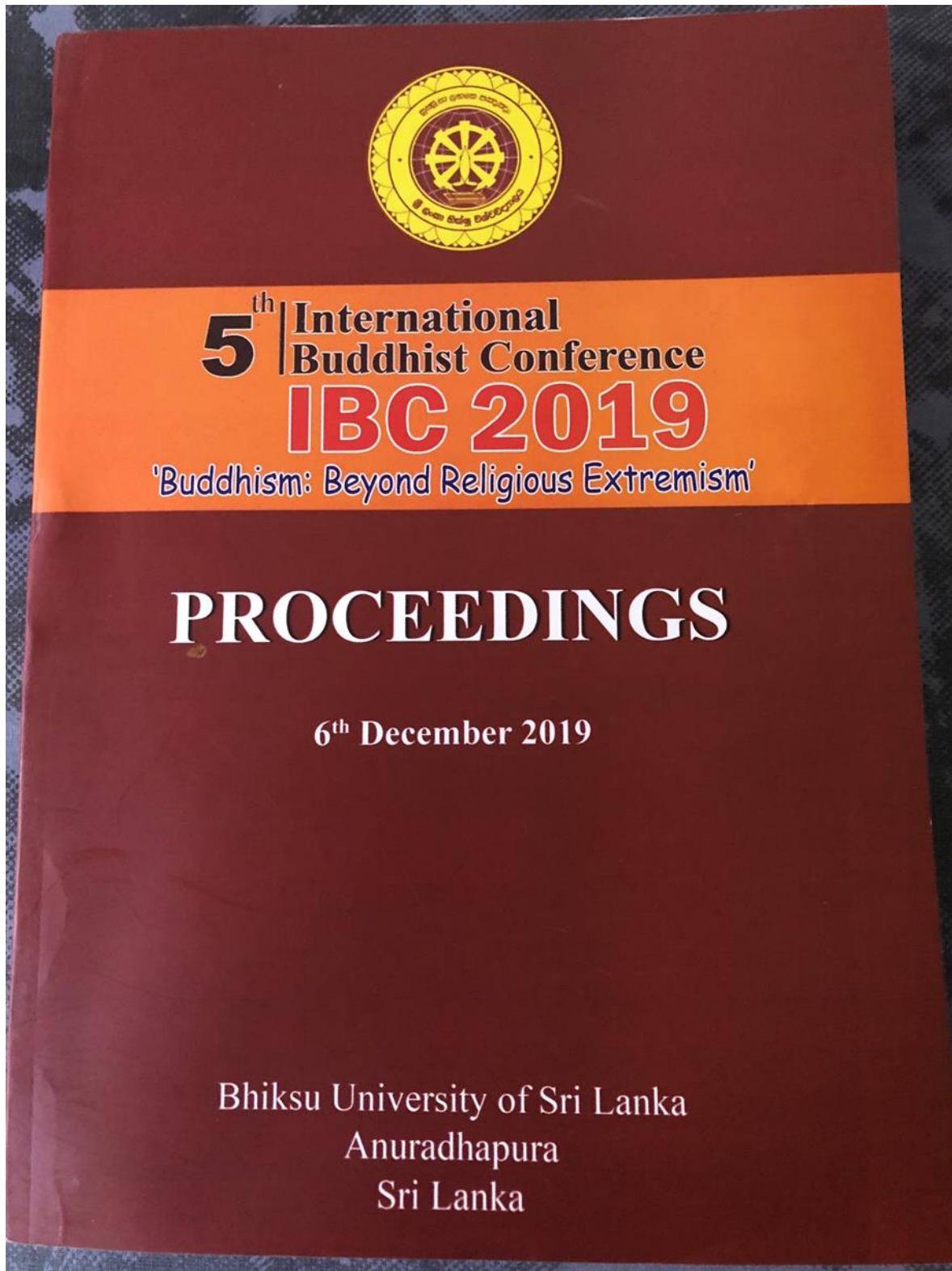


4.C.



## **Buddhist Meditation Experience Questionnaire (BMEQ): A Preliminary Tool to Describe Buddhist Meditation Experience**

E. A. S. K. Somarathne<sup>1</sup>, Dr. E. Lokupitiya<sup>2</sup>,  
Prof. W. Gunathunga<sup>3</sup>

### **Introduction**

Meditation has been practised around the world for thousands of years. It can be generally identified as a variety of techniques or practices under different religions or religious views which supports in training the mind (Craven, 1989; Kristeller, 2007). Among different religious and spiritual meditations, Buddhist meditation has taken wide attention throughout the world.

The Buddhist Meditation Experience Questionnaire (BMEQ) was developed as a part of a large-scale study on Buddhist meditation and behavioural modifications. The scope of the research is to study and correlate behavioural modifications through practising Buddhist meditation and environmental parameters.

### **Purpose & background**

According to scientific literature, the major meditative forms in Buddhism are Samatha and Vipassana; the former emphasizing on avoiding discursive thought by letting the practitioner concentrate on the object of meditation and the latter emphasizing on avoiding discursive thought by letting the practitioner concentrate on the practitioner's own mental activity (Amihai and Kozhevnikov, 2014; Deegalle, 2017).

Scholars have defined Buddhism or the teachings of The Buddha in many ways (Mikulas, 1981; Shonin, Van Gordon and Singh, 2015). Based on Dhammachakkapavattana sutta in Sanyuktha Nikāya, The Buddha's teachings reflect a mind basis-dhamma which shows the way of removal of hidden suffering

1. Research Assistant, Research Promotion and Facilitation Centre, Faculty of Medicine, University of Colombo, Department of Zoology and Environment Sciences, Faculty of Science, University of Colombo. sandunikanchana92@gmail.com
2. Department of Zoology and Environment Sciences, Faculty of Science, University of Colombo. erandi@sci.cmb.ac.lk
3. Professor, Department of Community Medicine, Faculty of Medicine, University of Colombo. wasantg@commed.cmb.ac.lk



while emphasizing that Kamma (actions) have Kamma vipaka (effects). The Buddha Dhamma cannot be understood, if one does not have paññā (wisdom) and his/her own efforts on researching the teachings of The Buddha. To attain the first stage of Niramisa Suwa, anyone should put his/her own efforts to thoroughly understand the core concepts of the The Buddha's teachings. For that, the mind should be clear and more concentrated (i.e. purified). Meditation could play a major role in achieving this.

The Buddhist meditation experience can be described as knowledge and skill gained through personally practising the Noble eightfold path namely Samma ditti, Samma Sankappa, Samma Vacha, Samma Kammantha, Samma Ajiva, Samma Vayama, Samma Sati and Samma Samadhi. Studying Buddhist meditation for scientific studies is one of the trending topics among the modern scientific community in the world. But the problem is the lack of a proper tool to study experiences of Buddhist meditators. Hence this study was undertaken to develop a tool to measure the experience of the Buddhist meditators. To our knowledge, this will be the first tool being developed to study Buddhist meditation experience in a scientific manner.

### Method

At the preliminary stage, it was tried to find a validated tool to study Buddhist meditation experience considering the objectives of the research study. As the researchers were unable to find a validated tool, it was decided to develop the BMEQ using English language. The Four Noble Truths, Three marks of existence (Tilakkhana) and The Noble Eightfold Path were considered as the basis in developing the BMEQ. In the initial construction of BMEQ, potential items were drawn from the following sources:

- literature reviewing of different Buddhist meditation traditions;
- existing meditation-related scales;
- interviews with expert Buddhist meditators and teachers;

In this analysis, 27 meditation-related items were pooled. Then, the 1st draft of BMEQ (BMEQ\_D\_1) was developed as a self-administered questionnaire with two main sections: a) questions about the start of the regular practice of meditation and b) general questions about the current meditation practice. The BMEQ\_D\_1 was distributed among reviewers (i.e. 7 reviewers - including experts in questionnaire designing and long-term Buddhist meditators who practise meditation regularly) and obtained the comments on the structure of the questionnaire and the pooled items. As suggested by the reviewers, it was decided to change the structure of the BMEQ as an interviewer-administered questionnaire.



Following the obtained comments and research objectives relevant to the BMEQ, items were further reviewed and selected for the 2nd draft of BMEQ (BMEQ\_D\_2) by the research team. The BMEQ\_D\_2 consisted of 24 items under 6 sections; a) demographic data, b) questions relevant to the initial phase of meditation, c) the regularity of the meditation practice, d) the current practice of meditation, e) other than Buddhist meditation, f) meditation retreats and impacts of meditation. It was pre-tested (n=10) and according to the obtained feedback, the BMEQ\_D\_2 was revised as 3rd draft of BMEQ (BMEQ\_D\_3). The BMEQ\_D\_3 (number of items = 22) was subjected to the preliminary pilot test. The number of 30 Buddhist regular meditators were surveyed with the aim of identifying issues in BMEQ\_D\_3. According to the obtained feedback, BMEQ\_D\_3 was revised as the 4th draft of BMEQ (BMEQ\_D\_4) by the research team. The BMEQ\_D\_4 had 18 pooled items and 4 sections; a) regular practice of Buddhist meditation, b) Buddhist meditation retreats, c) meditation practices other than Buddhist meditation and d) meditation and day-to-day life. The BMEQ\_D\_4 was reviewed by the reviewers (n=7) to reach the final draft of BMEQ.

### Results

After analyzing the obtained feedback, the final BMEQ was developed with 20 pooled items under 2 sub-questionnaires and 4 sections. Because of detected response errors due to biases in interviewing, it was decided to revise the structure of the questionnaire into 2 sub-questionnaires. The first 3 sections (the regular practice of Buddhist meditation, Buddhist meditation retreats, other meditation practices) belong to the 1st sub-questionnaire of the BMEQ which contains interviewer administering questions. The last section belongs to the 2nd sub-questionnaire of the BMEQ which addresses the Buddhist meditation and day-to-day life; it consists of 27 self-administered statements. The 5-point Likert scale has been used to record participant responses with each statement. At the beginning of page 1 of the BMEQ, definitions of practice of Buddhist meditation and the Buddhist meditation were included. These definitions were also reviewed by the reviewing committee. The validity of the questionnaire was ensured judgmentally considering the following factors (Bolarinwa, 2015; Tsang, Royse and Terkawi, 2017).

- Face validity
- Content validity
- Consensual validity

### Conclusions

BMEQ shows promise in measuring Buddhist meditation experience and it needs further improvement. Collected information via BMEQ can be used in

scientific research on Buddhist meditation experience. Future studies should be focused on the criterion-validity of this tool which further increases the scientific validity of it. As the judgmentally validated BMEQ was designed in English, it can be utilized only for collecting information on meditation experience from English known communities of Buddhist meditators.

*"This research was supported by the Accelerating Higher Education Expansion and Development (AHEAD) Operation of the Ministry of Higher Education funded by the World Bank".*

**Keywords:** The Buddha Dhamma, Buddhist Meditation, The Noble Eightfold Path, Buddhist Meditation Experience

### References

- Amihai, I. and Kozhevnikov, M. (2014) 'Arousal vs. Relaxation: A comparison of the neurophysiological and cognitive correlates of Vajrayana and Theravada meditative practices', PLoS ONE, 9(7). doi: 10.1371/journal.pone.0102990.
- Tsang, S., Royse, C. F. and Terkawi, A. S. (2017) 'Guidelines for developing, translating, and validating a questionnaire in perioperative and pain medicine'. doi: 10.4103/sja.SJA.
- Bolarinwa, O. A. (2015) 'Principles and methods of validity and reliability testing of questionnaires used in social and health science researches.', The Nigerian post-graduate medical journal, 22(4), pp. 195–201. doi: 10.4103/1117-1936.173959.
- Craven, J. L. (1989) 'Meditation and psychotherapy', Canadian Journal of Psychiatry, 34(7), pp. 648–653. doi: 10.1177/070674378903400705.
- Deegalle, M. (2017) Theravada Buddhism, Interreligious Philosophical Dialogues. doi: 10.4324/9781315115474.
- Kristeller, J. L. (2007) 'Kristeller\_Chap\_15\_Mindfulness\_Meditation', pp. 393–427.
- Mikulas, W. L. (1981) 'Buddhism and behaviour modification William I. Mikulas', pp. 331–342.
- Shonin, E., Van Gordon, W. and Singh, N. N. (2015) 'Buddhist foundations of mindfulness', Buddhist Foundations of Mindfulness, pp. 1–362. doi: 10.1007/978-3-319-18591-0.