

Meditation and Other Buddhist Approaches to Care and Healing

SPIRITUAL CARE AS AN EMBODIMENT OF BUDDHIST LOVING-KINDNESS AND COMPASSION TEACHINGS: A BUDDHIST CHAPLAIN'S PERSPECTIVE

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ABSTRACT

Spirituality is a person's relationship with something larger than her/himself that provides meaning in that person's life. Patients who visit or stay in a medical institution often experience spiritual pain, such as the suffering of losing personal freedom, fear of death, and questions of faith when facing serious diagnoses. Spiritual care is regarded as an important part of medical care alongside physical and psychosocial care. Especially in palliative care for terminal patients, spiritual care is an essential element of a holistic approach.

A chaplain sits with a person in spiritual and emotional crisis, creating a safe space for her/him to open her/his heart and supporting her/him to face and ease their pain. Listening attentively to what patients have to say and acknowledging what

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they share is the core of this ministry. When requested, rituals such as prayers appropriate to their faith tradition are also offered. Non-anxious, non-judgmental presence is the key attitude of a chaplain. The chaplain remains in the here and now. There is no agenda and nothing to fix when meeting with a suffering person. A chaplain sees and accepts the situation of the patient, the chaplain's own experience, and the environment as it is, gently embracing all of these elements in her/his heart.

Buddhist interfaith chaplaincy is gradually growing in Japan, the U.S. and elsewhere. The Buddhist teachings of *prajñā* (wisdom), *maitrī* (loving-kindness), and *karuṇā* (compassion), central to Mahāyāna Buddhism, support the practice of chaplaincy, placing caring for others and wishing them to be happy and free from suffering at the heart of the chaplain's practice. In the *Vimalakīrti Sūtra*, Vimalakīrti experienced suffering because of the suffering of other sentient beings. In the *Bodhicaryāvatāra*, Śāntideva emphasized the inseparability of self and others. Saichō, the founder of the Japanese Tendai School of Buddhism, taught his students, "forget self and benefit others." These pure, altruistic examples, free from attachment, serve as role models for chaplains.

For a chaplain, being fully present in a non-anxious and non-judgmental fashion provides a model of being that is free from attachment. When facing a suffering person, a chaplain receives and accepts that person's pain, while also acknowledging the chaplain's own pains. Seeing things as they are becomes a practice of internal transformation, or of developing *prajñā*, which is inseparable from loving-kindness and compassion. In this way, chaplaincy is a model of the bodhisattva path. Meditation practice, such as mindfulness, The Four Immeasurables or tonglen, can help prepare a chaplain to be ready to meet with suffering people and to deepen their own faith.

The spiritual care offered by the Buddhist chaplains can be regarded as an embodiment of Buddhist loving-kindness and compassion teachings.

PERSONAL SPIRITUAL HISTORY AND MOTIVATION FOR THIS RESEARCH

I was born and raised in a lay family in Japan where Buddhism is

embedded in various aspects of culture and life. I have been interested in Buddhism since my youth, and I started studying it seriously after I turned fifty through an online undergraduate program in Japan while still working as an engineer. One day, while walking in a park in downtown Tokyo, I was contemplating my favorite phrase from the *Avataṃsaka Sūtra*, “一即一切、一切即一、一入一切、一切入一,” which means: “one world is unspeakably many worlds, unspeakably many worlds are one world, one world enters unspeakably many worlds, unspeakably many worlds enter one world.” (Cleary, 1984, p. 406) This is one instance of similar expressions that repeatedly appear in the sūtra to depict the worldview of Indra’s Net, in which every aspect of existence is interconnected. A jewel at each knot emits its light to all the other jewels and each jewel reflects the lights from all the other jewels. The above phrase can be simply restated as “*One is all. All is one.*” Suddenly, I had an epiphany. I realized that “one is all” means that each existence, or dharma, is interconnected and interacting not only in boundless space but also in time without beginning and ending. An existence is a knot in a net, spun in limitless time and space. I am alive here and now as a knot thanks to connections with innumerable other existences in their knots in the past, and I will continue to receive influences from others while moving to another knot. On the other hand, “all is one” means that I have been influencing others, and I will continue to do so even after my death. I felt as if I was a part of the eternal, harmonious cosmos. At that instant, I thought that I achieved a glimpse of the Buddha’s reality of emptiness. I was embarrassed that tears would not stop flowing from my eyes. This auspicious experience inspired me to seek a second career as a chaplain, which is a lived practice of Buddhist loving-kindness and compassion.

Several months after this experience, I quit my engineering job and came to the U.S. to enroll in the Master of Divinity (MDiv) program at Naropa University in Boulder, CO. In this program I studied the basics of Buddhist teachings and spiritual care based on Buddhist wisdom, loving-kindness, and compassion. After getting an MDiv degree, I started chaplaincy trainings in CPE (Clinical Pastoral Education) programs under certified supervisors in renowned hospitals in the U.S.: Kuawkini Hospital in Honolulu,

HI, The Johns Hopkins Hospital in Baltimore, MD and Hospital of the University of the Pennsylvania (HUP) in Philadelphia, PA. Currently I am a staff chaplain at HUP serving patients, families, and staff at various medical units, including the intensive care units.

During this training, I formally started training for the priesthood in the Tendai Buddhist School under the supervision of the abbot of my home temple in Yokohama, Japan, with additional support from other leading teachers in the tradition, both in Japan and the U.S. In 2014 I had the honor of being ordained as a Tendai priest at the headquarters in Mt. Hiei near Kyoto, Japan.

While serving people's spiritual needs as a chaplain, I continued to reflect on the verse, "*One is all. All is one.*" It has become a *Koan* for me. I have been reflecting on how I can be a Buddhist and a spiritual caregiver at the same time. I have been contemplating how the Buddhist teachings and practice might support me in chaplaincy, and how the practice of chaplaincy might help me deepen my understanding of Buddhist teachings and my faith. Gradually I have come to an understanding that chaplaincy is a bodhisattva path for me. It motivated me to conduct this research to study the relationship between the Buddhist teachings and chaplaincy, and to clarify that spiritual care is an enactment of Buddhist loving-kindness and compassion.

RESEARCH METHODOLOGY

1. Literature review (1)

Books and writings on the thoughts and activities of the leaders of Buddhist chaplaincy in Japan and the U.S. were reviewed, including anthologies of their articles published in Japan (Watts, J. and Tomatsu, Y. ed., 2012) and in the U.S. (Gilles, C.A. and Miller, W.B. ed., 2012) The other publications by these leaders were referenced in this research too.

2. Literature review (2)

Some of the major Mahāyāna Sūtras, and their commentaries by the historical Buddhist teachers and researchers, were reviewed to identify the teachings that guide chaplains to offer spiritual support to people in need. Loving-kindness

and compassion are the key teachings for chaplaincy. I chose a character in a major Mahāyāna Sūtra and two historical Buddhist figures as the role models for the spiritual caregiver. They serve as examples of the pure altruism that is required for chaplains.

3. Interviews

I met some of the leading Buddhist chaplains in Japan and the U.S. and interviewed them about their motivation to become a chaplain, their attitude to meet with the care-receivers, the Buddhist teachings and beliefs that support them, and their strategies for self-care. Each of these people shared that they regard chaplaincy as their Buddhist path.

4. Personal experience and reflection

Buddhism and chaplaincy are not separate for me, but a unified path. By reflecting on the experiences of meeting with suffering people, I have repeatedly come back to the study and contemplation on the teachings of Buddhism and chaplaincy. This has helped me deepen my understanding and faith in the religion and the calling. I was honored to write an article about my experience and reflection on chaplaincy for *The Japanese Journal of Hospice and Palliative Care*. (Komura, 2016). I gave presentations at the seminars organized by The Institute of Engaged Buddhism in Tokyo, and at a conference for The International Association of Buddhist Universities (Komura, 2017) Additionally, I gave poster presentations at the Association of Professional Chaplains annual conferences in the U.S. These were auspicious opportunities that motivated me to continue my current research.

STATUS OF BUDDHIST CHAPLAINCY IN JAPAN AND THE U.S.

Japan (Komura, 2014, pp.15-26)

In Japan there have been only a few chaplains in hospitals associated with Christian churches. About twenty years ago a small number of young Buddhist practitioners took trainings of CPE or its equivalent, and started serving hospitals in several cities in Japan. (Taniyama, 2008) Chaplains were not welcomed by the medical institutions due to the policy of the separation of religion and

government, including hospitals. The general public thought the role of Buddhist priests was to offer funerals and memorial services, not to serve sick people. The situation has drastically changed after The East Japan Earthquake and Tsunami of 2011. Many religious ministers, including Buddhists, rushed to the disaster site to help thousands of afflicted people. They offered various forms of support, including spiritual care. Their activities have been widely reported on TV and in newspapers, signaling a change in the attitude of the Japanese mass media to discuss religion and spirituality openly. Historically, such topics have been taboo.

A college level program was started by Prof. Y. Taniyama and others in response to the growing need for chaplains in Tohoku University in 2012. Hoping to train people from various religions to become interfaith chaplains, this program has attracted many students and has been transferred to other Buddhist universities in Japan. Rev. H. Jin of The Institute of Engaged Buddhism in Tokyo is running a program aimed at training young Buddhists. (The Institute of Engaged Buddhism, 2013) He is also collaborating with Buddhist chaplains in Taiwan. Grief care for the survivors of deceased family members has become an important role for the Buddhist priests. (Takagi, 2012)

The U.S.

The Master of Divinity program at Naropa University is one of the oldest among graduate level Buddhist trainings for chaplains in the U.S. Similar three year education programs based on the Buddhist teachings have spread to other universities in the country, and there are a growing number of certified CPE supervisors who are Buddhist. New York Zen Center for Contemplative Care (Ellison, 2016) and Upaya Zen Center in New Mexico are famous for offering training based on the Dharma and meditation. The core is to develop loving-kindness and compassion to care for oneself and others. This is called contemplative care. These Buddhist education and training programs attract students from both Buddhist and non-Buddhist faith traditions. As Rev. Koshin, supervisor of New York Zen Center, said, “Buddhism is for chaplaincy.” Buddhist chaplains are welcomed as interfaith spiritual caregivers by numerous institutions and by the care-receivers. This is because the U.S. is a

society that generally accepts diverse religions and spirituality.

Spiritual Care and Chaplaincy

Spirituality is a person's relationship with something larger than her/himself that provides meaning in that person's life.

Spiritual care is for a care provider to take in the spirituality of the client, who is in her/his existential crisis, that is expressed in various forms and confirm it. It does not include any advising. Spiritual care is centered at the worldview of the client. The provider works together with the client in her/his searching of realizing her/his deeper identity or something that supports her/him. What is provided is a field/space where the search is performed. It is an atmosphere and a relationship between the giver and the client. Spiritual care does not matter even if the pain is not removed. It is not a central goal. Spiritual care is support for the client to live by confirming the above realization of deeper self. (Taniyama, 2009, p.28)¹

Patients who visit or stay in a medical institution often experience spiritual pain, such as the suffering of losing personal freedom, fear of death, and questions of faith, when facing serious diagnoses. Spiritual care is regarded as an important part of holistic health care alongside physical, social and emotional care. (Roberts, Donovan and Handzo, 2012, p.63) Especially in palliative care for terminal patients, spiritual care is an essential element of a comprehensive approach.

In the U.S. a chaplain who provides spiritual care usually holds a Master of Divinity degree and is endorsed by a religious institution. In contemporary settings, interfaith chaplains serve people regardless of those patients' religious or spiritual beliefs, even supporting those people who are non-spiritual. Families and the medical staff who care for patients often suffer from their own spiritual pains, and chaplains support those people as well. In addition to the medical institutions, chaplains serve people in various organizations, such as the military, universities, corporations, and professional sport teams. Chaplains are dispatched to disaster sites to support afflicted people too. (Marino, 2012, pp.235-236)

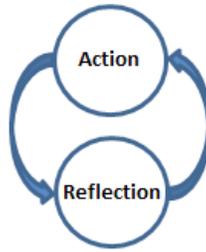
1. English translation by the current author.

A chaplain sits with a person in spiritual and emotional crisis, creates a safe space for her/him to open her/his heart and supports her/him to face and ease their pain. Listening attentively to what patients have to say and acknowledging what they share is the core of this ministry. A chaplain is often called to attend a meeting where the doctor and the family meet to decide on the withdrawal of treatment of a patient. When a patient is dying, a chaplain is called to attend her/him and the family. The chaplain stands by the patient's bed side and offers a compassionate presence for them. When requested, rituals such as prayers appropriate to the patient's faith tradition are also offered. Non-anxious, non-judgmental presence is the key attitude of a chaplain. The chaplain remains in the here and now. There is no agenda and nothing to fix when meeting with a suffering person. A chaplain sees and accepts the situation of the patient, the chaplain's own experience, and the environment as it is, gently embracing all of these elements in her/his heart.

Through the experiences of CPE training and practicing chaplaincy, I have identified the following core values or beliefs to realize the ministry of spiritual care: 1) Non-anxious, non-judgmental presence, 2) Be gentle to yourself, 3) Do not fix it.² Support, rather than solve a problem, 4) Willingness/curiosity to know/learn the unknown, 5) Listen rather than talk.

The core principle of CPE is the Action-Reflection-Action learning model shown below. (Wikipedia, 2019) By reflecting on the experiences of the actual practice of serving people in spiritual or emotional need, a chaplain can learn and grow. It is a process of professional development and improvement, and it supports the spiritual growth of the caregiver as well. "The religious professional must undergo an inner transformation in becoming a chaplain." (Jin and Watts, 2016, p.11) Rev. D. Okochi who is a Jodo Shu priest and one of the leading educators of chaplains in Japan said, "I enter the patient's room to meet with Amitabha Buddha." Being a chaplain is a path of deepening one's own faith.

2. Patsy Barnes, a teacher of ethics in Master of Divinity program at Naropa University repeated this phrase at the beginning of each class as a reminder for a chaplain.



Action-Reflection-Action Learning Model

The Buddhist Teachings of Loving-Kindness/Compassion that Guide Chaplaincy

It is said that the teaching of Buddhism is wisdom (*prajñā*), loving-kindness (*maitrī*), and compassion (*karuṇā*). Wisdom is enlightenment that frees oneself from suffering. Loving-kindness is wishing others be happy, and compassion is wishing them to be free from suffering. For seven weeks after the Buddha achieved his liberation from attachment under the Bodhi Tree, he kept sitting on the spot to think back over his enlightenment. During that period, the deity *Brahmā* came and implored him to teach other people the way to attain enlightenment. The Buddha accepted *Brahmā*'s request, and stood up. It was the beginning of the First Turning of the Dharma Wheel. (Strong, 2001, p.81) He could have kept his wisdom to himself and gone to immediate complete extinction. Instead, he intentionally chose to save ordinary people who are caught in *saṃsāra*, the endless cycle of worldly desires. It can be said that the Buddha's enlightenment included loving-kindness and compassion. The Buddha's wisdom and loving-kindness and compassion are inseparable. Since then, the Buddha taught the *saṅgha* loving-kindness and compassion as a virtue to be practiced. The practice is to renounce ego-clinging, to unite with others, and to benefit them. (Nakamura, 2010, p.100)

In the *Mahāyāna*, the Buddha's essence is his *mahāmaitrī* and *mahākaruṇā*, or absolute loving-kindness and compassion, to care for and save all sentient beings. The ideal *Mahāyāna* practitioner is a *bodhisattva*, or a person who seeks enlightenment. S/he

intentionally stays in saṃsāra rather than entering into nirvāṇa, continuing to serve all sentient beings until they are liberated. (Hirakawa, 2004, p. 330) The root of the Mahāyāna's loving-kindness and compassion is the non-duality of self and other. From the view of emptiness, or śūnyatā, the foundations of self and other are denied. There is no distinction or conflict of self and other. This is demonstrated in the *Avataṃsaka Sūtra*'s statement, "One is all, All is one," as I saw.

The core practice of a bodhisattva is the six pāramitās. Among them, the first virtuous act is dāna, or generosity. This is the primary practice of loving-kindness and compassion. The three dānas are discussed in "大智度論," which is the Chinese translation by Kumārajīva of Nāgārjuna's *Mahāprajñāpāramitāupadeśa*. It is a commentary on "大般若波羅密多經," or the *Mahāprajñāpāramitā Sūtra*.

First is material dāna. Second is dharma dāna. Third is dāna of no fear: All the sentient being are afraid of death. Those who can keep śīla should not have a mind of harming others. Instead, let them free from fear. This is called dāna of no fear. (Komura, 2014, P. 30)

From the viewpoint of emptiness, the threefold emptiness (三輪體空), or the threefold purity (三輪清淨), of the giver, the recipient, and the gift is shown in the *Mahāprajñāpāramitā Sūtra*.

Śaripūtra said, "What is called dāna pāramitā of non-mundane world?" Subhūti replied, "It is just like the three fold purity of the dāna practiced by a bodhisattva mahāsattva. First is non-attachment to oneself as a giver. Second is non-attachment to the other as a recipient. Third is non-attachment to giving and the result of giving. These constitute the threefold purity of dāna practiced by a bodhisattva mahāsattva." (Komura, 2014, p.31)

These ideas of three kinds of dāna and its threefold purity give us a guideline for the Buddhist spiritual care. A chaplain sits with a person who suffers from spiritual or emotional pain and supports her/him to find a way to become free from agony. A chaplain does not give anything other than her/his warm heart and compassionate ears. Neither does s/he preach for the patient. This is an offering of no fear. A chaplain has no attachment to the act of offering or the results of what s/he offers. This is an act of pure generosity and it

actualizes the chaplain's non-judgmental, non-anxious presence.

ROLE MODELS OF CHAPLAINS IN BUDDHIST HISTORY AND LITERATURE (KOMURA, 2014, PP.33-38)

Vimalakīrti Sūtra Chapter 5

The *Vimalakīrti Sūtra* is well known among Mahāyāna Buddhists. Vimalakīrti is a great lay bodhisattva. The senior disciples of the Buddha, who are symbols of the First Turning practitioners, visited Vimalakīrti, but lost their debates with him. In the fifth chapter of the scripture, the Bodhisattva Mahāsattva Mañjuśrī was sent by the Buddha to see Vimalakīrti in his sick bed. Mañjuśrī asked him why he was sick.

Vimalakīrti replied, “Mañjuśrī, my sickness comes from ignorance and the thirst for existence and it will last as long as do the sickness of all living beings. Were all living beings to be free from sickness, I also would not be sick. Why? Mañjuśrī, for the bodhisattva, the world consists only of living beings, and sickness is inherent in living in the world. Were all living beings free of sickness, the bodhisattva also would be free of sickness.” (Thurman, 2003, p.43)

When a bodhisattva sees sentient beings who are confused and suffering, s/he intentionally jumps into the world of saṃsāra. S/he takes others' suffering as her/his own and becomes sick. It is just like parents who suffer when their only child becomes sick. “The sicknesses of the bodhisattvas arise from the great compassion” (Thurman, 2003, p.43) The great compassion, or mahākaruṇā, is supported by wisdom, or emptiness. A bodhisattva throws away her/his own life and body to unite with suffering beings. Bodhisattvas and sentient beings experience their sickness together. This way s/he sees the true nature of their sickness as empty. The cause of the sickness of ordinary beings is attachment to self, and the cause of the sickness of bodhisattvas is the great compassion. For Vimalakīrti, a being who understood this truth was a true bodhisattva. (Kamata, 1990, p.139)

ŚANTIDEVA'S *BODHICARYĀVATĀRA* CHAPTER 8: TAKE THE SUFFERING OF OTHERS AS MY OWN

Śantideva was a great Indian scholar and practitioner of

Madhyamaka in the seventh and eighth centuries. (Hirakawa, 2004, p.204) His masterpiece, the *Bodhicaryāvatāra*, is a well written guidebook for the bodhisattva path, especially for the meditation practice to develop and nurture bodhicitta. In the eighth chapter, the way to relate to others as a caregiver is shown in the fusion of self and other. One shares others' joy and sorrow as one's own because each one of us is interdependent just like parts of a human body. People are obsessed with the beliefs and concepts of the duality of self and other. It is the cause of suffering. (Chödrön, 2005, p.310) Śāntideva emphasizes in the Verse 8.136 that the compassion of the Mahāyāna is altruism, or benefiting others, and at the same time, benefiting self as it liberates self from ego clinging.

To free myself from harm

And others from their sufferings,

Let me give myself away

And cherish others as I love myself.³ (Chödrön, 2005, p.322)

SAICHŌ (767—822 CE)

In the early eighth century, Saichō founded the Japanese Tendai School after studying Tiantai, Esoteric Buddhism, Zen, and the Mahāyāna vināya in China. He intended to form a perfect teaching of Buddhism, inclusively integrating the above four courses. At the core of the teaching was a bodhisattva spirit to save all the sentient beings. At a monastery in Mt. Hiei, he instructed his students in a twelve year program to build spiritual practitioners who could serve to benefit others. Saichō's instruction was to “forget self and benefit others (忘己利他).” Saichō authored a document that defines the rules for his disciples to follow, called *Sange-gakushōshiki* (山家學生式). The preamble states:

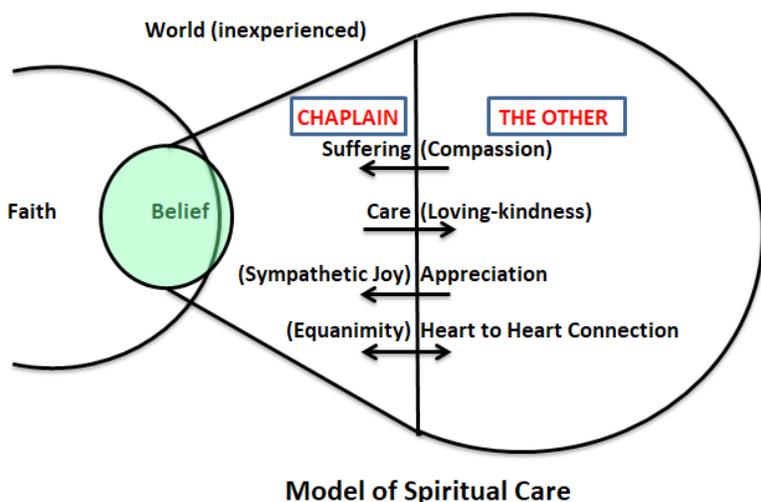
What is a national treasure? The treasure is bodhicitta, or the aspiration for enlightenment. A person with bodhicitta is named a national treasure. Lighting a corner of the world is the national treasure. Forget yourself and benefit others. This is the ultimate loving-kindness and compassion. (Komura, 2014, p.37)

3. This verse reminds me of Saicho's motto of “forget self and benefit others.”

All of Vimalakīrti, Śāntideva and Saichō emphasized non-distinction of self and others. It is another expression of the *Avatamsaka Sūtra*'s teaching, "One is all, All is one." The person who actualizes this idea as pure altruism is the Mahāyānist bodhisattva. These three characters demonstrated it and they serve as role models for chaplains.

CHAPLAINCY AS A BODHISATTVA PATH

For a chaplain, being fully present in a non-anxious and non-judgmental fashion provides a model of being that is free from attachment. When facing a suffering person, a chaplain receives and accepts that person's pain, while also acknowledging the chaplain's own pains. To see things as they are becomes a practice of internal transformation, or of developing *prajñā*, which is inseparable from loving-kindness and compassion. In this way, chaplaincy is a model of the bodhisattva path.



The diagram above is a model of spiritual care based on my experiences. When I sit in front of a person having spiritual or emotional suffering, I sense and receive it, wishing the person to be free from suffering (*karuṇā*). Then I send loving-kindness from my heart back to her/him (*maitrī*). Often, I notice the appreciation of the person in her/his eyes (*sympathetic joy*, or *muditā*). Then

a chaplain's heart is connected with the other person's heart (equanimity, or *upekṣā*). The safe space becomes a sacred space. This is a practice of meditation of The Four Immeasurables, or Brahma Vihāra, (Johnson, 2012, p.310) on the spot. An American Zen master and chaplain educator expressed the ideal attitude of a Buddhist chaplain as "Strong back, soft front." (Halifax, 2008, p.142) I have faith in Buddhism and the core values or beliefs that are held in my backbone, which are not visible to others. I open and show my soft heart of loving-kindness and compassion, supported by that backbone. This creates a safe space for the people I meet, and opens their ailing hearts. I have made this phrase my motto.

In addition to the Four Immeasurables, a meditation practice, such as *tonglen* (Chödrön, 2001) or mindfulness will help prepare a chaplain to be ready to meet, and be fully present with suffering people. Mindfulness is defined as "paying attention in a particular way: on purpose in the present moment, and non-judgmentally." (Kabat-Zinn, 2005, p.4) Paying close attention to 1) State of the mind and body of the other 2) State of the mind and body of oneself and 3) The room atmosphere enables a chaplain to be fully present in front of the person who is in spiritual or emotional crisis. This realizes the non-anxious, non-judgmental presence that is the first of the core values of chaplaincy as shown before. Only with such attention on the part of the chaplain can the other person open her/his heart in peace. (Komura, 2017, p.337) I am glad to hear from a patient or family that they felt peace just by my presence. Mindfulness prepares a ground for me to meet with patients and families as is shown in the following examples of encounters.

Encounter 1

I was visiting a psychiatric patient regularly to listen to her life story. One day I sat in front of her without words for a while. I received her pain into my heart just by silently looking at her eyes. Then, I could sense her appreciation for my care for her feeling in her eyes. I couldn't help but cry when I sensed that my heart and her heart were connected.

Encounter 2

One day I was paged to see a middle-aged female patient with

metastatic cancer. She was alert and asked me, “How can I find a person on Earth who can answer my question of why this happened to me?” My first response was to be shocked by this hard question for which I did not have an answer. I centered my attention to my vulnerability and her painful anxiety in order to make myself fully present. She was concerned about her prognosis, as well as the future of her teenage child. I looked at her eyes and sent my heart to her, wishing her to have an opportunity to encounter the Lord’s mercy and to be embraced with it. I geared up my courage and replied to her, “The person is you.” She looked puzzled and said, “I will think of it.” After excusing myself I could not stop tears falling from my eyes.

When I meet a suffering person as a chaplain, my worries disappear and I feel like my heart is cleansed. I am reflecting on my helplessness and rereading Buddhist teachings in addition to sitting in 止觀 (Shikan, śamatha-vipaśyanā) meditation every day. The traditional Western model of a chaplain’s learning is “Action-Reflection-Action,” as shown before. My learning and practicing both Buddhism and chaplaincy in parallel through this cycle helps prepare me as a chaplain and, at the same time, serving as a chaplain provides me an opportunity to deepen my faith.

Now it has become clearer for me that “*One is all*” means wisdom to save myself from suffering and “*All is one*” means loving-kindness and compassion to save others from their suffering. I feel in my mind and body that these two are connected and inseparable from each other. I am glad that this phrase has become a slogan that guides me in chaplaincy. I am appreciative for an auspicious encounter with this phrase and the calling of chaplaincy. As the supervisor of my first CPE training said to me, “There is neither a novice chaplain, nor a veteran chaplain.” I am determined to walk this bodhisattva path of chaplaincy for the rest of my life.

CONCLUSION

Spiritual care is to offer support to people who suffer from spiritual pains, such as fear of losing personal freedom or family,

fear of death and questions of faith. Chaplains are the professional spiritual caregivers who are priests or ministers from various faith traditions. The number of Buddhist chaplains is gradually growing in Japan, the U.S. and elsewhere.

A chaplain sits with a person in spiritual and emotional crisis and creates a safe space for her/him to open her/his heart. Attentive listening to what the person has to say and acknowledging it is the core of this ministry. Non-anxious, non-judgmental presence is the key attitude of a chaplain. There is no agenda and nothing to fix when meeting with a suffering person. A chaplain sees and accepts the situation of the person, the chaplain's own emotions, and the environment as it is, gently embracing all of these elements in her/his heart.

The Buddhist teachings of *maitrī* (loving-kindness) and *karuṇā* (compassion) support the practice of chaplaincy. It is the act of wishing others to be happy and free from suffering. The ideas of *dāna* of no fear discussed in *Mahāprajñāpāramitāupadeśa* and the threefold purity of the giver, the recipient, and the gift shown in the *Mahāprajñāpāramitā Sūtra* provide a guiding principle for a chaplain to be fully present with no attachment to the results in front of a suffering person. In the *Vimalakīrti Sūtra*, Vimalakīrti experienced suffering because other sentient beings suffered. In the *Bodhicaryāvatāra*, Śāntideva emphasized the non-duality of self and others. Saichō, the founder of the Japanese Tendai School of Buddhism, taught his students, “forget self and benefit others.” These characters who have pure altruistic hearts serve as role models for chaplains.

For a chaplain, when facing a suffering person, being fully present is to receive and accept that person's pain, while acknowledging the chaplain's own pains, without any judgment. Seeing things as they are becomes a practice of internal transformation, or of developing wisdom (*prajñā*), which is inseparable from loving-kindness and compassion. In this way, chaplaincy becomes a *bodhisattva* path. Meditation practice, such as mindfulness, The Four Immeasurables or *tonglen*, can help prepare a chaplain to be ready to meet with suffering people and to deepen her/his own faith. The spiritual care offered by the Buddhist chaplains can be regarded as an embodiment of Buddhist loving-kindness and compassion teachings.

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According to Buddhist traditions, respectfully acknowledging the origins of practices helps to provide confidence and credibility in teaching these practices. Patients need not have heard about Buddhism to benefit from mindfulness. If, however, psychologists wish to teach Buddhist practices it is helpful to have an understanding of Buddhist principles.Â Mindfulness meditation is considered as an insight practice and a way of being. In the Theravada Buddhist traditions, mindfulness meditation is called satipatthana vipassana.