



The World Community for Christian Meditation

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What's the price of a smile? This question was suggested by a speaker at the seminar who flashed a particularly attractive and disarming one. Smiles transmit so much just by stretching a few facial muscles and turning on a light in the eyes. They work over large distances, even to the back of the hall. Try to fake a smile but you won't convince others it's for real when it isn't.

But a stressed mental health worker tied to a busy schedule and measured outcomes be expected to smile as well? Definitely. We know that although we smile when we feel happy, smiling also makes us feel happy. So, smiles are to be encouraged. Chemical things inside you get activated by a smile; and if they make us feel better we will be more cost effective and complain less.

This inhumane and slightly insane logic is not so foreign as you might think to the way some areas of mental health services deal with the spiritual question. Last week, at the Meditatio Seminar on Meditation and Mental Health psychiatrists, social workers, mental health managers and service users came together from eight countries with Christian, Buddhist, and Muslim spiritual leaders. Is there a spiritual dimension to mental health and if so how can it be promoted in this caring profession?

One speaker told of a therapist who asked his patient where he found help and support in a life blighted by the disease of depression. 'In my church mostly, in the worship and friendship of the community?', he was told. 'Yes?', the therapist replied, looking for a more acceptable answer 'but apart from that.. where do you get your support??' It is not only in the medical profession that the spiritual dimension is suspect. A fear of anything so close to religion, and certainly (most un-PC of all) of naming a *particular* form of religion, characterises most institutions in secular societies.

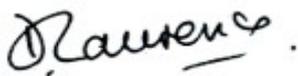
Part of the blame for this must be borne by religion itself. Religious leaders easily assume that secularism means a rejection of religion. In fact, it is merely a resituating of religion in a free society. The secular mind makes space for religious belief and spiritual practice but challenges the assumptions of privilege that religious people often drag along from an earlier age. Arrogance in religion may look cute but it also leads to rejecting religion within secular institutions. A different kind of religious attitude would have a different effect - especially if it could understand the spiritual hunger in modern life. Many professionals with faith might then fear less the contempt of their peers when they promoted the spiritual dimension in their field

of expertise.

Our speakers at the Meditatio Seminar were of a braver cut. It is not easy, though, to find a common language between psychiatrists, health workers, 12 -steppers, managers and monks. We found it, however, in the common ground of meditation - present in all religions and rising from the roots rather than trickling down from the upper echelons. The best religious leaders understand that the grass roots are where the Spirit mainly operates. Contemplation belongs there because it satisfies the universal thirst for wholeness and the search for healing what blocks that thirst from being satisfied. Take the classroom and preventive intervention in the classroom, for example. Most mental illness in adults first manifests before the age of fourteen. Meditation is known to promote mental health - and the spiritual dimension enhances wholeness. Teach meditation for psychological and spiritual reasons, therefore, and count the savings.

Meditation not only gave the spiritual leaders at the Seminar their sense of commonality. Psychiatrists and therapists could also relate to meditation in their own ways. One spoke of research on the effect of meditation on the amygdala - that part of the brain that helps process anger, pleasure and fear, decides what memories to store and so determines the degree of emotional response any event invokes. Even meditators who see meditation primarily as the prayer of the heart were stimulated by these kinds of findings because it shows how grace builds on nature. A psychiatrist or mental health worker, in turn, can be motivated by the spiritual dimension of meditation.

The early desert Christian monks, for whom prayer essentially meant contemplation, were also psychologists. They saw that in prayer the mind ?became its own physician? ? something that caught the psychiatrists? attention. In the follow-up to the Seminar we will see how these insights might improve the way mental suffering can be relieved through meditation, as a spiritual as well as technical practice and how mental health can be promoted as wholeness. Then a smile might be understood better just as the sunshine of the spirit it is.



Laurence Freeman OSB

The World Community for Christian Meditation, of which Laurence Freeman OSB is director, has recently opened a new outreach program ? ?Meditatio? (www.wccmmeditatio.org)

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