

Buddhism in Addiction Recovery

Subjects: [Religion](#)

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Buddhism was established by Guatama Buddha as a practice to liberate sentient beings from suffering.

Mindfulness-Based interventions (MBIs) are Western psychologists' adaptation of mindfulness/Vipassana to treat mental illnesses. In addition to mindfulness, Buddhist recovery peer-support programs also adopt the Four Noble Truths, the Noble Eightfold Path, and the Five Precepts, which are the Buddha's prescription to cease suffering and to discipline one's ethical conduct.

Buddhism

mindfulness-based interventions

addiction

addiction recovery

Buddhism has its roots in addressing suffering and cravings ^[1]. Individuals have also found documentation of the Buddha explaining the dangers of cravings and how cravings contribute to one's cyclical suffering ^{[1][2]}. Moreover, one of the earliest teachings taught by the Buddha, the *Dhammacakkappavattana Sutta*, addressed the human tendency of addiction to sense-pleasures or self-mortification ^[3]. The Buddha then instructed ways to alleviate suffering and the practices to which one should adhere. These teachings are the Four Noble Truths (Skt. *catvāri āryasatyāni*), the Noble Eightfold Path (Skt. *āryāṣṭāṅgamārga*), and the Five Precepts (Skt. *pañcaśīla*) ^{[3][4]}.

In recent decades, mindfulness has garnered increasing interest in health care ^[5] and significant attention in relation to mental health ^[6]. Additionally, Jon Kabat-Zinn's Mindfulness-Based Stress Reduction (MBSR) built the foundation for Mindfulness-Based Interventions (MBIs) ^[6]. Furthermore, the model of MBIs has influenced the treatment of addiction and substance use disorders, including the establishment of Mindfulness-Based Relapse Prevention (MBRP) ^[7], Mindfulness-Oriented Recovery Enhancement (MORE) ^[8], and other MBIs ^[9]. In addition to Mindfulness-Based Interventions, researchers also conducted studies to examine Acceptance and Commitment Therapy (ACT) and its efficacy for addiction treatment ^{[10][11][12][13][14]}. However, critics of MBIs posited that Western psychology's adaptation of mindfulness is inadequate, as it neglects necessary teachings of morality, the broader philosophical context of Buddhism, and the original significance of mindfulness in Buddhism ^{[4][6][15][16]}. Therefore, future research needs to integrate essential Buddhist teachings, besides mindfulness techniques, into clinical application ^{[16][17][18]}. In contrast to clinical research in Western psychology, Buddhist recovery peer-support programs incorporated the essential teachings of the Four Noble Truths, the Noble Eightfold Path, and the Five Precepts ^{[19][20][21]}. However, despite the growing population in Buddhist recovery ^[22], clinical research has largely overlooked Buddhist recovery peer-support groups.

This paper conceptualized Buddhism in addiction recovery as three major categories: traditional Buddhist teachings, mindfulness in Western psychology, and Buddhist recovery peer-support programs. Specifically, Buddhist theories are examined and compared in the discussion of Western psychology and Buddhist recovery

peer support groups. Finally, we drew comparisons between Western interventions and Buddhist recovery peer-support programs, highlighting the implication and current limitation of both approaches.

References

1. Chah, A. *Food for the Heart: The Collected Teachings of Ajahn Chah*; Wisdom Publications: Boston, MA, USA, 2002.
2. Walshe, M. *The Long Discourses of the Buddha: A Translation of the Digha Nikaya*, 2nd ed.; Wisdom Publications: Boston, MA, USA, 1995.
3. Anālayo, B. *Dhammacakkappavattana-sutta*. In *Buddhism and Jainism*; Sarao, K.T.S., Long, J.D., Eds.; Springer: Dordrecht, The Netherlands, 2017; pp. 372–374.
4. Anālayo, B. *Superiority Conceit in Buddhist Traditions*; Wisdom Publications: Boston, MA, USA, 2021.
5. Amaro, A. A Holistic Mindfulness. *Mindfulness* 2015, 6, 63–73.
6. Giraldi, T. *Psychotherapy, Mindfulness and Buddhist Meditation*; Springer International Publishing: Cham, Switzerland, 2019.
7. Bowen, S.; Chawla, N.; Witkiewitz, K. Mindfulness-Based Relapse Prevention for Addictive Behaviors. In *Mindfulness-Based Treatment Approaches*, 2nd ed.; Elsevier Inc.: Oxford, UK, 2014; pp. 141–157.
8. Garland, E.L. Restructuring reward processing with Mindfulness-Oriented Recovery Enhancement: Novel therapeutic mechanisms to remediate hedonic dysregulation in addiction, stress, and pain: Mindfulness and hedonic regulation. *Ann. N. Y. Acad. Sci.* 2016, 1373, 25–37.
9. Korecki, J.R.; Schwebel, F.J.; Votaw, V.R.; Witkiewitz, K. Mindfulness-based programs for substance use disorders: A systematic review of manualized treatments. *Subst. Abuse Treat. Prev. Policy* 2020, 15, 51.
10. Azkhosh, M.; Farhoudian, A.; Saadati, H.; Shoaee, F.; Lashani, L. Comparing Acceptance and Commitment Group Therapy and 12-Steps Narcotics Anonymous in Addict's Rehabilitation Process: A Randomized Controlled Trial. *Iran. J. Psychiatry* 2016, 11, 244–249.
11. Batten, S.V.; Hayes, S.C. Acceptance and Commitment Therapy in the Treatment of Comorbid Substance Abuse and Post-Traumatic Stress Disorder: A Case Study. *Clin. Case Stud.* 2005, 4, 246–262.
12. Byrne, S.P.; Haber, P.; Baillie, A.; Costa, D.S.J.; Fogliati, V.; Morley, K. Systematic Reviews of Mindfulness and Acceptance and Commitment Therapy for Alcohol Use Disorder: Should we be using Third Wave Therapies? *Alcohol Alcohol.* 2019, 54, 159–166.

13. Ii, T.; Sato, H.; Watanabe, N.; Kondo, M.; Masuda, A.; Hayes, S.C.; Akechi, T. Psychological flexibility-based interventions versus first-line psychosocial interventions for substance use disorders: Systematic review and meta-analyses of randomized controlled trials. *J. Context. Behav. Sci.* 2019, 13, 109–120.
14. Luoma, J.; Drake, C.E.; Kohlenberg, B.S.; Hayes, S.C. Substance abuse and psychological flexibility: The development of a new measure. *Addict. Res. Theory* 2011, 19, 3–13.
15. Lee, K.C.G. Demystifying Buddhist mindfulness: Foundational Buddhist knowledge for mindfulness-based interventions. *Spiritual. Clin. Pract.* 2018, 5, 218–224.
16. Shonin, E.; van Gordon, W.; Griffiths, M.D. The emerging role of Buddhism in clinical psychology: Toward effective integration. *Psychol. Relig. Spiritual.* 2014, 6, 123–137.
17. Sacamano, J.; Altman, J.K. Beyond Mindfulness: Buddha Nature and the Four Postures in Psychotherapy. *J. Relig. Health* 2016, 55, 1585–1595.
18. Szczygiel, P. Maneuvering Difficult Emotional Terrain in Psychotherapy: A Buddhist-Informed Conceptual Framework. *Clin. Soc. Work J.* 2016, 44, 241–251.
19. Recovery Dharma: How to Use Buddhist Practices and Principles to Heal the Suffering of Addiction. Independently Published. 2019. Available online: <https://recoverydharma.org/book> (accessed on 26 December 2021).
20. Levine, N. *Refuge Recovery: A Buddhist Path to Recovering from Addiction*; Harper Collins: New York, NY, USA, 2014.
21. Mason-John, V.; Groves, P. *Eight Step Recovery: Using the Buddha's Teachings to Overcome Addiction*; Windhorse Publ.: Birmingham, UK, 2013.
22. LaBelle, O.; Meeks, M.; Vest, N.; Hastings, M.; Harding, T. Recovery Dharma: Exploration of a Buddhist-based mutual help organization for the treatment of addiction. *J. Soc. Work Pract. Addict.* 2021, 1–13.

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