In this first section I am going to focus on the dharma of the body.

When I was two years old my father died. He had suffered, in 1954, with the inevitability of untreatable melanoma. I was young, but aware enough to realize that I needed to take care of my mother and my older siblings, so they would take care of me. This also meant I put others’ needs before my own and psychologically speaking, left my body.

Abandonment and care-giving were early conditioning. Additional challenges presented themselves with childhood and teenage years of sexual exploitation. Those experiences further undermined trust in my physical safety and integrity. I have, in adulthood, experienced a safe and privileged life and worked in therapy to repair those injuries.

When I started meditation practice, following my breath was elusive. Noticing my heart beat frightened me. My mind kept itself very busy with repetitive thoughts. My first retreats I would bristle at the direction to relax. I thought there must be another way. I was quite tense with trying to breathe. How could I possibly relax. It wasn’t being still that was the issue. It was fear of being alive.

Gradually I noticed that even the “just” sitting helped. I began to realize I was agitated and not reject the experience. I began to notice my unpleasant reactions to difficulties in life and then I began to find the spaces where I wasn’t reacting so quickly. I began to recognize choice.

I was following the direction of Buddhist teachers. I had been reading books about Buddhism, and not really getting it, for years. It was my body’s need to come out of the void that kept me meditating and meditating brought the dharma to life.

For me the world turns on this teaching from the Buddha: This is what I have learned. Put this into practice and see what it means to you.

I am learning to be in my body, alert to internal sensations; to notice the grief of grasping/clinging, of hostility/animosity. I am grateful to notice the struggle of confusion to recognize delusion. Dharma has given me this.

In my volunteer work with the patients and chaplains in our local Dignity hospital, I am stretched to be present with myself, to be attentive, respectful
and caring, without abandoning the experience of bodily awareness. With patients, I want to be alert to the perspective of their bodies and their relationship to self, others, and the sacred.

Hospital service has been the richest opportunity for me. What are a patient’s needs? How can I honor their body and care for their suffering, whatever its source? This is the level of congruity I want to be present with, to act with kindness and generosity of heart.

Sila: may I do no harm. This is the chief of my ethics, upon which all else is based.

Human life is precious, fragile, vulnerable; includes sickness and aging and always ends in death. The Buddha, from his experience, taught about the preciousness of a human life and admonished us against harming others. Stories about his life provide examples of his compassion.

As I understand it, harm is a result of hostility. It is grounded in a disrespect for life. It is ignorance leading to a belief in separation from others. In that sense of separation, terrible things can happen and we need to be warned against them for our survival. Fortunately I also grew up with love. I was educated in a Lutheran church school, with strong ethical teaching (not called ethics, but God’s will), but it was love that kept me from harming myself or others.

Having seen some of what’s possible, I’m afraid of my capacity for doing harm. This is an grievous factor in abuse, identifying with abuser. Experience with injury has given me an abhorrence of causing harm. As a teenager, late for work, my car hit a sparrow in a flock flying low across the road. I remember vividly the pain and shame I felt.

Even aversion to doing harm can be a form of grasping. I see I have to let go of fear and pain to live a full life and feel the joy inherent in being alive and awake. I want to say more about non-separation, our ultimate redemption from causing harm, later in this paper.

Beyond physical injury, I want not to take away another person’s understanding/ point of view/ belief. Especially in hospital, I want to hold a
patient’s experience with respect. So I am cautious with my words, giving patients my attention and noticing how they respond. Sometimes they are frightened, or in pain, irritated, agitated, sleep deprived, feeling a loss they are not eager to talk about, maybe with anyone.

I step into the water of their discomfort and wonder where is the shore for them? For me? I want to be gentle in my approach and I sometimes find my hesitancy a distraction. What is it to meet here, these few minutes, what is attentive non-harming?

I ask about their comfort. Family and friends. Their pain level. I might ask, what would you being doing if you weren’t here (in the hospital). I’m beginning to ask, what feels so vulnerable, for both of us, What are you hoping for. What are you afraid of losing. I may believe I want to cause no harm, but do they?

Sometimes truth-telling is painful. (More on this later, too). Part of my spiritual care team assignment is to verify patient’s religious preference. In response I have observed defensiveness, shame or anger. Practicing dharma, being calm and accepting in these uncomfortable situations, gives me confidence and keeps me humble.

Sacca

I spoke with Paul about what I wanted to include in this Dharmology paper, writing about the values I hold most dear. After body and breath practice, I mentioned truth. Until now, my exploration of speaking truthfully has been self-centric and distressing. I have identified the challenge as conditioning to conceal truth, to keep painful secrets. With practice I have become aware of the physical tension that arises with emotions, encouraging myself to quiet and settle. Staying true to myself, being the task at hand, until the grip of shame and fear loosens to irrelevance in the wholesomeness of being honest, appropriately and compassionately.

Now here I am studying this month’s texts on Sacca, with a bit more understanding of what is truth. It is, like it was early in my life, the nature of reality that is crucial to acknowledge.

I include this quote from Bikku Bodhi - -
To realize truth our whole being has to be brought into accord with actuality, with things as they are, which requires that within communications with others we respect things as they are by speaking the truth. Truthful speech establishes a correspondence between our own inner being and the real nature of phenomena, allowing wisdom to rise up and fathom their real nature.

-Essay on Truthfulness

The suffering I have experienced in my private version of speaking truth is a microcosm of what Bikku Bodhi writes here. Being fully present, alert and comprehending what is actually happening, allows for “establishing a correspondence between our own inner being and the real nature of reality”. In my life, there may be no more past that needs to be spoken. In the present there are, with discernment, words to hear, words to speak, timely, wise and caring. Words that connect in a shared respect for reality.

In the spiritual care volunteering I do with hospital patients I am very hesitant to bring my inner reality into their actual reality. I listen and respond with warmth, and consider their hospital room like a sacred space, loaded up with medical equipment. They are there living through sickness, often in advanced age, and sometimes with illness which will be fatal. That awareness and my care, cleanses me of self-importance. I am grateful to be a companion, hopeful to be a comfort.

Changing the Inner Narrative: Clinging, Animosity, Delusion

An early appeal of meditation practice came with the painful recognition of my reactivity. I did not tend to rage, but I was a veritable bull in a china shop with emotions. Therapy helped me identify emotions and their (conditioning) stories. Buddhism gave me the understanding of the source: grasping, aversion, ignorance / clinging, animosity, delusion.

Initially I was so busy with thoughts when I was sitting, and those thoughts weren’t allowing for investigation of what was behind my reiterative focus. Slowly concepts began to filter through. Clinging or hostility could look like the most important phenomena going, but they were the habitual status of closed
mind states. I could hold on to anger as long as I wanted. I could think and rethink it, but it only hurt, it never solved anything. The same with desire. The mind was resisting what it perceived as vulnerability, not yet recognizing the possibility of liberation. My interest now is identifying the ultimately empty experiences of wanting and judging. This is the heart beat of change for me. It is the place the practice has brought me to, as over time, dharma tends to teach what is needed to know next.

I have in my heart a great affection for discovering delusion. Misinformed, biased interpretations of reality have held poignant lessons. Seeing my way through projections and miscommunications, I have come to enjoy being simultaneously humbled and elated to realize I was all wrong about something.

Practice in this focus on clinging, aversion and delusion is opening the narrative to whatever is present in situations of spiritual care. A patient’s room is a liminal space, inhabited by waiting for the yet unknown. As their companion, I am best able to offer care when I am alert to heart and mind, theirs and mine.

The ultimate delusion is Separation.

I understand that the Buddha taught we are all captive to believing our perceived importance as a separate self. In my words, it is a disease of the mind. It is a misperception that creates unease, noncooperation, mental and emotional distress and disconnection from all living beings and our natural home, the earth.

This week I have been sitting with Matthew Brensilver. He has spoken about over-learning and under-learning. Over learning fear, he said, results in our belief in a separate self. That sense of separate self broadcasts vulnerability and reactive animosity. It is an entrapping delusion.

In my chaplaincy care for hospital patients there sometimes develops a sudden intimacy. Yesterday, a person with no spiritual reference points besides helplessness and regret, who was facing surgical amputation. She was heartbroken and mistrustful, but she let herself be seen with respect and kindness. She was willing to share moments of non-separation, which could not heal her body, but tended both our hearts.
Each of the dharma themes I have written about here are sourced in wanting to be free of this delusion. Embodiment, the Sila of non-harming, redeeming relationships with Sacca, limiting the influence of the three poisons, and understanding non-separation—are all on the path I want to walk to liberation.