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Prison Meditation Movements and Mass Incarceration¹

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Abstract

By some estimates more than half of inmates held in jails and prisons in the United States have a substance use disorder. Treatments involving the teaching of meditation and other contemplative practices have been developed for a variety of physical and mental disorders including drug and alcohol addiction. At the same time, an expanding volunteer movement across the country has been bringing meditation and yoga into jails and prisons. This review first examines the experimental research on one such approach - mindfulness meditation as a treatment for drug and alcohol addiction, as well as the research on mindfulness in incarcerated settings. We argue that in order to make a substantial impact on recidivism, such programs must mirror volunteer programs which emphasize interdependency and non-duality between the “helper” and the “helped,” and the building of meditation communities both inside and outside of prison.

Keywords

Meditation; Mindfulness; Mass Incarceration; Substance Use Disorders; Volunteering

Introduction

In *The New Jim Crow*, Michelle Alexander (2010) reframed our understanding of incarceration in the United States within a long-term historical framework of white supremacy, with the War on Drugs the latest policy instrument of domination over people of color. As a result of this “War,” the incarceration rate in the United States grew almost five-fold in the past four decades (Golembeski & Fullilove, 2005). Alexander argues that not only imprisonment, but also probation and parole create a caste of persons who are systematically deprived of rights and left with profoundly unequal opportunities. By some estimates more than half of prison and jail inmates have a substance use disorder (Columbia University, National Center on Addiction and Substance Abuse., 2010). Alexander and others have argued that underlying substance use rates do not drive the War on Drugs

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(Alexander, 2010: 126–127; Mauer, 1999). Ultimately, deriving from critical legal studies, Alexander's documentation of continuities between the War on Drugs, Jim Crow, and slavery can also be seen as a prime instance of the conflict theory approach within criminology. This theory explains both crime and the criminal justice response to it in terms of the powerlessness and political exclusion of particular groups (Chamblis and Seidman, 1971). The criminal justice system is a means of social control that serves the interests, economic and otherwise, of the powerful. With the de-industrialization of American cities, residents of segregated urban neighborhoods who are unable to participate in the legal economy become fodder for a profitable prison-industrial complex (Bourgois, 2003). Conflict theory has become increasingly nuanced over the years to account for the unique role of race in the criminal justice system, including the race of the victim (e.g., D. Hawkins, 1987) and the intersection of race, gender and age effects (Spohn and Holleran, 2000).

Since the mid-2000's, the number of state prisoners has leveled off, as the states face intense budget pressure to reduce spending on corrections (Bureau of Justice Statistics, 2013). While some states have tried to reduce spending per inmate via contracts with private prisons (Bureau of Justice Statistics, 2013), or simply released prisoners, others have implemented diversion and rehabilitation programs to try to reduce the number of ex-prisoners who recidivate or are returned for probation and parole violations. These states have sought evidence based approaches to drug and alcohol treatment in jails and prison, in order to reduce recidivism among drug offenders (Heaps, Lurigio, Rodriguez, Lyons, & Brookes, 2009). In the past twenty years, treatments involving meditation and other contemplative practices have been developed for a variety of physical and mental disorders, including drug and alcohol addiction (Chiesa and Seretti, 2014). At the same time, an expanding volunteer movement in the US and several other countries has been bringing meditation and yoga into jails and prisons. Mindfulness is trending in popular self-help culture and exploding as a research topic (Black, 2014). If mass incarceration is the result of policy that serves the interests of the powerful, can mindfulness meditation programs in jails and prisons make a genuine impact on incarceration in the United States?

To attempt to answer this question, this review first examines the research on mindfulness meditation as a treatment for drug and alcohol addiction. Several authors have recently reviewed meditation research in prison (Himelstein, 2011; Shonin, Van Gordon, Slade, & Griffiths 2013; Dafoe & Stermac, 2013). In the context of conflict theory, meditation programs as "treatments" of individuals in prison have inherent limitations. We then examine volunteer meditation and Engaged Buddhism movements, in order to understand how evidence-based meditation programs in prison may be designed to make a substantial impact on incarceration. We argue that in order to significantly reduce incarceration rates, professional programs must share two characteristics with the volunteer movements. These are an emphasis on interdependency and non-duality between the "helper" and the "helped," and the building of *sanghas* or meditation communities both inside and outside of prison. Guided by these principles, individuals in prison meditation programs can form communities that can then be instrumental in seeking policy change as a collective voice, in alliance with other meditators who are in positions of power. Despite the fact that mindfulness is based on acceptance, then, meditation communities have the potential to press for social and political change. Indeed, we will argue that although they have not yet realized this potential,

mindfulness meditation movements may have more capacity to lead to effective political action than other prison rehabilitation programs.

Mindfulness Meditation and Addiction

Mindfulness meditation based interventions are becoming standard for a variety of physical and mental disorders (Keng, Smoski, & Robins, 2011), including substance abuse disorders (Chiesa and Serretti, 2014). Mindfulness may be defined as attention to the flow of sensations, thoughts and feelings in the present moment, with a non-judgmental stance toward the contents of consciousness (Bishop et al., 2004). Mindfulness meditation is centered around quieting the mind and becoming aware of things as they are (Sanskrit *vipassana*) in the present moment through sitting and mindful movement practices. Practitioners report that this form of meditation heightens awareness of one's bodily sensations, thoughts, and emotions. Recent technological advances have permitted a more detailed picture of brain activity during meditation and the changes in brain structure associated with sustained meditation practice (Chiesa & Serretti, 2010). Among other findings, meditation training strengthens the neural pathways between areas of the prefrontal cortex and areas of the limbic system associated with the stress response, anxiety and other emotional states, as well as pain perception (Holzel et al, 2011). Researchers interpret these phenomena to indicate that meditation increases the capacity for conscious regulation of emotional states and pain perception, thereby reducing the severity of negative emotional states (Chiesa, Serretti, & Jakobsen, 2013).

The Mindfulness Based Stress Reduction (MBSR) programing, originally developed for chronic pain patients (Kabat-Zinn, 1982), has been adapted for numerous populations and health conditions. The late Alan Marlatt initiated a program to adapt MBSR for the treatment of substance use disorders, called Mindfulness Based Relapse Prevention (MBRP) (Bowen, Chawla, & Marlatt, 2011). While the currently prevailing substance abuse treatment is cognitive behavioral therapy to help clients understand and reappraise cravings and triggers, a mindfulness approach focuses on bodily awareness and acceptance of craving, rather than reappraisal (Witkiewitz, Marlatt, & Walker, 2005). Mindfulness Based Relapse Prevention is structured similarly to MBSR, and includes the body scan, sitting, and walking meditation, as well as compassion meditation (which is particularly important for individuals in the criminal justice system); with additional discussion of applying mindfulness to prevent drug and alcohol relapse (Bowen, Chawla, & Marlatt, 2011). Marlatt's term for increased awareness of, and non-reactiveness to craving is "urge surfing" (Bowen & Marlatt, 2009). As noted above, the meditation training component of MBRP may also lessen the overall severity of negative emotional states that trigger drug and alcohol relapse (Zgierska et al., 2009, Zgierska and Marcus, 2010). Two randomized controlled trials of MBRP as aftercare for patients who had completed substance abuse treatment in the community showed significantly greater reductions in substance use in the MBRP arm compared with treatment as usual (Bowen, Chawla et al., 2009) and cognitive behavioral treatment (Bowen, Witkiewitz et al. 2014). A common problem with many drug treatment programs is that the effects are short-lived; multiple treatment episodes are often needed to achieve lasting recovery, and relapse rates are high (Vaillant, 1995). There is evidence to suggest that the

effects of mindfulness meditation training may last longer than cognitive behavioral treatment (Bowen et al., 2014, Pbert et al., 2010).

Meditation Research in Prison

Meditation programs in prison have been the subject of research since the 1970s, which is perhaps logical given the stereotypical notion that meditation brings inner peace; the programs are hence generally viewed positively by prison administrators seeking to reduce aggressive behavior. The early research focused on Transcendental Meditation (TM) (Himelstein, 2011). Unlike mindfulness meditation, whose goal is awareness and acceptance of the whole field of consciousness, TM consists of repeating a mantra silently to oneself. It has been suggested that TM could be a treatment for drug and alcohol addiction (e.g., Alexander, Robinson, & Rainforth 1994), but few of the studies have been randomized controlled trials (Hawkins, 2003). In contrast to TM research in prison, studies examining mindfulness meditation in prison have been limited. Samuelson and colleagues implemented a MBSR program in six Massachusetts prisons. Pre- and post-test comparisons showed statistically significant reductions in hostility, increases in self-esteem and improvements in mood among program participants (Samuelson, Carmody, Kabat-Zinn, & Bratt, 2007). The study did not include a control group and ended prematurely due to withdrawal of support from prison administration.²

While most mindfulness interventions are held weekly or biweekly in classroom settings, Vipassana meditation retreats are ten-day immersion experiences during which prisoners are residentially separated from the general population and maintain strict silence. They have been implemented by volunteers in prison settings around the world (Bowen et al., 2006; Perelman et al., 2012; Ronel, Frid, & Timor, 2013). The documentary film “Dhamma Brothers” depicts a Vipassana course in a maximum security prison in Alabama (www.dhammabrothers.com). In a followup segment in 2011, the program was still thriving in the prison and about to be expanded to another prison in Alabama. These retreats may be considered comprehensive mindfulness training that aims for a transformation of consciousness affecting all aspects of life, not just addictive behaviors. Bowen and colleagues (2006) compared a cohort of inmates offered the Vipassana retreat in a prison in Washington State to a cohort given treatment as usual. The researchers found significantly greater reductions in self-reported alcohol and other drug use at 3 months following release in the treatment group compared to non-volunteers (Bowen et al., 2006; Simpson et al., 2007). While this study was one of the few meditation studies to include post-release substance use outcomes, it did not include an active control group to control for motivational characteristics of the inmates who volunteered for the retreat. Moreover, ten-day Vipassana retreats are unlikely ever to become widely available inmates in the US. They have been implemented on a small scale, involve highly motivated participants who are serving long sentences, and are led by volunteers from outside the correctional system. As such, they may be profoundly transformative for the individuals who participate, but are unlikely to be part of a broad public policy.

²James Carmody, personal communication.

Adapting Mindfulness Meditation to the Prison Setting

Several barriers exist to developing meditation programs as a widespread intervention for persons with substance use disorders in jails and prisons. Correctional facilities vary in the training and skill levels of their treatment counselors. Rehabilitative programs in jail and prison are largely didactic, such as programs to address criminal thinking and anger management, and can be taught by anyone with knowledge of the content. In contrast, for MBSR and MBRP, the trainers are expected to have a mindfulness practice themselves (Kabat-Zinn, 1994). One potential approach to increase interest in mindfulness practices among correctional drug and alcohol counselors is to link meditation to 12-step recovery programs such as Alcoholics Anonymous. Many substance abuse counselors are themselves in 12-step recovery, although the proportion is declining with the professionalization of this workforce (Smith & Liu, 2014). Meditation is mentioned in the 11th step, albeit with reference to God: "Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out." Thus, at least in principle, evidence based mindfulness meditation programs are congruent with a 12-step orientation. Recent works have described commonalities between Buddhist philosophy and practice and the 12 steps. (Griffin, 2004; Batchelor, 2007). Drug and alcohol counselors who are in 12-step recovery could be encouraged to develop a mindfulness practice as part of delivering these interventions.

Fleet Maull, a Zen Buddhist practitioner who served fourteen years in prison and founded the Prison Dharma Network, has remarked that some people without prison experience have compared prison to a monastery, permitting the pursuit of meditation freed from the distractions of the outer world (Maull, 2005). Maull makes clear that on the contrary, prison is a profoundly dehumanizing, distracting, and difficult environment for meditation practice (Haney, 2004). Rather than a monastery, Maull compares meditation in prison to "charnel house" meditation, a Tibetan Buddhist term for meditation in a cemetery or other extreme setting. Maull states that the extreme situation of a prison makes meditation both more difficult and more rewarding (Maull, 2005). His writings highlight the potential difficulty of implementing mindfulness meditation in a chaotic prison environment where participating inmates are not residentially separated from non-meditators.

Despite the fact that people of color comprise about 60% of jail and prison inmates (Sentencing Project, 2012), there has been little research on the need to adapt meditation programs for African Americans or Latinos in prison. Most mindfulness meditation research has taken place with white populations (Amaro, 2014), and published studies with people of color have focused on women (Amaro, Spear, Vallejo, Conron, & Black, 2014; Vallejo & Amaro, 2009). Any behavioral intervention for men of color must recognize the intersection of race, class, and gender bias that profoundly impacts their outcomes in the criminal justice system, their health and their life chances (Cohen, 1999; Lyons, Lurigio, Roque, & Rodriguez, 2013). Adaptation of meditation programs should begin with the participants' existing contemplative practices and frames of reference. Men of color in prison may have mind-body practices or practices of attention regulation, such as sports or martial arts, which may be a natural foundation on which to build a contemplative practice.

Finally, several studies indicate that jail and prison drug treatment is less effective if it is not followed up by aftercare in the community (Pelissier, Jones, & Cadigan, 2007; Inciardi, Martin, & Butzin, 2004; Knight, Simpson, & Hiller, 1999; Wexler, Melnick, & Cao, 2004). Interpretation of these studies is limited by selection bias among those who choose to participate in, and/or complete, aftercare. Nonetheless, to maintain successful abstinence, released prisoners must be prepared to navigate the social services they will need in the community and build social capital (Granfield & McCloud, 1999; Lyons & Lurigio, 2010). However, prisoners returning to the community are not always successfully linked with aftercare, or may choose not to participate. In one California study in which post release drug treatment was fully funded for each participant, only 25 percent of prison participants entered aftercare (Zhang, Roberts, & McCollister, 2011). Mindfulness based treatment is seldom available as an aftercare option. Since meditation programs in prison are experiential rather than didactic, participants who become engaged in a regular practice may be more willing to go to post-release meditation groups than to other types of treatment, but the potential level of engagement is currently unknown.

Meditation and Mass Incarceration

Thus far we have considered the potential of meditation programs to address addiction among individual prisoners. Available evidence suggests that meditation training can be an effective intervention that may have long lasting benefits for people with addictions. We now return to the contention that the enormous expansion of the jail and prison population since the 1980's is the result of the War on Drugs, sentencing laws, and other tough-on-crime legislation whose consequences fall disproportionately on the urban poor and people of color. From the point of view of conflict theory, treatment of individuals, even if it is "evidence based," leaves these political and social structures in place. Theoretically, if all drug and alcohol addicts involved in the criminal justice system were cured of their addiction, the system would remain as a system of social control. Indeed, of all possible responses to a self-perpetuating, systematically racially biased criminal justice system, meditation programs based on acceptance, silence, and stillness might be seen to be the most "quietist" of all possible programs, and least associated with activism.

However, Hick and Furlotte (2009) have suggested that mindfulness training can be a way of awakening, or raising consciousness (Freire, 2000) of people to unjust social conditions. They have developed a "radical mindfulness training program" (Hick & Furlotte, 2010) and pilot tested the ten week training with a small sample of homeless men and women. Less than half of initial participants completed the intervention; however, among those who completed, a scale of self-compassion improved significantly, and "isolative" items improved the most. Note, however, that Hick and Furlotte's program is similar to MBSR and MBRP in that it is premised on treating individuals who are suffering, rather than activism.

Volunteers are not waiting for the results of scientific studies to bring meditation and yoga programs to jails and prisons. Many volunteers are part of the Engaged Buddhism movement, a strand within contemporary Buddhism that calls for activism and engagement with social suffering (King, 2009). The extent of these volunteer movements is difficult to estimate. As noted, Vipassana retreats have been implemented in prisons in Taiwan, Israel,

India, and other countries (www.prison.dhamma.org). In Britain, Buddhism was the fastest growing religion in prisons between 1997 and 2008, mostly converts exposed to Buddhism through volunteer chaplains.(Beckford, 2008) A volunteer meditation program in Ontario, Freeing the Human Spirit, (<http://freeingspirit.com/>) was recently adopted by the national prison advocacy organization John Howard Society in Canada. In the US, the Prison Mindfulness Institute provides books and resources on meditation for prisoners, organizes a pen pal program between prisoners and meditation volunteers, and offers an online training program for prison volunteers. The Prison Mindfulness Institute's online network has over 700 members (www.prisonmindfulness.org). Volunteers from the Prison Yoga Project have brought yoga to prisoners at San Quentin prison in Northern California for more than a decade. The Prison Yoga Project explicitly uses a trauma-informed practice to address complex, embodied trauma (prisonyoga.com).

The primary purpose of these volunteer programs is not to reduce drug use and recidivism after release, but to improve participants' lives in prison. This goal is consistent with the orientation of mindfulness itself, which focuses on the here and now. However, we believe that these volunteer movements exemplify two principles that are critical for addressing the root causes of incarceration. First, the principle of non-duality emphasized in the Mahayana tradition of Buddhist philosophy teaches that the distinction between self and other is a delusion that leads to suffering (Williams, 1999). Non-duality implies recognition of oneness or sameness between the helper and those who are helped, and calls into question distinctions between patients to be treated and the professionals who treat them (King, 2009). This is not to say that the circumstances of people in jail and prison are the same as those of the human service providers working with them. It implies instead that the meditation instructor should view himself or herself as a beginner, not an expert, with a "beginner's mind" (Suzuki, 2011), and who can learn from those who are helped. (Indeed, since prisoners must develop detachment given circumstances that they literally cannot get away from, nonimprisoned Buddhists may have much to learn from them). This oneness between the helper and the helped is similar to Friere's notion of the "humility" of the teacher in effective popular education (Freire, 2000). One practical consequence of the principle of non-duality is that meditation training should primarily be a process of inquiry, rather than directing or teaching (Bowen et al., 2011). Facilitators elicit experiences rather than instruct beginning meditators what they should or should not feel. They then normalize challenges that learners face by bringing to light the fact that others, including the facilitator, have the same challenges.

Most importantly, non-duality implies agency on the part of the participant. The prisoner in the meditation program is not the "done to" and the meditation teacher is not the "doer." Since conflict theory proposes that political powerlessness and marginalization drive substance use and the incarceration of groups of people, a non-dualistic approach does not further deprive prisoners of power by treating them as patients to be fixed.

A second notion in Buddhism relevant to addressing mass incarceration is that of the sangha, or meditation community. Connection to activist social networks on the outside of prison empowers people being released from prison (Draine, McTighe, & Bourgois, 2011). The power of the group is again similar to 12 step and other self-help movements, much of

whose effectiveness relies on strengthened social bonds and access to social capital (Kaskutas, Bond, & Humphreys, 2002). There is some evidence that the benefits of meditation training may partly derive from the group setting in which it is learned. For instance, reduction of social isolation is the dimension of self-compassion that improved the most in Hick and Furlotte's study (Hick & Furlotte, 2010). This insight is currently being applied in an ongoing MBRP program offered by Lyons and Cantrell in a large urban jail. Many mindfulness based programs in prisons seek to establish a practicing community or sangha within the prison. Lyons and Cantrell's work puts an additional focus on maintaining this community after release from jail, due in part, to the shorter stays in jails versus prisons. Participants in the jail study are referred to community practice groups that are led by an instructor who learned yoga and meditation while he was incarcerated in the Illinois Department of Corrections. The first hour of these sessions consists of open discussion about the challenges of returning to the community and staying sober, as well as a guided mindful meditation. During the second hour, participants are invited to participate in a yoga session open to the larger community. The program is held at a community development organization, allowing participants to interact with individuals from all walks of life and fostering social capital, which may in turn increase collective efficacy (Rose & Clear, 1998).

Conclusion

From the perspective of conflict theory, meditation programs are like any other rehabilitation program in jail or prison: they cannot fundamentally address mass incarceration if they treat individuals alone, and do not lead to social and political activism. As Alexander argues, criminal justice reforms such as reducing penalties for drug possession will not end mass incarceration (Alexander, 2010), and a range of social actors, including a growing private prison industry, is poised to undermine any reforms that would substantially reduce the number of prisoners (Mauer, 2011). Rather than reform within the system, Alexander argues that only a movement similar to the Civil Rights Movement can transform the criminal justice system.

For several reasons, meditation programs in prisons might be a part of such a movement. First, as noted above, the radical oneness between helper and helped means that the prisoner learning to meditate enters the movement as an equal empowered to create his or her own group. The fundamental prerequisite for teaching mindfulness is to have a mindfulness practice oneself (Kabat-Zinn, 1994). Therefore, despite efforts to professionalize mindfulness teaching (Carmody, 2014), in an environment of severely limited resources, mindfulness meditators can go out and form their own groups, akin to self-propagating, nonprofessional self-help groups. Second, since mindfulness meditation is about the present moment, it encourages a kind of realism about social change, rather than utopianism. Most importantly, unlike other rehabilitation programs, meditation training does not imply a deficit on the part of the beginning meditator. Unlike 12 step movements, participation in a sangha does not require identification as an alcoholic or addict. Despite some research approaches that aim to measure deficits in "mindfulness" as a trait (Baer, Smith, Hopkins, Krietemeyer & Toney, 2006), volunteer movements such as the Prison Mindfulness Institute teach that all people are inherently good and capable of enlightenment.

This is not to imply that prisoners have the resources to create meditation sanghas or address the root social and public policy causes of mass incarceration on their own. Typically, recently released ex-offenders cannot volunteer in correctional settings for security reasons. However, through involvement with continuing practice groups upon release, these individuals can link to the empowering social capital of others engaged in mindfulness practices. It will be critical for such communities to be open and non-exclusive, and to provide “bridging” social capital (Lyons & Lurigio, 2010) to individuals not involved in the criminal justice system with resources and political connections, and who can obtain security clearance to reach back into jails and prisons as volunteers. Thus, although ultimately mass incarceration cannot be addressed except through a social movement, there is a role for professional programming in prisons. This analysis of volunteer movements and of the tenets of engaged Buddhism leads to specific recommendations for development of jail and prison meditation programs: (1) Facilitators should be meditators themselves and have a mindfulness practice of their own; (2) they should elicit experiences rather than tell inmates how to meditate, (3) they should empower them to facilitate their own meditation groups; (4) most importantly, the programs should link individuals inside prison to outside meditation groups.

This review has described the limited research on meditation as a treatment for drug and alcohol addiction and in prisons. Implementation of these programs may face the system-wide barrier of indifference or hostility to any intervention programs, even those found to be effective. Thus offering meditation programs to correctional officers and administrators is just as important as reaching the prisoners. They, as much as drug using prisoners, need tools to cultivate compassion and the sense of non-duality and community. Perhaps the primary role for social service and rehabilitation programs is to provide space and opportunities for these individuals to transform their own worlds and ours.

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