View metadata, citation and similar papers at core.ac.uk

brought to you by CORE

provided by UEL Research Repository at University of East London

A religion of wellbeing?: The appeal of Buddhism to men in London, UK.

Psychology of Religion and Spirituality

doi: 10.1037/a0036420

http://psycnet.apa.org/psycinfo/2014-14116-001/

Tim Lomas[1,2*†], Tina Cartwright[3], Trudi Edginton[3], and Damien Ridge[1].

[1] *School of Life Sciences, 115 New Cavendish St., University of Westminster, London, W1W, 6UW.*

[2] *Department of Psychology, Stratford campus, University of East London, E15 4LZ.*

[3] *Department of Psychology, 309 Regent St. University of Westminster, London, W1B 2UW.*

* Research was undertaken at the University of Westminster.

† Author responsible for correspondence:

Email: T.Lomas@uel.ac.uk

This article may not exactly replicate the final version published in the APA journal. It is not the copy of record.

Abstract

Against a backdrop of increasing secularization, the number of Buddhists in Britain continues to rise (Office for National Statistics, 2012). However, few studies have explored the reasons people are drawn towards Buddhism, with none focusing on men specifically. Uniquely, we conducted in-depth narrative interviews with 30 male meditators in London, UK, to explore the appeal Buddhism held for them. Buddhism was portrayed as a nexus of ideas and practices which improved men's lives. Analyzed through the prism of a multidimensional biopsychosocial model of wellbeing, Buddhism appeared to have the potential to promote wellbeing in biological terms (e.g., health behaviors), psychological terms (e.g., generating subjective wellbeing), and social terms (e.g., offering a supportive social network). From a gendered perspective, Buddhism offered men the opportunity to rework their masculine identity in ways that enhanced their wellbeing. This was a complex development, in which traditional masculine norms were upheld (e.g., Buddhism was constructed as a 'rational' framework of ideas/practices), yet also challenged (e.g., norms around alcohol abstinence). Our study offers new insights into the hazards and the attractions – particularly for men – of engaging with Buddhism.

Key words: meditation; Buddhism; men; masculinity; wellbeing

Buddhism in the West

Buddhism has been known to the 'West' as early as the 13th century through the accounts of Marco Polo (Abeydeera, 1990). However, it was not until the late 19th century that it attained any degree of recognition as translations of scriptures became more widely available and religious figures from Asia began to travel abroad, before reaching wider audiences in the mid-20th century through phenomena like the 'Beat' movement (Baumann & Prebish, 2002). As Buddhism has migrated 'Westward,' the various forms it has taken have been characterized under the rubric of 'New Religious Movements' (NRMs; Dawson, 1998). There are three main perspectives on these forms of religion: Westerners becoming 'Easternized,' Eastern practices being 'Westernized,' and the 'inter-mingling' of East and West. The first perspective is influenced by Said's (1995) idea of Orientalism, and the construct of the otherworldly 'mystic East.' From this perspective, Buddhism in the West is seen as retaining its original 'Eastern' form, and moreover is valued just for that reason. For example, Phillips and Aarons (2005) found members of an Australian Buddhist center had experienced a 'painfully-felt' disenchantment with Western society, from which engagement with Buddhism offered an 'escape.'

Conversely, a second perspective focuses on Buddhism becoming 'Westernized,' diverging from traditional forms, and reconstructed to suit secular "Western sensibilities" by eschewing "ritualized forms and traditional religious affiliations" (King, 1999, p.156). For example Obadia's (2008) study of a French Buddhist group revealed a form of 'Therapized Buddhism,' involving a pre-occupation with health: leaders used discourses constructing the practitioners as 'sick,' unhealthy activities as 'impure,' and Buddhism as the 'remedy.' From this stance, even people who meditate in a secular way without reference to Buddhism – as most do (Shapiro, 1994) – are 'engaged' with Buddhism, albeit in a form which disidentifies with its antecedent roots. However, it is argued that constructions of 'East' and 'West' risk

treating cultures as “organically binding and sharply bounded” in a way at odds with features of globalization (Robertson, 1995, p.39). Thus, a third perspective views Buddhist NRMs as “intermingling” discourses from various spiritual/therapeutic sources, promoting a “flexible and diffuse version of spiritual identity” (Phillips & Aarons, 2005, p.217). The practitioner is a ‘consumer’ in a ‘spiritual marketplace,’ choosing from interchangeable beliefs and practices – of which Eastern spiritualties are just some of many – to suit individual needs (Roof, 2001).

Across the diverse forms Buddhism has taken in Britain, the numbers of groups has grown (from 22 in 1966, to over 1000 by 2001; Bluck, 2006), as has the number of Buddhists (from 0.3% of the population of England and Wales in 2005, to 0.4% in 2011; Office for National Statistics [ONS], 2012). It is estimated that approximately 40% of British Buddhists are ‘converts’ to Buddhism (Bluck, 2006). This trend is notable against the idea of Britain generally becoming increasingly secularized (Bauman, 2001). The same ONS data suggest that the percentage of people without a religion rose from 15.7 to 25.1% over the same six year period. Moreover, although 59.3% of Britons identify as Christian (reduced from 77.6% in 2005), Collins-Mayo, Mayo, and Nash (2010) view this identification more as a “faded inherited cultural memory” than an “active faith.” A stark illustration of this counter-trend in interest in Buddhism is that it is the fastest growing religion among prisoners in English jails, rising sixfold in the ten years to 2009, with the vast majority of these adherents being males who ‘converted’ after their incarceration (Ministry of Justice, 2010). In contrast, the number of Christians rose just 3%, and the Muslim population only slightly more than doubled. However, although there has been much interest in Western converts to Islam, especially in terms of radicalization (Karagiannis, 2012), few studies have explored why Buddhism appears to hold an enduring appeal to many contemporary Britons. A clue to its appeal may lie in a separate body of literature linking religious engagement – not specifically Buddhism – to health and wellbeing.

Religion and Wellbeing

Although health and wellbeing are contested terms, used in diverse ways according to theoretical frameworks, there is a trend for using wellbeing as the more inclusive term, encompassing health within it as part of a multidimensional biopsychosocial construct incorporating physical (health), psychological, and social dimensions (De Chavez, Backett-Milburn, Parry, & Platt, 2005). For example, Pollard and Davidson (2001, p.10) define wellbeing as “a state of successful performance across the life course integrating physical, cognitive and social-emotional function.” Moreover, each of these dimensions are themselves multidimensional, comprising diverse concepts. For example, with physical health, Larson (1999) outlines various models, including the medical model, which focuses on (freedom from) disease, and the environmental model, emphasizing adaptation to one’s milieu. In psychological terms, Hatch, Harvey, and Maughan (2010) contend that wellbeing is conceptualized either negatively as the absence of mental illness or distress, or positively as the presence of desiderata, including Subjective Wellbeing (SWB; affective experiences of pleasure, and cognitive judgments of life satisfaction), and Psychological Wellbeing (PWB; e.g., finding meaning, and autonomy in life). Finally, social factors impinging upon wellbeing have been explored, such as access to support networks (Bradshaw & Ellison, 2010).

A growing body of work suggests that engagement with religion and/or spirituality[1] is associated with wellbeing – the so-called ‘religion-health connection’ (Ellison & Levin, 1998) – impacting positively on its various dimensions. For example, in social terms, religion is particularly effective at providing structural support for the cultivation of social networks; such networks can have a ‘buffering’ effect on stress and distress (Bradshaw & Ellison, 2010), and predict better mental health outcomes, for example facilitating faster recovery from depression (Koenig, 2009). Only a handful of studies have explored social capital in relation to Buddhism. An American survey suggested Buddhists tended to have higher levels

of social capital compared to other religions, and were well integrated into society (Wuthnow & Hackett, 2003). Such societal integration is perhaps encouraged by the way some Buddhist movements seek to be 'socially-engaged.' A study in Australia noted the engagement of Buddhists in 'outreach programs,' e.g., rehabilitation of prisoners, and palliative care (Barker, 2007). However, engagement levels may vary: in a survey of UK Buddhists, 24% did not regard themselves as socially engaged, and 56% felt that Buddhism did not have be 'engaged' as such (Henry, 2006). This last point suggests that forms of religious involvement vary, with not all forms necessarily leading to particular dimensions of positive wellbeing.

A second aspect of the religion-health connection concerns religion as a source of meaning. Theorists suggest there are two key meaning 'needs': for comprehensibility (understanding existence), and significance (endowing life with purpose) (Janoff-Bulman & Yopyk, 2004). Meaning is connected to wellbeing in various ways. From the perspective of the positive psychology paradigm, finding meaning is a crucial component of PWB (Seligman, Rashid, & Parks 2006). Furthermore, qualities encouraged by religious frameworks of meaning may also facilitate SWB, like compassion (Lyubomirsky, Sheldon, & Schkade, 2005). Moreover, religious meaning (e.g., belief in an afterlife) may also be helpful in dealing with events that cannot be repaired, like bereavement or death, a phenomenon known as 'religious coping' (Koenig, 2009). Only a few studies have explored meaning in relation to Buddhism, mostly focusing on people influenced by Buddhist ideas, rather than specifically identifying as Buddhist. For example, Ridge, Williams, Anderson, and Elford (2008) analyzed the 'meaning making narratives' of patients with HIV, who drew upon ideas of 'mindfulness' – a Buddhist concept around engaging with present-moment experience in a non-judgmental way – to find ways of living that were conducive to wellbeing.

Masculinity and Wellbeing

Few studies have examined the appeal of Buddhism through the prism of the religion-health connection, as our study seeks to. Moreover, a unique angle to take here, particularly given the statistics above about male prison converts, is to explore the appeal of Buddhism in relation to gender. Contemporary gender theorists suggest men are influenced by dominant cultural norms which can be problematic in terms of health, to the extent that that masculinity is frequently viewed in the literature, and society generally, as a 'risk factor' (Gough, 2006). For example, men are seen as less willing to seek help for physical and emotional problems, and tend to have smaller support networks, relative to women, which linked to masculine norms encouraging independence and stoicism (Courtenay, 2000). Similarly, higher levels of alcohol abuse in men relative to women have been partly attributed to the idea that alcohol use is a common resource in the construction of masculinity (de Visser & Smith, 2007).

However, recent work has challenged the notion that men are poor at engaging with wellbeing, suggesting men are able to resist or redefine masculinity in adaptive ways. For example, O'Brien, Hunt, and Hart (2005) found that some men were willing to seek help *if* it helped to support other valued aspects of masculinity, e.g., maintaining fitness for demanding occupations. This study shows the complexities of the intersection between health behaviors and masculinity: these men did not resist traditional norms, but with interpretative flexibility incorporated help-seeking within conventional masculine constructions (e.g., stressing the importance of control). In this context, it is interesting to explore how Buddhism intersects with masculinity in the context of men's wellbeing. A few studies have connected Buddhism and masculinity tangentially. For example, Barker (2008) found that some Western men were drawn to Buddhism through disenchantment with modernity. However, no study has explicitly explored the intersection between Buddhism, masculinity, and wellbeing, as the present study seeks to.

Methods

Thirty male meditators were recruited in London, using principles of maximum variation sampling (Marshall, 1996). Narratives around engagement with Buddhism were elicited via two semi-structured interviews (separated by at least a year, in 2009 and 2010), and analyzed using a modified constant comparison approach (Strauss & Corbin, 1990). The research question was: What is the appeal of Buddhism for men in Britain? The aim was to explore how engagement with Buddhism intersected with masculinity to impact upon men's wellbeing.

Sample Characteristics and Recruitment

Inclusion criteria were that participants be over 18 and currently practice meditation, though not as part of a clinical intervention. Recruitment was mainly through one Buddhist center, plus other events attended by meditators in London. The particular center will remain unnamed to preserve participants' anonymity. However, it can be noted that it is affiliated to the Friends of the Western Buddhist Order (FWBO; recently renamed as the Triratna Buddhist Order/Community). While the FWBO is one of the most popular Buddhist movements in the UK (Bluck, 1996), it is viewed as somewhat unorthodox, since it does not explicitly identify with a particular antecedent Asian tradition (Vishvapani, 2001). Rather, the founder is described as selecting practical and doctrinal elements from various traditions – including Therevadan meditation practices, Mahayanan rituals and Tibetan mantras – to present a "core of common material" constituting the "essence" of Buddhism which is "relevant" to the West (Subhuti, 1994). The FWBO is further unusual in its commitment to gender parity, with men and women practicing and becoming ordained on an equal basis. Despite focusing on one center, a purposive maximum variation sampling strategy was used (Marshall, 1996), which aimed to include a wide range of socio-demographic backgrounds and life experience. Sampling occurred concurrently with, and was influenced by, the emerging data analysis, which suggested the inclusion of certain men to clarify the emerging

analysis, increasing its robustness and credibility (Cutcliffe, 2005). For example, men were sought who had become disillusioned with Buddhism. Twenty-two men were recruited from one center; four men were attached to other centers; and four men were unattached to any center.

Data Collection and Analysis

Interviews were semi-structured, undertaken by the first author at a location selected by the participants (their homes or places of work, the meditation center or the university). On average, the first interview (T1) lasted around two hours, and the follow-up interview (T2) around an hour. Before the T1 interview, participants signed an informed consent form and completed a demographic survey. The project was approved by the University Research Ethics Committee and an ethics protocol was in place to ensure participants' wellbeing.

Interviews aimed to elicit narratives concerning men's engagement with Buddhism and/or meditation. Narratives order events in time, and reflect how people construct and represent meanings about their lives (White, 1987). The interview approach was designed to be sensitive to men, providing a safe space for them to tell their own story in their own words (Minichiello, Aroni, Timewell, & Alexander, 1995). Separate interview guides for T1 and T2 were devised. T1 interviews were in two parts. The first part elicited life narratives leading up to engagement with meditation and/or Buddhism, following up to the present and ahead to the future. The second part focused on topics relevant to the research (if not already discussed), including Buddhism and religion, health and wellbeing, stress and coping, and masculinity and identity. At T2, the first part concerned narratives of the intervening year; the second part focused on the same topics of interest as T1, with particular interest on whether men's perspectives on these topics had changed.

Interviews were professionally transcribed. To ensure anonymity, details likely to lead to identification were removed. Transcripts were sent electronically to participants for

approval, which all granted. The NVivo software package was used to help organize and analyze the data. The data was explored using a ‘modified’ constant comparison approach, focusing mainly on open and axial coding (Strauss & Corbin, 1990). Modified constant comparison follows the steps of modified grounded theory, including linking back to existing literature to clarify the emerging analysis (Cutcliffe, 2005). However, constant comparison falls short of developing a theoretical framework, rather aiming to identify and articulate inter-relations between key themes.

In an initial coding phase, the first six T1 transcripts were examined line by line to identify emergent themes. Around 80 prominent codes were identified. Subsequent transcripts (from both T1 and T2) were searched paragraph by paragraph for additional codes, with a final figure of 105. This paper concentrates on data pertaining to broad engagement with Buddhism (two previous papers focused more exclusively on meditation, one examining the reasons men took up meditation initially (Lomas, Cartwright, Edginton, & Ridge, 2013a), and one detailing the development of emotional intelligence through meditation (Lomas, Edginton, Cartwright, & Ridge, 2013b). Around 35 relevant codes were identified, including ‘Spiritual friendships’ and ‘The *sangha*.’ The next stage involved the generation of a tentative conceptual framework: codes were compared with each other, and grouped into overarching categories according to conceptual similarity. For example, the two codes above produced a category of ‘The community.’ In all, six categories were identified, which constitute the six sections below. The final stage involved fleshing out the properties, dimensions, and interrelations between the codes and categories.

Results

Although there was considerable variation in men’s narratives, in this paper we focus on common themes to explore factors contributing to the appeal of Buddhism to men. One overarching theme emerged: Buddhism offered men an attractive ‘package’ of ideas and

practices which generally changed their lives for the better (but which could sometimes be challenging to take on). As Peter (all names are pseudonyms) said: *"Practicing the Dharma is a much broader thing than merely practicing meditation. . . . It includes ethical behavior, developing friendship, study, ritual, reflection."* Under this broad theme, there were six interlinked themes, discussed in turn below, illustrated with interview excerpts in italics.

- Meditation: A 'gateway' to Buddhism.
- Religiosity: A sense of spirituality which did not conflict with a valued rationality.
- Ethics: A credible system of 'guidelines' to help men live well.
- Community: The opportunity to cultivate deeper friendships.
- New gender models: Integrating 'feminine' and 'masculine' qualities.
- Meaning: Finding a sense of purpose in life.

Meditation

Participants were recruited on the basis of practicing meditation, not engagement with Buddhism per se. However, for many, meditation and Buddhism had become inextricably linked. This was not true of all men: a couple of participants meditated without any reference to Buddhism, practicing in other contexts (e.g., Bill used a *"Hindu system"* in his psychic work as a *"medium."*). Moreover, for most men, meditation and Buddhism were not *initially* linked. The majority first tried meditation – as an activity not necessarily connected to Buddhism – before subsequently engaging with Buddhism. For example, some men began meditating in the hope of being able to better manage stress (Lomas et al., 2013a). However, for many, meditation became their gateway to subsequent interest in Buddhism. (For a few men, this connection was reversed: Henry was *"astounded"* aged 14 by a documentary on Buddhism, and tried meditation as an archetypal Buddhist activity.) Moreover, meditation remained central to Buddhism's appeal, the cornerstone upon which men's on-going interest in it was founded. For example, Adam suffered when his back prevented him meditating.

[At] times I couldn't really formally meditate, and this was quite dispiriting, because it was where I went when my faith needed topping up, [since] I could see [Buddhist] principles working in my own experience as I was meditating.

Thus, engagement with Buddhism – as a nexus of ideas and practices – was anchored in men finding meditation rewarding, albeit challenging (Lomas et al., 2013b). For example, although participants encountered difficult thoughts/feelings in meditation, they also developed coping skills through their practice to help manage these, like 'decentering' (appraising negative content more dispassionately). However, many men came to the view that meditation *alone* was insufficient for wellbeing. For example, Dalton castigated *"Western consumerism"* for encouraging the popular belief that meditation was *"a pill"* to be *"picked off the shelf to make us feel better."* Participants argued that meditation needed to be augmented by engagement with wellbeing in other areas of life, such as finding a sense of meaning, which many men subsequently achieved through Buddhism.

You can meditate until the cows come home, you're still not going to be fully happy. You can't meditate problems away. You still have stuff in your life that needs to be addressed. (Ross)

Religiosity and Rationality

Given the role of meditation as a 'gateway,' men's first impressions of Buddhism were often through attending a meditation class, in which teachers sometimes introduced Buddhist ideas. Interestingly, men were often appreciative of how Buddhism did not seem religious (in the way men had come to understand this term). Many men had been brought up in religious families (mostly Christianity), and had rejected it, mostly in adolescence. Despite appreciating aspects of Christianity, like its social dimensions (Colin: *"Like a family*, *a sense of not being isolated."*), participants suggested they had ceased to find its theology credible (William: *"I had a go, but by 14 I was going through the motions."*). Some also disliked the

way religion could be judgmental (Colin: *"It just left me feeling guilty."*), a particular issue for homosexual participants (Harry: *"They didn't want the queer mafia in their church."*). Some participants had remained open to spirituality, seeing this as different to religion (Michael enjoyed being contemplative in churches – *"even though I didn't believe in God."*). However, others had conflated religion with spirituality, and were wary of both, regarding these as too 'flaky' for the rational man they saw themselves as, emphasizing the influence of moving in well-educated secular social circles in London. There was also a gendered element to this skepticism: participants suggested that 'as men' they were encouraged and expected to be rational (indeed, rationality is often perceived as a 'masculine' mode of cognition; Ross-Smith & Kornberger, 2004). Terry recalled thinking of religion:

> *'It's all a load of rubbish, wishy-washy, hocus-pocus, airy-fairy.'. . . I didn't talk about religion, or God or the meaning of life. . . . They just weren't the kinds of conversations that were had with my circle of friends.*

Encountering Buddhism (e.g., at meditation centers), participants were perplexed by religious-seeming aspects, like statues of the Buddha, and were unclear whether it *was* a religion (a question many remained unsure of). However, teachers had tended to discuss Buddhism using psychological theories of wellbeing, rather than the kind of discourses men had come to associate with religion (e.g., faith in God). Compared to previous experiences of religion, Buddhism seemed *"pragmatic"* (Michael) and *"rational"* (Peter), which from a gendered perspective made it easier for participants to take on. Rather than being asked to uncritically adopt beliefs, men felt they were encouraged to test ideas for themselves. After Christianity, Peter called this *"a breath of fresh air."* Thus, for many men, opening up to a sense of spirituality seemed to have been eased by the way this continued to be presented in ways that eschewed 'traditional' religious notions. Men tended to downplay conventional Buddhist ideas like 'enlightenment' (Vincent: *"I'm not sure I believe in the afterlife angle.*

It's mysticism."); even the few who endorsed it seemed skeptical (Harry: *"I suppose as a Buddhist one has to believe in enlightenment."*). Rather, men tended to construct spirituality using three main discourses of psychological development:

- Integration: *"To grow spiritually is to integrate the bits of me that have been split off."* (Jack)
- Authenticity: *"We wear masks and don't let our authentic self come through. [Now] I trust my inner voice."* (Ali)
- Overcoming the 'ego': *"[There cannot] be any real spiritual progress unless one can give up one's egoistic will."* (Jack)

However, men suggested that although Buddhism appeared to disavow conventional aspects of religion, like theism (Grant: *"There's no real God involved, which makes things easier."*), it took on religious dimensions for them. Some more experienced men, who were ordained within the context of the FWBO and had studied Buddhism in depth, said it trod a *"middle way"* between theism (*"eternalism"*) and atheism (*"nihilism"*). Although rejecting traditional notions of God, they believed in a 'force' greater than themselves – concerning the evolution of consciousness in the universe – that could be venerated. Buddhist figures and archetypes (e.g., the Buddha), the focus of contemplation in advanced meditation practices, were also sometimes constructed as existing 'externally.' Jack used religious language to discuss the importance of *"reverence"* towards these. This 'reverence' was also manifested in religious practices, such as rituals, involving chanting from scripture, and bowing to a shrine. Although some men were perturbed to encounter such overtly-religious practices (Earnest: *"I'm not comfortable worshipping something."*), many men came to value rituals.

> *What I'm bowing to is . . . a symbol that has lots of associations. It's values, it's a vision, it's a tradition that I'm part of, it's the spirit of the Buddha from two and a*

> *half thousand years ago, it's beauty, it's truth, it's the spirit of compassion in the world. It's all of these things.* (Adam)

Ethics

As men began to engage with Buddhism, many valued the way it offered an ethical framework of 'precepts[2].' There was variation here: committed Buddhists had taken vows of adherence; others saw them as ideals to be selectively followed; some men did not mention them. However seriously men took the precepts though, they appreciated having a credible moral code which they had the option to follow. Participants contrasted these favorably with previous experiences of religious proscriptions. For example, in contrast to Christian discourses around sin he'd been brought up with (*"You feel utterly horrible."*), William found the precepts *"a more subtle, sophisticated way of thinking."* Michael felt that with traditional religious frameworks losing relevance – for him personally, and for society generally – people were losing a foundation to guide their actions (*"We've got this whole burnt-out moral system that nobody believes in."*). However, he felt that Buddhism offered a credible alternative (*"It gave me a [moral] basis, without the madness of belief. . . . It's seriously pragmatic."*). As such, some men suggested they while had felt somewhat 'lost' in life before finding Buddhism, they now had more of a sense of direction.

> *[Previously] I had no principles to guide me. Now I have. . . . There's nothing that's ever jarred, [thinking], 'Oh I don't like that rule.' It's all about non-violence and generosity really, and that seems a pretty good way to live.* (Steven)

Moreover, some men made a direct link between behaving ethically and wellbeing (Michael: *"If you're in negative states of mind, that's an ethical matter. . . . It's to do with how you've acted before."*). Thus men were motivated to follow the precepts. However, doing so could be difficult. Some felt an overbearing sense of *"responsibility"* being Buddhist (Jimmy *"It comes with a weight of expectations."*). Others said that pursuing an

ethical path could be hard, and that they were sometimes tempted to transgress (Danny: *"You don't always feel like doing the right thing, [especially if] it brings you into conflict with people."*). There were also prohibitive social pressures outside the meditation community. For example, many men had been trying to cut down alcohol (one of the precepts). However, doing so was frequently a struggle. As with other themes here, gender expectations were a factor in this: drinking was often a core social activity among non-meditating peers, and participants often felt expected as men to consume alcohol. Under such circumstances, it could be difficult to abstain (William: *"[I] hang out with people who aren't Buddhists, who drink and take drugs. There's a tension."*). Finally, although men were encouraged to be *"forgiving"* and *"non-judgmental"* towards themselves regarding failures to follow the precepts, some felt that Buddhism had a demanding discourse of accountability.

> *Buddhism confronts you with yourself. It's the most savage religion. It insists that you take complete responsibility for yourself. . . . It's the most difficult thing. It won't let you off the hook.*' (Michael)

Community

As noted above, it was often difficult for men to share their interest in Buddhism with their male friends, partly because it contravened expectations around masculinity. For example, Dean felt he had a "*blokey relationship*" with non-Buddhist friends; if he tried to "*go beyond a certain level*" and discuss spirituality he could "*sense the discomfort ... a resistance. . . . 'Don't want to go there, it's Buddhist stuff, it's rubbish. The world's entirely rational, there's no God. . . . Get a beer, watch the football.'*" Given this antipathy, many participants highlighted the importance of being part of a community of others also engaged with Buddhism and/or meditation. Most men first encountered such a community when they attended their local meditation center. (As noted above under 'Sample Characteristics and Recruitment,' most participants were involved with a particular center affiliated to the

FWBO. This was a mixed-sex center, although its living quarters, housing around 30 people, were exclusively for men, with separate accommodation arrangements for women off-site.) Many participants portrayed life before engaging with meditation/Buddhism as relatively lonely and disconnected. As with other elements of these results, there was a strong gendered dimension to this disconnection. As detailed at length in a previous paper covering the reasons participants here began meditating (Lomas et al., 2013a), men recalled socialization pressures that encouraged them to demonstrate their masculinity by dealing with problems alone, and generally being self-sufficient. For example, Dalton recalled a "*difficult time"* in adolescence, and remembered thinking: "*I've got to face this alone, this idea about being the lone man… the myth from my grandfather.*"

However, men felt that in retrospect they had suffered from their disconnection, and as such, the appeal of community was thus potent (Terry: *"I'd been very isolated, [and] I thought, 'Maybe I can be part of that.'"*). Many men greatly appreciated being able to become involved with the community, although they were not naïve about the problems that could sometimes occur within them. For example, Michael felt the emotional dynamics between men could be complicated, from unrequited attraction (*"You can easily fall in love."*) to deep-seated emotional issues (*"Young men looking for father figures."*). The idealistic atmosphere could be intense (Jimmy: *"A hothouse environment."*), and conflicts occurred, for various reasons, which were exacerbated by this idealism (John: *"I was fiery and naive."*). However, many men saw engagement with the community – which many referred to as the *"sangha"* – as central to their Buddhist practice.

> *[Although] I don't feel the need to be part of a club . . . having a sense of sangha now, [i.e.,] friendships revolving around this way of life, [is] why it's started to feel real. You really need support, to be able to socialize with people whose values are the same as yours.* (Andrew)

Men valued the kinship of other practitioners in the community for manifold reasons, pertaining to wellbeing generally, and Buddhism specifically. In terms of wellbeing, the community offered friendship (Jimmy: *"Like the family I never had."*) and support (Steven: *"If you're ill or something people really look after you."*). Moreover, many felt that engaging with the sangha was central to engaging with Buddhism: it helped to sustain engagement, such as keeping up meditation practice, especially during times when men felt less motivated to do so (Henry: *"I've got less escape routes if I'm with people."*); shared values enabled pursuit of common goals, such as following the precepts (Steven: *"We're all living by the same principles."*); some men felt a sense of spirituality in the collective endeavor (Adam: *"Something transcendental . . . a coincidence of wills without a loss of individuality."*); structural activities, such as study groups, helped men to explore Buddhism (Danny: *"It's not just about theorizing, [but] how do you live that in your life."*); and men enjoyed the opportunity to learn from more experienced practitioners (Kris: *"The best place to learn how to be a man is to learn off good men."*). Silas felt the value of the sangha was encapsulated by the opportunity to develop 'spiritual' friendships: *"[We need] friendships to go deeper and be more meaningful, not just mates. I have people who I feel very strongly for, [with] open frank communication . . . challenging and supporting each other to live up to our ideals."* However, there was a poignant element to this theme. Men's appreciation of the community was heightened by the feeling that the close-knit support enjoyed here was less accessible in other areas of life. Participants suggested that other domains were still characterized by traditional masculine norms that discouraged connection. For example, Dalton described his deliberations around showing affection outside the community:

> *It's easier in the [centre], where I feel trusting. [Outside] there's wariness, a critical voice of what other people might think, [like] if I'm too loving or kind to a man people*

> *might think I'm gay... In the community I'm quite tactile. [Outside] I'm not, because I'm not sure how people will take it.*

New Gender Models

As indicated by Dalton's excerpt, many men suggested that through their engagement with Buddhism – and encouraged by the community – they had begun to change how they related to others. Having learned to be emotionally disconnected growing up, many men felt they had begun to open up to themselves and others emotionally, especially with a supportive community (William: *"People around here are emotionally open. . . .You don't get the blokey banter."*). Moreover, participants were learning to be more openly caring towards others, albeit usually only in the center (echoing the point above about non-Buddhist peers not being supportive of men's engagement with Buddhism). Caring was not simply encouraged by the community; the movement to which the center was aligned had developed structural arrangements specifically intended to foster it, including an emphasis on single-sex activities. A number of participants explained the rationale behind these activities in terms of allowing men to take on qualities which might be eschewed were women to be present.

> *[By] creating single sex conditions, men can learn to be men more fully and not allow women to do the nurturing, intimate side of things. [Before] I would have gone to women much more for my emotional needs, [whereas] now I feel I've got men friends I can be very open with and transparent with.* (Danny)

Participants acknowledged that the qualities depicted above were conventionally seen as 'feminine.' Indeed, men closely involved with the center rehearsed an explicit discourse of gender, suggesting the topic was a particular focus of reflection in the center. Danny echoed others in constructing an ideal of *"integrating the masculine and the feminine,"* which he indicated was promulgated by the center's leader (*"This is only what [he's] emphasized."*). However, as this ideal suggests, this discourse was not simply about men rejecting traditional

masculine traits and adopting feminine ones. As a senior figure in at center, Jack outlined its stance on gender issues. While he thought it important that men cultivate *"feminine"* qualities, he was wary of men *"feminizing"* themselves. He felt that *"50 years of aggressive feminists"* had undermined men, and that part of the rationale behind single-sex groups was providing spaces for *"guys to get together and see that they're alright."* His ideal man, a member of the center, combined traditional and non-traditional qualities.

> *He's emotionally-based and caring, really into being in relationships . . . but he's also a man. He's hardy, he's been around. He's tough but he's soft. [They're] qualities you don't usually find in the same place.*

A meaningful life

Together, the elements above offered a constellation of ideas and practices which men found appealing. This is not to imply that all men took on all elements; a few men embraced only one (e.g., meditation); others overlooked certain elements (e.g., preferring not to engage with a community). However, most men were drawn to at least some elements, and as such, engaged with Buddhism. A more complicated issue was whether men identified as Buddhist: many men did so, a few almost immediately on hearing about it. Some of these men had taken public vows of commitment within the framework of the FWBO, becoming a mitra (avowing their commitment to Buddhism as taught by the FWBO), or even ordained (Sam: *"I still experience enormous consequences of that. . . . I committed to Buddhist practice. I can't undo that."*). Others struggled with issues around identification, reluctant to label themselves. For example, Andrew had only just *"resolved"* whether he would call himself a Buddhist.

> *For a long time I thought, 'I'm into Buddhism, but I wouldn't call myself a Buddhist.' . . . I'm not interested in belonging to a club, [but] it's really important to me as an orientation in life. [Recently], a guy said, 'Ah, you're a Buddhist.' I said, 'Yes,' as it would be dishonest to say no, although I'd probably rather have said no.*

As this excerpt shows, what many participants appreciated in Buddhism was finding an ‘orientation in life.’ Before engaging with meditation/Buddhism, many men suggested retrospectively that they had felt *“lost”*: they lacked a sense of meaning or purpose in life, or were pursing goals, like materialism, that they were beginning to find unfulfilling. Thus part of the appeal of Buddhism was finding a coherent and credible framework of meaning. This framework included a persuasive worldview that helped them understand life, e.g., why suffering happens (Silas: *“It just becomes more obvious why things are like that.”*). It also provided helpful guidelines for how to live, e.g., values on which to base their actions (Alvin: *“It’s the most simple philosophy, ‘Do good, good comes to you.’”*). More concretely, men found value in practical activities, like going into schools to *“spread the dharma,”* i.e., tell others about Buddhism (Dean: *“It’s incredibly worthwhile.”*). Thus, the ideals/practices above offered an appealing path, one that was quite alternative to the traditional masculine paths that participants felt had had been open to them (Steven: *“My life plan is to do the ordination process, because this is the most meaningful thing I’ve found to do with my life.”*). Some participants explicitly characterized this path as a route to wellbeing.

> *You have to do what’s meaningful and [Buddhism is] where I find meaning. . . . I can choose not to do it, [but] I get pretty twitchy if I’m not following [this path]. I just get depressed actually. If you really feel there’s something important in life and you’re ignoring it, the color goes out of life pretty quickly.* (Adam)

Discussion

Our study provides, for the first time, analysis of why Buddhism might appeal to men specifically. In particular, Buddhism offered a nexus of ideas and practices which generally improved men’s lives for the better, for example, giving them the opportunity to form close friendships with other men. Moreover, from a gendered perspective, this nexus of ideas and practices was particularly valued because it offered an alternative model of masculinity to

those which participants encountered elsewhere in life. A useful way of understanding the various benefits offered by Buddhism to participants here is through the biopsychosocial model of wellbeing (even if men themselves would not necessarily articulate it in this way). In terms of the biological dimension (i.e., physical health), Buddhism promoted health behaviors, particularly through its system of ethics. In psychological terms, Buddhism offered ideas and practices which afforded men opportunities to experience SWB and PWB, and to alleviate distress. Finally, with its emphasis on the '*sangha*,' Buddhism generated social networks for men, providing social support. Together, these various factors help explain why these men were drawn to engage with Buddhism (whether or not they identified as Buddhist).

This analysis of Buddhism and wellbeing is unusual. In academic/clinical literature, considerable attention has been paid to meditation, and its impact upon wellbeing (Brown, Ryan, & Creswell, 2007). However, although many meditation practices derive from Buddhism, this interest in meditation – from academics, clinicians, and practitioners themselves – is mostly 'de-contextualized' from this Buddhist background (Shapiro, 1994). Shapiro warned that such de-contextualization meant that the potential for meditation to engender wellbeing was diluted, since in the context of Buddhism, meditation is viewed as just one component in a broader system of ideas/practices intended to promote wellbeing (e.g., working in concert with ethical behavior). Although Shapiro's caution has generally not been heeded in the literature, it was interesting to find men here making a similar point around the importance of 'going beyond' meditation to engage with wellbeing in a broader way through Buddhism.

First, Buddhism impacted upon the biological dimension of wellbeing by promoting health behaviors through its framework of ethics. Religious prescriptions and proscriptions on behavior, particularly around use of intoxicants, have often been seen as beneficial to health (Burris, Sauer, & Carlson, 2011). Participants spoke about being influenced by the precept of

'refraining from intoxicants,' with many men making efforts to reduce their use of alcohol, cigarettes, and psychoactive drugs. It was notable that men had previously rejected other religious frameworks and their ethical proscriptions (such as Christian discourses around sin). In contrast, it seemed an important aspect of the appeal of the Buddhist system of ethics was that it appealed to men's sense of rationality. That is, justifications for its ethical principles were made through explanations couched in psychological discourses of wellbeing (i.e., 'do this and you will feel better'), rather than with appeals to faith (i.e., 'trust that this is right') or to threats (i.e., 'otherwise you will be punished'). To this extent, Buddhism found a receptive audience among these secular participants by appearing consonant with both the rationality of modernity – an adaptation of Buddhism which McMahan (2004) has identified as 'Scientific Buddhism' – and with secular discourses around wellbeing, an adaptation which Obadia (2008) referred to as 'Therapized Buddhism.' (That said, Buddhism also began to take on more overtly religious elements for some men, supporting Pyysiäinen's (2003) point that it is too simplistic to categorize Buddhism as non-theistic.) Moreover, there was a gendered element to the appeal of Buddhist as a rational system, since it helped some men overcome their skepticism around spiritualty, a skepticism which was informed by societal discourses linking rationality to masculinity (Ross-Smith & Kornberger, 1994). However, in other ways, Buddhism offered participants opportunities to eschew traditional masculine performances. For example, from a gender perspective, men's abstinence efforts are notable, since alcohol use is a prominent way for men to demonstrate masculinity (de Visser & Smith, 2007). Thus Buddhism appeared to enable men to both uphold *and* challenge traditional conceptions of masculinity; moreover, in both cases, this was generally in the service of greater wellbeing.

Second, engagement with Buddhism helped participants satisfy the psychological dimension of wellbeing in manifold ways. Engagement helped alleviate distress and mental health issues such as depression: through practicing meditation, men learned coping skills to

help deal with negative emotions (see Lomas et al., 2013b); the social support of the community also helped during difficult times (see below). Engagement with Buddhism also promoted subjective wellbeing (SWB) and psychological wellbeing (PWB), constructs introduced under 'Religion and Wellbeing' early in this article. It is often theorized that SWB is subject to habituation: positive changes in circumstances only produce a temporary 'bounce' in wellbeing, which returns to a baseline largely determined by genetic factors (Lykken & Tellegen, 1996). However, Lyubomirsky et al. (2005) found long-term elevation in SWB can be achieved through ongoing opportunities to both give and receive compassion. Corroborating this point, participants in the present study reported that Buddhism's emphasis on compassion – both as an ideal, and through concrete activities (e.g., specific meditations) – was particularly rewarding. Again, in terms of the appeal of Buddhism to men specifically (rather than practitioners more generally), there was a gendered element to this appeal: in other contexts, qualities such as compassion were discouraged as antithetical to traditional masculine ideals (Connell, 1995); conversely, social settings connected to Buddhism provided a 'safe space' for the cultivation of heterodox qualities. (There are parallels here to the Australian 'shed movement,' a network of informal 'workshop-based spaces' where men could express non-traditional qualities; Golding, Kimberley, Foley, & Brown, 2008). Finally, Buddhism provided many men with meaning, which is integral to PWB (Seligman et al., 2006). Partly this concerned men finding a worldview – e.g., following the precepts – that rendered life comprehensible and purposeful (Janoff-Bulman & Yopyk, 2004). Moreover, Buddhism channeled this worldview into concrete activities, like proselytizing in schools, an example of 'engaged Buddhism' (Henry, 2006). As such, men could "serve something that one believes is bigger than the self" in a practical way, which Seligman et al. (p.777) suggest is key to finding a sense of meaning.

Third, engagement with Buddhism impacted upon social dimensions of wellbeing, particularly through its emphasis on the importance of the '*sangha,*' i.e. the community. Before engaging with Buddhism, many men indicated they had been relatively socially disconnected, affirming the idea that, partly due to traditional masculine norms encouraging independence, men tend to have smaller support networks than women (Courtenay, 2000). Here, many men felt supported by the community, especially when in distress, corroborating a key aspect of the 'religion-health connection' (i.e., religious participation as a 'buffer' against stress, reducing mental health issues; Koenig, 2009). Moreover, Krause's (2008) point that religious networks are especially close-knit, as adherents share principles geared towards caring, and thus are a potent resource of social support, is apposite here. Even participants who chose not to get involved with the sangha reported that engagement with Buddhism had impacted positively on their social relationships. For example, by working on qualities such as compassion, men reported being better able to cultivate friendships.

In sum, as noted above, in offering new practices which appeared to satisfy various dimensions of wellbeing, Buddhism appeared to both subvert *and* affirm traditional models of masculinity. For example, in promoting abstinence and relational intimacy, Buddhism challenged traditional norms such as alcohol use and independence (Courtenay, 2000). However, the narratives were still replete with qualities valorized as traditionally masculine, such as self-control and rationality (Ross-Smith & Kornberger, 1994). Notably, this mix of traditional and non-traditional gender practices was explicitly acknowledged by some men themselves. Participants suggested that the FWBO, to which the center was aligned, had encouraged them to take on 'feminine' qualities, and even designed structural arrangements to help this process (e.g., single-sex activities). Yet the movement also encouraged the retention of traditional masculine traits (e.g., toughness), and thus promoted an ideal of 'integrating' the masculine and the feminine. This ideal contrasts with discourses of gender

promoted by earlier men's groups which arose in the wake of social movements, like feminism, that challenged conventional gender norms (Stein, 2005). A neo-conservative 'mythopoetic' movement, drawing on myths around men's hunter-gatherer evolutionary past, reasserted traditional masculinity via male bonding (Hearn, 2004). In contrast, pro-feminist groups sought to encourage the emergence of the "emotionally-expressive New Man" (Messner, 1993, p.723). Against the background of such groups, it was striking that participants here seemed to particularly appreciate being encouraged to take on 'feminine' qualities (e.g., caring), without having to reject conventionally 'masculine' traits which they still felt had some value (e.g. stoicism).

Limitations of the research means caution is needed generalizing from the results here. Post-positivist theories of knowledge recognize that data do not provide a "window onto reality," but are generated by the research process (Charmaz, 2000, p.524). For example, research interactions represent opportunities for men to construct a particular identity which positions them in a positive light (Allen, 2005). Thus, men's accounts of taking on new practices through Buddhism could be seen as part of a concerted effort to construct a dramatic 'conversion' narrative, which is one way religious adherents identify themselves as 'converts' (Popp-Baier, 2002). Men may have drawn on such a genre, perhaps influenced by discourses in the community. However, this does not mean narratives cannot provide information about the past. Treating qualitative data as 'fiction' to be 'read' for narrative devices risks "spurning the effort respondents themselves make to speak the truth" (Connell, 1995, p.91). As such, it is important not to write off men's accounts of personal change simply as discursive strategies, but to recognize that men may indeed have found ways towards better wellbeing through engagement with Buddhism. Another limitation is in terms of generalizability. This study focused mainly on narratives pertaining to one particular Buddhist movement (the FWBO), one that is acknowledged even by its adherents to be

idiosyncratic in its interpretation of Buddhism (Vishvapani, 2001). Thus, the issue of whether the findings apply to Buddhism more generally – whether Buddhism holds a specific appeal to men in the context of masculinity – is a question for future research.

These findings are important given the considerable interest around meditation in the literature. Shapiro (1994) argued that in order to make 'Eastern' approaches to wellbeing palatable to a secular Western academic audience, it helped to decontextualize the practices (e.g., meditation) from their religious background. The 'explosion' of interest in mindfulness over the last two decades suggests this process of de-contextualization has been successful (Brown et al., 2007). However, Shapiro argued that it would eventually be important to 're-contextualize' meditation by exploring the wider system of Buddhism from which it derived, as this may also have important lessons for wellbeing. Our study makes a useful contribution towards this re-contextualization: while participants found meditation rewarding, most felt that its impact upon wellbeing was limited unless accompanied by a broader engagement with Buddhist ideas and practices in general life. As such, our study suggests that all those interested in meditation might benefit from also exploring the Buddhist frameworks which helped to produce and develop meditation in the first place.

References

Abeydeera, A. (1990). The travels of Marco Polo in the land of Buddhism. In V. Elisseeff (Ed.), *The Silk Road: Highways of Culture and Commerce*. Paris: UNESCO.

Allen, L. (2005). Managing masculinity: Young men's identity work in focus groups. *Qualitative Research*, *5*(1), 35-57. doi: 10.1177/1468794105048650

Barker, C. (2008). Men, Buddhism and discontents of Western modernity. *Journal of Men, Masculinities and Spirituality, 2*(1), 29-46.

Barker, M. (2007). Investments in religious capital: An explorative case study of Australian Buddhists. *Journal of Global Buddhism, 8*, 65-80.

Bauman, Z. (2001). *The Individualised Society.* Cambridge: Polity Press.

Baumann, M., & Prebish, C. S. (2002). *Westward Dharma: Buddhism beyond Asia*. London: University of California Press.

Bluck, R. (2006). *British Buddhism: Teachings, Practice and Development.* London: Routledge.

Brown, K. W., Ryan, R. M., & Creswell, J. D. (2007). Mindfulness: Theoretical foundations and evidence for its salutary effects. *Psychological Inquiry, 18*(4), 211-237. doi:10.1080/10478400701598298

Burris, J. L., Sauer, S. E., & Carlson, C. R. (2011). A test of religious commitment and spiritual transcendence as independent predictors of underage alcohol use and alcohol-related problems. *Psychology of Religion and Spirituality, 3*(3), 231-240. doi: 10.1037/a0022204

Charmaz, K. (2000). Grounded theory: Objectivist and constructivist methods. In N. Denzin & Y. Lincoln Y (eds), *Handbook of Qualitative Research* (pp. 509-535). Thousand Oaks, CA: Sage.

Collins-Mayo, S., Mayo, B., & Nash, S. (2010) *The Faith of Generation Y.* London: Church

House Publishing.

Connell, R. W. (1995). *Masculinities*. Cambridge: Polity Press.

Courtenay, W. H. (2000). Constructions of masculinity and their influence on men's well-being: A theory of gender and health. *Social Science and Medicine, 50*(10), 1385-1401. doi: 10.1016/S0277-9536(99)00390-1

Cush, D. (1996). British Buddhism and the new age. *Journal of contemporary religion*. *11*(2): 195-208. doi:10.1080/13537909608580768

Cutcliffe, J. R. (2005). Adapt or adopt: Developing and transgressing the methodological boundaries of grounded theory. *Journal of Advanced Nursing, 51*(4), 421-428. doi:10.1111/j.1365-2648.2005.03514.x

Dahlsgaard, K., Peterson, C., & Seligman, M. E. (2005). Shared virtue: The convergence of valued human strengths across culture and history. *Review of General Psychology, 9*(3), 203-213. doi: 10.1037/1089-2680.9.3.203

Dawson, L. L. (1998). Anti-modernism, modernism, and postmodernism: Struggling with the cultural significance of new religious movements. *Sociology of Religion, 59*(2), 131-156. doi: 10.2307/3712077

De Chavez, A. C., Backett-Milburn, K., Parry, O., & Platt, S. (2005) Understanding and researching wellbeing: Its usage in different disciplines and potential for health research and health promotion. *Health Education Journal, 64*(1), 70-87. doi: 10.1177/001789690506400108

De Visser, R. O., & Smith, J. A. (2007). Alcohol consumption and masculine identity among young men. *Psychology & Health, 22*(5), 595-614. doi: 10.1080/14768320600941772

Diener, E. (2009). Subjective wellbeing. *The science of wellbeing: Social Indicators Research Series, 37,* 11-58. doi.org/10.1007/978-90-481-2350-6_2

Ellison, C. G., & Levin, J. S. (1998). The religion-health connection: Evidence, theory, and

future directions. *Health Education and Behavior, 25*(6), 700-720. doi: 10.1177/ 109019819802500603

Golding B, Kimberly H, Foley A and Brown A (2008) Houses and sheds in Australia: An exploration of the genesis and growth of neighbourhood houses and men's sheds in community settings. *Australian Journal of Adult Learning* 48(2): 237-262.

Gough, B. (2006). Try to be healthy, but don't forgo your masculinity: Deconstructing men's health discourse in the media. *Social Science and Medicine, 63*(9), 2476-2488. doi.org/10.1016/j.socscimed.2006.06.004

Hatch, S. L., Harvey, S. B., & Maughan, B. (2010). A developmental-contextual approach to understanding mental health and wellbeing in early adulthood. *Social Science and Medicine, 70*(2), 261-268. doi.org/10.1016/j.socscimed.2009.10.005

Hearn, J. (2004). From hegemonic masculinity to the hegemony of men. *Feminist Theory, 5*(1), 49-72. doi:10.1177/1464700104040813

Henry, P. (2006). The sociological implications for contemporary Buddhism in the United Kingdom: Socially engaged Buddhism, a case study. *Journal of Buddhist Ethics,* Retrieved from http://jbe.gold.ac.uk.

Janoff-Bulman, R., & Yopyk, D. J. (2004). Random outcomes and valued commitments. In J. Greenberg, S. L. Koole, & T. Pyszczynski (Eds.), *Handbook of Experimental Existential Psychology* (pp.122-140). New York: Guilford.

Karagiannis, E. (2012). European converts to Islam: Mechanisms of radicalization. *Politics, Religion, & Ideology*, *13*(1), 99-113. doi: 10.1080/21567689.2012.659495

King, R. (1999). *Orientalism and Religion: Post-Colonial Theory, India and "The Mystic East"*. London: Routledge.

Koenig, H. G. (2009). Research on religion, spirituality, and mental health: a review. *Canadian Journal of Psychiatry, 54*(5), 283-291.

Krause, N. (2008). The social foundation of religious meaning in life. *Research on Aging, 30*(4), 395-427. doi: 10.1177/0164027508316619

Larson, J. S. (1999). The conceptualization of health. *Medical Care Research and Review, 56*(2), 123-136. doi: 10.1177/107755879905600201

Lomas, T., Cartwright, T., Edginton, T., & Ridge, D. (2013a). 'I was so done in that I just recognized it very plainly, "You need to do something"': Men's narratives of struggle, distress and turning to meditation. *Health:, 17*(2), 191-208. doi: 10.1177/1363459312451178

Lomas, T., Edginton, T., Cartwright, T., & Ridge, D. (2013b). Men developing emotional intelligence through meditation? Combining narrative, cognitive, and electroencephalography (EEG) evidence. *Psychology of Men and Masculinity*. doi: 10.1037/a0032191

Lykken, D., & Tellegen, A. (1996). Happiness is a stochastic phenomenon. *Psychological Science, 7*(3), 186-189. doi:10.1111/j.1467-9280.1996.tb00355.x

Lyubomirsky, S., Sheldon, K., & Schkade, D. (2005). Pursuing happiness: The architecture of sustainable change. *Review of General Psychology, 9*(2), 111-131. doi:10.1037/1089-2680.9.2.111

Marshall, M. (1996). Sampling for qualitative research. *Family Practice, 13*(6), 522-525. doi:10.1093/fampra/13.6.522

McMahan, D. L. (2004). Modernity and the early discourse of scientific Buddhism. *Journal of the American Academy of Religion, 72*(4), 897-933. doi:10.1093/jaarel/lfh083

Messner, M. A. (1993). "Changing men" and feminist politics in the United States. *Theory and Society,* 22, 723-737. doi:10.1007/BF00993545

Minichiello, V., Aroni, R., Timewell, E., & Alexander, L. (1995). *In-Depth Interviewing: Principles, Techniques, Analysis*. Melbourne: Longman Cheshire.

Ministry of Justice (2010). Offender Management Caseload Statistics 2009: Ministry of Justice Statistics bulletin. Published 22 July 2010. Retrieved from http://www.justice.gov.uk/downloads/statistics/prison-probation/omcs-2009-complete-210710a.pdf.

O'Brien, R., Hunt, G., & Hart, K. (2005) 'It's caveman stuff, but that is to a certain extent how guys still operate': Men's accounts of masculinity and help seeking. *Social Science and Medicine, 61*(3), 503-516. doi:10.1016/j.socscimed.2004.12.008

Obadia, L. (2008). The economies of health in Western Buddhism: A case study of a Tibetan Buddhist group in France. In D. C. Wood (Ed.), *The Economics of Health and Wellness: Anthropological Perspectives* (pp.227-259). Oxford: JAI Press.

Office for National Statistics (2012). Religion in England and Wales 2011. Published 11 December 2012. Retrieved from http://www.ons.gov.uk/ons/dcp171776_290510.pdf.

Phillips, T., & Aarons, H. (2005). Choosing Buddhism in Australia: Towards a traditional style of reflexive spiritual engagement. *British Journal of Sociology, 56*(2), 215-232. doi:10.1111/j.1468-4446.2005.00056.x

Pollard, E. L., & Davidson, L. (2001). *Foundations of Child Wellbeing: Action Research in Family and Early Childhood*. Paris: UNESCO. Retrieved from http://unesdoc.unesco.org/images/0012/001246/124620eo.pdf.

Popp-Baier, U. (2002). Conversion as a social construction: A narrative approach to conversion research. In C. A. M. Hermans, G. Immink, A. de Jong, & J. van der Lans (Eds.) *Social Constructionism and Theology.* Holland: Koninklijke.

Pyysiäinen I (2003) Buddhism, religion and the concept of god. *Numen* 50(2): 147-171.

Ridge, D. T., Williams, I., Anderson, J., & Elford, J. (2008). Like a prayer: the role of spirituality and religion for people living with HIV in the UK. *Sociology of Health and Illness, 30*(3), 413-428. doi:10.1111/j.1467-9566.2007.01062.x

Robertson, R. (1995). Globalization: Time-space and homogeneity-heterogeneity. In M.

Featherstone, S. Lash, & R. Robertson (Eds.), *Global Modernities* (pp.25-44). London: Sage.

Roof, W. (2001). *Spiritual Marketplace.* Princeton, NJ: Princeton University.

Ross-Smith, A., & Kornberger, M. (2004). Gendered rationality? A genealogical exploration of the philosophical and sociological conceptions of rationality, masculinity and organization. *Gender, Work and Organization, 11*(3), 280- 305. doi:10.1111/j.1468-0432.2004.00232.x

Said, E. W. (1995). *Orientalism: Western Conceptions of the Orient*. London: Penguin.

Seligman, M. E. P., Rashid, T., & Parks, A. C. (2006). Positive psychotherapy. *American Psychologist, 61*(8), 774-788. doi:10.1037/0003-066X.61.8.774

Shapiro, D. H. (1994). Examining the content and context of meditation. *Journal of Humanistic Psychology,* 34(4), 101-135. doi:10.1177/00221678940344008

Stein, A. (2005). Make room for daddy: Anxious masculinity and emergent homophobias in neopatriarchal politics. *Gender and Society, 19*(5), 601-620. doi:10.1177/0891243205277309

Strauss, A., & Corbin, J. (1998). *Basics of Qualitative Research: Techniques and Procedures for Developing Grounded Theory.* Thousand Oaks, CA: Sage.

Subhuti, D. (1994). *Sangharakshita: A New Voice in the Buddhist Tradition.* Buddhism: Windhorse Publications.

Vishvapani, D. (2001) Perceptions of the FWBO in British Buddhism. *Western Buddhist Review* 3.

Wuthnow, R., & Hackett, C. (2003). The social integration of practitioners of non-Western religions in the United States. *Journal for the Scientific Study of Religion, 42*(4), 651-667. doi:10.1046/j.1468-5906.2003.00209.x

[1] Religion usually refers to social institutions centered around particular beliefs, practices, and rituals, whereas spirituality is 'something individuals define for themselves that is largely free of the rules, regulations and responsibilities associated with religion' (Koenig, 2009, p.281). However, given the conceptual overlap between the two terms, Koenig uses them interchangeably, qualifying them where necessary to indicate whether he is refer to social structures, or people's personal sense of spirituality/religiosity.

[2] The precepts prescribe abstinence from: harming living beings; taking the not given (i.e., theft); misconduct concerning sense pleasures (e.g., sexual misconduct); false speech (i.e., lying); and unmindful states related to consumption of alcohol or drugs (see Dahlsgaard, Peterson, and Seligman, 2005).