness (Jamgon Kongtrul, 1992: 126; Khyentse Rinpoche, 1988). These distinctions are often presented in terms of temporal duration: the Dharmakaya is beginningless and endless, the Sambhogakaya has a beginning but is endless, while the Nirmanakaya is temporary (Inagaki, 1994). The Buddha Sakyamuni is seen to have encompassed all three bodies.

These philosophical distinctions also have their individual personal bodily correlates. These are the three centres or ‘gates’, each correlating with one of the three bodies of the Buddha. The first is the head centre (at the crown of the head, or between the eyebrows); this corresponds to the Nirmanakaya or physical body. The second is the throat centre, which corresponds to the Sambhogakaya and subtle energy flows and speech. And the third is the heart centre, which corresponds to the mind or the Dharmakaya. Towards the end of the practice different coloured lights emanating from the three different sources and aspects of the Buddha’s body are visualized as merging with the same three aspects of the practitioner’s body. The focus is on the purification of the bodily elements, and this may be accomplished by means of sound and visualised light (see Govinda, 1969; Singh, 1976). As Clifford states:

In Buddhist tantric yoga the sacred universe is internalized. The basic practice is to understand the correspondences between ‘the cruder karmic body’, the human body, and the body of absolute truth, ‘the pure essence of Buddha’s Body’, which has been concealed by clingings and confusions. The intermediary links between these two bodies are the subtle life-force airs, psychic veins, and vital essences which support physical existence. Through tantric practice, the clingings and confusions are cleared away and these life-forces, veins, and essences are purified and transformed to reveal the three inherent bodies of Buddhahood. (Clifford, 1992, p. 65)
A key issue is the idea that everything can be viewed as forms of energy. Not only reduced to forms of energy but also transformed from one type or modality of energy to another. Notions of solidity are thus counterbalanced with ideas of change and mutability. The attempt is always to move away from the fixidity of the normal mind and its attitude towards the world.

This is also reflected in the description of the composition of the body. The Buddha is seen to be physically present but not solid, to be of light and similar to a rainbow, to be luminous but not solid. This concern with the body of light is of course present in other religious traditions (Johnston, 1995).

There are then elements in this practice which attempt to undermine our notions of a fixed and rigid self-identity, to show rather that it is changeable, mutable and constantly shifting. The concepts of projection and transformation are central to this discussion:

All phenomena are projections of mind.
Mind itself does not exist
And is empty in its being.
Although empty, it manifests everything without obstruction. (Jamgon Kongtrul, 1992, p. 22)

A third, philosophical, concern approached experientially in the meditation is the relationship between Samsara, the imperfect world in which we find ourselves with all its suffering, and Nirvana, the perfect state where suffering has ceased to exist. In Buddhist religious thinking this discussion revolves around the relationship between the relative and the absolute worlds. It is often expressed in the clear religious belief that states that Samsara and Nirvana are inseparable. The problem arises from our view of the situation not with the situation itself. These ideas relate closely to a central feature of Buddhism that it incorporates a monist religious/philosophical structure. As Conze has stated: ‘If all is one and the same, then also the Absolute will be identical with the Relative, the Unconditioned with the Conditioned, Nirvana with Samsara’ (Conze, 1988, p. 51). Writers involved in Buddhist/Christian dialogue have been deeply aware of this feature of Buddhist religion and commentators from both sides of the dialogue have discussed the similarity between certain ideas in Buddhism and the occluded monist side of Christian theology and mystical experience particularly as expressed in the ideas of Meister Eckhart (Johnson, 1979; Mullen, 1994).

In the form of meditation under discussion all elements of the individual’s lived experienced field (i.e. samsara) are visualized as being temporally replaced by elements of a pure land—in other words nirvana. Generally it is recommended that the visualization be carried out with the eyes open:

The dharma is a method that enables us to go from the state of ordinary being to the state of awakened being. (Bokar Rinpoche, 1991)

Closely connected to the idea of the inseparability of the relative and the absolute
worlds is the central philosophical tenet within Mahayana Buddhism of the empty or void nature of all phenomenon. This is reinforced in the final stage of the meditation practice:

Vajrayana meditations are divided into two phases . . . The phase of creation . . . during which one mentally creates the appearance of the deity. The phase of completion . . . during which one dissolves the appearance into emptiness. (Bokar Rinpoche, 1991)

The meditation practice is a skilful means by which one may recognize, or get a taste of, the empty or conditioned nature of all phenomena; that each is nothing in and by itself. As has been stated phenomena include such entities as physical and mental sickness.

Sociological account

From the above discussion we can identify various elements of this practice that would be of interest to a sociologist, in particular those concerned with the interpretation and definition of the present reality, and the focus on the body. One sociological approach to this material is via the theoretical ideas of Goffman (1963, 1974) which help us to understand the concern with the body and also the importance of the stages of the meditation practice.

Turner (1995) has pointed out that all approaches to the sociology of the body are anti-cartesian in nature. Crossley (1995) sees Goffman as providing the key to such a non-dualistic sociology where practical embodied action is interwoven with the perceptual field of the agent. He believes that Merleau-Ponty (philosophically) and Goffman (sociologically) mount a challenge to the central assumption that the mind is an inner and separate world. Merleau-Ponty posits three claims, first he rejects the proposition that mind and matter exist as different ‘substances’. Second, that we should not understand mental predicates as referring to inner (and, therefore, incorporeal) mental states but rather to publically verifiable aspects of embodied conduct. Third, that perception does not involve the internal representation of an outer world, but rather an ‘openness onto Being’ and intertwining or ‘chiasm’. As Crossley presents it, ‘I must be simultaneously the perceiver and the perceived’. Crossley believes that Goffman’s work allows us to develop this ontology into an intercorporeal and non-dualistic sociology.

Kelly and Field, also using the work of Goffman, maintain that both social identity and self-conception are central to human conduct and that both are related to the body: ‘The body is central both to the experience and feelings associated with illness (self) and the social processes involved in its management (identity)’ (Kelly & Field, 1996, p. 251). Goffman (1963) writes of ‘virtual identities’ which are those imputed by others, while individual’s self-conceptions are ‘actual identities’. 
In the meditation situation one is dealing with a relationship, between the self and an imagined or projected other, and the labelling and imputation of self-identity is being carried out by the practitioner him or herself. Kelly and Field (1996) have indicated a general movement in the construction of identity starting from the physical body via the self to identity. In the meditation practice the movement is from change in self-identity via change in projected bodies. We should also note that in the meditation puja we are dealing with the visualization of perfect bodies. In such visualizations, all practitioners are viewed as equal, having the form of a perfect Buddha or Bodhisattva. The description of the visualised body stresses its freedom from any illness or blemish, indeed its beauty. As the title of the Buddha’s pure land states, everything about the visualization is ‘pleasing to behold’.

We can see that the ‘other’ becomes complex and problematic in this situation. The other, from the point of view of the practitioner throughout the practice, is the ‘actual deity’ visualised in its sambhogakaya form, in the form of light. During the practice there is also an imputed transformation in the physical body of the practitioner, this is imagined as being effected by the deity himself. Eventually this culminates when the identity of the practitioner imputed by the other is imagined to be transformed into the body, speech and mind of the deity. Parallels may be found for a Christian believer, the ‘not I, but Christ in me’ of St Paul for example. Indeed practitioners of all religions relate via prayer to the supernatural however defined, although this has rarely been the focus of much of the sociology of religion; an exception being the work of Flannagan (1986, 1988).

Turner (1995), Bury (1995) and Williams (1996) have shown how recent theorizing within the sociology of the body views the self as being charged with emotions, discusses body image, and aims to deconstruct our notions of materiality. All of these have their experiential correlates within the meditation under discussion. We may view the meditation as a deliberate attempt to ‘deconstruct’ any notion of a constant or fixed perception of the body. We can also see that within the meditation perfect body images are first projected by the practitioner, but are then dissolved back into the person. This may produce a general sense of well-being, with the person being more likely to identify favourably with the experience of their lived body.

As Nettleton (1995, p. 103) has pointed out the major concerns of society are becoming less to do with increasing production as was the case in industrialized capitalism, but more to do with the regulation of bodies. We are rapidly moving towards a ‘somatic society’ (Turner, 1995) where the body constitutes the central field of political and cultural activity. Theorists of the sociology of the body have spoken about modern culture being a ‘corporeal culture’.

The focus is on control and resistance to such control. Writing in the 1990s on disability spoke out against psychologists who often stressed the view of the perfect bodied of body-image theory. From the point of view of this meditation practice it is somewhat in reverse; perfect body images are invoked but are then dissolved back into the person’s real body image. The projected self runs counter to the everyday self of the person. What happens in the space of meditation can be seen as offering a resistance to such all-pervasive forces that attempt to control the
body. Indeed, there is also an exhortation to move from one to the other and to take
the insights gained in the meditation through into the lived experience of the outside
world.

The practice progresses through various stages and in each one there is a
particular orientation towards the imaginary body, these can be understood more
clearly if we use another of Goffman’s (1974) theoretical constructs: frame.

The meditation takes place within the overarching frame of everyday life
(Berger & Luckmann, 1967; Schutz, 1971), but the frame and sub-frames of the
meditation have distinguishing characteristics. First, these are reflected in the
chanted text. Some sections are in a form of prayer and are therefore petitionary
in content. Others are by nature descriptive of the deity.

Second, the type of focus and the training in the shifting of focus are important
attributes of the meditation frame. One characteristic of these would be the concept
of one-pointedness. This has already been highlighted by Johnson (1979) as a
general characteristic of the meditation experience in whatever form. Another
important characteristic of the meditational frame is the restriction of the focusing
of attention to the body. Certain passages can thus be thought of as indexical in that
they direct the mental focus towards particular aspects of the visualized mental
field.

Just as there are various sub-frames, there are transitional sections when we
move from one to another. There are also major sections where there is a gradual
build-up of elements both visual and sensual, where the frame is constructed; then
later when the visualization is dissolved the frame is finally ‘deconstructed’. Another
important issue is that of the comparison of the meditational frame with the frame
of everyday life; at the end of the practice a change has hopefully occurred in the
mind of the person and s/he is asked to reflect on this change and take the experience
forward into their daily life.

Goffman’s (1974) discussions of, a ‘play within a play’, the theatrical framing
of reality, and the distinction between the natural and social perspectives, all throw
light on the experience of meditation. Goffman also directs our attention to the
importance of keying for ushering in a change of frame. In the more elaborate forms
of the described practice—the lighting of incense before the ritual commences, the
ringing of bells, the clash of cymbals and the beating of the shrine drum when the
deity first is visualized—all serve to mark important shifts of frame.

Conclusion

To conclude there are various concepts within Buddhist religious philosophy which
correlate with ideas within sociological theory. By the use of this description of a
Buddhist healing meditation practice we can go some way towards indicating these
interesting similarities. One is the notion of skilful means; the whole meditation itself
and the visualizations should be recognized as a skilful means. Other concepts are
indexicality, the provisional nature of reality, interdependence and even the core
concept of the mutability of the self.
A key theme is resistance. Just as Foucault (1979, 1981) demonstrates how the self is produced through the production of the body, and Turner (1995) shows how we are moving towards a somatic society where the body constitutes the central field of political and cultural activity, we can detect strong elements of resistance in this health meditation. The movement is on redefinition of the self via visualization and is in the opposite direction from that normally hypothesized where self and identity are merely seen as the result of external social forces.

Social theory outlines two polarized perspectives on the body, the naturalistic and the social constructionist positions with phenomenology often comprising a third perspective, acting as a bridge between the two extremes (Shilling, 1996; Turner, 1995). The weak version of the social constructionist view posits that the body has a material base that is shaped and altered by social practices and its social context. The phenomenological approach tends to focus on the relationship between the self, identity and the body.

The Buddhist ideas as presented in this practice have close parallels with the social constructionist perspective, and indeed to follow through this way of thinking into a form of action. In the meditation under consideration we are dealing with experiential reality and discursive practices. The aim is to produce a change of view, a change in knowledge. It is also discursive, with the meditational text being the discourse. The liturgical text is what guides the practitioner to define the reality of the meditational space in the first instance (see Barthes, 1977, p. 41; Laderman & Roseman, 1996). The question we could ask of the meditation puja is, ‘is the fundamental nature of the body changed by the social interaction within the meditational puja?’ This would indeed be adopting a strong version of the social constructivist stance.

Shilling (1996) develops the notion of the body as project. That is, the body is ‘seen as an entity which is in the process of becoming; a project which should be worked at and accomplished as part of an individual’s self identity’ (Shilling, 1996, p. 5). Creating and maintaining a healthy and fit body is an example of an increasingly common type of body project. We may also wish to view meditation as a mental project, which may not only have beneficial mental but also positive physical affects on health.

Laderman and Roseman have described healing as performance ‘as purposive, contextually-situated interaction . . . or ‘framed’ enactment’ (1996, p. 2). Text and context need to be seen as mutually constitutive in ritual performance. This paper’s analysis of one textual description of a healing ritual may thus yield the following benefits. It is important first as an illustration of the benefits of taking seriously the injunctions to study such practices from within their own philosophical framework. Second, this investigation offers one illustration of the way in which sociological analysis of meditation practices in relation to mental health may proceed. Finally, it gives an insight into the way in which such practices may lead towards a positive redefinition of self, potentially contributing towards an improvement in mental health.
Acknowledgements

The author wishes to acknowledge the kindness and help of his Buddhist teachers, the Venerable Dr Akong Tulku Rinpoche and Ringu Tulku Rinpoche. The contents of the chapter are, however, based on his experience and interpretation of Buddhist practice and this is not a work of Buddhist Dharma. He is also grateful to the Reverend Professor Leslie Francis for his help in clarifying his ideas on this topic.

Note

[1] A preliminary formulation of these ideas can be found in Mullen (2000). The current paper advances the former analyses by focusing on the specific healing and thus bodily aspects of such practices. An early version of this paper was presented at the 1998 British Sociological Association Conference in Edinburgh.

REFERENCES


