

## Further Iterations of the Integrated Mindfulness Model (IMM)

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### Abstract

*The author has developed a theoretical model for the psycho-religious construct of mindfulness (Gerža, 2005). This paper elaborates the central existential notion of the manifold nature of suffering; how it may underpin processes involved in the perception of threat and subsequent development of anxiety (Spielberger, 1979), and how these might be linked to the important psychological construct of "control" (Astin & Shapiro, 2005). In light of these considerations, two iterations of the model are developed: the normative/entropic and the pathologised, which clarify the relationship of the different schema at the triad levels of the IMM. The paper concludes by examining the evidence for the relationship between mindfulness and the generation of values.*

### Introduction

The author has previously outlined a provisional theoretical model for the psycho-religious construct of mindfulness, the Integrated Mindfulness Model (IMM) (Gerža, 2005). Incorporating the perspectives of mindfulness from leading authors from different psychological paradigms, the model utilises Sternberg's notion of mindfulness as a cognitive style (Sternberg, 2000), Langer's social and informational cognition perspectives (Langer, 1989), and the temporal and affective cognitive elements from the therapeutic/transpersonal paradigms typified by Teasdale and colleagues (Segal, Teasdale, & Williams 2002) and Tart (Tart, 1993). These are combined with personality elements (which themselves bear some comparison to the five factor model of personality (McCrae & John, 1991)) into a multi-level model of cognition (see diagram 1).

This paper seeks further to identify, clarify, elaborate, and develop the underlying processes that may be at work within the model. In Part 1 the author further explores the existential level of the model, specifically the key notion of the manifold nature of suffering. Part 2 examines the how these may relate to Spielberger's model of anxiety and how these in turn may be understood as control processes. Part 3 looks at how these processes generate iterations of the IMM, specifically identifying two new versions: the entropic/normative, and pathologised. The author concludes in part 4 by showing how mindfulness can be understood in relation to the generation of values, using some supporting evidence from a recent empirical study undertaken by Brown and Kasser (2000).

Insert Diagram 1 here

### Part 1: Manifold Nature of Suffering (IMM Level 1 Cognition)

Austin asks: "Does profound adversity sensitise a person to existential issues?" He concludes that the life experiences of both Siddhartha Gautama and Carl Jung appear to indicate that this is indeed likely to be the case (Austin 1998, pages 535 & 574-575). One could also cite the experiences of the existential-transpersonal psychoanalyst Viktor Frankl in Auschwitz to support this observation (Frankl 1984, p.60). For Frankl, suffering became a key factor in the way individuals were able to derive meaning in their lives (Fuller, 1994, p.250).

So whilst at first glance this is possibly the most "esoteric" element of the model, it is the one which enables the model to address important existential issues which, within the IMM framework, lead to the restructuring of the individuals' system of values and thereafter modifies the behaviour contingent upon those values. It is therefore *suffering* which plays the key role in mindfulness and hence in the mechanics of the IMM. Thus, an understanding of suffering and its relationship to existential issues greatly expands the model's explanatory scope. The topic is therefore worth some further analysis.

#### **Suffering in the Religious Context**

Bowker states: "It is because suffering, in one form or another, is a common experience that religions give to suffering a place of central importance or consideration - indeed, it is often said that suffering is an important *cause* of religion..." (1970/2003, p.1 original italic). He continues that a main route to understanding the world's religions is in their respective relationships toward suffering which, he writes, is especially true of Buddhism (ibid. pages 237-238) Similarly Murti notes:

"Spiritual life is born of the sharp contrast felt between what is and what should be. It is the consciousness of suffering...The essential prerequisite of spiritual awakening is the awareness of the intensity and universality of suffering..."

Murti, 1955/1980 (p.160)

Religion proffers a framework within which an individual can make sense of suffering. However, this framework places great emphasis on understanding suffering as a complex phenomenon, and that in many ways much suffering is of our own making (Bowker p. 8 and 240-1). This understanding might be thought of as the basis of the developmental agenda of transpersonal/religious practice, as distinct from religion used in its palliative context. This is certainly the case in respect of the use of mindfulness as a transpersonal "technique" outlined in Tart's exploration of

the construct (see Tart, 1990 & 1994). The psychological mechanism upon which this may be working will be examined in part 2. This examination must be preceded by unpacking the term "suffering".

### **Suffering: A working definition**

"Suffer" is now usually used in its pejorative sense, synonymous with physical or emotional pain. The Oxford Concise Dictionary definition gives equal weight to its meaning *undergo* or *experience*, passive but not necessarily painful. Indeed, major definitions of the word are *allow*, *permit*, *put up with* and *tolerate*. The term might be construed then as being as much to do with experiencing situations as with physical injury or negative emotions. How then do we account for these various meanings?

As the author suggested in the previous paper, suffering may be understood to be *manifold* in nature: that it is an individual's awareness of and ability to *engage with* inevitable and challenging life experiences that is the basis of the resolution of certain types of suffering. As such, an individual either engages or manages suffering consciously and objectively (*mindfully*) or unconsciously (*mindlessly*) and "dishonestly" (see Peters, 1964/1976 p.94).

The latter results in suffering being perpetuated and possibly exacerbated for the individual. What can be termed *necessary* suffering is therefore transformed into *unnecessary* suffering. Further, the manifestations of such suffering can be transferred to another individual or group similarly placed, in a position to experience and/or transform this suffering (also dependent on their own levels of mindfulness) into either necessary or unnecessary suffering – *ad infinitum*.

### **Sufferance, Acceptance & Understanding**

However, in separating mindfulness from such a psycho-religious analysis of suffering, many clinicians see the construct as a *non-evaluative* and *non-judgmental* process of observing of thoughts, strongly emphasising the "acceptance" nature of the construct (Baer, page 125, Baer, Smith, & Allen, 2004 p.191-192 and Hayes, Follette & Lineham, 2004). In line with Teasdale and colleagues (Teasdale, Segal & Williams, 2003) the author is cautious of such an approach.

In the context of the IMM, mindfulness is indeed an observation of thoughts. It is also, however, *an evaluation process* which uses the perception of the manifold nature of suffering as its datum point. In *accepting* inevitable/unavoidable suffering - the OCD definition of the word *sufferance* - the individual consciously engages with

problematic/challenging situations without suffering *unnecessarily* (Tart 1994 p.139). In short, a mindful individual identifies unnecessary suffering and thereby negates it or sees it as without any real foundation. *Acceptance* is therefore based upon the mindful *understanding* that some emotions are painful, some social situations are unavoidable, one's position in temporal space is unchangeable and some information is challenging, but that these existential "fears" are ultimately manageable and indeed part of and essential to the individual's development.

### **Mindfulness as an Evolving Quality (of Consciousness)**

The transpersonal literature observes that mindfulness process requires a degree of evaluation. Ornstein suggests that there are two types of meditative exercise: *concentrative*, and that which he terms as "opening-out" exercises; the latter described as "mindful" awareness (Ornstein, 1972 pages 127-130). Gunaratana reflects on the distinction between the two:

"The real problem is that concentration alone will not give you a perspective on yourself. It won't throw light on the basic problems of selfishness and the nature of suffering. It can be used to dig down into deep psychological states. But even then, the forces of egotism won't be understood. Only mindfulness can do that. If mindfulness is not there to look into the lens and see what has been uncovered, then it is all for nothing. Only mindfulness understands. Only mindfulness brings wisdom." (Gunaratana, 2002)

Similarly, Austin suggests mindfulness is a triad of processes involving meditative concentration together with *restraint*, and *insight*: "Reinforcing one another, they gradually bring their *coordinated* impact into thoughts, attitudes and behaviour. Together, they help one sort things out, observe which options work better, arrive at *constructive solutions*, keep one's best intentions on-line." (ibid. p.126 original italics)

So it would appear that it is the concentrative element that forms an initial phase of mindfulness, evolving into a more dynamic reflective mindfulness. Austin laments: "Rarely does this point receive the emphasis it deserves. As it evolves, it proceeds in both external and internal dimensions along lines that are increasingly intuitive." (ibid p.127) Austin suggests this phase is more psychoanalytic in nature. Thus, it is in the earlier phase that both euphoric and dysphoric feelings are identified, *after which* the individual attempts to pinpoint the genesis of such states in what Austin terms a

“quietly critical” inner dialogue (ibid. p.128). This would seem to be the basis of what Tart calls *self-observation* and *self-remembering* from the Gurdjieff tradition (Tart 1990, pages 91-92) and which Wilber suggests is the “transpersonal witness” from which “...one can comprehensively look at individual emotional and ideational complexes.” (Wilber 1993 p.29)

Further, Shapiro (1994) suggests in his SR-SE-SL continuum that varying levels of meditative practice target different objectives. Initial phases focus on *self-regulation*, predominately to enhance relaxation and dissipate stress, thereafter *self-evaluation* enables subjects to engage in “nonreactive, detailed, systemic, and impartial observation of one’s own cognitions and emotions...” (ibid p.108). The final stage is one of *self-liberation*, which focuses on the original existential religious context and value generation: “The goal of meditation at its deepest level has been liberation from the egoic self; developing a sense of harmony with the universe, and the ability to increase one’s compassion, sensitivity, and service to others.” (Ibid, p.113).

To summarise, within the IMM framework level 1 cognition, the perception of the manifold nature of suffering permits the possibility of seeing the habitual and often inappropriate nature of schema-driven thought processes. In detaching from these the individual can then observe the limitations of level 2 cognitions and thereby allow subsequent modification of level 3 behaviours. This evaluation process encompasses one’s perception of reality, specifically to differentiate whether this reality is “real” or illusory and establish one’s position within it. The alternative is subjugation of the individual within a *pseudo-reality* based upon delusional agendas primarily focused on the his/her desire for comfort, survival or power. These will be returned to in parts 3 and 4.

## **Part 2: Stress, Anxiety and the IMM**

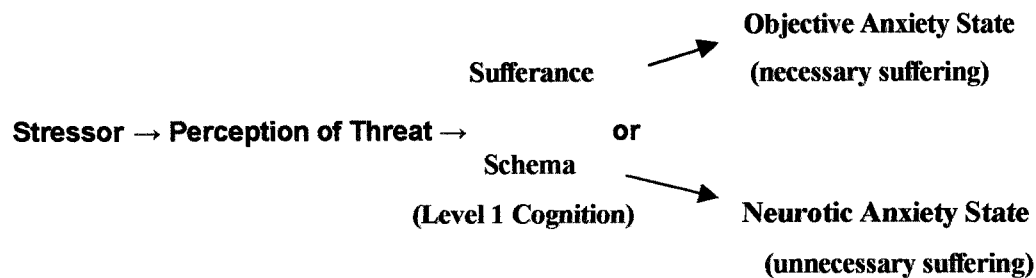
Perhaps the area where the construct of the *Manifold Nature of Suffering* can best understood is in its relationship with orthodox notions of Stress and Anxiety, which Professor Charles Spielberger describes as “...a complex psychological process that consists of three elements. The process is *initiated* by a situation or stimulus that is potentially harmful or dangerous (*stressor*). If a stressor is *interpreted* as dangerous or threatening, an *anxiety reaction* will be elicited.” (Spielberger, 1979 page 17, original italics)

Thus:

**Stressor → Perception of Threat → Anxiety State**

However, Spielberger differentiates between what he terms *objective* and *neurotic* anxiety. Objective anxiety is the normal and indeed necessary feeling associated with threats or stressors in the environment. Neurotic anxiety is the heightened distressful state associated with the distorted perceptions of the same stressors. Spielberger suggests both are based upon “coping skills and previous experience.” (ibid p.43).

The author argues that this may be understood in IMM terms as the following:



### **Control Processes**

However the IMM is not a model of stress or anxiety *per se* but rather a model of cognitive processing and evaluation of factors which may or may not be the cause of necessary or unnecessary suffering and ways in which these effect cognition, personality and subsequent behaviour. How the above process may relate to mindfulness can be elaborated with specific reference to the way individuals perceive the notion of *control*, which Astin and Shapiro (2005) suggest is of some relevance to transpersonal psychology.

The construct of control is well established in mainstream psychology and is also fundamental to many criminological theories (Lilly, Cullen & Ball, 2002). In the former the notion of *internal* control is linked with general psychological well being and health (Hurrell & Murphy, 1991). Criminological control theories have placed control either externally in the form of “social bonds” (Laub & Sampson, 2001), or internally with the notion of “self-control” (Gottfredson & Hirschi, 1990), specifically in relation to the delay of gratification and impulsivity (Blackburn, 1993 p.191). From this criminological perspective, having either little or no self-control or having loose or no social bonds is seen as the basis for delinquent or deviant behaviour (for a review of these theories see Farrington, 2003).

However, looking at the construct from the perspective of the IMM such activity is due not so much to lack of control but rather stems from the individual's *desire to gain control* and thereby ameliorate the pain of unnecessary suffering caused by the inadequate management of that suffering. Borrowing the stage protocols from Crick and Dodge's social information processing model (Crick & Dodge, 1994) the notion of control can be seen as a process developing along three different pathways.

### **The Mindful Control Process**

What may be considered to be the "intuitive" mode of control is the conscious or mindful evaluative process which generates and perpetuates diagram 1. As Astin and Shapiro write: "...our research on how people realise a sense of control in their lives also suggests that optimal psychological health is characterised by a balanced and flexible use of the two positive modes of assertive *and* yielding control, as well as their integration." (ibid p.185 original italic). It is therefore important to bear in mind that a certain amount of a *lack of control* is accepted within this process.

Stage 1 - Stressors - are seen within the context of the manifold nature of suffering - Level 1 cognition.

Stage 2 - Objective interpretation - stressful situations are objectively interpreted. Here the mindful individual will evaluate whether the situation is likely to be necessary or unnecessary suffering, i.e. whether what is happening is the product of inevitable events entirely beyond one's control, or events that are controllable but the product of other individuals' projection of their own suffering and hence unnecessary.

Stage 3 - Anxiety Reduction - This reduces the expenditure of energy upon unwarranted anxiety and negative rumination.

Stage 4 - Problem Solving - Having eliminated unnecessary processing, the individual is in a better position to access a possible solution to the stressor (situation).

Stage 5 - Action - execution of the plan of solution.

Stages 6 - Resolution - negative rumination on retrospective solutions are eliminated as the individual accepts that the most appropriate solution was tried.

### **The Normative/Entropic Control Process**

Using Astin and Shapiro's terms, it may be that this process utilises negative yielding strategies which focus on passivity and acquiescence (ibid, p.184), and the same stages as above progress in the following manner;

Stage 1 - Stressor

Stage 2 - Distorted evaluation, the perception of threat

Stage 3 - Anxiety - Heightened/amplified feeling of unpleasant affect.

Stage 4 - Comfort Schema - Development of schema to ameliorate the sense of anxiety (focusing on wealth, material possession, relationships and other signifiers of comfort and social stability). - Desire for comfort overrides and distorts further "objective" perception of source/sources of anxiety.

Stage 5 - Cognitive Atrophy - Habituated Response based on repeated comfort-based behavioural responses.

Stage 6 - Normalisation of inappropriate behaviours - Personal and Social value systems modified to reconcile new comfort-based behavioural choices and to diminish any remaining sense of guilt (which might be defined here as the dysphoria caused by the dissonant mindful awareness of one's own mindless behaviour).

### **The Pathologised Control Process**

As envisaged, this is the most maladaptive and hence deleterious form of control, which reflects Astin and Shapiro's notion of *negative assertive* control. Here the focus is on what they term "overcontrolling" strategies (ibid, p.184).

Stage 1 - Stressor - Important to understand that the time of the experience of the stressor is key to later deviant behaviour, related to Piaget & Vygotsky's "Critical Stages" of cognitive development (autistic, egocentric, social).

Stage 2 - Anxiety/Shock - Inability to deal with stage 1 is based on a lack of development of level 1 cognition. Stress is therefore experienced as anxiety-inducing (unnecessary suffering).



Stage 3 - Cognitive Spasm – By way of protection of self, the level 2 cognitions go into spasm – to reduce the perceived potential for further psychological damage.

Stage 4 - Schema Development – Survival/Power schemas develop in the *desire to control* environment/situation.

Stage 5 - Amelioration of Unnecessary Suffering - Violence, sexual gratification (involving violence), drug-taking, parts of the Survival/Power schemas, each seen as bestowing *control* over emotional, social, temporal and informational cognitions.

Stage 6 - Perpetuation/Interaction - Normalisation of inappropriate behaviours with self-concept – Ultimately irreconcilable behaviours develop - growing detachment from notions of self and society (see part 5).

### **Part 3: The Development of the Model**

In respect of these considerations, the author has generated two further iterations of the IMM. This helps to distinguish both the entropic and deeper states of mindlessness (and the resulting level three behavioural traits that develop from those) from IMM as defined in the previous paper and only briefly touched upon in that work.

#### **The Entropic IMM**

The reader is referred to Diagram 2 which shows the milder “entropic” form of mindfulness wherein the focus of the existential concerns of the level 1 cognition is not the *manifold nature of suffering* but the desire for *comfort*. It is the product of normative control processes and perhaps the most pervasive style of cognition (Langer 1989 and Tart 1991).

#### **The Pathologised IMM**

Generated from the “pathological” control process, diagram 3 indicates the deeper, more profound level of mindlessness that can develop. As such the existential concern of these individuals is *survival* and/or *power*. What follows is an elaboration of the level 2 cognitions and level 3 personality traits and subsequent behaviour.

**Insert diagrams 2 & 3 around here**

#### **Personality Triads (IMM Levels 2 & 3)**

As noted in the original version of the model, the cognitive and personality elements of these levels of the IMM should be thought of as being in a triadic relationship, that is, in the mindful individual the cognition modules on level 2 drive the two personality traits below them (ibid, p.73). However in the following iterations, these cognitions are respectively in a state either of atrophy or spasm. This is represented by the smaller size of the level two ellipses in diagrams 2 and 3.

### **Emotional Cognition Triad**

In the Comfort Schema version of the IMM and its primary objective, emotional cognition is limited to fixed or negative emotions such as desire, envy, etc which are due to perceptions of *lack of comfort*. Thus, moral development is limited to this existential concern and driven by this desire. As a mindful or “objective” morality is based on level one cognition, without it an ersatz or learned moral code develops – a “set of rules” that requires little conscious evaluation. Similarly, the individual’s *empathic* development focuses on what can be acquired from inducing “need” type of emotions in others; consequently, the individual’s level of “understanding” of others will be fixed on this basis.

Deeper pathologised version of this triad may expect to see emotional cognition limited to early neonate emotional development, focused on survival and thus based in fear, hate and anger. No “objective” morals can be developed in this *survival*-based schema. The generated version of the morality trait in this schema is based upon an inverse/negative perception of those “objective” moral values. Further, the empathetic trait of the individual becomes callous toward the emotions of others (and therefore others’ moral and empathic concerns), which come to be viewed as a liability or an obstacle to the successful execution of the survival/power schema of the pathologised individual.

In respect of antisocial and criminal behaviours such as drug taking and violence, the former can quell negative emotions (Khantzian, 1985) whilst the latter might be viewed as an expression of the neonate emotions experienced by the individual – often the only emotions available to the individual within a survival/power schema.

### **Social Cognition Triad**

In the normative/entropic version of the IMM, limited social cognition results in the personality levels of the IMM developing the two traits of *dependence* and *compliance* (cowardice). Here, instead of the individual understanding society and its cultural norms as systems for the management of suffering, they become means to gain and

maintain comfort and as such must be rigidly maintained to eliminate perceived suffering.

If the individual perceives society/culture as a source of threat/ambiguity then that individual becomes *socially aversive*. In developing a survival/power schema the individual avoids society and or sets up an alternative and acceptable version of society that sits comfortably with the alternate moral values that have also developed. As these will be potentially dissonant with the norms of the society within which that individual exists (but not necessarily so, see part 4), the individual is in state of perpetual *antagonism* against the dominant society/culture. In order to eliminate this dissonance and reclaim a degree of power, the individual may well seek to restructure the culture/society to satisfy the individual's (distorted) perceived requirements for survival. In respect of this, drug taking and violent behaviour can be seen as ways of seizing, manipulating and maintaining "control" of a situation.

### **Temporal Cognition Triad**

As the late Rumanian philosopher Mircea Eliade (1907-1986) noted, our sense of time can be perceived as suffering by those "thirsty for 'being'" (as reported in Larrimore 2001 p.XV). In psychological terms this is perhaps the hardest cognition to define and understand, one that both Zimbardo & Boyd (1999) and Carstenson and colleagues (Carstenson, Isaacowitz, & Charles 1999) suggest has been neglected by psychologists. It is one however that has been identified as being crucial to the understanding of conditions such as ADHD: "Those with ADHD are adrift and disorganised within time." (Barkley, 1997 p.241)

In respect of the IMM, the mindful individual engages in labour due to the awareness of the flow of time. Those that require comfort will conversely perceive labour as a reminder of the inexorable flow of time. The individual will therefore avoid engaging in labour, hence *indolence* (which is from the Latin *dolere* to "suffer pain"). Furthermore, by way of ameliorating the perception of passing time, a timeless, idealised existence and sense of purpose or aim is substituted for objective goals, namely *fantasy*.

In some individuals a more pathologised way of controlling their sense of time will be to engage in activities which lead to the eradication of the individual's perception of time altogether. The individual begins to live an *atemporal* existence, wherein little consideration is given to the implications or consequences of one's actions. Thus an

individual's behaviour will be *impulsive* in nature, seeking distracting activities. The need to engage in these activities becomes *obsessive* in order to maintain this state of temporal agnosia.

As Levin (2000) and Everitt (see Grant 2005) suggest, the link between impulsivity/ADHD and drug taking has yet to be fully explained. Within the IMM framework, drugs are used to "fix" the addicted individual's sense of time - to stop it "moving", to be away from the present (Marlatt 1994 unpublished).

### **Informational Cognition Triad**

In the absence of level 1 cognition, the individual relies on *preferred* information and problem solving strategies with which to navigate through problems. However, such problem solving strategies take on a "one size fits all" quality, in that successive problems are approached using the same strategy. Importantly, the individual will do this whether this preferred solution is appropriate to the situation/problem or not (as the appropriateness cannot be gauged). In effect, it is a trait of *habitation*.

Chanowitz and Langer refer to this as *premature cognitive commitment* (Chanowitz & Langer 1981). This is the basis of the Einstellung paradigm of experiments, wherein subjects are given a problem to solve and further problems, which whilst superficially similar, can actually be solved in a more easily than the first if the individual analysed subsequent problems afresh. In over-relying on these repertoires, an individual misses the possibility of more *creative* solutions to problems. Thus, problems are dealt with in a spirit of an unrealistic hope or in a *blindly optimistic* fashion.

Within the pathologised version of the IMM, problems are not perceived as being soluble unless the data or information itself are ignored or otherwise restructured. This is ultimately a destructive process with the cumulative effect that problems are not solved leading to amplification of the initial problem(s). Such a state of affairs leads the individual into perceiving a world in which solutions are ultimately always unsuccessful, engendering an outlook of *despair*.

### **Part 4: Mindfulness & Value Generation**

In line with Shapiro's observations mentioned in part 1, these iterations suggest that the construct of mindfulness is fundamental to the generation of values and personal behavioural norms. But as Austin notes, some may view what might be termed "the Buddhist path" as ethically neutral and almost amoral (Ibid. p.645). However, Austin is critical of those who engage in the practice of mindfulness outside a context of

religious ethics; "...no one engaged in authentic Buddhist training relinquishes either moral compass, anchor, or rudder." (Ibid. p.144) Indeed, Shapiro has observed that consideration of the original existential context of these processes is an important factor in gaining the wider existential benefits (Shapiro, 1992). Kornfield too acknowledges that the Buddhist path is axiomatically a path to a wider social responsibility (Kornfield, 1985/1993).

In respect of these points, Brown and colleagues have recently undertaken research that indicates that mindfulness (as measured using the MAAS scale, Brown and Ryan, 2003) has a positive relationship with what they term "intrinsic values". They define these as being values that are orientated toward personal growth, relationships and community involvement and are distinct from extrinsic values orientated toward financial success, image and popularity. These factors are in turn positively related to what they refer to as subjective well-being (SWB) and ecologically responsible behaviour (ERB) (Brown and Kasser, 2005). Further mindfulness has been found to have a negative relationship to materialism (Brown, Kasser, Ryan & Konow, unpublished).

In IMM terms, ethical values and moral action arise *naturally* as individuals come to realise (in both senses of the word) their own detachment from an erroneous notion of "self" embedded within comfort or survival/power schemas, with the self focused upon what might be termed "mindless" values. In such terms materialism would be understood as the individual identifying with signifiers of what they see as necessary in order to sustain agendas of comfort, power and survival. Conflict arises if these agendas are at odds with the values of the rest of society. Resultant behaviour is categorised as deviant, selfish or anti-social.

### **Mindfulness: A Social Perspective**

And therein lies the wider socio-political issue, in that as society and the individual interact, so the immediate society/culture may also (d)evolve into comfort/survival/power mechanisms. The author suggests that totalitarian, authoritarian cultures are products of many individuals subscribing to such existentially-focused schemas, the traits of which become the "norms" of that society/culture and the socio-legal frameworks or "codes" of behaviour they spawn. For examples, see prison cultures and Japan of the Meiji Restoration (see Victoria 1999, Lewis & Steele, 2001 pages 53-68), or Germany's Third Reich (Barkai, 1994 pages 33-50, Muller-Hill, 1994, 62-70). As such, "social bond theory" as a rationale for explaining criminal behaviour is somewhat undermined by such an analysis, as

immoral behaviour seems appropriate or even rational within such societies, whereas moral behaviour is necessarily seen as deviant.

Thus, the author suggests that the comprehension of the manifold nature of suffering is just as essential for the development of stable and just societies as it is for the development of psychologically healthy and mindful individuals. By extension, such societies and the legal and political systems which they develop, would have the notion of "acceptance" or what be a more apt term, "tolerance" as their basis. Further: "crime", aside from being inevitable is in many ways a social necessity in that (as for the individual so for society) it becomes the datum point upon which to develop a framework of moral norms.

### **Conclusion**

Thus far the author has concentrated on what seems, on the face of it, to be a very negative aspect of mindfulness. However, the author feels that too frequently the basic and axiomatic foundations of mindfulness have not been adequately addressed in the clinical and academic literature. Failure to understand the nature of suffering and the way it relates to the formulation and perpetuation of mindlessness diminishes the scope of understanding of mindfulness itself. This in turn limits the understanding of the psychological and interpersonal benefits that may be possible from its cultivation.

In conclusion, Straub, in his analysis of the psychology of good and evil has observed: "Some people who have suffered greatly seem to become intensely committed to helping others... We know little about this phenomenon, as yet." (Straub, 2003, p.63) The author hopes that the IMM begins to give a framework for understanding such phenomena. In this respect, it has as much to say about altruistic behaviours and their possible aetiology as it does about pathological behaviours.

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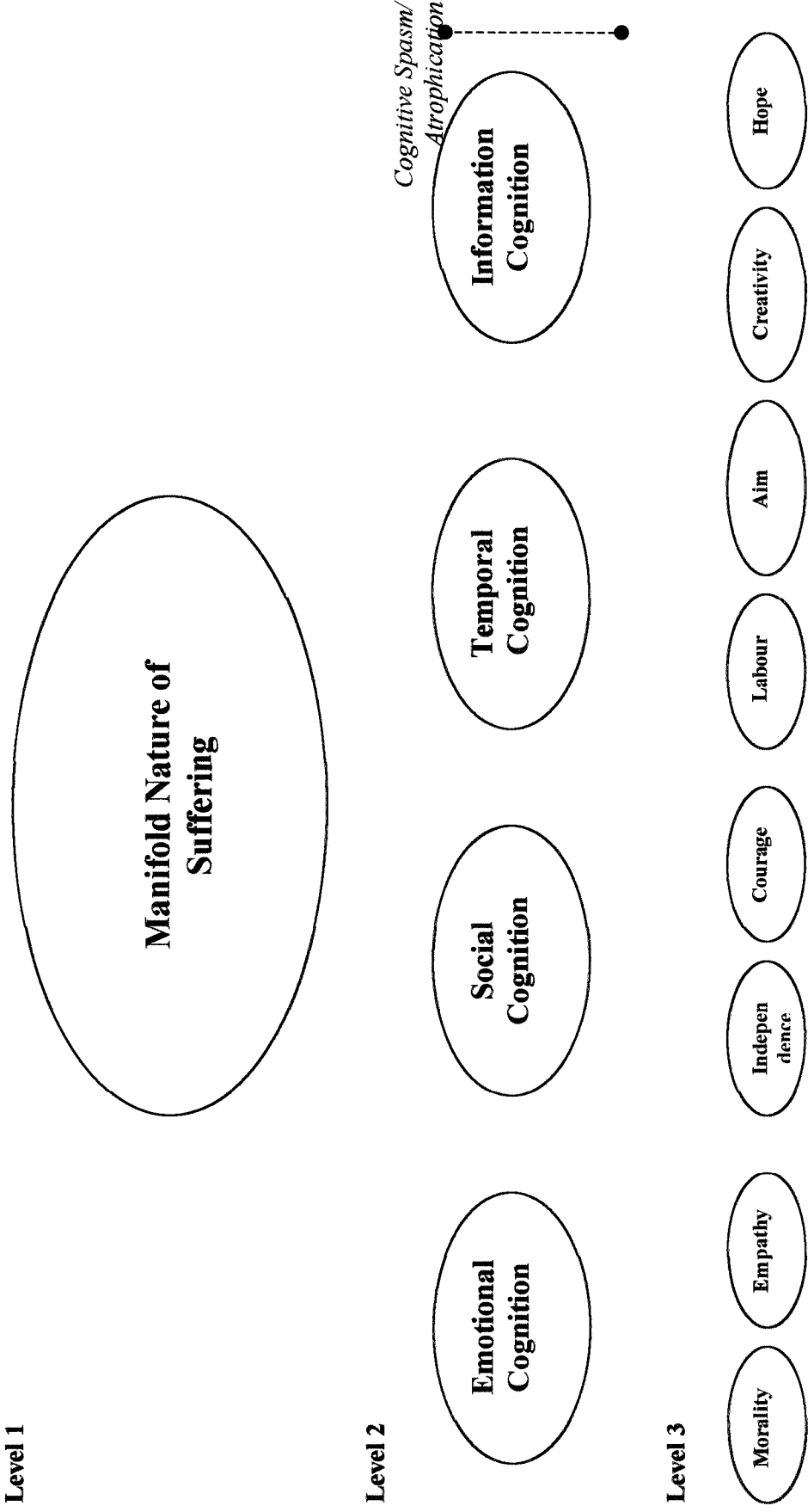
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# Diagram 1

## Integrated Mindfulness Model



Level 1 = Cognitive Style/  
Existential Concern

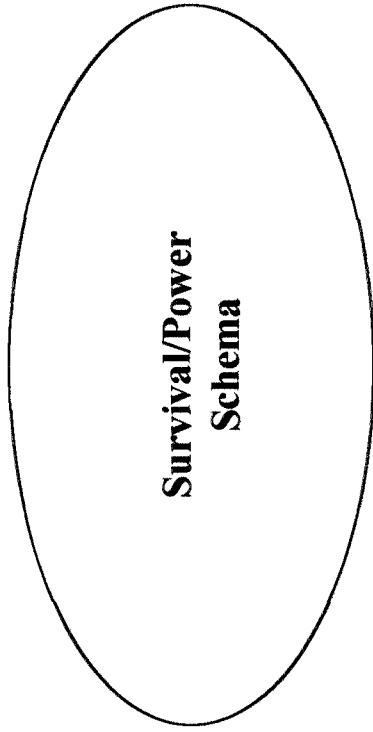
Level 2 = Cognitive Ability Level/  
Therapeutic Level

Level 3 = Personality/  
Behavioural

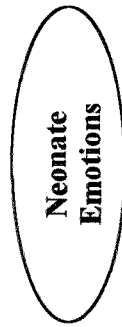
### Diagram 3

## Integrated Mindfulness Model: The Pathologised Version

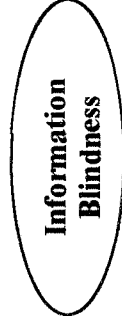
Level 1



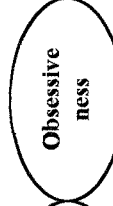
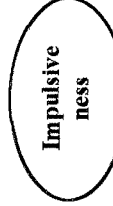
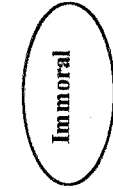
Level 2



*Cognitive Spasm*



Level 3



Level 1 = Cognitive Style/  
Existential Concern

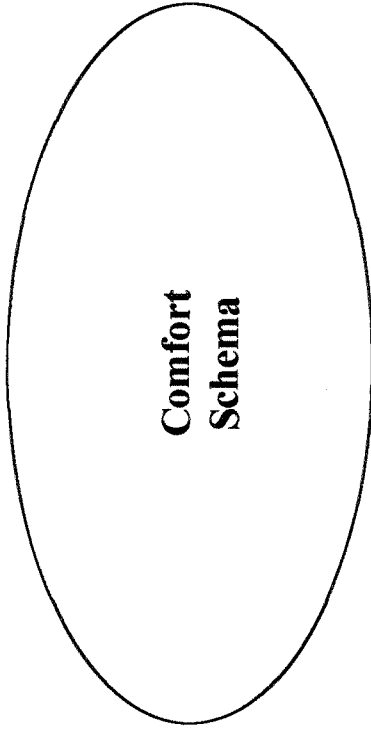
Level 2 = Cognitive Ability Level/  
Therapeutic Level

Level 3 = Personality/  
Behavioural

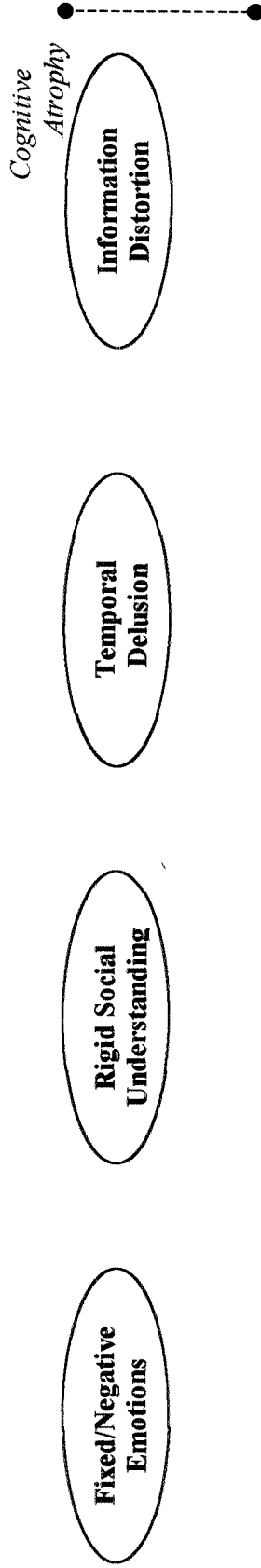
# Diagram 2

## Integrated Mindfulness Model: The Entropic Version

Level 1



Level 2



Level 3



Level 1 = Cognitive Style/  
Existential Concern

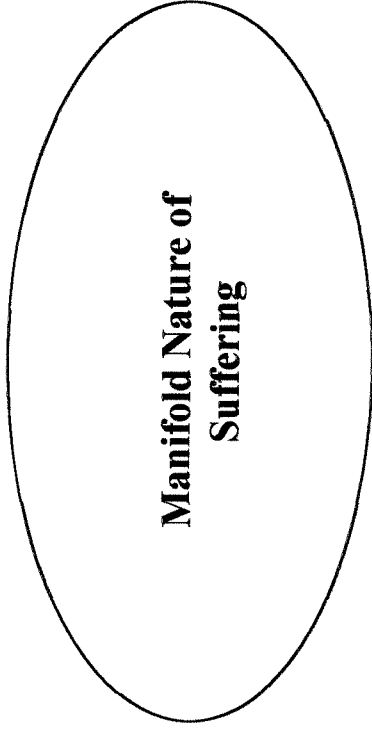
Level 2 = Cognitive Ability Level/  
Therapeutic Level

Level 3 = Personality/  
Behavioural

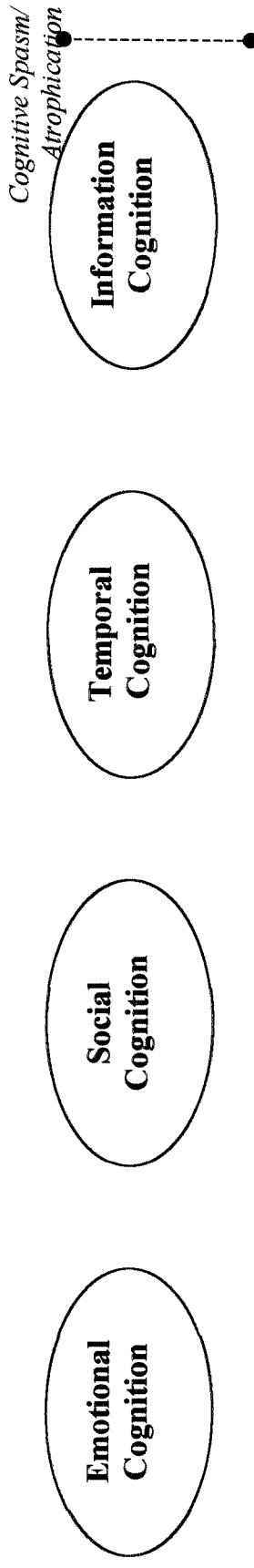
# Diagram 1

## Integrated Mindfulness Model

Level 1



Level 2



Level 3



Level 1 = Cognitive Style/  
Existential Concern

Level 2 = Cognitive Ability Level/  
Therapeutic Level

Level 3 = Personality/  
Behavioural