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From Mental Health Crisis to Existential Human Suffering: The Role of Self-Transcendence in Contemporary Mindfulness

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Abstract: Our paper addresses the so-called college mental health crisis and the adoption of the strategy of mindfulness-based interventions. We offer a critique of their underlying medical–therapeutic paradigm by engaging the notion of self-transcendence in Viktor Frankl's Existential Analysis and Buddhism in dialogue. We argue that the current mindfulness movement has decontextualized and appropriated mindfulness from its Buddhist foundations in favor of a model that offers objectively verifiable biophysical and mental benefits. Self-transcendence, whether from the perspective of Buddhism or Frankl's work, offers what we feel is an existentially viable path forward for college students, in lieu of the current paradigm promoted by those advocating use of these mindfulness-based interventions. We conclude by considering Existential and Buddhist notions of self-transcendence in dialogue, suggesting they offer an educational practice worthy of implementation.

Keywords: self-transcendence; mental health crisis; contemporary mindfulness; Existential Analysis; Buddhism; suffering; medicalization

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1. Introduction

> "A convenient way of getting to know a town is to find out how people work there, how they love and how they die. In our little town [. . .] all these things are done together, with the same frenzied and abstracted way. [. . .] You will say no doubt that this is not peculiar to our town and that, when it comes down to it, people today are all like that. Of course, there is nothing more normal nowadays than to see people work from morning to evening, then choose to waste the time they have left for living at cards, in a café or in idle chatter. But there are towns and countries where people do occasionally have an inkling of something else. On the whole, it does not change their lives; but they did have this inkling, and that is positive in itself. Oran, on the other hand, appears to be a town without inklings, that is to say, an entirely modern town." (Camus [1974] 2013, pp. 8–9)

Amongst the several populations disrupted by the COVID-19 pandemic, post-secondary students are of particular concern. Recent surveys conducted in countries such as Canada (Hamza et al. 2021), China (Cao et al. 2020; Ma et al. 2020), France (Wathelet et al. 2020), Saudi Arabia (Mohammed et al. 2021), the UK (Evans et al. 2021), the US (Charles et al. 2021; Gratz et al. 2021; Hoyt et al. 2021; Kecojevic et al. 2020; Son et al. 2020; Wang et al. 2020), and worldwide (Lai et al. 2020) have shown that the propagation of the virus, the ensuing restrictive measures to contain it, and the fears, uncertainties, and challenges inherent to this scenario are exercising negative psychological effects on college students. The findings are alarming, as they allude to the exacerbation in the college mental health crisis that pre-dated the outbreak of the pandemic in early 2020 (Auerbach et al. 2018; Duffy et al. 2019).

Since the mid-2000s, diagnoses of psychological disorders, such as anxiety and depression, among post-secondary students have been on the rise in modern societies around the world, leading experts to call attention to a mental health crisis in the college student

population (Auerbach et al. 2016). Several research projects that were part of the World Mental Health Surveys International College Student project, for example, point to the prevalence of mental health issues among college students. From a sample of close to 14,000 students from eight countries, Auerbach et al. (2018) found that 35% of students surveyed reported at least one lifetime disorder, and 31% reported at least one 12-month disorder. Another study (Bruffaerts et al. 2018) of close to 5000 students reported very similar findings, with 34.9% of students reporting a mental health problem within the last year, and some 36% of students reporting more than one mental health problem.

A number of strategies to support students have been proposed and subsequently studied, which have included mindfulness-based interventions (Galante et al. 2018). Throughout the COVID-19 pandemic, the effectiveness of mindfulness for the promotion of university students' mental health has also been of special interest (González-García et al. 2021; Simonsson et al. 2021; Sun et al. 2021). By referring to the crisis among post-secondary students with terms such as "mental health," "diagnoses", and "disorders," researchers seem to imply that the root cause of the issue might be of a "*psychiatric* nature", and, as a result, turn to "the medical model for explanations" (Andersen et al. 2021, p. 102). However, findings show that the medical model fails to conclusively explain the dramatic growth of the cases. In one instance, Andersen et al. (2021) found that a developmental model based on identity formation, meaning, and purpose better explained students' mental health problems than a strictly psychiatric model. The authors reported "Stronger senses of identity and purpose were associated with less frequent experiences of anxiety and depression that interfere with academic studies, and less frequently feeling overwhelmed in general", and they concluded that "considerably more attention should be given to developmental models in the undergraduate context." We suggest this is a significant finding to the extent that it reframes the crisis as something other than a medical one.

The aim of our paper is to look at the alleged college mental health crisis, and the function of mindfulness-based interventions as a possible solution to it through a perspective that invites Viktor Frankl's Existential Analysis and Buddhism into conversation. We argue that they share a philosophical meeting point in the concept of self-transcendence. Frankl's work represents a Western perspective on transcendence, and we use it here as a gateway to exploring how transcendental approaches common to some Buddhist schools of practice can offer a more effective approach to the college mental health crisis. More specifically, our goal is to offer a critique of, and an alternative to, the medical–therapeutic paradigm; our critique is nested in the interpretation of the crisis and the role of mindfulness in it in offering possibilities of self-transcendence.

2. The Nature of the Problem

2.1. Existential versus Medical Accounts of Human Suffering

There are a number of reasons that justify our proposed approach. Firstly, as philosophical stances, both Existential Analysis and Buddhism posit that suffering is an "existential" (Frankl [1969] 2014, p. 62), "fundamental" (Gethin 1998, p. 59) fact of life, respectively. This starting point itself accounts for most of the limitations of the medical–therapeutic paradigm when addressing human afflictions.

In effect, since the 1960s, the medical view has been the object of criticism of anthropologists, historians, physicians, psychologists, and sociologists (Conrad 1992; Davis 2006; Furedi 2004, 2006). Many scholars have expressed concerns about the *(over)medicalization* of human problems in the Western world (Conrad and Slodden 2013; Gosselin 2019). Medicalization "describes a process by which nonmedical problems become defined and treated as medical problems, usually in terms of illnesses or disorders" (Conrad 1992, p. 209). Nonmedical problems might include "forms of deviance, natural life processes, and problems of living" (Davis 2006, p. 51).

The medical–therapeutic paradigm is similarly imbuing the dominant understandings and uses of mindfulness, known as *contemporary mindfulness* (Dunne 2015). Through its medicalization, mindfulness has become a seemingly suitable response to address what

is perceived as pathological conditions suffered by college students. Indeed, the current popularization of mindfulness—or the *mindfulness movement* (Stanley et al. 2018)—could not have been achieved had the ancient Buddhist practice of mindfulness meditation not been appropriated from its traditional religious origins, decontextualized, and reconceptualized as a biomedical and psychological technique that delivers scientifically measurable and verifiable biophysical and mental benefits (Forbes 2019; Wilson 2014). The role of Jon Kabat-Zinn as the precursor of a host of mindfulness-based interventions or therapies for clinical applications is well-known and documented in the literature, and most of these applications are derived from Kabat-Zinn's *Mindfulness-Based Stress Reduction* (MBSR) Program (Kabat-Zinn [1990] 2005; Brown et al. 2015; Didonna 2009). Other mindfulness-based approaches are now in evidence: Mindfulness-Based Cognitive Therapy (Segal et al. 2004), Dialectical Behavioral Therapy (DBT) (Dimeff and Linehan 2001), and Acceptance and Commitment Therapy (ACT) (Waltz and Hayes 2010).

2.2. The Transformative Power of Contemporary Mindfulness in Question

A second motivation of our proposal has to do with the pervasiveness of the medical–therapeutical perspective as a set of cultural and social forces that shape our cultural imaginary, language, practices, self-perception, and the perception of others. As such, it is not a mere coincidence that the condition experienced by college students and the contemporary reformulation of mindfulness practice are predominantly seen through medical lenses (Harrington and Dunne 2015; Nehring and Frawley 2020). These forces act on a formal level to the extent that they act as "an established body of scientific knowledge conveyed through [. . .] institutions"; simultaneously, on an informal level, they provide a "cultural framework" for our understanding of "selfhood, identity, and emotional life" (Illouz 2008, p. 12).

Many proponents of contemporary mindfulness believe in its capacity to propel personal, social, and cultural change. In one instance, Kabat-Zinn (2017) boldly put forward the following on the transformative power of mindfulness:

> This may indeed be a pivotal moment for our species to come to our senses both literally and metaphorically in terms of mobilizing and operationalizing in the mainstream world and its institutions what we know to be *the intrinsically healing, illuminating, and potentially liberating virtues and power of mindfulness, both as a practice and as a way of being.* In embarking on such a path, we might transcend or at least learn how to work more imaginatively, creatively, and with good will with the tyranny of our own thoughts in the form of conventional dualisms, such as right/left, liberal/conservative Democrat/Republican, rich/poor, true/false, the good guys and the bad guys, and even sacred/secular, which may all be, in their own domains, true to a degree, but not true enough to bring about either healing or peace or compassion or wisdom at the levels that the planet, our species and many many others, are calling out for. (Kabat-Zinn 2017, p. 1129, italics added)

However, Kabat-Zinn's concept of mindfulness "both as a practice and a way of living" designed to mobilize transformation remains embedded in the medical–therapeutic paradigm of a sick society necessitating the "rule of dharma" as a healing force that "minimiz[es] harm" and "maximiz[es] wellbeing":

> Politically, that might mean *developing a democracy 2.0 based on the Hippocratic principle* to first do no harm and *grounded in the lawfulness that a universal dharma foundation* based on widespread embodied practice might provide. If democracy is truly based on the rule of law, and the law itself were grounded on the first principle of minimizing harm and maximizing well-being for all members of the body politic, writ large and understood broadly—*a kind of political, social, and economic Hippocratic Oath*—then the lawfulness of the dharma might well provide an inescapable and essential foundation for upgrading the wisdom inherent in our laws and institutions at present [. . .]. (Kabat-Zinn 2017, p. 1129, italics added).

The awareness that contemporary mindfulness was forged within a medical–therapeutic, secularized conceptual framework, and continues to carry this imprinting, is crucial for those who wish to bring forth positive transformations, especially when seeking to expand the applications of contemporary mindfulness to nonclinical contexts. We agree with Buddhist scholar Rupert Gethin (2015), who argues that mindfulness should not be perceived as "some particular thing out there in the world that Buddhism first discovered over 2000 years ago and 21st-century science is now investigating, such that soon we will finally be able to say exactly what it is" (Gethin 2015, p. 9).

The secular, reductionist approach to mindfulness employed by those who use it in a medicalized fashion has been questioned and challenged by a stream of the mindfulness movement known as "critical", "social", or "civic" (Forbes 2019; Stanley et al. 2018). Many scholars, researchers, and practitioners who adhere to this view resort to traditional religious Buddhism in an attempt to restore and reintegrate what is considered the "lost" ethical–moral and spiritual dimensions of contemporary mindfulness. Still, it is worth reminding ourselves that, while mindfulness cannot be solidified in a single, essential conceptualization, it should neither be encapsulated as the dualistic notion of "Buddhist mindfulness" *versus* "secular mindfulness". Looking at mindfulness is thus more likely an examination of "active, ongoing process," one that is not so much about what mindfulness is, but rather about "what various practitioners *say* it is, and how they employ it" (Wilson 2014, p. 9).

2.3. The Contextual Setting of Buddhist Modernism

One way to illuminate the issues at hand might be to turn to the notion of *Buddhist modernism* (McMahan 2004, 2008, 2012) as the bedrock for the most recent uses of mindfulness, including contemporary mindfulness. Buddhist modernism refers to a "dynamic, complex, and plural set of historical processes" (McMahan 2008, p. 6), culturally and geographically diffused, by which selected teachings and practices of traditional Asian Buddhism have been combined with "the dominant cultural and intellectual forces of [Western] modernity" (McMahan 2008, p. 6), the latter including science, psychology, modern sociopolitical thinking, and activism. Additionally, while many hybrid forms that have arisen out of Buddhist modernism are being employed to criticize the dominant elements of modernity—the case, for example, of the role of "Engaged Buddhism" in denouncing the destructive social, economic, political, environmental, and cultural trends of our planet (e.g., Hanh 2021)—the same cannot be said of most of contemporary mindfulness for the moment, given how deep it is still enmeshed in the medical–therapeutic paradigm (Stanley et al. 2018; Wilson 2014).

Acknowledging that any attempt to bring forth the transformative capacity of mindfulness is inescapably set within the Buddhist modernism context might be of great benefit. The fact that this genre is characterized by its constant negotiation with Western cultural aspects means that elements of more traditional forms of Buddhism *can* equally enter into dialogue with those voices in the West that are opposed to the negative aspects of modernity in general, and the medical–therapeutic view in particular.

2.4. From Individualism to Self-Transcendence

One of the most on-point critics of the medical–therapeutic paradigm was Austrian Jewish neurologist and psychiatrist Viktor Emil Frankl, the founder of Logotherapy and Existential Analysis. His was one of the pioneering works to detect the increasing pathologization of problems of existence way before the proposal of the medicalization thesis in the 1960s. Furthermore, Frankl offered an interpretation of the rise of the medical view that is particularly appealing, grounded in a philosophy that signals an existential path and an integrative anthropological model that characterizes human beings as self-transcendent.

There has been a renewed interest from philosophers, psychologists, and theologists in the study of self-transcendence in the past few years (Frey and Vogler 2019). Philosophically, self-transcendence may be defined as the human orientation towards "goods that can often demand great personal sacrifice from individuals for the sake of something 'greater than

the self,' and whose benefits are not easily or best understood in terms of individual benefit or well-being" (Frey and Vogler 2019, p. 1). The implication is that the pursuit of a good, virtuous life can neither be "be egoist or primarily self-directed" nor hold happiness and well-being as the ultimate human goals (Frey and Vogler 2019, p. 4). Rather, it requires individuals to develop a greater understanding of their nature as social and spiritual beings, as well as to "place [themselves] with respect to a larger whole" (Frey and Vogler 2019, p. 4).

With respect to a religious reflection on the concept of self-transcendence, there is an added dimension: self-transcendence may also be understood as " . . . experiences in which a person transcends himself [sic] . . . being pulled beyond the boundaries of one's self, being captivated by something outside of myself, a relaxation of or liberation from one's fixation on oneself" (Joas 2008, p. 7; Westphal 2004). We suggest that the concept of self-transcendence can be interpreted in teachings of some schools of Buddhist thought—if, that is, by "experiences [of] [. . .] being captivated by something outside of myself", one means the transcendent liberatory experience of nirvāna (Gethin 1998); likewise, to the extent that "liberation from fixation on oneself" signifies the uprooting of "engrained maladaptive tendencies toward greed, aversion, and delusion" as constitutive of the path towards nirvāna (MacKenzie 2019, p. 205).

Having offered this hypothesis, we want to stress that our argument supporting the existence of self-transcendence in Buddhist thought is an interpretive one; others might come to the Buddhist texts we cite below with a different interpretation that does not recognize self-transcendence or even the existence or non-existence of a self to begin with! In the Ānanda Sutta, the Buddha, when asked about the existence of a self, points out that replying is either to affirm or not affirm the self, and refuses to do so, pointing out the confusion that would result from either reply (Bodhi 2005). As Segall (2020) points out, the Buddhist doctrine of non-self is a denial of an unchanging ātman and is certainly incompatible with any concepts of an eternal soul, common among the Abrahamic traditions. Further, Vasubandhu's Refutation of the Theory of a Self (Duerlinger 2003), which we cite below, can be seen as exactly that: the refutation that there is any real self; it follows, therefore, that there cannot be any self-transcendence.

However, if there is the possibility of transformation into the Buddha nature, this is the 'transcendental womb,' as the Śrīmālādevī Sutra (Paul 2004) puts it. Segall (2020) characterizes this self-transcendence as a "non-dual organismic interconnectedness with everything that is" (p. 134). It is precisely this transcendental element that, according to Wilson (2014), "some fear [. . .] is in danger of being lost entirely" (Wilson 2014, p. 78) in the medicalized version of mindfulness. We suggest that an approach to the employment of mindfulness based in the Buddhist concepts and practices of transcendence will better serve students in coping with the challenges they are experiencing.

We will begin by introducing the concept of self-transcendence in the Existential Analysis philosophical approach by Viktor Frankl and in Buddhism as a school of thought; we use Frankl's work as a gateway to an exploration of Buddhist notions of transcendence. We acknowledge that, far from being monolithic, Buddhism encompasses a number of sub-traditions bearing somewhat distinct philosophical interpretations and practices. For the purposes of our paper, though, we attempted to select those features of certain elements in the Buddhist teachings that point to transcendence. The notion of self-transcendence will mediate the dialogue between Existential Analysis and Buddhism in the following section. Set in the context of Buddhist modernism, our dialogical exercise is designed to raise problematic issues in contemporary mindfulness, as well as provide a few tentative responses to tackle them.

3. Conceptualizations of Self-Transcendence in Existential Analysis and Buddhism

In this section, we will look at self-transcendence and its relations to the fundamental aspects of Existential Analysis and Buddhism.

3.1. Self-Transcendence in Viktor Frankl's Existential Analysis

The concept of self-transcendence in Viktor Frankl's thinking is bound up with the foundational aspects of his Existential Analysis: an anthropological model[1] and a philosophy of life.

Over the course of his work, Frankl sustained that most of the mental pain plaguing postsecondary students in contemporary times could be in actuality problems inherent to human existence that are being reinterpreted as medical conditions. Frankl's attention to this matter was initially drawn by the reported experiences of suffering and suicide attempts among the Austrian youth in the years between the 20th century's two great wars. In 1955, Frankl coined the term "existential vacuum" to refer to this "increasing and widespread" phenomenon (Frankl [1969] 2014, p. 70). Though not a pathological condition in its nature—therefore, not primarily connected with mental health—the existential vacuum bears the possibility of producing very clear negative psychological effects. Frankl characterized the existential vacuum as "existential despair" (Frankl [1969] 2014, p. 74), an experience of "inner void", a "sense of meaningless, [aimlessness] and emptiness" (Frankl [1969] 2014, p. 70).

In Frankl's estimation, the growth and dissemination of the existential vacuum had partly to do with the hyper-specialization of knowledge and the presentation of scientific findings in reductionist ways. Reductionism, claimed Frankl, is a "pseudoscientific approach" that mechanizes and reifies human beings, turning them into a "nothing more than" (Frankl [1969] 2014, p. 27; Frankl [1955] 1986)—nothing more than "the result of biological, psychological and sociological conditions, or the product of heredity and environment" (Frankl [1946] 2000, p. 132). "Reductionism has become the mask of nihilism," Frankl alerted us, to the extent that "nihilism no longer unmasks itself by speaking of 'nothingness'"; rather; it "is masked by speaking of the 'nothing-but-ness' of [human beings]" (Frankl [1969] 2014, p. 27).

By arguing this way, Frankl attributed the widening and deepening of reductionism to misguided anthropological assumptions embedded in our dominant culture, the medical–therapeutic paradigm being a case in point. Frankl, then, proposed an anthropological model—the first of his two major philosophical contributions through Existential Analysis—that reunites the biophysio, psychological, and social dimensions of the individual. The integrative aspect of human multidimensionality, however, lies in another dimension, one that is specifically human: the *spiritual*, *noetic*, or *noological* dimension. It is in this dimension that resides the unique human capacity of *self-transcendence*, characterized by one's ability to move away from any tendency towards self-enclosure and self-satisfaction to a realm beyond oneself. "[...] [H]uman existence always points, and is directed, toward something other than oneself; or rather, toward something or someone other than oneself [...]" (Frankl [1955] 1986, p. 221).

Frankl was particularly concerned with the hidden anthropologies in the reigning psychotherapeutic theories of the time. These assumed that human beings were self-directed, closed systems whose goal is the restoration of one's psychodynamic equilibrium through the "gratification of drives and the satisfaction of needs" (Frankl 1966, p. 67), such as the pursuit of happiness. It turns out, however, that this apparent primary goal, according to Frankl, is "self-defeating" (Frankl 1966, p. 98; Frankl [1969] 2014, p. 35). "Happiness is [...] an unintended side effect of self-transcendence. [...] The more one aims at it the more one misses the aim" (Frankl [1955] 1986, p. 225).

Human existence, Frankl posited, is qualified by intentionality, that is, the openness to the world—a world replete with values to be created, meanings to be found and fulfilled, and other beings to be encountered (Frankl 1966, Frankl [1955] 1986, Frankl [1969] 2014). This brings us to the two manifestations of self-transcendence. The first one is the *will to meaning*, namely human's "basic striving [...] to find and fulfill meaning and purpose" (Frankl [1969] 2014, p. 36). The will to meaning places individuals between the two opposite polarities of existence, which are expressed by a permanent tension between the pull of the intentional referents which lie beyond oneself—values, meanings, and love—and the

egotism of self-centeredness. The second manifestation of self-transcendence is *conscience*. Situationally confronted with their selfish desires, on the one hand, and a vast range of possible choices in the world out there, on the other hand, individuals have an imperative to learn to listen to their conscience so as to either "seize the meaning of a situation in its very uniqueness" or "grasp the other human being in his [*sic*] very uniqueness" (Frankl [1969] 2014, pp. 24–25).

The refinement of the "intuitive capacity" of conscience is of utmost importance in the age of existential vacuum. In addition to scientific specialization and reductionism, Frank ascribed this phenomenon to the decline of traditions and conventions and the erosion of values in the Western world. No longer engaged with, and guided by, normatives, individuals have lost sense of what they *wish* to do, let alone what they *should* do (Frankl [1969] 2014). Conscience, then, orients individuals in navigating life's challenges by orienting them in finding "the *right* answer to a question, [. . .] the *true* meaning of a situation" (Frankl [1969] 2014, p. 55). Here lies a second valuable contribution of Existential Analysis: as a *philosophy of life*, Existential Analysis is tasked with bringing the awareness of the "intrinsic quality" of human existence that is *responsibility* (Frankl [1955] 1986, p.71):

> Existential analysis accordingly is designed to help the individual comprehend his [*sic*] responsibility to accomplish each of his tasks. The more he [*sic*] grasps the task quality of life, the more meaningful will his [*sic*] life appear to him. While the man [*sic*] who is not conscious of his [*sic*] responsibility simply takes life as a given fact, existential analysis teaches people to see life as an assignment".
>
> (Frankl [1955] 1986, pp. 59–61)

3.2. Buddhist Concepts of Self, Liberation, and Self-Transcendence

In what follows in this section, we briefly outline the basics of some of the Buddhist teachings on the self, the nature of liberation, and the significance of self-transcendence, that are present in the Yogācāra tradition of the Mahāyāna school.

Spiritual liberation (*nirvāna*) is the goal of Buddhist practice as a way of life. Self-transcendence is felt to be a condition of liberation; liberation " . . . consists in the irreversible transcendence of egoic modes of psychological functioning" (MacKenzie 2019, p. 203). The Eightfold Path is designed to liberate one from suffering and achieve liberation through self-transcendence and has three integrated domains of wisdom (right view and right intention), ethics (right speech, action, and livelihood), and meditation (right mindfulness and concentration).

Some schools of Buddhist thought argue against the fundamental, ontological status of the self. There is a variable *sense* of self, an identity that fluctuates, but these are rooted in illusion; we conflate, as it were, the "ontologically selfless flow of experience for the existence of a self" (MacKenzie 2019, p. 216). Vasubandhu, one of the founders of the Yogācāra school, in his *Refutation of the Theory of a Self* (Duerlinger 2003), argues that

> It is known that the expression, "self," refers to a continuum of aggregates and not to anything else because [direct perception and correct inference establish that the phenomena in dependence upon which a person is conceived are the aggregates, and] there is no direct perception or correct inference [of anything else among these phenomena].
>
> (p. 71)

The sense of self, rather, consists of *skandas* or this continuum of aggregates: material form, affect, perception and cognition, conditioning, and awareness or consciousness. These aggregates are changeable, not enduring or permanent—hence the notion of 'no self'—even though they appear to us as real, stable, and constitutive of a self. As MacKenzie (2010) puts it: "Take away the complex, impermanent, changing skandhas and we are not left with a constant, substantial self; we are left with nothing" (p. 78). This is the notion of *anātman*, no-self.

Vasubandhu states that "for all phenomena, there is direct perception [pratyakṣa] . . . or there is correct inference [Pramāṇa] [that establishes their existence]" (Duerlinger 2003, p. 73). He then concludes that since there is no inference of a self nor a direct perception of a self, therefore, " . . . there is no self" (p. 72). Later, Vasubandhu writes: "Those who are fettered by strong attachment to a self and to the things possessed by a self are very far from liberation" (p. 94). Addressing liberation later, he writes "Selflessness is the only road to the city of nirvāṇa" (p. 111). As Duerlinger comments, Vasubandhu argues "that only the Buddha's teachings on selflessness, which he implies have been misunderstood by the Pudgalavådins, can free us from suffering" (p. 120).

The same view is expounded in the *Śrīmālādevī Sutra*: "'Limited views' refer to the common person's adherence to the misconception that there is a substantial ego within the five psychophysical elements (skandhas) . . . . The nonsubstantiality of the self is considered a substantial self, the impure is considered pure" (Paul 2004, pp. 43–44).

The *Śrīmālādevī Sutra* presents the theory of *Tathāgatagarbha*, the notion that the nature of the mind is both defiled (because of the skandas) and yet intrinsically unconditioned and pure—the *Buddha-dharma* (Paul 1979). There is the possibility of transformation into the Buddha nature; the *Śrīmālādevī Sutra* uses the metaphor of a jewel-storehouse (Paul 2004, p. 19) to describe *Tathāgatagarbha*, and it is referred to as a 'transcendental womb' (p. 46). Each "living being has within his consciousness the cause which enables him to attain enlightenment" (Paul 1979, p. 194). Although the seed of enlightenment is present, each person must "nurture and mature this embryonic seed" (p. 194). As Paul goes on to assert, "The *Śrīmālādevī Sutra* served as a prototype for a consciousness which would function both as a receiver of input directed towards spiritual transformation and the cause for that spiritual development" (p. 198).

The illusory sense of self grasps at happiness and avoiding suffering in ways that are doomed to defeat, seeking happiness, for example, in material goods and pleasures. As well, this sense of self leads to what we refer to as self-centeredness and all that flows from that grounding as an individualized, separate sense of self.

The movement toward liberation involves a 'deconstruction' of this sense of self. The Eightfold Path provides the means to do so. One begins to apprehend or cognize oneself and others not as enduring subjects but rather as "complex conditioned networks of mental and physical processes" (MacKenzie 2019, p. 217). The deconstruction process involves various methodologies: first-person (meditative approaches such as mindfulness), second-person (cultivation of the Four Immeasurables (equanimity or *upekkha*, love or *metta*, compassion or *karuna*, and joy or *mudita*), and third-person (undertaking philosophical analyses of the sense of self and the reality of no self; awareness of impermanence, and so on) methodologies.

The aim is to deconstruct or overcome any ontological separation between 'self' and that which is delusively apprehended as 'other.' Liberation includes this transcendence of a separate 'self' characterized by a calm, focused mind, a comprehension of the ongoing flow of mental processes, an allied "penetrating insight (*vipaśyana*) into the impermanent, unsatisfactory, and selfless nature of the phenomena constituting one's mind-body complex" (p. 218). One finally attains the realization that grasping after that which is separate and ever-changing cannot bring happiness. One has transcended the ontological sense of a separate, stable self. Instead, one has the transcendent state of awareness of interconnectedness and interdependence.

MacKenzie (2019) writes:

> . . . the cultivation of mindfulness and the related qualities of heedfulness and insight yield a profound transformation in self-experience, from a sense of being a fixed self to a selfless flow of experience. In this way, the cultivation of mindfulness, virtue, and self-transcendence are deeply intertwined in the Buddhist path. (p. 218)

In the Mahāyāna school, the concept of a sense of connectedness to others and to the world is a refutation of the notion of a separate, individualized, and unchanging self; to

transcend the self is to leave behind this sense of identification with this separate self, this 'limited view.' Peetush (2018) notes that: "At the heart of various Mahāyāna perspectives and ontologies of the self is the notion of *pratītya-samutpāda* or interconnectedness (often termed 'dependent origination'), which is associated with the idea of *anitya* or impermanence, and *śūnyatā* or emptiness" (p. 243). In the *Samyutta Nikaya*, the Buddha says to his disciples:

> When this is, that is.
>
> From the arising of this comes the arising of that.
>
> When this isn't, that isn't.
>
> From the cessation of this comes the cessation of that. (Bhikku 2005)

In describing the work of Yogācāra Buddhism, Hase (1984) writes:

> It is not a departure from all of the interrelationships of our practical lives; it is rather a return to the interrelationships of our lives themselves, in other words to "other-dependent nature." . . . This activation is the conversion from imagined nature to perfected nature. But perfected nature is not separated from other-dependent nature; it is the true comprehension of other-dependent nature itself, and it has other-dependent nature as its contents. (p. 193)

We see here the transcendent work. In the words of Thich Nhat Hanh (2002) "So what permanent thing is there that we can call a self? . . . Nothing can exist by itself alone. It has to depend on every other thing. That is called inter-being. To be means to interbe . . . . Inter-being is not being and it is not non-being. Interbeing means being empty of a separate identity, empty of a separate self" (pp. 47–48). He also stated "You cannot just be by yourself alone. You have to inter-be with every other thing" (Hanh 1988, p. 4). This concept of interbeing is the hallmark of self-transcendence.

4. Existential and Buddhist Self-Transcendence in Dialogue: Problematizing Contemporary Mindfulness as a Medical View and a Way Forward with an Existential View

Let us return to the issue of the assumed mental health crisis among postsecondary students and the calls for the application of mindfulness as clinical interventions. Unlike the studies mentioned in the Introductory Section, we are not concerned with the efficiency of mindfulness-based interventions to tackle mental health; our claim is that the very use of this framing for mindfulness contributes to the crisis to the extent that it obscures the nature of the problem we are dealing with and, consequently, the suitability of responses it deserves. The current focus in applying mindfulness as a 'solution' to the mental health crisis only reifies the sense of separate individuality that contributes to the mental and social challenges faced by university students and that is so characteristic of the prevailing Western forces shaping Buddhist modernism.

There is no question that contemporary mindfulness is aligned with the medical–therapeutic paradigm (Barker 2014), as we stated earlier. The alliance of contemporary mindfulness with medicalization means, at the very least, the acceptance of the problem at hand as a mental health crisis; to a greater degree, however, this alliance entails the reinforcement, expansion, and prolongation of the mental health crisis. In this sense, calls for, and research on, the implementation of mindfulness-based interventions for the psychological benefit of students are far from being innocuous. They feed a self-perpetuating cycle of "disease-therapy" (Barker 2014)—the "way of being" that Kabat-Zinn (2017) alludes to in reference to mindfulness; they feed students' continuing focus on a separate, individualized self.

Cohen (2010) outlines in detail how mindfulness became decontextualized and stripped of its setting within an integrated Eightfold Path and reduced to "yet another coping mechanism for dealing with the stresses of modern life" (p. 111). Cohen adds that "Buddhism appears overwhelmed by the Western sense of entitlement to happiness irrespective of our moral conduct" (p. 111). Mindfulness thus becomes reduced to a "rather self-centered pursuit; less concerned with making us into better human beings and more

concerned/obsessed with allowing us to have better (more 'real'/intense) experiences" (p. 112). Cohen concludes by asserting that Buddhist Modernism is quite distinct from "the radically transformative paths and transcendent aspirations of earlier Buddhism" (p. 116), further arguing that "The highest aims of [Buddhist modernism] appear to be limited to various forms of psychological adjustment and it has to be recognized that these are simply not comparable to the original Buddhist goals of liberation and awakening" (p. 116). Stanley (2012) adds that the individualization of mindfulness simply allows practitioners to accommodate themselves to a capitalist society. By focusing on our individual psyche in mindfulness practice, we can "reinforce our experience of ourselves as 'bounded beings', separate from each other and our social and natural worlds."

Similarly, Forbes (2019) points to white, middle class mindfulness proponents who hold to an individualistic approach that allows them to maintain their 'privileged position,' including promoting 'mindful capitalism and mindful consumerism' (p. 10). Here, mindfulness becomes the practice of "an isolated or alienated individual out for personal gain or happiness, separated from one's body, nature, culture, and society" (p. 12). Such mindful approaches "ignore seeing our inseparability from all others" (p. 28); mindfulness thus becomes about "improving my happiness, well-being, and productivity" (p. 28). In all of this, the individualized, ego self becomes unintentionally reified.

Out of a study designed to assess the effectiveness of both psychiatric–medical and developmental–identity variables in predicting how university students experience and report emotional distress, Andersen et al. (2021) concluded that interventions designed to help students would be more effective if they focused on identity, arguing that their research data showed "Stronger senses of identity and purpose were associated with less frequent experiences of anxiety and depression that interfere with academic studies, and less frequently feeling overwhelmed in general," adding that more attention should be given to the treatment models that focus on developmental and identity issues. They recommend that "a wide array of supports" be offered toward students' identity formation and emerging sense of purpose beginning in high school, and continuing through each level of university, "including encouraging positive, empowering narratives that enable students to be active agents in their own development—as long recommended by Erikson and Frankl, and researchers following their traditions."

Buddhist traditions that focus on transcendence offer both teachings and practices ideally designed to cultivate identity development that would contribute to students' overall thriving; the teachings and practices designed to cultivate and develop toward what we are referring to as a relational, transcendent self (the Buddhist notion of no-self) are ideally suited to address what we feel are largely existential challenges, not psychological ones, faced by students.

Kabat-Zinn's interpretation of mindfulness also mentions it as "a practice". There is a recurrent conflation between the notions of "practice" and "technique" amongst researchers and practitioners of meditation in general, and mindfulness meditation in particular (Komjathy 2015, 2018). Much of the debate around the problematic aspects of contemporary mindfulness revolve around concerns with its technicization and instrumentalization (Stanley et al. 2018; Wilson 2014). However, we would like to argue that the heart of problem lies elsewhere when we consider *practice* "an all-pervasive", multifaceted existential approach (Komjathy 2018, p. 63). In this framework, practice encompasses at least four dimensions: specific worldviews, a technique or method, the experience of the practitioner, and the projected goals of the practice (Komjathy 2015, 2018).

Contemporary mindfulness, to our understanding, is not a practice *and* a way of life; rather, it is *practice as a way of life*. This perspective is an existential one. The philosophy and methods that make up mindfulness-based interventions are inextricably linked. As a way of life, contemporary mindfulness holds particular viewpoints about being, self, life, and conceiving of and acting in the world. These are seldom, if ever, problematized among mindfulness practitioners for the medical imprinting they carry. Some of these hidden assumptions, for example, involve the notion of self. The "medicalized self" is

commonly depicted as a bio-physio (body) and psychological (mind) dualist organism and an atomized being. Human existence, on the other hand, is reduced to the avoidance of disease and the pursuit of health as its ultimate concerns. In recent decades, with the burgeoning of new trends that include neurosciences and positive psychology, and growth of the self-help and wellness industry, new developments have been added to the medical–therapeutic glance. They ended up reinforcing physicism, a narrow conception of the mind, and the perception that humans are separate from the relational network they are part and parcel of. Conditions that are heavily influenced by cultural and social dynamics—a point that postmodern, post-structural, postcolonial, feminist, Black, and Indigenous scholars have brought to our attention (Wilber 2006)—have been individualized, along with the responsibility for personal suffering and care. Rather, narrow conceptions of happiness and well-being have been deified on the altar of our most cherished goals.

We suggest that the concept of self-transcendence might be a way of breaking the links that hold this chain together. This is so because, as it may have been surmised from our examination of this notion in Existential Analysis and Buddhism, self-transcendence simultaneously touches upon ways of conceiving the ontology, anthropology, phenomenology, ethics, and soteriology of a given system of thought. For Viktor Frankl, self-transcendence is an intrinsic quality of a multidimensional self; in the Buddhist traditions we have referenced, self-transcendence is a condition for, and the experience of, liberation from egoic, unwholesome mental states towards a virtuous mode of being (Loy 1997, 2012; MacKenzie 2019). As MacKenzie puts it: "The awakened person has uprooted the unwholesome roots of greed, aversion, and delusion . . . . [and] is characterized by joy (*sukha*), virtue (*śīla*), insight (*prajñā*), and freedom (*vimukti*)" (pp. 219–20).

In both philosophical approaches, self-transcendence situates individuals in openness to, and relationality with, the world. Moreover, self-transcendence is bound up with the primary concern of those values, virtues, and meanings that requires one to overcome self-centeredness by acting responsibly and compassionately for the benefit of other beings. Self-transcendence is about the inter-relatedness of self and others, with the existential and moral implications of this circumstance. Finally, self-transcendence is implicated in accounts of the nature and meaning of suffering as an existential human condition.

Either conceived of as an essential characteristic of the self, in the Franklian Existential Analysis, or as a condition, an experience, and a goal, in these Buddhist traditions, the idea of self-transcendence demands that the engagement with the questions of who we are and who we wish to be, how we would like to live, and who/what we want to live for, be a practice in the broadest sense of the word. We suggest that this engagement might be an *educational practice*.

5. Recommendations for Educational Practice

The second author is one of the program coordinators of a two-year Master of Education program, "Contemplative Inquiry and Approaches in Education" at Simon Fraser University in Canada. We have had five cohorts of students go through the program and, from the students' perspectives (based on feedback given through program evaluations and via qualitative research we have undertaken (Gunnlaugson et al. 2022), we find that the students generally report a very positive experience, especially in addressing and overcoming the existential challenges—loneliness, a sense of isolation or disconnectedness, or a lack of meaning or purpose—they have been facing. They report what appears to be a corresponding improvement in their mental health.

The students either have contemplative practices, mindfulness among them, when they enter the program or develop them during the time in the program. Although the program does not explicitly offer direct teachings from Buddhism or any other contemplative tradition, the students do become familiar with these teachings and traditions, which serve to supplement and buttress their contemplative practices; we emphasize that a contemplative practice should be grounded in a comprehensive teaching, whether that is religious or secular. The program relies on the faculty members' own committed practice

of contemplation, which brings a diversity of approaches to their teaching: yoga and other embodied forms of contemplative inquiry, Indigenous contemplative traditions, Buddhist- and Daoist-based practices, and so on. Faculty are committed to a deepening sensitivity to the relational transcendent, based on lived experience of the learning possibilities that emerge through the relational dimensions of classroom life.

We note that while the program does not offer either an exclusively Buddhist or Franklian approach to transcendence, it does have a focus, through relationality, on self-transcendence. Some of its pedagogies are existential in the Franklian sense, involving, for instance, sustaining the tension between our selfish inclinations and the opportunities to act virtuously whenever the opportunity arises in the classroom. This might include bringing awareness that every single moment in life is an invitation to the realization of values and fulfillment of meanings, as Frankl suggests, or to the cultivation of compassion and loving-kindness, according to the Buddhist path.

Students report that a more transcendent sense of a 'connected' self, interbeing, becomes deeply meaningful and a source of inspiration for them. One student writes that "at the heart of this program is interconnectedness." Another student mentions that, as a result of the focus on interconnectedness and intersubjectivity, they are adding loving-kindness meditation (Khyentse 2007; Thondup 2021) to their contemplative practice. Further, another student shares this reflection that shows a shift to a transcendent self:

> When I applied to the program, I thought of myself as one person, on my own. Now, I recognize all the interconnectedness that holds my life up. I am part of a tribe, part of a beautiful city, part of a school library, part of a cohort, part of the wind that blows and part of the falling Sakura petals on my way to work.

We mention these points because we would argue that those who incorporate mindfulness approaches in their work with students should (a) remember that mindfulness was part of an integrated system of overcoming of existential suffering through realization of the transcendent self (no-self); and (b) employ Buddhist teachings on self-transcendence as an integrated part of the mindfulness approaches and practices, with an intention of moving away from the purely medicalized approach that has proved to be not only insufficient, but also problematic. We would suggest the transcendental approach inherent in the Buddhist teachings we have highlighted represents a more effective and meaningful approach to address the challenges that postsecondary students are facing; these are, as we have suggested, existential in nature and not medical.

Education, especially at postsecondary levels, can offer rich opportunities for these explorations and, we suggest, will offer what students need: a solution not to a medical concern but to an existential one. It goes without saying that the implications of our proposal require a re-examination of the educational task and the pedagogies that enact it.

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Note

[1] Viktor Frankl's use of terms "anthropology" and "anthropological" allude to "views of human being, self, personhood, and identity, including embodiment and psychosomatic dimensions" (Komjathy 2018, pp. 71–72, 311). His concept of anthropology was a critical response to the reductionist views of human beings that emerged out of scientism. Frankl wished to provide a more comprehensive, integrative view of human beings that considered the biological, psychological, social, and cultural dynamics that helped shape them.

References

Andersen, Robert, Anders Holm, and E. Côté James. 2021. The student mental health crisis: Assessing psychiatric and developmental explanatory models. *Journal of Adolescence* 86: 101–14. [CrossRef] [PubMed]

Auerbach, Randy P., Jordi Alonso, William G. Axinn, Pim Cuijpers, David D. Ebert, Jennifer G. Green, Hwang Irving, R. C. Kessler, H. Liu, P. Mortier, and et al. 2016. Mental disorders among college students in the World Health Organization world mental health surveys. *Psychological Medicine* 46: 2955–70. [CrossRef]

Auerbach, Randy P., Philippe Mortier, Ronny Bruffaerts, Jordi Alonso, Corina Benjet, Pim Cuijpers, Koen Demyttenaere, D. D. Ebert, J. G. Green, P. Hasking, and et al. 2018. WHO world mental health surveys international college student project: Prevalence and distribution of mental disorders. *Journal of Abnormal Psychology* 127: 623–38. [CrossRef] [PubMed]

Barker, Kristin K. 2014. Mindfulness meditation: Do-it-yourself medicalization of every moment. *Social Science and Medicine* 106: 168–76. [CrossRef] [PubMed]

Bhikku, Thanissaro. 2005. Assutavā Sutta: Uninstructed (1) (SN 12.61). Translated by Pali T. Bhikku. Available online: http://www.accesstoinsight.org/tipitaka/sn/sn12/sn12.061.than.html (accessed on 12 May 2021).

Bodhi, Bhikkhu. 2005. Ānanda (Is there a self?) Part IV, Chapter X, Abyākatasamyutta. In *The Connected Discourses of the Buddha: A New Translation of the Samyutta Nikaya*, 2nd ed. Somerville: Wisdom Publications.

Brown, Kirk Warren J., Creswell David, and Richard M. Ryan, eds. 2015. *Handbook of Mindfulness: Theory, Research, and Practice*. New York: The Guilford Press.

Bruffaerts, Ronny, Philippe Mortier, Glenn Kiekens, Randy P. Auerbach, Pim Cuijpers, Koen Demyttenaere, Jennifer G. Green, Matthew K. Noch, and Ronald C. Kessler. 2018. Mental health problems in college freshmen: Prevalence and academic functioning. *Journal of Affective Disorders* 225: 97–103. [CrossRef]

Camus, Albert. 2013. *The Plague*. n.p. London: Penguin. First published 1974.

Cao, Wenjun, Ziwei Fang, Guoqiang Hou, Mei Han, Xinrong Xu, and Jiaxin Dong. 2020. The psychological impact of the COVID-19 epidemic on college students in China. *Psychiatry Research* 287: 112934. [CrossRef]

Charles, Nora E., Stephanie J. Strong, Lauren C. Burns, Margaret R. Bullerjahn, and M. Serafine Katherine. 2021. Increased mood disorder symptoms, perceived stress, and alcohol use among college students during the COVID-19 pandemic. *Psychiatry Research* 296: 113706. [CrossRef] [PubMed]

Cohen, Elliot. 2010. From the Bodhi tree, to the analyst's couch, then into the MRI scanner: The psychologisation of Buddhism. *Annual Review of Critical Psychology* 8: 97–119.

Conrad, Peter. 1992. Medicalization and social control. *Annual Review of Sociology* 18: 209–32. [CrossRef]

Conrad, Peter, and Caitlin Slodden. 2013. The medicalization of mental disorder. In *Handbook of the Sociology of Mental Health*. Edited by Carol S. Aneshensel, Jo C. Phelman and Alex Bierman. Dordrecht: Springer, pp. 61–73.

Davis, Joseph E. 2006. How medicalization lost its way. *Society* 43: 51–56. [CrossRef]

Didonna, Fabrizio, ed. 2009. *Clinical Handbook of Mindfulness*. New York: Springer.

Dimeff, L., and M. M. Linehan. 2001. Dialectical behavior therapy in a nutshell. *The California Psychologist* 34: 10–13.

Duerlinger, James. 2003. *Indian Buddhist Theories of Persons: Vasubandhu's Refutation of the Theory of a Self*. London: Routledge.

Duffy, Anne, Kate E. A. Saunders, Gin S. Malhi, Scott Patten, Andrea Cipriani, Stephen H. McNevin, Ellie MacDonald, and Geddes John. 2019. Mental health care for university students: A way forward? *The Lancet Psychiatry* 6: 885–87. [CrossRef]

Dunne, John D. 2015. Buddhist styles of mindfulness: A heuristic approach. In *Handbook of Mindfulness and Self-Regulation*. Edited by Brian D. Ostafin, Michael D. Robinson and Brian P. Meier. New York: Springer, pp. 251–70.

Evans, Simon, Erkan Alkan, Jazmin K. Bhangoo, Harriet Tenenbaum, and Ng-Knight Terry. 2021. Effects of the COVID-19 lockdown on mental health, wellbeing, sleep, and alcohol use in a UK student sample. *Psychiatry Research* 298: 113819. [CrossRef] [PubMed]

Forbes, David. 2019. *Mindfulness and Its Discontents*. Blackpoint: Fernwood Publishing.

Frankl, Viktor E. 1986. *The Doctor and The Soul: From Psychotherapy to Logotherapy*. New York: Vintage. First published 1955.

Frankl, Viktor E. 1966. Self-transcendence as a human phenomenon. *Journal of Humanistic Psychology* 6: 97–106. [CrossRef]

Frankl, Viktor E. 2000. *Man's Search for Meaning: An Introduction to Logotherapy*. Boston: Beacon. First published 1946.

Frankl, Viktor E. 2014. *The Will to Meaning: Foundations and Applications of Logotherapy*. New York: Plume/Penguin. First published 1969.

Frey, Jennifer A., and Candace Vogler. 2019. Introduction. In *Self-Transcendence and Virtue: Perspectives from Philosophy, Psychology, and Theology*. Edited by Jennifer A. Frey and Candace Vogler. New York: Routledge, pp. 1–12.

Furedi, Frank. 2004. *Therapy Culture: Cultivating Vulnerability in an Uncertain Age*. New York: Routledge.

Furedi, Frank. 2006. The end of professional dominance. *Society* 43: 14–18. [CrossRef]

Galante, Julieta, Géraldine Dufour, Maris Vainre, Adam P. Wagner, Jan Stochl, Alice Benton, Neal Lathia, Emma Howarth, and B. Jones Peter. 2018. A mindfulness-based intervention to increase resilience to stress in university students (the Mindful Student Study): A pragmatic randomised controlled trial. *The Lancet Public Health* 3: e72–e81. [CrossRef]

Gethin, Rupert. 1998. *The Foundations of Buddhism*. Oxford: Oxford University Press.

Gethin, Rupert. 2015. Buddhist conceptualizations of mindfulness. In *Handbook of Mindfulness: Theory, Research, and Practice*. Edited by Kirk Warren Brown, J. David Creswell and Richard M. Ryan. New York: Guilford Publications, pp. 9–41.

González-García, Marian, Álvarez Jorge Crespo, Pérez Elena Zubeldia, Fernandez-Carriba Samuel, and Javier González López. 2021. Feasibility of a brief online mindfulness and compassion-based intervention to promote mental health among university students during the COVID-19 pandemic. *Mindfulness* 12: 1685–95. [CrossRef]

Gosselin, Abigail. 2019. "Clinician knows best"? Injustices in the medicalization of mental illness. *Feminist Philosophy Quarterly* 5: 1–39. [CrossRef]
Gratz, Kim L., Adam J. D. Mann, and T. Tull Matthew. 2021. Suicidal ideation among university students during the COVID-19 pandemic: Identifying at-risk subgroups. *Psychiatry Research* 302: 114034. [CrossRef]
Gunnlaugson, Olen, Renata Cueto de Souza, Steven Zhao, Allen Yee, Charles Scott, and Heesoon Bai. 2022. Revisiting the nature of transformative learning experiences in contemplative higher education. *Journal of Transformative Education* 20: 1–18. [CrossRef]
Hamza, Chloe A., Ewing Lexi, Heath Nancy L., and Abby L. Goldstein. 2021. When social isolation is nothing new: A longitudinal study on psychological distress during COVID-19 among university students with and without preexisting mental health concerns. *Canadian Psychology/Psychologie Canadienne* 62: 20–30. [CrossRef]
Hanh, Thich Nhat. 1988. *The heart of understanding: Commentaries on the Prajnaparamita Heart Sutra*. Berkeley: Parallax Press.
Hanh, Thich Nhat. 2002. *No Death, No Fear: Comforting Wisdom for Life*. New York: Riverhead Books.
Hanh, Thich Nhat. 2021. *Zen and the Art of Saving the Planet*. New York: HarperCollins.
Harrington, Anne, and John D. Dunne. 2015. When mindfulness is therapy: Ethical qualms, historical perspectives. *American Psychologist* 70: 621–31. [CrossRef]
Hase, Shōtō. 1984. Knowledge and transcendence: Modern Idealist philosophy and Yogācāra Buddhism. *Japanese Journal of Religious Studies* 11: 169–94.
Hoyt, Lindsay Till, Cohen Alison K., Dull Brandon, Castro Elena Maker, and Neshat Yazdani. 2021. Constant stress has become the new normal: Stress and anxiety inequalities among US College students in the time of COVID-19. *Journal of Adolescent Health* 68: 270–76. [CrossRef]
Illouz, Eva. 2008. *Saving the Modern Soul: Therapy, Emotions, and the Culture of Self-Help*. London: University of California Press.
Joas, Hans. 2008. *Do We Need Religion? On the Experience of Self-Transcendence*. New York: Routledge.
Kabat-Zinn, Jon. 2005. *Full Catastrophe Living: Using the Wisdom of Your Body and Mind to Face Stress, Pain, and Illness*. New York: Delta. First published 1990.
Kabat-Zinn, Jon. 2017. Too early to tell: The potential impact and challenges—Ethical and otherwise—Inherent in the mainstreaming of dharma in an increasingly dystopian world. *Mindfulness* 8: 1125–35. [CrossRef] [PubMed]
Kecojevic, Aleksandar, Basch Corey H., Sullivan Marianne, and Nicole K. Davi. 2020. The impact of the COVID-19 epidemic on mental health of undergraduate students in New Jersey, cross-sectional study. *PLoS ONE* 15: e0239696. [CrossRef]
Komjathy, Louis, ed. 2015. *Contemplative Literature: A Comparative Sourcebook on Meditation and Contemplative Prayer*. Albany: SUNY Press.
Komjathy, Louis. 2018. *Introducing Contemplative Studies*. Hoboken: Wiley Blackwell.
Khyentse, Dilgo. 2007. *The Heart of Compassion: The Thirty-Seven verses on the Practice of a Bodhisattva*. Boston: Shambhala Publications.
Lai, Agnes Yuen-kwan, Letitia Lee, Man-ping Wang, Yibin Feng, Theresa Tze-kwan Lai, Lai-ming Ho, Veronica Suk-fun Lam, Mary Sau-man Ip, and Tai-hing Lam. 2020. Mental health impacts of the COVID-19 pandemic on international university students, related stressors, and coping strategies. *Frontiers in Psychiatry* 11: 584240. [CrossRef] [PubMed]
Loy, David R. 1997. Loving the world as our own body: The non-dualist ethics of Taoism, Buddhism, and Deep Ecology. *Contributions in Philosophy* 66: 85–85. [CrossRef]
Loy, David R. 2012. Beyond transcendence? A Buddhist perspective on the Axial age. In *After Spirituality: Studies in Mystical Traditions*. Edited by Philip Wexler and Jennifer Garb. New York: Peter Lang, pp. 155–72.
Ma, Z., J. Zhao, Y. Li, D. Chen, T. Wang, Z. Zhang, Z. Chen, Q. Yu, J. Jiang, F. Fan, and et al. 2020. Mental health problems and correlates among 746 217 college students during the coronavirus disease 2019 outbreak in China. In *Epidemiology and Psychiatric Sciences*. Cambridge: Cambridge University Press, vol. 29, p. e181. [CrossRef]
MacKenzie, Matthew. 2010. Enacting the self: Buddhist and enactivist approaches to the emergence of the self. *Phenomenology and the Cognitive Sciences* 99: 9132–8.
MacKenzie, Matthew. 2019. Virtue, self-transcendence, and liberation in Yoga and Buddhism. In *Self-Transcendence and Virtue: Perspectives from Philosophy, Psychology, and Theology*. Edited by Jennifer A. Fray and Candace Vogler. New York: Routledge, pp. 203–21.
McMahan, David L. 2004. Modernity and the early discourse of scientific Buddhism. *Journal of the American Academy of Religion* 72: 897–933. [CrossRef]
McMahan, David L. 2008. *The Making of Buddhist Modernism*. New York: Oxford University Press.
McMahan, David L. 2012. Buddhist modernism. In *Buddhism in the Modern World*. Edited by David L. McMahan. London: Routledge, pp. 160–76.
Mohammed, Zeinab, Ahmed Arafa, El-Sayed Atlam, Nader El-Qerafi, Momen El-Shazly, Omar Al-Hazazi, and Ashraf Ewis. 2021. Psychological problems among the university students in Saudi Arabia during the COVID-19 pandemic. *International Journal of Clinical Practice* 75: e14853. [CrossRef]
Nehring, Daniel, and Ashley Frawley. 2020. Mindfulness and the 'psychological imagination'. *Sociology of Health and Illness* 42: 1184–201. [CrossRef]
Paul, Diana. 1979. The concept of Tathāgatagarbha in the Śrīmālādevī Sūtra (Sheng-Man Ching). *Journal of the American Oriental Society* 99: 6026563. [CrossRef]
Paul, Diana. 2004. *The Sutra of Queen Śrīmālā of the Lion's Roar*. Moraga: BDK America.

Peetush, Ashwani. 2018. The ethics of interconnectedness: Charles Taylor, no-self, and Buddhism. In *Ethics without Self, Dharma without Atman*. Edited by Gordon F. Davis. New York: Springer, pp. 235–51.

Segal, Zindel V., John D. Teasdale, and J. Mark G. Williams. 2004. Mindfulness-Based Cognitive Therapy: Theoretical Rationale and Empirical Status. In *Mindfulness and Acceptance: Expanding the Cognitive-Behavioral Tradition*. Edited by Steven C. Hayes, Victoria M. Follette and Marsha Linehan. New York: Guilford Press, pp. 45–65.

Segall, Seth Zuihō. 2020. Self and self-transcendence. In *Buddhism and Human Flourishing*. London: Palgrave Macmillan, pp. 115–41.

Simonsson, Otto, Olivier Bazin, Stephen D. Fisher, and B. Goldberg Simon. 2021. Effects of an eight-week, online mindfulness program on anxiety and depression in university students during COVID-19: A randomized controlled trial. *Psychiatry Research* 305: 114222. [CrossRef] [PubMed]

Son, Changwon, Sudeep Hegde, Alec Smith, Xiaomei Wang, and Sasangohar Farzan. 2020. Effects of COVID-19 on college students' mental health in the United States: Interview survey study. *Journal of Medical Internet Research* 22: e21279. [CrossRef]

Stanley, Steven. 2012. Mindfulness: Towards a critical relational perspective. *Social and Personality Psychology Compass* 6: 631–41. [CrossRef]

Stanley, Steven, Ronald E. Purser, and N. Singh Nirbhay, eds. 2018. *Handbook of Ethical Foundations of Mindfulness*. New York: Springer.

Sun, Shufang, Danhua Lin, Simon Goldberg, Zijiao Shen, Pujing Chen, Shan Qiao, Judson Brewer, Eric Loucks, and Operario Don. 2021. A mindfulness-based mobile health (mHealth) intervention among psychologically distressed university students in quarantine during the COVID-19 pandemic: A randomized controlled trial. *Journal of Counseling Psychology*. Advance online publication. [CrossRef]

Thondup, Tulku. 2021. *The Healing Power of Loving-Kindness: A Guided Buddhist Meditation*. Boston: Shambhala Publications.

Waltz, Thomas J., and Steven C. Hayes. 2010. Acceptance and commitment therapy. In *Cognitive and Behavioral Theories in Clinical Practice*. Edited by Nikolaos Kazantzis, Mark A. Reinecke and Arthur Freeman. New York: Guilford Press, pp. 148–92.

Wang, Xiaomei, Sudeep Hegde, Changwon Son, Bruce Keller, Alec Smith, and Sasangohar Farzan. 2020. Investigating mental health of US college students during the COVID-19 pandemic: Cross-sectional survey study. *Journal of Medical Internet Research* 22: e22817. [CrossRef]

Wathelet, Marielle, Stéphane Duhem, Guillaume Vaiva, Thierry Baubet, Enguerrand Habran, Emilie Veerapa, Christoph Debien, Sylvie Molenda, Mathilde Horn, Pierre Grandgenèvre, and et al. 2020. Factors associated with mental health disorders among university students in France confined during the COVID-19 pandemic. *JAMA Network Open* 3: e2025591. [CrossRef]

Westphal, Merold. 2004. *Transcendence and Self-Transcendence: On God and the Soul*. Bloomington: Indiana University Press.

Wilber, Ken. 2006. *Integral Spirituality: A Startling New Role for Religion in the Modern and Postmodern World*. Boston: Shambhala Publications.

Wilson, Jeff. 2014. *Mindful America: Meditation and the Mutual Transformation of Buddhism and American Culture*. New York: Oxford University Press.