

Overcoming “Sentimental Compassion”: How Buddhists Cope with Compassion Fatigue.*

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Compassion fatigue demolishes productivity and the mental health of helping professionals. And yet, very little research has investigated it from the Buddhist perspective. The following mixed-method research explores how Buddhists overcome and prevent compassion fatigue during their caring services. With reference to the *Vimalakīrti Nirdeśa Sūtra* (維摩詰所說經), this project has examined the experiences of 35 interviewees. It then proposes the bodhisattva spirit as a potential solution, for it involves interaction between *bodhicitta* (enlightened mind 菩提心), *prajñā* (wisdom 般若) and *upāya* (skilful means 方便). The enlightened mind is the basis for the latter two qualities. Wisdom enables helping practitioners to free themselves from “sentimental compassion” and reduce stress when serving clients. Having applied skilful means to caregiving, practitioners flexibly cater to the individual needs of the service recipients. Through this process, practitioners both help others and take care of their own emotional

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reactions towards clients’ distress, resulting in tackling compassion fatigue, enhancing personal growth and achieving self-benefiting altruism.

Buddhist Philosophy on Compassion Fatigue

A cluster of terminology, including burnout, compassion fatigue, vicarious trauma, and secondary traumatic stress, refers to negative impacts on physical, mental, and spiritual health, and the work performance of caregivers,¹ volunteers² and human service professionals,³ including counsellors,⁴ social workers⁵ and teachers,⁶ especially among young novices.⁷ This patois is made up of frequently interchangeable terms,⁸ although the causes behind the symptoms are different⁹ and their focus varies regarding the intensity of empathic engagement.¹⁰ Burnout is usually produced by heavy workloads, bureaucratic demands, and the disintegration of professional identity.¹¹ Meanwhile, vicarious trauma inclines towards cognition changes related to the professionals themselves, others around them and the world,¹² and secondary traumatic stress¹³ indicates behavioural symptoms¹⁴ and psychological dysfunction.¹⁵ Compassion fatigue results in compassion discomfort and stress,¹⁶ and the erosion of hopes and empathy,¹⁷ mainly referring to affective and emotional responses.¹⁸ This fatigue is induced when

¹ Milstein, Gerstenberger, and Barton (2002)

² Rank, Zaparanick, and Gentry (2009); Lynch and Lobo (2012)

³ Bozgeyikli (2012); Sprang, Craig, and Clark (2011); Jacobson (2012)

⁴ Injeyan et al. (2011); Baird and Jenkins (2003); Arvay (2001); Jenkins and Baird (2002); Bride, Hatcher, and Humble (2009); Fahy (2007)

⁵ Newell and MacNeil (2010); Bride (2007); Pulido (2007)

⁶ Cullen (2013)

⁷ Tam and Mong (2002, 90)

⁸ Worley (2005); Stewart (2009); Sprang, Clark, and Whitt-Woosley (2007); Deighton, Gurriss, and Traue (2007); Cieslak et al. (2013); Naturale (2007)

⁹ Everall and Paulson (2004, 26); Bride, Radey, and Figley (2007, 156)

¹⁰ Boyle (2011, 3); Bush (2009, 25)

¹¹ Vanheule and Verhaeghe (2005, 286); Tam and Mong (2005, 480)

¹² Baird and Krachen (2006, 181)

¹³ Bride and Kintzle (2011, 22)

¹⁴ (Newell and MacNeil 2010, 60; Robinson-Keilig 2014, 1478)

¹⁵ Collins and Long (2003b, 418-419)

¹⁶ Boyle (2011, 2)

¹⁷ Mathieu (2012, 8)

¹⁸ Slocum-Gori et al. (2011)

a caring service practitioner who empathically works for vulnerable people¹⁹ is overwhelmed by excessive compassionate energy and over-involvement²⁰ over a long period of time, being exposed to service recipients who are suffering from pain, grief, distress, trauma,²¹ and the fragility of life.²² Paradoxically, compassion is the most essential attribute of professional caregivers.²³

Apart from physical and psychosomatic symptoms, such as tiredness and chronic pain,²⁴ compassion fatigue induces three types of affective exhaustion: emotional shrinking, depersonalisation, and the devaluation of personal achievements.²⁵ This exhaustion devastates enthusiasm, job performance²⁶ and peer relationships in the workplace,²⁷ increases irritability,²⁸ worsens a sense of hopelessness and isolation,²⁹ and causes a withdrawal from and avoidance of social connections.³⁰ The health service field has been affected by compassion fatigue³¹ due to the cumulative stressful work of serving clients.³² Gender differences related to this sort of fatigue remain unproven: some research reports no significant disparity,³³ whereas other arguments point to a higher level among female practitioners.³⁴

Compassion fatigue tends to be severe among double role caregivers, such as nurse-daughter practitioners,³⁵ who bear feelings of guilt, anger and hopelessness. Moreover, the risk of compassion fatigue increases in caring professionals who have experienced life's difficulties while exposed to clients' pain³⁶ at a time

¹⁹Dunn (2009); Gilmore (2012)

²⁰Gallavan and Newman (2013); Frandsen (2010)

²¹Bloniasz (2011); Stewart (2009); Nimmo and Huggard (2013)

²²Gilmore (2012); Berzoff and Kita (2010)

²³Barker and Buchanan-Barker (2004, 18); Radey and Figley (2007, 207); Halifax (2013b, 110)

²⁴Gilmore (2012)

²⁵Gallavan and Newman (2013)

²⁶Adam, Boscarino, and Figley (2006, 103); Harr and Moore (2011, 353)

²⁷Negash and Sahin (2011, 5)

²⁸Stewart (2009); Negash and Sahin (2011)

²⁹Figley (2002, 1436)

³⁰Lynch and Lobo (2012)

³¹Stebnicki (2008, 3)

³²Mizuno et al. (2013, 547)

³³Sprang, Clark, and Whitt-Woosley (2007)

³⁴Rossi et al. (2012, 933); Barse et al. (2013, 155); Thompson, Amatea, and Thompson (2014, 67)

³⁵(Ward-Griffin, St-Amant, and Brown 2011)

³⁶Sabo (2011, 3); Figley (2002)

when they have lower sensitivity to accumulated stress and to their own emotional needs.³⁷ Thus both the health service workforce³⁸ and health care costs³⁹ have been beset by a high resignation rate,⁴⁰ which has impelled policy makers to offer programmes designed to reduce symptoms of compassion fatigue,⁴¹ for example, the employee assistance programme, and the “Circle of Life”⁴² for peer support and positive self-caring strategies.⁴³

Whilst most scholars have investigated compassion fatigue based on Western theories, Marr⁴⁴ initiates a discussion on it from the Buddhist perspective, and conceives that compassion fatigue does not actually arise. She explains that compassion is neither a static state nor a concept, but is a praxis by which to eradicate self-centredness and to connect with others in a genuine manner. Her suggestions for approaching patients without suffering from compassion fatigue include non-dualism between “I” as a caregiver and “you” as a service recipient, and focusing on the here-and-now while serving patients non-judgementally. Although she has not elucidated to which school of Buddhist thought she refers, her Zen practices and thread of philosophy align with Mahāyāna (Great Vehicle 大乘佛教). Nevertheless, Marr⁴⁵ does not further discuss how these teachings can be applied to tackle compassion fatigue.

The “Being with Dying Professional Training Programme”, formulated by Halifax,⁴⁶ combines interventions for caregivers, patients and their family members, which employ Buddhist ideas, including the *catvāri apramāṇāni* (the four immeasurables 四無量心). However, insufficient scriptural data support her claims of using Buddhism in this programme.

Huang⁴⁷ has discussed what makes helpers create mental obstructions, using the personal experience of volunteers in a Buddhist organisation, and has explicated what Buddhist compassion is and how it works. His discussion can

³⁷ Bush (2009, 25)

³⁸ Lombardo and Eyre (2011)

³⁹ Joinson (1992, 119)

⁴⁰ Kjellenberg et al. (2014, 127)

⁴¹ Potter et al. (2010); Tyson (2007)

⁴² Running, Tolle, and Girard (2008, 306)

⁴³ Lombardo and Eyre (2011)

⁴⁴ Marr (2009)

⁴⁵ Marr (2009)

⁴⁶ Halifax (2013a)

⁴⁷ Huang (2013)

potentially be developed as a theoretical discourse, offering references to caring professionals to deal with emotional exhaustion.

The current exploratory research delves into the causes of compassion fatigue from the viewpoint of the Mahāyāna, and explores how Buddhists can manage compassion fatigue. Such study makes a significant contribution, in that it proposes alternative ideas for conquering this professional challenge. The research questions consist of the following: first, to what extent do Mahāyāna doctrines explain how compassion fatigue is produced? Second, how can Buddhism help practitioners to tackle and prevent compassion fatigue? This cross-disciplinary project analyses the *Vimalakīrti Nirdeśa Sūtra* (維摩詰所說經) in order to present the relevant Mahāyāna teachings; they are concordant with the personal experience of the interviewees in this study, who manage compassion fatigue through Buddhist wisdom.

This study encompasses four major parts as follows. It begins by depicting the mixed research method; then looks into the canonical and interview data; then further discusses the insightful references associated with the formation of a coping model; finally, sets out the significance, implications, limitations and conclusion.

Hybrid Research Design

This study gathers primary data by utilising mixed methods which combine references from the *Vimalakīrti Nirdeśa Sūtra* (維摩詰所說經) and a fieldwork inquiry. This is intended to cross-validate the data from a scriptural text and qualitative interviews, and thus illustrate how a collaborative approach can link the disciplines of Buddhist studies and social sciences.

A Textual Study

The *Vimalakīrti Nirdeśa Sūtra* (維摩詰所說經) (hereafter simply referred to as the *Sūtra*) was dissected for the present study, with the aid of the ATLAS.ti 7 software package⁴⁸ (refer to Figure 1). This section first expounds how the *Sūtra* connects to this topic of compassion fatigue, and then introduces the significance of the *Sūtra*.

⁴⁸ Cheng (2014d)

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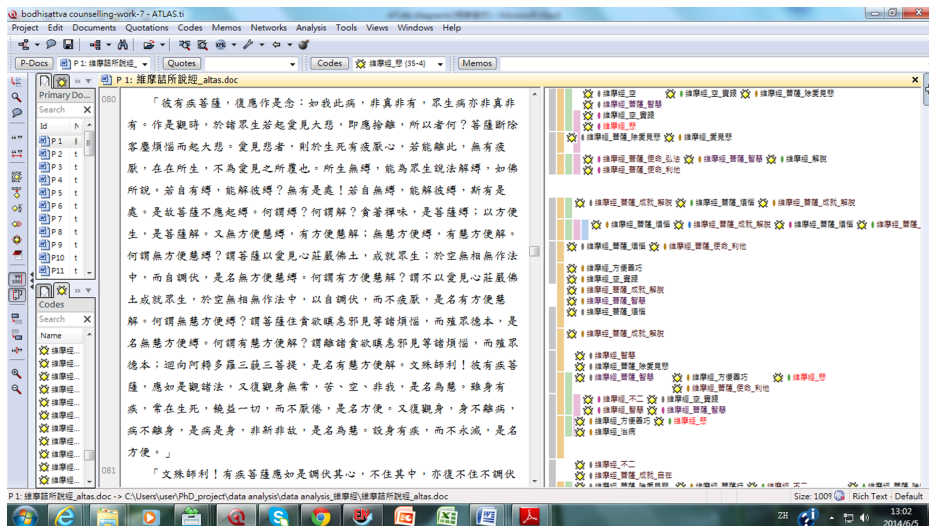


Figure 1: Buddhist Scriptural Studies through the Aid of ATLAS.ti 7

Sentimental compassion. The *Sūtra* is the only Buddhist canon which discusses “sentimental compassion”⁴⁹ (愛見悲、⁵⁰愛見大悲⁵¹) in detail, although the *Bodhisattvapiṭaka Sūtra*⁵² (佛說大乘菩薩藏正法經) also addresses this construct in a cursory manner. In Chapter 5 of the *Sūtra*, *Mañjuśrī’s Condolence Visit*⁵³ (文殊師利問疾品第五), Vimalakīrti explains the causes of sentimental compassion that can induce illnesses in bodhisattvas (有疾菩薩), especially among “novice bodhisattvas”.⁵⁴

A bodhisattva aims to eradicate sentient beings’ distress,⁵⁵ metaphorically

⁴⁹McRae (2004, 112)

⁵⁰《文殊師利問疾品第五》T14, no. 0475, p. 0545a26

⁵¹《文殊師利問疾品第五》T14, no. 0475, p. 0545a25-26

⁵²「是故菩薩修法觀時，最極微量悉無所見，於解脫法及菩提道悉皆出離得無障礙，於諸有情不起愛見大悲之想。彼無煩惱及隨煩惱。所以者何？如其了義平等入解人法俱空，無有煩惱之所積集，而能覺悟彼煩惱自性即菩提性，此菩提自性即煩惱性。」《佛說大乘菩薩藏正法經》T11, no. 0316, p. 0877a25-28

⁵³《文殊師利問疾品第五》T14, no. 0475, p. 0544a26-0545c29

⁵⁴McRae (2004, 177); 「新學菩薩。」《囑累品第十四》T14, no. 0475, p. 0557a17; 「新學者。」《囑累品第十四》T14, no. 0475, p. 0557a22

⁵⁵“This is the term for the bodhisattva who has simultaneously eliminated old age, illness, and death.” (McRae 2004, 111) 「如是兼除老病死者，菩薩之謂也。」《文殊師利問疾品第五》T14, no. 0475, p. 0545a18-19

serving as a physician doctor⁵⁶ who cures sickness (of mental problems); the term *bodhi* refers to “enlightenment”⁵⁷ and *sattva* to “sentient beings”.⁵⁸ Although a bodhisattva is able to attain *nirvāṇa* (perfect stillness 涅槃), s/he is willing to enter *saṃsāra*⁵⁹ (the cycle of birth and death 輪迴) and dedicates her/himself to living with sentient beings in order to save them. However, novice bodhisattvas on the one hand sympathetically engage with the afflictions of sentient beings,⁶⁰ while on the other hand suffering from the affectionate compassion they feel towards their misery.⁶¹ This sickness is called sentimental compassion, and this bodhisattva is “the bodhisattva who is ill”.⁶² The sick bodhisattva will then loathe their return to the secular world⁶³ and will be unable to achieve her/his mission. This negative effect is comparable to affective exhaustion among caring practitioners, namely, compassion fatigue, as explicated earlier.

Vimalakīrti pointed out that sick bodhisattvas have not yet attained *prajñā* (wisdom 般若) and misunderstand *dharmas*.⁶⁴ This misunderstanding reinforces the attachment to self and to sentient beings,⁶⁵ and such attachment impacts on compassionate caring negatively, producing sentimental compassion. He therefore preached on how ill bodhisattvas can expunge sentimental compassion, and so relieve themselves from the bondage of affectionate views⁶⁶ by means of a

⁵⁶“Be the physician king, healing the host of illnesses.” (McRae 2004, 110) 「當作醫王，療治眾病。」《文殊師利問疾品第五》T14, no. 0475, p. 0544c20

⁵⁷Dayal (1932/1999, 4)

⁵⁸Yao (2006, 191)

⁵⁹“Bodhisattvas enter *saṃsāra* on behalf of sentient beings.” (McRae 2004, 108) 「菩薩為眾生故入生死。」《文殊師利問疾品第五》T14, no. 0475, p. 0544b21

⁶⁰“When sentient beings are ill the bodhisattvas are ill also and when sentient beings recover from their illness the bodhisattvas recover also.” (McRae 2004, 108) 「眾生病則菩薩病，眾生病愈，菩薩亦愈。」《文殊師利問疾品第五》T14, no. 0475, p. 0544b22-23

⁶¹“The illness of bodhisattvas arises from great compassion.” (McRae 2004, 108) 「菩薩病者，以大悲起。」《文殊師利問疾品第五》T14, no. 0475, p. 0544b23

⁶²McRae (2004, 110); 「有疾菩薩。」《文殊師利問疾品第五》T14, no. 0475, p. 0544c17

⁶³“If they have an affectionate view of compassion, they would thereby generate aversion toward *saṃsāra*.” (McRae 2004, 112) 「愛見悲者，則於生死有疲厭心。」《文殊師利問疾品第五》T14, no. 0475, p. 0545a26

⁶⁴“understand the conception of the extinguished dharmas” (McRae 200, 110) 「滅法想。」《文殊師利問疾品第五》T14, no. 0475, p. 0544c30

⁶⁵“Furthermore, the arising of this illness is entirely due to attachment to self. ... the conception of ‘self’ and the conception of ‘sentient being.’” (McRae 2004, 110) 「又此病起，皆由著我。…我想及眾生想。」《文殊師利問疾品第五》T14, no. 0475, p. 0544c28-29

⁶⁶“... they are subsequently reborn they will not be limited by any affectionate view.” (McRae 2004, 112) 「不為愛見之所覆也。」《文殊師利問疾品第五》T14, no. 0475, p. 0545a27

synthesis of *prajñā* (wisdom 般若) and *upāya* (skilful means) (方便), affirming “skilful means with one’s wisdom emancipated”⁶⁷ and “wisdom with one’s skilful means emancipated”.⁶⁸ The former encourages bodhisattvas to deeply understand the nature of beings,⁶⁹ that is, *sūnyatā* (voidness 空性), according to the *pratītya-samutpāda* (the law of dependent origination 緣起法). Simultaneously, the latter exhorts bodhisattvas to serve others flexibly without limiting their methods.⁷⁰ These precepts, emphasised by Vimalakīrti, represent the classical wisdom of *bodhisattva-mārga* (the bodhisattva path 菩薩道) which evolved 2,000 years ago, and which have been narrated in the *Sūtra*. The current research further looks into their applicability and practicality in modern society through the lived experiences of service providers.

Significance of the *Sūtra*. The *Sūtra* embraces the principal Mahāyāna teachings from the perspective of *prajñā* (wisdom 般若); for instance, *pratītya-samutpāda* (the law of dependent origination 緣起法), *sūnyatā* (voidness 空性), *anitya* (impermanence 無常), *advaita* (non-dualism 不二), seed of Tathāgata (suchness 如來種), *buddhakṣetra* (*buddha* land 佛土), and particularly bodhisattva, *bodhisattva-mārga* (the bodhisattva path 菩薩道) and the *catvāri apramāṇāni* (the four immeasurables 四無量心), representing the Mahāyāna views of human nature, life and the world. Its theories have significantly influenced the Chan⁷¹ (Zen 禪宗), Tiantai⁷² (天臺宗), Huayan⁷³ (華嚴宗), Pure Land⁷⁴ (淨土宗), and Vajrayāna⁷⁵ (Tantric Buddhism 密宗) schools of Buddhism.

⁶⁷McRae (2004, 112); 「有方便慧解。」《文殊師利問疾品第五》T14, no. 0475, p. 0545a31

⁶⁸McRae (2004, 113); 「有慧方便解。」《文殊師利問疾品第五》T14, no. 0475, p. 0545a33

⁶⁹“It is not to use affection to ornament the *buddha* lands and accomplish [the liberation of] sentient beings, and to control oneself so as to be without aversion within [the three emancipations of] emptiness, singleness, and wishlessness.” (McRae 2004, 112) 「謂不以愛見心莊嚴佛土、成就眾生，於空、無相、無作法中，以自調伏，而不疲厭，是名有方便慧解。」《文殊師利問疾品第五》T14, no. 0475, p. 0545a31-32

⁷⁰“It is to transcend the afflictions of desire anger, and false views and plant a host of virtuous roots, rededicating [the merit to one’s achievement of] *anuttarā-samyak-sambodhi*.” (McRae 2004, 113) 「謂離諸貪欲、瞋恚、邪見等諸煩惱，而植眾德本；迴向阿耨多羅三藐三菩提，是名有慧方便解。」《文殊師利問疾品第五》T14, no. 0475, p. 0545a33-34

⁷¹Wu (2001, 10)

⁷²You (1999)

⁷³Ng (1995, 93-94)

⁷⁴Xie and Pan (2011, 148)

⁷⁵Tam (1995; 1997)

Composed around the first to second centuries A.D.,⁷⁶ the *Sūtra* was translated into seven Chinese versions,⁷⁷ among which Kumārajīva’s (鳩摩羅什) rendition has been used in the current research because of its readability and popularity.⁷⁸ Preaching on the *Sūtra* has been widely assimilated in Chinese culture across different social classes, including aristocrats, gentry,⁷⁹ and scholars,⁸⁰ which is evident in philosophical discourse,⁸¹ art⁸² and literature.⁸³ Furthermore, it has become a folk religion⁸⁴ practised by the grass-roots class.⁸⁵ The *Sūtra* is also well known elsewhere in Asia, including Vietnam,⁸⁶ Japan and Korea,⁸⁷ as well as in the West, in countries such as Germany⁸⁸ and Spain.⁸⁹ In addition, there are various English versions, among which the renditions of McRae⁹⁰ and Watson⁹¹ are employed in this research since their translations were grounded on Kumārajīva’s work.⁹²

Since the *Sūtra* is a Mahāyāna scripture, using it in the present research implies that the analysis and discussion adhere to Mahāyāna theories, particularly its concept of *prajñā* (wisdom 般若).

Qualitative Fieldwork

This research recruited 35 Buddhist participants (refer to Table 1) with a variety of backgrounds (refer to Table 2) into four groups of stakeholders, including helping practitioners, Buddhist masters, volunteers, and beneficiaries, who cope with life challenges through Buddhist principles and help other people afterwards. The

⁷⁶Lin (1997, 147)

⁷⁷Wang (2009, 3)

⁷⁸Tu (2005, 125-130)

⁷⁹Mather (1968)

⁸⁰Demiéville (1962/1988)

⁸¹Shi (2002)

⁸²He (2000)

⁸³Wang (1992)

⁸⁴He (2009)

⁸⁵He (2005)

⁸⁶Lieu (2004)

⁸⁷Miller (1984)

⁸⁸Fuchs (2005)

⁸⁹Bellerin (2005)

⁹⁰McRae (2004)

⁹¹Watson (1997)

⁹²Cheng (2013)

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identity of “Buddhist” in this study is taken in a broad sense, for which ordination is not a prerequisite. Specifically, one participant classifies herself as a Buddhist, even though she has not been officially confirmed in a Buddhist ceremony.

Table 1: Groups of Participants. (Remarks: Those names marked with * are pseudonyms; the remainder are either real names or dharma name used with their consent.

Group of stakeholders (n=4)	Participant (n=35)
Helping practitioners (n=10; 28.6%)	Dr Chan (a professor) Dr Li (a psychiatrist) Hong (a teacher) HW* (a professor) Jackie (a social worker) JC* (a psychiatrist) Joe (a counsellor) KJ* (a psychiatrist) ML* (a counsellor), Polly (a clinical psychologist)
Buddhist masters (n=11; 31.4%)	Rinpoche K* Sister Harmony Venerable Chi Yiu Venerable Foo Chai Venerable Sander Venerable Sinh Nghiem Venerable Thong Hong Venerable Yu Chun VHT*, VHU*, VHY*
Volunteers (n=6; 17.1%) (n=6; 17.1%) (2 focus groups)	Tzu-Chi focus group: Betty, Ming Lai, Yim Na Palliative ward service group: Simon, Wai Hing, Wendy
Beneficiaries (n=8; 22.9%)	Amara, Che Wai, Chi Sim, Dun Li, Esther, Pema Kazhuo, Pu He, Pureté de Lotus

Table 2: Profiles of the 35 Participants

Category	Details	Frequency
Gender	Female	22 (62.9%)
	Male	13 (37.1%)
Age	18-30	3 (8.6%)
	31-45	25 (71.4%)

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Category	Details	Frequency
	46-60	5 (14.3%)
	>60	2 (5.7%)
Education	PhD	5 (14.3%)
	Post-graduate	12 (34.3%)
	University/College	10 (28.6%)
	Secondary school	7 (20%)
	Primary school	1 (2.8%)
Ethnicity	Non-Chinese	1 (2.8%)
	Hong Kong Chinese	28 (80%)
	Mainland Chinese	2 (5.8%)
	Malaysian Chinese	1 (2.8%)
	Singaporean Chinese	2 (5.8%)
	Taiwanese Chinese	1 (2.8%)
Language	Cantonese	32 (91.6%)
	English	1 (2.8%)
	Putonghua/Mandarin	1 (2.8%)
	Tibetan	1 (2.8%)

Data collection. The present project was approved by the Human Research Ethics Committee for Non-Clinical Faculties, The University of Hong Kong. Recruitment methods included social networks, referrals and snowball effects, cold calls, and electronic media (electronic mails and a facebook page). This study mainly conducted interviews in Hong Kong, with 41 individual sessions and two focus group sessions, covering 2,534 minutes in total, by means of face-to-face, long distance calls and written correspondence. Four sets of interview guiding questions were utilised for the different stakeholders, aimed at understanding their service experiences and how they manage their emotions when facing their clients’ afflictions. In addition, supplementary materials were gathered, such as artefacts, autobiographies and expressive art.

Data analysis. The interviews were audio-recorded and transcribed verbatim into Chinese. The unit of analysis was individual and interpretative phenomenological analysis, which specifically examines personal accounts of informants related to a given phenomenon,⁹³ was used for qualitative data analysis, assisted by ATLAS.ti 7 (refer to Figure 1). Transcriptions were read over and over before processing open coding, which was grouped into three “emergent themes”⁹⁴ – *bodhicitta* (enlightened mind 菩提心), *prajñā* (wisdom 般若) and *upāya* (skilful

⁹³McCormack, Joseph, and Hagger (2009, 111)

⁹⁴Smith, Flowers, and Larkin (2009, 91)

means 方便) – and finalised into one “super-ordinate theme”⁹⁵ (the bodhisattva spirit).

Academic rigour. In order to enhance trustworthiness, this study underwent different levels of triangulation. Member-checking ensured the transcription accuracy and appropriateness of data interpretation by discussion with the participants. Moreover, peer analysis was also adopted, for which the researcher and a co-analyst analysed the transcriptions separately. The researcher then compared the two coding sets and reviewed their similarities and differences, accomplishing an inter-rater reliability of 92%.

Analyses and Results

The lived experiences of the 35 participants add up to one super-ordinate theme (the bodhisattva spirit which is realised through self-benefiting altruism) that has been elaborated upon in the *Vimalakīrti Nirdeśa Sūtra*, and which is supported by three emergent themes, including *bodhicitta* (enlightened mind 菩提心), *prajñā* (wisdom 般若) and *upāya* (skilful means 方便).

Bodhicitta (Enlightened Mind 菩提心)

Bodhicitta (that is, *anuttarā-samyak-sambodhi*⁹⁶ in Sanskrit) refers to the highest wisdom that yields an “altruistic intention”,⁹⁷ a compassionate commitment to fulfil *bodhisattva-mārga* (bodhisattva path 菩薩道) which is rooted in untainted *karuṇā* (compassion 悲).

Compassionate commitment. Realising *bodhicitta* is the fundamental practice of Buddhists. This “original inspiration”⁹⁸ is the overarching pledge of Mahāyāna devotees who achieve it through serving sentient beings; it is hence also specified as the “aspiration for the Mahāyāna”,⁹⁹ a “commitment” as Polly (a clinical psychologist) called. This strong commitment is made because of the inherent

⁹⁵Smith, Flowers, and Larkin (2009, 107)

⁹⁶「阿耨多羅三藐三菩提心。」《佛國品第一》T14, no. 0475, p. 0538c29

⁹⁷Gyatso (2011, 103)

⁹⁸McRae (2004, 91); 「本心。」《弟子品第三》T14, no. 0475, p. 0540c28

⁹⁹McRae (2004, 90); 「大乘心。」《弟子品第三》T14, no. 0475, p. 0540c26

buddha-nature of all sentient beings,¹⁰⁰ an internal force, Yim Na (a volunteer) stated, a statement also supported by Rinpoche K*.

“All beings have the *buddha*-nature; therefore, all beings have the potential to become buddhas.”

Anyone who practises *bodhicitta* is a bodhisattva, an enlightened sentient being¹⁰¹ with an awakened mind,¹⁰² even someone who is an ordinary person,¹⁰³ as Esther (a beneficiary) understood:

“Bodhisattva: indeed, everyone is a bodhisattva. ... because [anyone] who is willing to help other people is a bodhisattva.”

Venerable Thong Hong endorsed this understanding, relating that

“Everyone can be a bodhisattva, regardless of good people or bad people.”

Sister Harmony (a Buddhist nun) supplemented this discourse:

“You know, after they (criminals) are released from prison, they know their direction in life so that they can contribute their energy, their time in order to make up for what they did wrong in the past, if possible. He or she then becomes a bodhisattva.”

Bodhicitta is “the will to benefit sentient beings”, Joe (a counsellor) affirmed, and this “benefit” refers to altruistic activities, in accordance with which Rinpoche K* explained:

“*Bodhicitta* is associated with a yearning for alleviating suffering of all beings and enabling them to pursue happiness, which is initiated by loving-kindness (*maitrī* 慈) and compassion (*karuṇā* 悲). It leads to fulfil the ultimate goal: becoming a *buddha*.”

Venerable Chi Yiu added the relationship between *bodhicitta* and *bodhisattva-mārga*¹⁰⁴ (bodhisattva path 菩薩道), explaining:

¹⁰⁰ Hsing-Yun (2007a, b)

¹⁰¹ Virtbauer (2010, 96); Yin-Shun (1980/1994, 170)

¹⁰² Yin-Shun (1949/2003, 201); Glaser (2005, 19)

¹⁰³ Conze (1953, 128); Leighton (1998, 1); Suzuki (1938/1981, 61)

¹⁰⁴ “The mind that aspires to *bodhi* is the place of practice, for it is without error or misconception.” (McRae 2004, 55) 「菩提心是道場。」《菩薩品第四》T14, no. 0475, p. 052c12

“*Bodhicitta* equates to the achievement of the *buddha* path and to being a help to sentient beings.¹⁰⁵ Activating *bodhicitta* navigates the bodhisattva path (*bodhisattva-mārga* 菩薩道).”

Untainted *karuṇā* (compassion 悲). *Bodhicitta* arises from *mahā-maitrī-mahā-karuṇā* (great loving-kindness and great compassion 大慈大悲) in the fullest way when a bodhisattva demonstrates parental love.¹⁰⁶ “When others suffer, I feel suffering. When others drown, I also feel [as though I am] drowning. Only when I count the affliction as my personal problem, can I help other people [with my whole] heart,” Venerable Chi Yiu said.

However, this sympathetic immersion will mar the missionary capability to serve sentient beings, if a bodhisattva becomes ill when s/he sympathises with the sickness of sentient beings¹⁰⁷ and is unable to manage this sympathy properly, resulting in sentimental compassion. Analogously, human service practitioners will suffer from compassion fatigue when they are overwhelmed by their emotional reactions to the afflictions of their clients. “This is a trap for counsellors, stunting their work when they fall into such affective compassion”, as Polly (a clinical psychologist) observed.

Sentimental compassion is impure compassion. In contrast, a bodhisattva has been liberated from defilements, so that her/his compassion is pure without taint.¹⁰⁸ This untainted compassion plays a dominant role in feeling the distress that sentient beings are suffering,¹⁰⁹ in heartily helping others without seeking re-

¹⁰⁵ 「上求佛道，下化眾生。」 (Yang 2009, 228)

¹⁰⁶ “It is like an elder whose only son becomes ill, and the parents become ill as well. If the son recovers from the illness, the parents also recover. Bodhisattvas are like this. They have affection for sentient beings as if for their own children.” (McRae 2004, 108) 「譬如長者，唯有一子，其子得病，父母亦病。若子病愈，父母亦愈。菩薩如是，於諸眾生，愛之若子。」《文殊師利問疾品第五》 T14, no. 0475, p. 0544b21-22

¹⁰⁷ “Since all sentient beings are ill, therefore I am ill.” (McRae 2004, 108) 「以一切眾生病，是故我病。」《文殊師利問疾品第五》 T14, no. 0475, p. 0544b20

¹⁰⁸ “Bodhisattvas eliminate the vexations of sensory data and generate compassion.” (McRae 2004, 112) 「菩薩斷除客塵煩惱而起大悲。」《文殊師利問疾品第五》 T14, no. 0475, p. 0545a26

¹⁰⁹ “They must take upon themselves the sufferings of all living beings.” (Watson 1997, 119) 「代一切眾生受諸苦惱。」《香積佛品第十》 T14, no. 0475, p. 0553a29-30

ward,¹¹⁰ in practising indiscrimination and impartiality,¹¹¹ and in serving people with no sentimental hindrances.¹¹²

Similarly, combating compassion fatigue becomes a crucial need for caregivers, for which Venerable Sander suggested, “You (a practitioner) have to stay with yourself and not get taken away with other people’s problems.” This shrinking away from over-involvement can be achieved by discerning the difference between genuine compassion and the “compassion devil” (悲魔), which is the “defilement of compassion that cannot develop authentic compassion,” HW* (a professor) affirmed. She continued,

“I can empathically feel his predicament, but I won’t fall into it. ... I don’t necessarily tumble into such a predicament because if I do, how I can help [the client]. I am totally unable to help. ... [I] keep [my] distance [from such disturbances]. ... and don’t wholly dash ahead regardless of my safety.”

Hong (a teacher) shared his personal experience in peacefully viewing the actual needs of service recipients.

“When you put this thing in your mind purely without tarnish, you’ll easily help them from a clear viewpoint, understanding their needs. ... You’ll manage it easily. You won’t be attached [to their afflictions], ... [They] won’t tie you up. ... If you [try to] help them through sentimental compassion, ... you will help them superficially. Therefore, we don’t merely initiate from feelings, but from wisdom, identifying it wisely. Indeed, [find] what they want, then do it. ... then give them appropriate things, don’t give them what you think is good [for them], but give them what is really adequate for them.”

Untainted compassion not only leads practitioners to discern the actual needs of service recipients, but also reveals that altruism is a *bodhisattva-mārga* (the

¹¹⁰“They benefit sentient beings without seeking recompense.” (Watson 1997, 155) 「饒益眾生，而不望報。」《香積佛品第十》T14, no. 0475, p. 0553a29

¹¹¹“One exercises great compassion in equal measures without seeking reward or recompense.” (Watson 1997, 63) 「無所分別，等於大悲，不求果報。」《菩薩品第四》T14, no. 0475, p. 0544a06

¹¹²“Equanimity is the place of enlightenment, because of the eradication of repugnance and affection.” (McRae 2004, 100) 「捨是道場，憎愛斷故。」《菩薩品第四》T14, no. 0475, p. 0542c14-15; Huang (2013, 13-15)

bodhisattva path 菩薩道) practice. HW* (a professor) gained an insight into mind training and self reflection when activating compassion, illustrating it in this way:

“It (facing others’ distress) is a chance to train [our] mind. By such an opportunity, [you] train [your] mind. ... During this [therapeutic] process, [it] is also a chance to make a commitment. You also activate your compassionate mind through this chance. Therefore, you’re experiencing suffering [of the recipient]. ... In that adventure, you are also in self healing, or self repenting. Or you face yourself. ... We (a practitioner and a recipient) are two persons, but we have the same experience, then at that time we’re experiencing the same feeling. However, I unnecessarily fall [into that feeling].”

Through such mind training, helping professionals can achieve self development for themselves and their clients, Venerable Sinh Nghiem came through this beneficial experience, depicting it by saying:

“[Compassion] gives me energy to help people in actually being in contact with people and understanding their suffering. ... I listen deeply to the suffering. Understanding their suffering gives me a lot of motivation to practise on myself, to be stronger, and to be able to support them when they need it. So that is the energy.”

Moreover, practising compassion is conducive to a deeper self-understanding and a conquest of fragility, as witnessed by Wendy (a volunteer):

“[Serving other people] indeed inspires me, inspires me to let go of attachment. This is a big bombardment for me. I’m so lucky that I can convert this bombardment into [something] positive. ... In this process, I learn to review myself. I empty all [of my thought]. [I understand that I] do not necessarily grasp a set of die-hard issues.”

Pema Kazhuo (a beneficiary) enriched this idea when she provided volunteer service:

“I think Heaven gives me such a chance, lets me try it, experience it, know it, and widen my views, not always feeling my own miseries. ... While other people are living happily, I always fall into negative

emotions. [I] tackle this attachment, letting me better understand this world. ... In fact, this is an issue of mentality. I think heaven gives me such a chance to try it.”

***Bodhisattva-mārga* (bodhisattva path 菩薩道).** *Bodhisattva-mārga* is the practice of a bodhisattva, referring to anyone who is committed to serving other people.¹¹³ However, “to be without the attachment of affection”¹¹⁴ is a challenge to someone who gets involved in the afflictions of the people they serve. The *Sūtra*¹¹⁵ emphasises *prajñā* (wisdom 般若) and *upāya* (skilful means 方便) to fortify service providers’ capabilities against negative emotions. Whereas *prajñā* focuses on cognitive strength, *upāya* is centred around praxis.

***Prajñā* (Wisdom 般若)**

Mahāyāna wisdom refers to the ability to understand the truth of reality which involves *anitya* (impermanence 無常), *śūnyatā* (voidness 空性), *anātman* (non-self 無我) and *duḥkha*¹¹⁶ (suffering 苦); among which the first three collectively represent *pratitya-samutpāda* (the law of dependent origination 緣起法).

Nature of reality. Existence is formed through an assembly of conditions, including *hetu* (cause 因) and *saha-kāri-pratyaya* (contributing causes 助緣), resulting in the phenomenal world,¹¹⁷ which changes when conditions change. Therefore, it has no fixed form¹¹⁸ and constantly alters, which is also called *anitya*¹¹⁹ (impermanence 無常). Impermanence manifests the nature of condi-

¹¹³ Cheng (2014b)

¹¹⁴ McRae (2004, 114); 「不愛著。」《文殊師利問疾品第五》T14, no. 0475, p. 0545b27

¹¹⁵ 「智度菩薩母，方便以為父。」《佛道品第八》T14, no. 0475, p. 0549b30

¹¹⁶ “And he should view the body and realise that it is marked by impermanence, suffering, emptiness, and absence of ego. This is called wisdom.” (Watson 1997, 71) 「又復觀身無常、苦、空、非我，是名為慧。」《文殊師利問疾品第五》T14, no. 0475, p. 0545a33-34

¹¹⁷ “All things in the phenomenal world are just such phantoms and conjure beings.” (Watson 1997, 43) 「一切諸法，如幻化相。」《弟子品第三》T14, no. 0475, p. 0540b28

¹¹⁸ “Phantoms have no fixed forms.” (Watson 1997, 90) 「幻無定相。」《觀眾生品第七》T14, no. 0475, p. 0548b25

¹¹⁹ “Conditioned dharmas were all entirely impermanent.” (McRae 2004, 79) 「知有為法皆悉無常。」《佛國品第一》T14, no. 0475, p. 0538c30

tioned beings,¹²⁰ that is, *śūnyatā* (voidness 空性) grounded on the principle of non-abiding.¹²¹

In short, *pratītya-samutpāda* (the law of dependent origination 緣起法) signifies the importance of sufficient conditions and causality, including the capability of service providers, as spelled out by HW* (a professor).

“When we don’t have sufficient karmic reward (福報), we’re unable to help other people. ... When we don’t have sufficient conditions or resources, we’re unable to help.”

Jackie (a social worker) supplemented this by elaborating upon it:

“It’s true that the service recipient has a lack of mature conditions [to be saved]. ... This doesn’t matter for a bodhisattva, who is preparing to help anyone who is willing to be helped. If you (recipient) don’t want to be saved, I save others first until you are willing. ... When I have such thoughts, I can release stress and feel hopes. I can wait.”

Likewise, sentient beings carry the characteristics of phenomenal existence as related to physical and psychological aspects. A body cannot stop degenerating, like a drifting cloud,¹²² while the mind mutates with various ideas.¹²³ Sentient beings *per se* are thus *anātman* (without self 無我), powerlessly aging without an ever-lasting form, metaphorically people created by a conjuror.¹²⁴

Duḥkha (suffering 苦). Suffering is inevitable¹²⁵ and is metaphorically referred to as “sickness”¹²⁶ in the *Sūtra*, which elucidates the causes of distress. Negli-

¹²⁰“Form is emptiness – it is not that form extinguishes emptiness but that the nature of form is of itself empty.” (McRae 2004, 145) 「色即是空，非色滅空，色性自空。」《不二法門第九》T14, no. 0475, p. 0551a19

¹²¹“the non-abiding is its fundamental basis.” (McRae 2004, 127) 「無住為本。」《觀眾生品第七》T14, no. 0475, p. 0547c20

¹²²“This body is like a drifting cloud, changing and vanishing in an instant.” (Watson 1997, 35) 「是身如浮雲，須臾變滅。」《方便品第二》T14, no. 0475, p. 0539b14

¹²³“The mind is like a phantasm.” (McRae 2004, 109) 「心如幻故。」《文殊師利問疾品第五》T14, no. 0475, p. 0544c12

¹²⁴McRae (2004, 123); 「幻人。」《觀眾生品第七》T14, no. 0475, p. 0547b01

¹²⁵Yalom (1980, 9); Cheng (2011, 153)

¹²⁶“Alternatively suffering and vexatious, it accumulates a host of illnesses.” (McRae 2004, 83) 「為苦、為惱，眾病所集。」《方便品第二》T14, no. 0475, p. 0539b12

gence of phenomenal reality and a misperception of eternity produce *avidyā*¹²⁷ (ignorance 無明), referring to the disregarding of *pratītya-samutpāda* (the law of dependent origination) (緣起法). This ignorance guides false comprehension connected to self, impermanence and happiness, which creates *viparyāsa*¹²⁸ (confusion 顛倒). Such misapprehension fuels *ālambana*¹²⁹ (entanglement 攀緣) to be infatuated by external factors through sensory information, including colour, sound, smell, taste and touch, yielding *abhūta-parikalpa*¹³⁰ (false dichotomy 虛妄分別) causing the viewer to distinguish between “I” and “you”, “good” and “bad”, and so forth. This discrimination reflects *rāga*¹³¹ (greed 貪) and *ātma-grāha*¹³² (self-attachment 我執) so as to retain the perpetuity of body and longevity.¹³³ However, the very truth negates this figment of illusion, which then generates afflictions in those who are ignorant of reality, as experienced by Wendy (a volunteer); “Life is impermanent. The more you attach, the more [you] won’t let go, [and] the more you suffer.”

Karma (action 業). Equally, unceasing karma¹³⁴ determines one’s present life,¹³⁵ which is affected by the behaviour, speech and intentions of past lives.¹³⁶ Rin-

¹²⁷“This illness of mine is born of ignorance and feelings of attachment.” (Watson 1997, 65) 「從癡有愛，則我病生。」《文殊師利問疾品第五》T14, no. 0475, p. 0544b20

¹²⁸“This present illness of mine comes entirely from the false concepts, confusions, and afflictions of previous lives.” (McRae 2004, 110) 「今我此病，皆從前世妄想顛倒諸煩惱生。」《文殊師利問疾品第五》T14, no. 0475, p. 0544c27

¹²⁹“Where there are troublesome entanglements, these become the source of illness.” (Watson 1997, 69) 「從有攀緣，則為病本。」《文殊師利問疾品第五》T14, no. 0475, p. 0545a16

¹³⁰“False discrimination is its fundamental basis.” (McRae 2004, 126) 「虛妄分別為本。」《觀眾生品第七》T14, no. 0475, p. 0547c18

¹³¹“Desire and greed are the root.” (Watson 1997, 86) 「欲貪為本。」《觀眾生品第七》T14, no. 0475, p. 0547c17

¹³²“The body also has no self. Furthermore, the arising of this illness is entirely due to attachment of self.” (McRae 2004, 110) 「身亦無我；又此病起，皆由著我。」《文殊師利問疾品第五》T14, no. 0475, p. 0544c28

¹³³“The illnesses of sentient beings arise from the four elements (earth, water, fire and wind).” (McRae 2004, 109) 「而眾生生病，從四大起。」《文殊師利問疾品第五》T14, no. 0475, p. 0544c19

¹³⁴“Yet good and bad karma never cease to function.” (Watson 1997, 22) 「善惡之業亦不亡。」《佛國品第一》T14, no. 0475, p. 0537b38

¹³⁵「是身如影，從業緣現。」《方便品第二》T14, no. 0475, p. 0539b13-14

¹³⁶“These are misdeeds of the body, these are the retribution for misdeeds of the body. These are misdeeds of the mouth, these are the retribution for misdeeds of the mouth. These are misdeeds of the mind these are the retribution for misdeeds of the mind.” (Watson 1997, 117) 「是身邪行，

poche K* explained, “Our physical and mental illnesses are incurred by karma in past lives. ... The results show in this life.” Suffering is thus the consequence of our own deeds. Venerable Chi Yiu then urged, “We cannot complain about it, but are responsible for what we have done.”

The concept of karma indeed points to self responsibility while responsibility serves as motivation,¹³⁷ which in turn guides virtue and prevents transgression. Therefore, no one should bear the karmic distress of other people even when *karuṇā* (compassion 悲) has naturally arisen. HW* (a professor) calmly explained, “I (as a helping practitioner) can’t take on his (a client) defilements.”

Upāya (Skilful Means 方便)

Upāya, coping with unfavourable working experience, comprises the skills and quality of practitioners who handle adversity.

Flexibility. Competent professionals are able to identify clients’ individual intelligence¹³⁸ and needs¹³⁹ in order to provide appropriate services, and are also capable to skilfully apply diverse methods to different types of recipients.¹⁴⁰ They are adept in long-term deliberation, as shown by Jackie (a social worker):

“When his (a client) condition is immature, I tune down my expectation in order to pave a better road for the future. To pave the road is to build a more solid relationship with him. If he needs help, he will contact me. ... I will also build a relationship with his family.”

Caring veterans are far-sighted, knowledgeable and versatile in working with clients and understanding themselves well, which averts self blame and over-involvement in clients’ predicaments, while also increasing self confidence in dealing with frustration. This confidence bolsters them to attain an ordinary mind for serving others indiscriminately.

是身邪行報；是口邪行，是口邪行報；是意邪行，是意邪行報」《香積佛品第十》T14, no. 0475, p. 0552c27

¹³⁷Pritchard and Eliot (2012, 202)

¹³⁸“to discriminate the sharp and dull faculties of all sentient beings” (McRae 2004, 114) 「而分別眾生諸根利鈍。」《文殊師利問疾品第五》T14, no. 0475, p. 0545b32

¹³⁹“depending upon what is appropriate to the circumstances” (Watson 1997, 126) 「隨其所應。」《菩薩行品第十一》T14, no. 0475, p. 0554a29

¹⁴⁰“employ all manner of expedient means” (Watson 1997, 27-28) 「於一切法方便無礙眾生來生其國。」《佛國品第一》T14, no. 0475, p. 0538a35

Upekṣā (equanimity 捨). Caring veterans buttress the “I-Thou relation”,¹⁴¹ that is, they remove the demarcation between “I” and “you”. Mahāyāna followers go beyond the “I-thou” and accomplish *upekṣā* (equanimity 捨), resulting in egalitarianism,¹⁴² “wise impartiality”,¹⁴³ indiscrimination and non-judgement, as VHY* (a Buddhist nun) said, “*Upekṣā* means no discrimination and equal treatment to all sentient beings.”

Through *upekṣā* (equanimity 捨), practitioners are able to listen to clients sincerely, carefully and unconditionally, from which they can also see their inward worlds and be congruent.¹⁴⁴ Therefore, both practitioners and clients benefit from such congruence,¹⁴⁵ as elaborated on by the experience of Venerable Sinh Nghiem:

“When I’m able to look deeply at my own difficulties, I feel that the process of me helping myself is the same process as helping other people. So as I nourish myself, I nourish other people as well. Going together, I help myself and I help other people. In that way I find that I don’t have compassion fatigue. I don’t suffer from fatigue because I learn to give myself compassion. And in that same process, I give other people compassion too. It is amazing. There is no separation between me and others.”

Self-equipped. Caregiving consumes energy and obliterates physical and psychological satisfaction, which drives service providers to prepare sufficiently for coping with such deterioration,¹⁴⁶ reflecting the fact that practitioners are able to look after other people only when they can take care of themselves,¹⁴⁷ including their physical, mental and spiritual health.¹⁴⁸ Thus, caregivers equip themselves

¹⁴¹ Buber (1923/1937, ix)

¹⁴² “In mind they must be like other living beings, humbling themselves, descending to their level, erecting no barriers.” (Watson 1997, 119) 「等心眾生，謙下無礙。」《香積佛品第十》T14, no. 0475, p. 053a30

¹⁴³ Manne-Lewis (1986, 137)

¹⁴⁴ Rogers (1957)

¹⁴⁵ Rogers (1967)

¹⁴⁶ “It is impossible for someone with bonds to emancipate others from their bonds. It is only possible for someone without bonds to emancipate others from their bonds.” (McRae 2004, 112) 「若自有縛，能解彼縛，無有是處！若自無縛，能解彼縛，斯有是處。」《文殊師利問疾品第五》T14, no. 0475, p. 0545a27-28

¹⁴⁷ Worley (2005)

¹⁴⁸ Braccia (1995); Stewart (2009)

with sturdy qualities in order to serve clients over the long run. VHT* (a Buddhist monk) emphasised that:

“A new bodhisattva should be well-equipped. If you don’t have ability, you have difficulty in saving sentient beings. ... Before helping others, you have to acquire good preparation and train yourself first. ... Such as a secular bodhisattva must cure her/his sickness [first] and then help others.”

Self-awareness. Self-awareness for helping practitioners¹⁴⁹ is critical for creating a psychological balance in their prolonged exposure to the sorrowfulness of clients, including sensitivity to emotional health¹⁵⁰ and the risks of compassion fatigue.¹⁵¹ Polly (a clinical psychologist) reiterated:

“... synchronise ... On the one hand, you are compassionate. On the other hand, you intensively think about how to help your client. This works by simultaneously [acting as] a balance. ... Meanwhile, you observe yourself and assess your feelings. ... A good counsellor is compassionate, showing sympathy, and is trying her/his best to help clients.”

Self-awareness is also knowing the accountabilities of practitioners themselves and the limits of their work.¹⁵² Recognising one’s own limitations is crucial¹⁵³ for altruism, Venerable Sinh Nghiem repeated, “Yes, [we must] know about ourselves, know about our limitations.” “You know, if we work past our limit, we don’t have much to offer. And it is very important that we prioritise what we should do,” Sister Harmony (a Buddhist nun) emphasised.

Self-acceptance leads to clearer perception of one’s own strengths, weaknesses and limitations. It augments self-awareness of feelings and changes in feelings, and promotes living in the present moment. It is a deeper self-caring.

¹⁴⁹Bloniasz (2011)

¹⁵⁰Joinson (1992, 119)

¹⁵¹Injeyan et al. (2011, 535)

¹⁵²Sexton (1999, 399-400)

¹⁵³Gilmore (2012)

Self compassion. By accepting that they have their own limits, practitioners learn how to look after themselves and to recharge their own resources,¹⁵⁴ as stated by Venerable Sinh Nghiem.

“If we don’t recharge our spirit and our ideals, like our desire to help, we don’t know how to nourish ourselves with goodness, joy, happiness, and peace; and then day after day, as we are exposed to people’s problems, we will feel awful. So, you have to learn how to protect yourself. You have to learn to take your care of the mind of love, or the desire to help other people. Of course helping other people is good, but you can only do so much in a day. Sometimes you are limited by circumstances, the systems in society. It also depends on the person you’re trying to help. Also, your ideas about how to help may get in the way of actually being helpful. You want to help him in this way, but another person may think it’s not so helpful. The way you help might not be perceived as helpful because they have their own experience. Wanting to help and actually helping can be quite different. Whether you’re skilful enough, whether you are mindful enough, whether you understand enough of the situation or just think you understand. ... It’s very different.”

Sister Harmony (a Buddhist nun) then added:

“Many of us really want to help, but we may become exhausted and give up. I know people who come for a retreat who don’t know how to recharge themselves. They don’t know how to find the joy to do things; they work for many years consecutively without rest, without a break, without anything to sustain them. Then the friction, the conflict arises. Working with others, there is no way to be reconciled, and they feel that it is not nourishing, so they abandon their career. This is a waste, for us, for the people. So we have to learn how to find the joy of doing these things. You know if you spend hours in counselling work, you have to give yourself at least two hours to do something to nurture yourself. Without [those regular] two [free] hours, I don’t think you can go more than ten years.”

A competent practitioner is willing to ask for help when s/he detects negative emotions. HW* (a professor) said:

¹⁵⁴Gilmore (2012)

“If I feel that if I’m too involved, it may reflect that the client’s defilement corresponds with mine. Then I have to ask [for help]. ... [I will visit] my counsellor or my senior to talk about this problem.”

Venerable Sinh Nghiem described various ways in which she takes care of herself in order to help others.

“I live in a monastery presently, [but] that doesn’t mean that all my difficulties and problems are finished. I encounter conflicts and tensions because of my own ideas or expectations of other people, and my own habits and energies. And so, when I’m able to reflect on myself, transform my difficulties, I’m more able to save energy and space, and have more confidence in the practice of mindfulness. This motivates me to share with other people. This is a very practical and non-religious way to deal with our difficulties and our basic human relationships with each other in everyday life. So, if I’m able to work through my own difficulties, it gives me a lot of confidence in my practice, and gives energy to continue my daily life, to continue my daily practice, and to help other people.”

Bodhisattva Spirit: Self-Benefiting Altruism

Many studies warn that caring practitioners suffer from physical, mental, spiritual and social symptoms¹⁵⁵ when they are “enveloping sadness”.¹⁵⁶ This sadness is yielded by over-exposure to vulnerable clients, and saps individual well-being and deteriorates a healthy workforce. Furthermore, the interaction among the cared for, caregiver and caring professionals affects one another mutually,¹⁵⁷ creating a complicated set of consequences leading to compassion fatigue.¹⁵⁸ Policy makers of health management, therefore, should keep an alert eye to “help the helpers”¹⁵⁹ in order to retain their “professional well-being”.¹⁶⁰

¹⁵⁵Lynch and Lobo (2012)

¹⁵⁶Perry, Dalton, and Edwards (2010, 29)

¹⁵⁷Keidel (2002)

¹⁵⁸Salston and Figley (2003, 169)

¹⁵⁹Inbar and Ganor (2003a, 109)

¹⁶⁰Yildirim (2014, 153); Butt (2002, 17); Zeidner (2014, 91); Gardner and O’Driscoll (2007, 245); Rama-Maceiras and Kranke (2013; 213)

A considerable amount of research reports that self-caring¹⁶¹ and self-reflection¹⁶² contributes to rejuvenating collapsed compassion, enabling human service professionals to be capable of self-soothing,¹⁶³ and desensitising traumatic stressors.¹⁶⁴ Prevalent self-care programmes¹⁶⁵ reinforce the work-life balance,¹⁶⁶ peer support¹⁶⁷ and strong social networks.¹⁶⁸ Self-caring activities involve leisure time and relaxation,¹⁶⁹ sleep, physical exercise,¹⁷⁰ nutrition and a healthy diet,¹⁷¹ and meditation.¹⁷² This series of interventions not only improves psychological health, but also encourages humour¹⁷³ and gratitude,¹⁷⁴ which strengthens those whose personality characterises external locus of control and low optimism.¹⁷⁵ As a result, helping practitioners are able to renew hope, and become stronger and more compassionate.¹⁷⁶

Although these self care programmes cover individual, professional, cognitive-behavioural and social dimensions,¹⁷⁷ Kraus¹⁷⁸ doubts their effectiveness in ameliorating compassion fatigue, probably due to their tendency to focus on skills geared to acquiring immediate outcomes. The findings of the present research reveal a holistic perspective on how to manage compassion fatigue, as elaborated on earlier, finalising the bodhisattva spirit that consummates “self-benefiting altruism”¹⁷⁹ (refer to Figure 2).

¹⁶¹Negash and Sahin (2011); Smith (2007); Bride and Figley (2007); Brückner (2012)

¹⁶²Walton and Alvarez (2010, 400)

¹⁶³Figley (2002, 1440)

¹⁶⁴Figley (2002, 1438)

¹⁶⁵Wentzel and Brysiewicz (2014, 96); Lambert and Lawson (2013, 266)

¹⁶⁶Tehrani (2007, 337); Boyle (2011, 5); Wentzel and Brysiewicz (2014, 96)

¹⁶⁷Uren and Graham (2013, 10); Rossetti and Rhoades (2013, 335); Lee and Akhtar (2007, 80)

¹⁶⁸Siu, Yuen, and Cheung (2012, 191)

¹⁶⁹Inbar and Ganor (2003b, 110)

¹⁷⁰Kapoulitsas and Corcoran (2014, 11); Bush (2009, 27)

¹⁷¹Keidel (2002)

¹⁷²Thompson, Amatez, and Thompson (2014, 96); Wentzel and Brysiewicz (2014, 70); Stebnicki (2008, 89-174); Thomas and Otis (2010, 86)

¹⁷³Collins and Long (2003a, 24); Inbar and Ganor (2003a, 110); Wentzel and Brysiewicz (2014, 96)

¹⁷⁴Chan (2010, 176)

¹⁷⁵Injeyan et al. (2011, 533)

¹⁷⁶Worley (2005)

¹⁷⁷Inbar and Ganor (2003a, 110-111)

¹⁷⁸Kraus (2005, 86)

¹⁷⁹Cheng (2014b, 141)

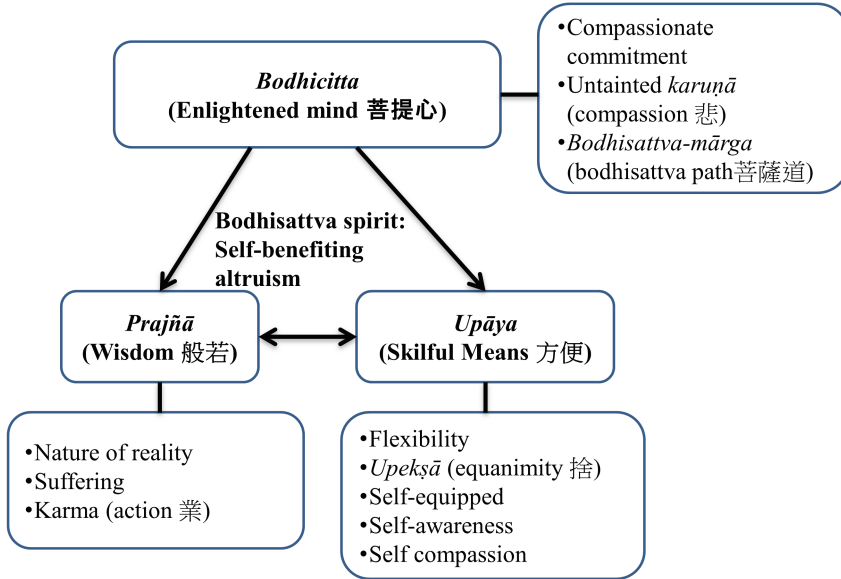


Figure 2: Bodhisattva Spirit Tackling Compassion Fatigue

Compassion fatigue is engendered by sentimental compassion towards the tribulation endured by other people, and is yielded by *avidyā* (ignorance 無明). Mahāyāna heightens *prajñā* (wisdom 般若), through which sentient beings can understand reality,¹⁸⁰ the causes of suffering, karmic causality, and apply untainted *karuṇā* (compassion 悲). Equally significant, *karuṇā* starts from self-kindness¹⁸¹ and self-compassion,¹⁸² prior to being able to unconditionally¹⁸³ and compassionately care for others.¹⁸⁴

When the praxis of untainted *karuṇā* (compassion 悲) couples with *prajñā* (wisdom 般若), it also requires a synthesis of *prajñā* and *upāya*¹⁸⁵ (skilful means 方便) that involves not only competence of service but more importantly personal qualities, including self-appreciation, self-cherishing, self-awareness, self-

¹⁸⁰Williams (1998, 29); Kaklauskas and Olson (2008)

¹⁸¹Wright (2004, 3)

¹⁸²Bush (2009, 26)

¹⁸³Hoyt (2014, 25)

¹⁸⁴Baumrucker (2002, 155)

¹⁸⁵Cheng (2014b, 131)

forgiveness and hope.¹⁸⁶ This blend of these three components (*karuṇā*, *prajñā* and *upāya*) enables practitioners to set an empathic boundary between themselves and recipients:¹⁸⁷ “caring distancing”¹⁸⁸ These qualities are rooted in the internal force of *bodhicitta* (enlightened mind 菩提心).

However, this distance does not dissociate caregivers from recipients but helps them perceive the essence of sentient beings and the nature of *duḥkha* (suffering 苦) more clearly. The inborn *bodhicitta* (enlightened mind 菩提心) substantiates the maintenance of distance when compassionately serving others and attaining inner peace¹⁸⁹ against distress. This compassionate commitment of serving other people marks the cornerstone of *bodhisattva-mārga* (the bodhisattva path 菩薩道), in which a bodhisattva is able to realise the sacred mission.

This model of using the bodhisattva spirit to overcome compassion fatigue focuses on the dynamics of the *prajñā* (wisdom 般若), *upāya* (skilful means 方便) and *bodhicitta* (enlightened mind 菩提心), forming a comprehensive assembly of professional strategies.¹⁹⁰ Germinated from untainted *karuṇā* (compassion 悲), these essentials are composed of intention, cognition and intelligence, and implementation. Referring to such aspects, helping professionals may be inspired through thought transformation regarding the fact that practitioners are not omnipotent. They are thus humble agents, rather than being a saviour, to offer compassionate service. They also enhance personal development through altruistic activities in *bodhisattva-mārga* (the bodhisattva path 菩薩道), recognising that service recipients are indeed bodhisattvas to the caregivers. Such mutual influence between both parties forms the bodhisattva-bodhisattva interplay,¹⁹¹ thereby attaining self-benefiting altruism.

Self-benefiting altruism fundamentally differs from other available theories on altruism, such as “self-serving altruism”,¹⁹² “reciprocal altruism”¹⁹³ and “enlightened self-interested”¹⁹⁴ altruism. It represents a selfless, unconditional, indiscriminate, altruistic vow with unreserved sacrifice, a consonance of “perfect

¹⁸⁶ Bush (2009, 27)

¹⁸⁷ Boyle (2011, 6)

¹⁸⁸ Inbar and Ganor (2003a, 111)

¹⁸⁹ Rossetti and Rhoades (2013, 335)

¹⁹⁰ Huggard (2003, 164)

¹⁹¹ Cheng (2014c)

¹⁹² Gino, Ayal, and Ariely (2013, 285)

¹⁹³ Landry (2006, 957)

¹⁹⁴ Lenart (2010, 26)

altruism”.¹⁹⁵ Although self benefit gains from altruism, it is not the goal of altruistic behaviour. Rather, both active self-benefit, which sharpens the competitive edge of caregivers, and passive self-benefit, which received from altruistic activities fulfils altruism, aim to enrich altruism.

Self-benefiting altruism works only when *catvāri apramāṇāni* (the four immeasurables 四無量心), including *maitrī* (loving-kindness 慈), *karuṇā* (compassion 悲), *muditā* (empathetic joy 喜) and *upekṣā* (equanimity 捨), interact together.¹⁹⁶ When *karuṇā* does not work well, it will affect other elements as well as the unity of the whole, implying a problem in that compassion fatigue inversely impacts self-benefiting altruism. However, *karuṇā* can be substantiated by the other three elements, which illustrates the wholeness of *catvāri apramāṇāni* that realises self-benefiting altruism.

Implications

The Vimalakīrti teachings, as supported by the interview data, construct a model of the bodhisattva spirit to overcome compassion fatigue, suggesting theoretical, practical and methodological considerations.

Theoretical Implications

The concept of self-benefiting altruism for conquering compassion fatigue explicates the interaction among intention, intelligence and behaviour, with the inception of self loving-kindness and self compassion. This self-caring is grounded on the aspiration of altruism, bringing inner happiness through serving other people. This inspires discussion on how the available theories of altruism can escalate into a higher level of pursuing well-being. This concept also offers philosophical underpinning to scholars who investigate helping behaviour and compassion fatigue.

Furthermore, the totality of *catvāri apramāṇāni* (the four immeasurables 四無量心) optimises the power of these individual constituents,¹⁹⁷ in contrast to those who focus on their separable functions.¹⁹⁸ This principle also unveils the cultural differences related to *muditā* (empathetic joy 喜) and *upekṣā* (equanimity

¹⁹⁵ Williams (1998, 29)

¹⁹⁶ Cheng (2014b, 144)

¹⁹⁷ Cheng (2014a, 221)

¹⁹⁸ Wallace (2010)

捨) in Western theories.¹⁹⁹ Studying this probably makes research on compassion fatigue and caregiver resilience more constructive.

Practical Implications

The present work particularly discusses the compassion fatigue experienced by beginners in the caring service field, showing the need to review the training curricula. Such a review may pay attention to the concept of untainted compassion, which helps novices engage compassionate performance and avoid over-devotion to their clients’ predicaments, attaining greater resilience and elasticity.

This model also proposes that clients’ taking part in altruistic activities as a part of rehabilitation and intervention can improve their self-esteem and self confidence, resulting from their shift from being victims to being service providers. This shift may mitigate their distress, while increasing their self appreciation.

This model comprises the philosophy of the bodhisattva spirit and *catvāri apramāṇāni* (the four immeasurables 四無量心) on a theoretical level. Further studies are encouraged in order to develop the theory into practice, formulating therapeutic interventions for human service practitioners for both preventive and curative purposes.

Methodological Implication

This study combines qualitative interviews with references to a classical Buddhist text. It synthesises the research traditions of textual studies and ethnography. As a result, it broadens the horizon of both disciplines in the sense of thematic exploration and methodological sophistication.

Limitations

Despite these implications for relevant studies, the present study pays little attention to the effects of institutional factors and a heavy workload on compassion fatigue. This inclination leaves room for future research directions. Also, if it had captured the voices of family caregivers, service recipients and non-Buddhists, it would have presented a richer data set and analysis, from which interventions for non-Buddhists also involve.

¹⁹⁹Kraus and Sears (2009)

Conclusion

Compassion fatigue attenuates the compassion satisfaction and work performance of caring practitioners. The current project conceptualises a model of the bodhisattva spirit through self-benefiting altruism in order to deal with and prevent this problem. With an emphasis on *bodhicitta*, which is activated by untainted *karuṇā* (compassion 悲), it boosts the synchronisation of *prajñā* (wisdom 般若) and *upāya* (skilful means 方便) within the *bodhisattva-mārga* (bodhisattva path 菩薩道). This brings a critical insight: that helping professionals may do well to increase awareness of their emotional reactions towards clients’ afflictions and thus avoid affective exhaustion.

This research applies classical Buddhist philosophy to overcoming the compassion fatigue suffered by caregivers in modern society. Combining qualitative research through interviews with references to the *Vimalakīrti Nirdeśa Sūtra*, it presents the cogency of Buddhist reasoning. It shows the practicality of the bodhisattva spirit across centuries, and differentiates between the concepts of altruism in Eastern and Western cultures. This attempt may indicate the usefulness of Mahāyāna teachings in coping with life’s difficulties, such as this professional challenge.

References

Buddhist canons

This manuscript adopted *Tripitaka* 大藏經 based on the electronic version of Chinese Buddhist Electronic Text Association (CBETA 中華電子佛典協會), Taipei, 2011.

鳩摩羅什譯《維摩詰所說經》三卷，大正藏經，臺灣：中華電子佛典協會，大正藏漢文電子佛典（2011年版）T14, No.475, p.0537a07-0557b19

法護等譯《佛說大乘菩薩藏正法經》，大正藏經，臺灣：中華電子佛典協會，大正藏漢文電子佛典（2011年版）T11, no. 0316, p. 0877a25-28

Secondary sources

- Adam, Richard E., Joseph A. Boscarino, and Charles R. Figley. 2006. "Compassion fatigue and psychological distress among social workers: A validation study." *American Journal of Orthopsychiatry* no. 76 (1):103-108.
- Arvay, Marla J. 2001. "Secondary traumatic stress among trauma counsellors: What does the research say? ." *International Journal for the Advancement of Counselling* no. 23:283-293.
- Baird, Katie, and Amanda C. Krachen. 2006. "Vicarious traumatization and secondary traumatic stress: A research synthesis." *Counselling Psychology Quarterly* no. 19 (2): 181-188. DOI: 10.1080/09515070600811899.
- Baird, Stephanie, and Sharon Rae Jenkins. 2003. "Vicarious traumatization, secondary traumatic stress, and burnout in sexual assault and domestic violence agency staff." *Violence and Victims* no. 18 (1):71-86.
- Barker, Phil, and Poppy Buchanan-Barker. 2004. "More than feeling." *Nursing Standard* no. 19 (11):18-19.
- Baumrucker, Steven J. 2002. "Palliative care, burnout, and the pursuit of happiness." *American Journal of Hospice and Palliative Care* no. 19 (3):154-156. DOI: 10.1177/104990910201900303.
- Bearse, Jennifer L., Mark R. McMinn, Winston Seegobin, and Kurt Free. 2013. "Barriers to psychologists seeking mental health care." *Professional Psychology: Research and Practice* no. 44 (3):150-157. DOI: 10.1037/a0031182.
- Bellerin, Laureano Ramirez. 2005. *Sūtra de Vimalakīrti*. Spain: Kairos.
- Berzoff, Joan, and Elizabeth Kita. 2010. "Compassion fatigue and countertransference: Two different concepts." *Clinical Social Work Journal* no. 38:341-349. DOI: 10.1007/s10615-010-0271-8.
- Bloniasz, Elaine R. 2011. "Caring for the Caretaker: A nursing process approach." *Creative Nursing* no. 17 (1):12-15. DOI: 10.1891/1078-4535.17.1.12.
- Boyle, Deborah A. 2011. "Countering compassion fatigue: A requisite nursing agenda." *The Online Journal of Issues in Nursing* no. 16 (1):Manuscript 2, 1-14. DOI: 10.3912/OJIN.Vol16No01man02.
- Bozgeyikli, Hasan. 2012. "Self efficacy as a predictor of compassion satisfaction, burnout, compassion fatigue: A study on psychological counsellors." *African Journal of Business Management* no. 6 (2):646-651. DOI: 10.5897/AJBM11.2167.
- Brückner, Margrit. 2012. "Understanding professional care from the viewpoint of care Receivers and care givers – The necessity of a special care rationality." *Social Work and Society* no. 10 (2):1-10.

- Braccia, Deborah. 1995. "Follow these tips to avoid burnout from chronic grief and compassion fatigue." *Oncology Nursing Society News* no. 20 (10):6.
- Bride, Brian E. 2007. "Prevalence of secondary traumatic stress among social workers." *Social Work* no. 52 (1):63-70.
- Bride, Brian E., and Charles R. Figley. 2007. "The fatigue of compassionate social workers: An introduction to the special issue on compassion fatigue." *Clinical Social Work Journal* no. 35 (3):151-153. DOI: 10.1007/s10615-007-0093-5.
- Bride, Brian E., Schnavia Smith Hatcher, and Michael N. Humble. 2009. "Trauma training, trauma practices, and secondary traumatic stress among substance abuse counsellors." *Traumatology* no. 15 (2):96-105. DOI: 10.1177/1534765609336362.
- Bride, Brian E., and Sara Kintzle. 2011. "Secondary traumatic stress, job satisfaction, and occupational commitment in substance abuse counsellors." *Traumatology* no. 17 (1):22-28. DOI: 10.1177/1534765610395617.
- Bride, Brian E., Melissa Radey, and Charles R. Figley. 2007. "Measuring compassion fatigue." *Clinical Social Work Journal* no. 35 (3):155-163. DOI: 10.1007/s10615-007-0091-7.
- Buber, Martin. 1923/1937. *I and Thou*. Translated by Ronald Gregor Smith. UK: Morrison and Gibb Limited.
- Bush, Nancy Jo. 2009. "Compassion fatigue: Are you at risk?" *Oncology Nursing Forum* no. 36 (1):24-28.
- Butt, Richard. 2002. "Professional well-being and learning: A study of administrator-teacher workplace relationships." *Journal of Educational Enquiry* no. 3 (1):17-34.
- Chan, David W. 2010. "Teacher burnout revisited: Introducing positive intervention approaches based on gratitude and forgiveness." *Educational Research Journal* no. 25 (2):165-186.
- Cheng, Fung Kei. 2011. "An exploratory study of a counselling framework: Four noble truths and their multi-interactive cause-and-effect." *Chung-Hwa Institute of Buddhist Studies* no. 12:151-196.
- Cheng, Fung Kei. 2013. An exploration of two issues on Chinese and English renditions of Buddhist scriptures: Using "the dharma way of emancipation of exhaustible and inexhaustible" expounded in the Vimalakīrti Nirdeśa Sūtra as an example. Paper read at 2013 International Conference of East Asian Buddhist Thoughts and Culture, November 8-10 (pp. 1-72), at Taipei, Taiwan.
- Cheng, Fung Kei. 2014a. "B. Alan Wallace: The four immeasurables: Practices to open the heart, 3rd edition." *Mindfulness* no. 5 (2):220-222. DOI: 10.1007/s12671-013-0221-y.
- Cheng, Fung Kei. 2014b. "The bodhisattva spirit: Practising self-benefiting altruism." *Fuyan Buddhist Studies* no. 9:93-168.

- Cheng, Fung Kei. 2014c. *Conceptualising a bodhisattva-spirit-oriented counselling framework inspired by the Vimālakīrti Nirdeśa Sūtra*, Department of Social Work and Social Administration, The University of Hong Kong, Hong Kong.
- Cheng, Fung Kei. 2014d. *Utilising computer-assisted qualitative data analysis software in Buddhist canonical analysis*. The ATLAS.ti Research Blog 2014d [cited June 13 2014]. Available from <http://atlastiblog.wordpress.com/2014/06/13/utilising-computer-assisted-qualitative-data-analysis-software-in-buddhist-canonical-analysis/>.
- Cieslak, Roman, Kotaro Shoji, Allison Douglas, Erin Melville, Aleksandra Luszczynska, and Charles C. Benight. 2013. “A meta-analysis of the relationship between job burnout and secondary traumatic stress among workers with indirect exposure to trauma.” *Psychological Services* no. 11 (1):75-86. DOI: 10.1037/a0033798.
- Collins, Sean, and A. Long. 2003a. “Too tired to care? The psychological effects of working with trauma.” *Journal of Psychiatric and Mental Health Nursing* no. 10:17-27.
- Collins, Sean, and A. Long. 2003b. “Working with the psychological effects of trauma: Consequences for mental healthcare workers – A literature review.” *Journal of Psychiatric and Mental Health Nursing* no. 10:417-424.
- Conze, Edward. 1953. *Buddhism: Its essence and development*. London: Oxford.
- Cullen, Margaret. 2013. “Supporting teachers in the classroom: Examples from compassion training in schools.” In *Compassion: Bridging practice and science*, edited by Tania Singer and Matthias Bolz, 52-63. Germany: Max Planck Society.
- Dayal, Har. 1932/1999. *The bodhisattva doctrine in Buddhist Sanskrit literature*. India: Banarsidass Publishers Private Limited.
- Deighton, Russell McKenzie, Norbert Gurriss, and Harald Traue. 2007. “Factors affecting burnout and compassion fatigue in psychotherapists treating torture survivors: Is the therapist’s attitude to working through trauma relevant?” *Journal of Traumatic Stress* no. 20 (1):63-75. DOI: 10.1002/jts.20180.
- Demiéville, Paul. 1962/1988. “Vimalakīrti in China 維摩詰在中國.” In *Collection of translations of famous works on Buddhism, Volume 47 世界佛學名著譯叢, 第47冊*, edited by Lan Ji Fu 藍吉富, 241-251. Taiwan: Hua Yu Publisher 華宇出版社. Original edition, Original published in 1962.
- Dunn, Dorothy J. 2009. “A way of knowing, being, valuing and living with compassion energy: A unitary science and nursing as caring perspective.” *Visions: The Journal of Rogerian Nursing Science* no. 16 (1):40-47.
- Everall, Robin D., and Barbara L. Paulson. 2004. “Burnout and secondary traumatic stress: Impact on ethical behaviour.” *Canadian Journal of Counselling* no. 38 (1): 25-35.

- Fahy, Annie. 2007. "The unbearable fatigue of compassion: Notes from a substance abuse counsellor who dreams of working at Starbucks." *Clinical Social Work Journal* no. 35 (3):199-205. DOI: 10.1007/s10615-007-0094-4.
- Figley, Charles R. 2002. "Compassion fatigue: Psychotherapists' chronic lack of self care." *Journal of Clinical Psychology* no. 58 (11):1433-1441.
- Frandsen, Betty MacLaughlin 2010. "Burnout or compassion fatigue." *Long-Term Living* no. May:50-52.
- Fuchs, Thomas. 2005. *Das Vimalakirti-Sutra*. Germany: Angkor Verlag.
- Gallavan, Deanna B., and Jody L. Newman. 2013. "Predictors of burnout among correctional mental health professionals." *Psychological Services* no. 10 (1):115-122. DOI: 10.1037/a0031341.
- Gardner, Dianne, and Michael O'Driscoll. 2007. "Professional wellbeing." In *Professional Practice of Psychology in Aotearoa New Zealand*, edited by Ivan M. Evans, Julia J. Rucklidge and Michael O' Driscoll, 245-258. Wellington, New Zealand: The New Zealand Psychological Society Inc.
- Gilmore, Cathy. 2012. "Compassion fatigue – What it is and how to avoid it?" *Kai Tiaki Nursing New Zealand* no. 18 (5):32.
- Gino, Francesca, Shahar Ayal, and Dan Ariely. 2013. "Self-serving altruism? The lure of unethical actions that benefit others." *Journal of Economic Behaviour and Organization* no. 93:285-292.
- Glaser, Aura. 2005. *A call to compassion: Bringing Buddhist practices of the heart into the soul of psychology*. USA: Nicolas-Hays, Inc.
- Gyatso, Tenzin. 2011. *Illuminating the path to enlightenment*. USA: The Lama Yeshe Wisdom Archive.
- Halifax, Joan. 2013a. "Being with dying: Curriculum for the professional training programme in compassionate end-of-life-care." In *Compassion: Bridging practice and science*, edited by Tania Singer and Matthias Bolz, 467-478. Germany: Max Planck Society.
- Halifax, Joan. 2013b. "Being with dying: Experiences in end-of-life-care." In *Compassion: Bridging practice and science*, edited by Tania Singer and Matthias Bolz, 108-120. Germany: Max Planck Society.
- Harr, Cynthia, and Brenda Moore. 2011. "Compassion fatigue among social work students in field placements." *Journal of Teaching in Social Work* no. 31 (3):350-363. DOI: 10.1080/08841233.2011.580262.
- He, Jian Ping 何劍平. 2005. "Vimalakirti beliefs as popular sūtra copying and repentance rituals 作為民間寫經和禮懺儀式的維摩詰信仰." *Journal of Duhuang Studies 敦煌學輯刊* no. 50:54-66.

- He, Jian Ping 何劍平. 2009. *Study of Vimalakīrti belief in medieval China* 中國中古維摩詰信仰研究. China: Sichuan Publishing Group 四川出版集團.
- He, Shi Zhe 賀世哲. 2000. “Paintings on Vimalakīrti in Dunhuang frescoes 敦煌壁畫中的維摩詰經變.” In *Collection of Dunhuang research: Paintings in Dunhuang caves* 敦煌研究文集：敦煌石窟經變篇, edited by Dunhuang Research Institute 敦煌研究院. China: Gansu Minzu Chubanshe 甘肅民族出版社.
- Hoyt, Mei. 2014. “Engaging bodhisattva compassion in pedagogical aporias.” *Paideusis* no. 21 (2):24-31.
- Hsing-Yun, Master 星雲大師. 2007a. “Śīla, dhyāna, and prajñā in Humanistic Buddhism, Part 1 人間佛教的戒定慧（上）.” *Universal Gate Buddhist Journal* 普門學報 no. 37:1-45.
- Hsing-Yun, Master 星雲大師. 2007b. “Śīla, dhyāna, and prajñā in Humanistic Buddhism, Part 2 人間佛教的戒定慧（下）.” *Universal Gate Buddhist Journal* 普門學報 no. 39: 1-40.
- Huang, Jhao-Min 黃兆民. 2013. “Transforming compassion with attachment and wrong views into true compassion during services by the volunteers: Illustrated by the senior citizen’s care services provided by the Jhong Hua Yao Shih Shan Lay Buddhists Association 志工服務的「愛見大悲」如何轉成「真實大悲」—以中華藥師山居士佛學學會的老人關懷實踐為例.” *Tzu-Chi Journal of the General Education* 慈濟通識教育學刊 no. 8:1-27.
- Huggard, Peter. 2003. “Compassion fatigue: How much can I give?” *Medical Education* no. 37:163-164.
- Inbar, Jacinto, and Michael Ganor. 2003a. “Trauma and compassion fatigue: Helping the helpers.” *Journal of Jewish Communal Service* no. Winter/Spring:109-111.
- Inbar, Jacinto, and Michael Ganor. 2003b. “Trauma and compassion fatigue: Helping the helpers.” *Journal of Jewish Communal Service* no. 79 (2-3):109-111.
- Injeyan, Marie C., Cheryl Shuman, Andrea Shugar, David Chitayat, Eshetu G. Atenafu, and Amy Kaiser. 2011. “Personality traits associated with genetic counsellor compassion fatigue: The roles of dispositional optimism and locus of control.” *Journal of Genetic Counselling* no. 20:526-540. DOI: 10.1007/s10897-011-9379-4.
- Jacobson, Jodi M. 2012. “Risk of compassion fatigue and burnout and potential for compassion satisfaction among employee assistance professionals: Protecting the workforce.” *Traumatology* no. 18 (3):64-72. DOI: 10.1177/1534765611431833.
- Jenkins, Sharon Rae, and Stephanie Baird. 2002. “Secondary traumatic stress and vicarious trauma: A validation study.” *Journal of Traumatic Stress* no. 15 (5):423-432.
- Joinson, Carla. 1992. “Coping with compassion fatigue.” *Nursing* no. 22 (4):116-121.
- Kaklauskas, Francis J., and Elizabeth A. Olson. 2008. “Large group process: Grounding Buddhist and psychological theory in personal experience.” In *Brilliant sanity:*

- Buddhist approaches to psychotherapy*, edited by Francis J. Kaklauskas, Susan Nimanheminda, Louise Hoffman and MacAndrew S. Jack, 133-160. Colorado: University of the Rockies Press.
- Kapoulitsas, Maryanne, and Tim Corcoran. 2014. “Compassion fatigue and resilience: A qualitative analysis of social work practice.” *Qualitative Social Work*. DOI: 10.1177/1473325014528526.
- Keidel, Gladys Catkins. 2002. “Burnout and compassion fatigue among hospice caregivers.” *American Journal of Hospice and Palliative Care* no. 19 (3):200-205.
- Kjellenberg, Elin, Frida Nilsson, Daiva Daukantaitė, and Etzel Cardeña. 2014. “Transformative narratives: The impact of working with war and torture survivors.” *Psychological Trauma: Theory, Research, Practice, and Policy* no. 6 (2):120-128. DOI: 10.1037/a0031966.
- Kraus, Sue, and Sharon Sears. 2009. “Measuring the Immeasurables: Development and initial validation of the Self-Other Four Immeasurables (SOFI) scale based on Buddhist teachings on loving kindness, compassion, joy, and equanimity.” *Social Indicators Research* no. 92 (1):169-181.
- Kraus, Vanieca I. 2005. “Relationship between self-care and compassion satisfaction, compassion fatigue, and burnout among mental health professionals working with adolescent sex offenders.” *Counselling and Clinical Psychology Journal* no. 2 (1):81-88.
- Lambert, Simone F., and Gerard Lawson. 2013. “Resilience of professional counsellors following hurricanes Katrina and Rita.” *Journal of Counselling and Development* no. 91 (3):261-268.
- Landry, Donald W. 2006. “Voluntary reciprocal altruism: A novel strategy to encourage deceased organ donation.” *Kidney International* no. 69:957-959. DOI: 10.1038/sj.ki.5000280.
- Lee, Jenny S. Y., and Syed Akhtar. 2007. “Job burnout among nurses in Hong Kong: Implications for Human resource practices and interventions.” *Asia Pacific Journal of Human Resources* no. 45 (1):63-84. DOI: 10.1177/1038411107073604.
- Leighton, Taigen Daniel. 1998. *Bodhisattva archetypes: Classic Buddhist guide to awakening and their modern expression*. USA: Arkana.
- Lenart, Bartłomie. 2010. “Enlightened self-interest: In search of the ecological self (A synthesis of Stoicism and ecosophy).” *Praxis* no. 2 (2):26-44.
- Lieu, Thih Hua 許嬋蕊. 2004. *Translation and interpretation of the Vimalakīrti Nirdeśa Sūtra in Vietnam by Venerable Zhi Guang and Venerable Ci Tong* 越南智廣、慈通對《維摩詰經》的翻譯與詮釋, Chinese Culture University 中國文化大學, Taiwan.
- Lin, Wen Ping 林文彬. 1997. “An exploratory study of the teachings of non-duality in the Vimalakīrti Nirdeśa Sūtra 『維摩詰經』不二法門義理初探.” *Journal of the*

- Chinese Department, National Chung Hsing University 興大中文學報 no. 10:145-158.
- Lombardo, Barbara, and Carly Eyre. 2011. “Compassion fatigues: A nurse’s primer.” *The Online Journal of Issues in Nursing* no. 16 (1):Manuscript 3, 1-9 (January 31, 2011). DOI: 10.3912/OJIN.Vol16No01Man03.
- Lynch, Susan H., and Marie L. Lobo. 2012. “Compassion fatigue in family caregivers: a Wilsonian concept analysis.” *Journal of Advanced Nursing* no. 68 (9):2125-2134. DOI: 10.1111/j.1365-2648.2012.05985.x.
- Manne-Lewis, Joy. 1986. “Buddhist psychology: A paradigm for the psychology of enlightenment.” In *Beyond therapy: The impact of Eastern religions on psychological theory and practice*, edited by Guy Claxton, 123-138. England: Wisdom Publications.
- Marr, Lisa. 2009. “Can compassion fatigue? ” *Journal of Palliative Medicine* no. 12 (8): 739-740. DOI: 10.1089/jpm.2009.9577.
- Mather, Richard B. 1968. “Vimalakīrti and gentry Buddhism.” *History of Religions* no. 8 (1):60-73.
- Mathieu, Françoise 2012. *The compassion fatigue workbook: Creative tools for transforming compassion fatigue and vicarious traumatization*. New York: Routledge.
- McCormack, Lynne, Stephen Joseph, and Martin S. Hagger. 2009. “Sustaining a positive altruistic identity in humanitarian aid work: A qualitative case study.” *Traumatology* no. 15 (2):109-118. DOI: 1177/1534765609332325.
- McRae, John R. 2011. *The Vimalakīrti Sūtra*. Numata Centre for Buddhist Translation and Research 2004 [cited February 1 2011]. Available from http://www.numatacenter.com/digital/dBET_Srimala_Vimalakirti_2004.pdf.
- Miller, Roy Andrew. 1984. “Yamanoë Okura, a Korean poet in eighth-century Japan.” *Journal of the American Oriental Society* no. 104 (4):703-726.
- Milstein, Jay M., A. Elise Gerstenberger, and Sue Barton. 2002. “Healing the caregiver.” *The Journal of Alternative and Complementary Medicine* no. 8 (6):917-920.
- Mizuno, Maki, Emiko Kinefuchi, Rumiko Kimura, and Akiko Tsuda. 2013. “Professional quality of life of Japanese nurses/midwives providing abortion/childbirth care.” *Nursing Ethics* no. 20 (5):539-550. DOI: 10.1177/0969733012463723.
- Naturale, April. 2007. “Secondary traumatic stress in social workers responding to disasters: Reports from the field.” *Clinical Social Work Journal* no. 35 (3):173-181. DOI: 10.1007/s10615-007-0089-1.
- Negash, Sesen, and Seda Sahin. 2011. “Compassion fatigue in marriage and family therapy: Implications for therapists and clients.” *Journal of Marital and Family Therapy* no. 37 (1):1-13.

- Newell, Jason M., and Gordon A. MacNeil. 2010. "Professional burnout, vicarious trauma, secondary traumatic stress, and compassion fatigue: A review of theoretical terms, risk factors, and preventive methods for clinicians and researchers." *Best Practices in Mental Health* no. 6 (2):57-58.
- Ng, Yu Kwan 吳汝鈞. 1995. *Contemporary Interpretation of Chinese Buddhism* 中國佛學的現代詮釋. Taipei: Wen Jin Publishing Company Limited 文津出版有限公司.
- Nimmo, Arohaina, and Peter Huggard. 2013. "A systematic review of the measurement of compassion fatigue, vicarious trauma, and secondary traumatic stress in physicians." *Australasian Journal of Disaster and Trauma Studies* no. 1:37-44.
- Perry, Beth, Janice E Dalton, and Margaret Edwards. 2010. "Family caregivers' compassion fatigue in long-term facilities." *Nursing Old People* no. 22 (4):26-31.
- Potter, Patricia, Teresa Deshields, Joyce Divanbeigi, Julie Berger, Doreen Cipriano, Lori Norris, and Sarah Olsen. 2010. "Compassion fatigue and burnout: Prevalence among oncology nurses." *Clinical Journal of Oncology Nursing* no. 14 (5):E56-62. DOI: 10.1188/10.CJON.E56-E62.
- Pritchard, Kevin, and John Eliot. 2012. *Help the helper: Building a culture of extreme teamwork*. USA: Portfolio/Penguin.
- Pulido, Mary L. 2007. "In their words: Secondary traumatic stress in social workers responding to the 9/11 terrorist attack in New York City." *Social Work* no. 52 (3): 279-281.
- Radey, Melissa, and Charles R. Figley. 2007. "The social psychology of compassion." *Clinical Social Work Journal* no. 35 (3):207-214. DOI: 10.1007/s10615-007-0087-3.
- Rama-Maceiras, Pablo, and Peter Kranke. 2013. "Working conditions and professional wellbeing: A link easy to imagine but difficult to prove." *European Journal of Anaesthesiology* no. 30:213-215. DOI: 10.1097/EJA.obo13e32835fc894.
- Rank, Michael G., Tracy L. Zapananick, and J. Eric Gentry. 2009. "Nonhuman-animal care compassion fatigue: Training as treatment." *Practices in Mental Health* no. 5 (2):40-61.
- Robinson-Keilig, Rachael A. 2014. "Secondary traumatic stress and disruptions to interpersonal functioning among mental health therapists." *Journal of Interpersonal Violence* no. 29 (8):1477-1496. DOI: 10.1177/0886260513507135.
- Rogers, Carl Ransom. 1957. "The necessary and sufficient conditions of therapeutic personality change." *Journal of Consulting Psychology* no. 21:95-103.
- Rogers, Carl Ransom. 1967. *The therapeutic relationship and its impact: A study of psychotherapy with schizophrenics*. USA: The University of Wisconsin Press.

- Rossetti, Stephen J., and Colin J. Rhoades. 2013. "Burnout in Catholic clergy: A predictive model using psychological and spiritual variables." *Psychology of Religion and Spirituality* no. 5 (4):335-341. DOI: 10.1037/a0033639.
- Rossi, Alberto, Gaia Cetrano, Riccardo Pertile, Laura Rabbi, Valeria Donisi, Laura Grigoletti, Cristina Curtolo, Michele Tansella, Graham Thornicroft, and Francesco Amadeo. 2012. "Burnout, compassion fatigue, and compassion satisfaction among staff in community-based mental health services." *Psychiatry Research* no. 200: 933-938.
- Running, Alice, Lauren Woodward Tolle, and Deb Girard. 2008. "Ritual: The final expression of care." *International Journal of Nursing Practice* no. 14:303-307. DOI: 10.1111/j.1440-172X.2008.00703.x.
- Sabo, Brenda. 2011. "Reflecting on the concept of compassion fatigue." *The Online Journal of Issues in Nursing* no. 16 (1):Manuscript 1, 1-15. DOI: 10.3912/OJIN.Vol16No01Mano1.
- Salston, MaryDale, and Charles R. Figley. 2003. "Secondary traumatic stress effects of working with survivors of criminal victimization." *Journal of Traumatic Stress* no. 16 (2):167-174.
- Sexton, Leo. 1999. "Vicarious traumatization of counsellors and effects on their workplaces." *British Journal of Guidance and Counselling* no. 27 (3):393-403.
- Shi, Suei Yu 施穗鈺. 2002. "On the intersection and choice of Prajñā School and Hsuan-Hsueh 般若學與玄學之交匯及選擇—以《維摩詰經》為核心" *National Cheng Kung University: Journal of Religion and Culture 成大宗教與文化學報* no. 2:255-275.
- Siu, Christina F. Y., S. K. Yuen, and Andy Cheung. 2012. "Burnout among public doctors in Hong Kong: Cross-sectional survey." *Hong Kong Medical Journal* no. 18 (3):186-192.
- Slocum-Gori, Suzanne, David Hemsworth, Winnie W. Y. Chan, Anna Carson, and Arminee Kazanjian. 2011. "Understanding compassion satisfaction, compassion fatigue and burnout: A survey of the hospice palliative care workforce." *Palliative Medicine* no. 27 (2):172-178. DOI: 10.1177/0269216311431311.
- Smith, Bryce D. 2007. "Sifting through trauma: Compassion fatigue and HIV/AIDS." *Clinical Social Work Journal* no. 35 (3):193-198. DOI: 10.1007/s10615-007-0096-2.
- Smith, Jonathan A., Paul Flowers, and Michael Larkin. 2009. *Interpretative phenomenological analysis: Theory, method and research*. UK: SAGE Publications Limited.
- Sprang, Ginny, James J. Clark, and Adrienne Whitt-Woosley. 2007. "Compassion fatigue, compassion satisfaction, and burnout: Factors impacting a professional's quality of life." *Journal of Loss and Trauma* no. 12:259-280. DOI: 10.1080/15325020701238093.

- Sprang, Ginny, Carlton Craig, and James Clark. 2011. "Secondary traumatic stress and burnout in child welfare workers: A comparative analysis of occupational distress across professional groups." *Child Welfare* no. 90 (6):149-168.
- Stebnicki, Mark A. 2008. *Empathy fatigue: Healing the mind, body, and spirit of professional counsellors*. New York: Springer Publishing Company, LLC.
- Stewart, Della W. 2009. "Casualties of war: Compassion fatigue and health care providers." *MEDSURG Nursing* no. 18 (2):91-94.
- Suzuki, Beatrice Lane. 1938/1981. *Mahāyāna Buddhism*. London: George Allen & Unwin. Original edition, Original published 1938.
- Tam, Shek Wing 談錫永. 1995. "A study of Vajrayāna emerged in the Vimalakīrti Nirdēśa Sūtra 維摩經旨密義初探." *Nei Ming* 內明 no. 284 (November):3-18.
- Tam, Shek Wing 談錫永. 1997. *Talk about Vajrayāna* 閒談密宗. Taiwan: Buddha All Cultural Enterprise Company Limited 全佛文化出版社.
- Tam, Shui Kee Tony, and Lilian Mong. 2002. "Emotional exhaustion, depersonalisation, and personal accomplishment — the case of burnout among school social workers in Hong Kong." *Asia Pacific Journal of Social Work and Development* no. 12 (2): 76-94. DOI: 10.1080/21650993.2002.9755901.
- Tam, Tony S. K., and Lilian P. K. Mong. 2005. "Job stress, perceived inequity and burnout among school social workers in Hong Kong." *International Social Work* no. 48 (4):467-483. DOI: 10.1177/0020872805053470.
- Tehrani, Noreen. 2007. "The cost of caring – the impact of secondary trauma on assumptions, values and beliefs." *Counselling Psychology Quarterly* no. 20 (4):325-339. DOI: 10.1080/09515070701690069.
- Thomas, Jacky T., and Melanie D. Otis. 2010. "Intrapsychic correlates of professional quality of life: Mindfulness, empathy, and emotional separation." *Journal of the Society for Social Work and Research* no. 1 (2):83-98. DOI: 10.5243/jsswr.2010.7.
- Thompson, Isabel A., Ellen S. Amatea, and Eric S. Thompson. 2014. "Personal and contextual predictors of mental health counselors' compassion fatigue and burnout." *Journal of Mental Health Counselling* no. 36 (1):58-76.
- Tu, Yen Chiu 涂艷秋. 2005. "An exploration of Kumārajīva's translation methods with the Vimalakīrti Nirdeśa Sūtra as an example 鳩摩羅什譯經方法的探討—以《注維摩經》為例." *Hsuan Chuang Humanities Journal* 玄奘人文學報 no. 4 (February):121-156.
- Tyson, Jeni. 2007. "Compassion fatigue in the treatment of combat-related trauma during wartime." *Clinical Social Work Journal* no. 35 (3):183-192. DOI: 10.1007/s10615-007-0095-3.
- Uren, Sarah, and Tanya Graham. 2013. "Subjective experiences of coping among caregivers in palliative care." *The Online Journal of Issues in Nursing* no. 18 (2):1-14. DOI: 10.3912/OJIN.Vol18No02PPT02.

- Vanheule, Stijn, and Paul Verhaeghe. 2005. “Professional burnout in the mirror: A qualitative study from a Lacanian perspective.” *Psychoanalytic Psychology* no. 22 (2): 285-305. DOI: 10.1037/0736-9735.22.2.285.
- Virtbauer, Gerald Doko. 2010. “Dimensions of intersubjectivity in Mahāyāna-Buddhism and relational psychoanalysis.” *Contemporary Buddhism* no. 11 (1):85-102.
- Wallace, B. Alan. 2010. *The four immeasurables: Practices to open the heart*. New York: Snow Lion Publications.
- Walton, Ann Marie Lee, and Mimi Alvarez. 2010. “Imagine: Compassion fatigue training for nurses.” *Clinical Journal of Oncology Nursing* no. 14 (4):399-400. DOI: 10.1188/10.CJON.399-400.
- Wang, Xin Shui 王新水. 2009. *New discussion on the thoughts of the Vimalakīrti Nirdeśa Sūtra 維摩詰經思想新論*. China: Huang Shan Publishing House 黃山書社.
- Wang, Zhi Wei 王志楨. 1992. “The Vimalakīrti Nirdeśa Sūtra and Chinese scholars, literature and art 《維摩詰經》與中國文人、文學、藝術.” *Chung-Hwa Buddhist Journal 中華佛學學報* no. 5:263-298.
- Ward-Griffin, Catherine, Oona St-Amant, and Judith Belle Brown. 2011. “Compassion fatigue within double duty caregiving: Nurse-daughters caring for elderly parents.” *The Online Journal of Issues in Nursing* no. 16 (1):Manuscript 4, 1-16. DOI: 10.3912/OJIN.Vol16No01Mano4.
- Watson, Burton (Translated). 1997. *The Vimalakīrti Sūtra*. New York: Columbia University Press.
- Wentzel, Dorien, and Petra Brysiewicz. 2014. “The consequence of caring too much: Compassion fatigue and the trauma nurse.” *Journal of Emergency Nursing* no. 40 (1):95-97.
- Williams, Paul. 1998. *Altruism and reality: Studies in the philosophy of the Bodhicaryāvatāra*. UK: Curzon Press.
- Worley, Cynthia A. 2005. “The art of caring: Compassion fatigue.” *Dermatology Nursing* no. 17 (6):416.
- Wright, Bob. 2004. “Compassion fatigue: How to avoid it.” *Palliative Medicine*, no. 18:3-4. DOI: 10.1191/0269216304pm866ed.
- Wu, Yan Sheng 吳言生. 2001. *The origin of Chan philosophy 禪宗思想淵源*. China: Zhong Hua Books 中華書局.
- Xie, Lu Jun 謝路軍, and Fei 潘飛 Pan. 2011. *Culture of Chinese Buddhism 中國佛教文化*. China: Chang Chun Publication 長春出版社.
- Yalom, Irvin D. 1980. *Existential psychotherapy*. USA: Basic Books.
- Yang, Zeng Wen 楊曾文. 2009. “Theories of Mahāyāna Buddhism and contemporary society 大乘佛教理論與現代社會.” In *From tradition to contemporary: Buddhist*

- ethics and contemporary society* 從傳統到現在—佛教倫理與現代社會, edited by Fu Wei Xuen 傅偉勳, 221-244. Taipei: Dong Da Tu Shu Gong Si 東大圖書公司.
- Yao, Fuchuan. 2006. “There are no degrees in a Bodhisattva’s compassion.” *Asian Philosophy* no. 16 (3):189-198.
- Yildirim, Kamil. 2014. “Main factors of teachers’ professional well-being.” *Educational Research and Reviews* no. 9 (6):153-163. DOI: 10.1007/s10615-007-0093-5.
- Yin-Shun, Master 印順導師. 1949/2003. *An overview of dharma* 佛法概論. Taiwan: Zheng Wen Publication 正聞出版社.
- Yin-Shun, Master 印順導師. 1980/1994. *The origin and development of Early Mahāyāna Buddhism* 初期大乘佛教之起源與開展. Taiwan: Zheng Wen Publication 正聞出版社.
- You, Hwei Jean 尤惠貞. 1999. *Philosophy of Tiantai and praxis of Buddhism* 天臺哲學與佛教實踐. Taiwan: Nanhua University 南華大學.
- Zeidner, Moshe, Hadar, Dafna. 2014. “Some individual difference predictors of professional well-being and satisfaction of health professionals.” *Personality and Individual Differences* no. 65:91-95.