Who should not meditate?

Excerpt from SD 17.8c (8.5).

<u>1</u> Meditation is generally safe for most people, but there are reported cases and studies noting some adverse effects. From one-third to one-half of participants of long silent meditation retreats (two weeks to three months) in the West reported increased tension, anxiety, confusion, and depression. In an article well publicized on the Internet, Jack Kornfield confesses that in *vipassanā* practice,

At least half the students who came to three-month retreats couldn't do the simple "bare attention" practices because they were holding a great deal of unresolved grief, fear, woundedness, and unfinished business from the past. I also had an opportunity to observe the most successful group of meditators—including experienced students of Zen and Tibetan Buddhism—who had developed strong samadhi and deep insight into impermanence and selflessness. Even after many intensive retreats, most of the meditators continued to experience great difficulties and significant areas of attachment and unconsciousness in their lives, including fear, difficulty with work, relationships wounds, and closed hearts. (Kornfield 2003)

<u>2</u> On the other hand, most of these very same participants also reported very positive effects from their meditation practice. The vulnerable margin of participants usually includes those who are under some kind of medication, or have a psychiatric history or some kind of undisclosed personal disorder. There have been a few reports that intensive meditation could cause or worsen symptoms in people who have certain psychiatric problems, but this question has not been fully researched.

Such studies do suggest, however, that meditation may <u>not</u> be recommended for people with psychotic disorders, severe depression, and other severe personality disorders, unless they are also receiving psychological or medical treatment, and closely monitored so that they can receive support whenever needed. Individuals who are aware of an underlying psychiatric disorder who wish to take up meditation should speak with a mental health professional or experienced instructor before doing so.³

<u>3</u> Obviously, for some people, the "vipassana" method does not always work, or does not always work by itself. **Meditation for beginners** is likely to succeed when <u>the following minimum conditions</u> are present:

- (1) Participants with emotional or psychological issues have them resolved first.
- (2) The instructor is an experienced teacher, with sufficient spiritual training.
- (3) Breath meditation and lovingkindness cultivation are taught in a balanced manner.
- (4) The group is small, say, not more than fifteen participants per group.
- (5) The environment is quiet and conducive, and there are basic standing rules.

² See eg Jack Kornfield 1993.

¹ See §8.2nn for refs.

³ For more details, see *Bhāvanā*, SD 15.1 esp (14).

Who should not meditate by Piya Tan

- (6) The length of sitting is flexible, depending on the student's ability and inclination.
- (7) The instructor keeps to an ethical code and is easily available for related consultation.
- <u>4</u> Psychotherapists and other professional specialists trained in meditation may be effective meditation instructors for beginners, even for intermediate levels. However, for more advanced practice, the teacher must be firmly founded on Buddhist meditation, if the students are to really benefit.
- <u>5</u> Even if religious experience can be scientifically induced [8.1], it is still a feeling like love, faith and compassion, which cannot be meaningfully induced by the most sophisticated scientific instrument, short of man himself. This is a matter of consciousness working upon itself: only the mind can induce such states. The best tool for cultivating inner stillness is a hearty meditation.⁴

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⁴ On Buddhist meditation, see *Bhāvanā*, SD 15.1.