IRIS AperTO

UNIVERSITÀ DEGLI STUDI DI TORINO

AperTO - Archivio Istituzionale Open Access dell'Università di Torino

Contemplative Methods Meet Social Sciences: Back to Human Experience as It Is

This is the author's manuscript

Original Citation:

Availability:

This version is available http://hdl.handle.net/2318/158494 since 2016-09-14T11:56:05Z

Published version:

DOI:10.1111/jtsb.12078

Terms of use:

Open Access

Anyone can freely access the full text of works made available as "Open Access". Works made available under a Creative Commons license can be used according to the terms and conditions of said license. Use of all other works requires consent of the right holder (author or publisher) if not exempted from copyright protection by the applicable law.

(Article begins on next page)

12 October 2024

Journal for the Theory of Social Behaviour ••:••
DOI: 10.1111/jtsb.12078

Contemplative Methods Meet Social Sciences: Back to Human Experience as It Is

VINCENZO MARIO BRUNO GIORGINO

ABSTRACT

The aim of this paper is to trace a pathway connecting contemplative knowledge and practices with the social sciences. Contemplative knowledge and practices offer material for reflection in social science even concerning their very foundation. I'll found an opportunity for meshing our disciplinary tools with this knowledge as I introduced it in a health promotion program. The result will be a transdisciplinary confluence of different lines of inquiry contributing to a new perspective of self and social action.

First of all I will give a definition of contemplative knowledge and practices. Then, I will make a bridge between the contemplative approach and the social sciences, showing the contribution that symbolic interactionism can play. I will illustrate the perspective drawing on an action research program called *Auriga* aimed at smoking cessation and reduction among health professionals. The aim of this paper is focused on the specification of the conceptual background in which such kind of program has been developed. Finally, I outline some implications it could represent for what might be called transformative sociology.

I believe that contemplative knowledge could contribute to disentangle some of the unanswered questions and concerns in the social sciences, once they dismiss for a while their scientistic perspective. The secular redefinition of tools mainly belonging to the wisdom traditions represents an innovation that can reshape what we intend by the self and experience, contributing to what is called the "social transformation from within," a pragmatic and wise approach to change at any level.

Keywords: contemplative sociology, clinical sociology, economic sociology, first-person inquiry, health and well-being

© 2014 John Wiley & Sons Ltd

INTRODUCTION

The aim of this paper is to trace a pathway connecting contemplative knowledge and practices with the social sciences. Contemplative knowledge and practices offer material for reflection in social science even concerning their very foundation. I present an opportunity for meshing our disciplinary tools with this knowledge as I introduced it in a health promotion program. The result is a transdisciplinary confluence of different lines of inquiry contributing to a new perspective of self and social action.

First of all I will give a definition of contemplative knowledge and practices. Then, I will make a bridge between the contemplative approach and the social sciences, showing the contribution that symbolic interactionism can play. I will illustrate the perspective drawing on an action research program called *Auriga* aimed at smoking cessation and reduction among health professionals. The aim of this paper is focused on the specification of the conceptual background in which such kind of program has been developed. Finally, I outline some implications it could represent for what might be called transformative sociology.

I believe that contemplative knowledge could contribute to disentangle some of the unanswered questions and concerns in the social sciences, once they overcome their scientistic perspective. The secular redefinition of tools mainly belonging to the wisdom traditions represents an innovation that can reshape what we intend by the self and experience, contributing to what is called the "social transformation from within," a pragmatic and wise approach to change at any level.

Contemplative Knowledge and Practices

What motivates this mixed approach that calls for introducing contemplative thought? The first reason is connected to a loss of grasp of the current constructivist approach, that bases our life exclusively on the symbolic dimension ("the text"). Another motive derives from the literature on emotions in the sociology of work and its critical appraisal of self-help culture. In its attempt to demonstrate the pervasiveness of the capitalistic structure at the most intimate levels of our lives, structuralist orientations transmit a stifling sensation of being in a cage: every new idea or behaviour is framed as "system-provoked." What was intended as a critical tool to make people aware of societal constraints and open the way for a collective change exerts a boomerang effect: a feeling of impotence. These were the circumstances in which I began to introduce meditation practices in my courses on *Methodology of Social Research* (1998) and of *Sociology of Health* (1999–2008).

Contemplative practices have been introduced since the 70s in the health area to integrate the biomedical approach, nurturing the subfield of so-called integrative or behavioural medicine. This innovation was not intended as an alternative to biomedicine but more as an extension of it (Kabat-Zinn 1990; 2005). It also

© 2014 John Wiley & Sons Ltd

found a reception in psychological therapy (among others, Epstein 1995; Linehan et al. 1999; Butler 2002; Kornfield 2000; Bennett Goleman 2001; Bolletino 2001; Magid 2002). Ospina et al. (2007) offer the most updated and complete evaluation study up to now about the related health literature.

These methods come from the wisdom traditions developed over thousands of years, from the religious, spiritual and other cultural sources. By wisdom traditions, I mean those institutionalized and not institutionalized systems of knowledge whose main concern is the exploration of the human condition and the search for meaning of human life. These practices can make a powerful contribution to a positive demedicalization, depsychologization and desocialization of human behaviour, giving to experts—doctors, psychotherapists etc.—new opportunities, as far as people are more able to care for themselves.

Sociology has tended to substitute a sociologization for the medicalization of illness. Sociology itself has its own corporate interests to demonstrate the social basis of everything and to define with a set of sociological variables the explanation of it. To recall a recent example, the Dutch scholar Ruut Veenhoven, in reporting the counter-intuitive results of a study in which people's happiness is not related to the GDP index, describes the silence it received in the sociological community (Veenhoven 2006a: 4), a clear sign of the pathology-oriented approach in the discipline. An embarrassment that leads to the denial of the possibility that people can be happy even in hardship, as the explanation usually appealed to is actors' "false consciousness" (Veenhoven 2006b).

The individuation of a social pathology seems to be part of the inner program of social sciences. A clear-cut example can come from the relatively recent field of the sociology of emotions (Hochshild 1983) or the sub-area of the management of chronic illnesses and the self: the development of late capitalism intrudes more and more the sacred spheres of life, emotions, intimacy, sexuality and even the contemplative aspects. In sum, the contemplative approach operates to depathologize social interactions, wherever the source of the pathology can be found.

Through the 80s and 90s, from an initial marginal niche, contemplative practices are stimulating growing research and, in the last 10 years, the field has gained scientific and practical legitimation, as the 2010 birth of the journal *Mindfulness* testifies. Other relevant indicators of its influence and growth are visible in education (see the work done in higher education by the ACMHE association: http://www.acmhe.org/) and management especially in the literature about the learning organizations (Duerr 2004, Senge 1990 and, less explicitly, Nonaka and Takeuchi 1995), just to cite the most important subareas of research and intervention.

The recognition that health conditions often involve emotional and even existential work lies at the basis of the secularization of contemplative practices in our time and is coherent with its introduction in the health field as well as other areas. Existential work is "culturally natural" for any sentient human animal: to feel and

© 2014 John Wiley & Sons Ltd

reflect about the finitude of life. It has universal value across cultures, whatever the local interpretations and institutionalizations that have occurred.

Existential work differs from contemplative work; the former includes all sorts of human work about impermanence and suffering, the latter only the kind of work that relates to disciplined knowledge and methods, which can come from any wisdom tradition. Once they have been secularized, such approaches are considered methods of inquiry as subject to doubt as any other procedure in science and can be tested and modified accordingly, once the specific framework in which they pertain is respected. Reading a poem, a novel, seeing a painting can be forms of existential work; to the latter belong those techniques and methods typical of the wisdom traditions such as sitting meditation etc.

It is no discovery that in "normal" life people find it difficult to articulate effective answers to their life events. Different authors describe how unease and dissatisfaction are stable parts of the cultural landscape of our post-modern societies. Difficulties can arise in the intimate realm as well as the jobsite, and humans usually develop reaction strategies; even if tested and felt as filled with negative collateral effects, they commonly find them hard to change. Dysfunctional levels of stress, emotional outbursts or soft depression moods (*dysphoria*) are elements of our daily life more than ever for a broad set of variables. These processes do not always come to the attention of the experts of the pathological state and, luckily, generally speaking, very often it is not the case for in the realm of the "normal" life there is a wide space for transformation and healing, as contemplative knowledge suggests. If in the 80s the sociology of work opened its doors to emotional life in the economic sphere and in society at large, the time is ripe to go further.

Contemplative Work, Co-Production and Co-Action

According to Kabat-Zinn (1990: 194), "Directing mindfulness to your interactions with your doctors, both before you see them and during your encounter with them, can help you to formulate and ask the questions you want answers to and to advocate more effectively for yourself." This view is complementary to what co-production means in social sciences. The term co-production covers a vast array of contributions from different areas—such as health or education or social services—scientific disciplines, and even different kinds of practices. As far as regards academic disciplines, it covers at least law (Cahn 2000), public economics and political science (Ostrom 1996), and sociology (Roustang 1993).

In sociology, co-production could be theoretically grounded in the symbolic interactionist tradition. In Blumer, as Gerhardt notes (1989: 76), "behaviour emanates from the interchange between person and the environment. Blumer, with an anti-Parsonsian accent, made it clear that this "looking-glass" impact of the social environment upon a person's identity has a constructive side to it." More recently, Kenneth Gergen (2009), also attributing the term co-action to

© 2014 John Wiley & Sons Ltd

Herbert Blumer and John Shotter (32–33), developed it in coherence with its theoretical proposal of a *relational being*. In the sociology of health, although the active role of patients, following Stacey (1993), is recognized in the pioneering contributions of Roth (1963) and Goffman (1961), to be more systematic theoretical attention dates back to Hughes (1956) with further development by Anselm Strauss (Strauss et al. 1985).

Co-production calls for a new definition of what is meant by work. As Strauss et al. (1985: 238–9) stress, work is not seen from the occupational point of view or from the point of view of the professions but as "work per se." In *The Social Organization of Medical Work*, Strauss et al. finds patients work almost everywhere, invisible and unrecognized, as they are not hospital employees; instead, their activity is not defined as work "but just as patients' activity or general participation in their own care." Ironically, patients are expected to be "cooperative" (Strauss et al.: 191), i.e. nothing more than "acting properly or decently in accordance with the requirements of their care by professionals and assisting personnel" (Strauss et al.: 192). Stevenson also is worth noting for his observation that in human service industries "production and consumption occur simultaneously" (1976 cited in Stacey: 6). What emerges as important is not the division of labor or labor itself, but the relationship of different types of work and its trajectory (Strauss et al. 1985: 270): "Labor and its relationship to the tasks is the salient issue."

This re-definition of work challenges the dominant sociological view based on occupational and professional perspectives and offers a chance to observe and recognize the amount of effort that people make in many spheres of their lives. A recent discussion and reappraisal in the sociology of work can be found in Perry et al. (2006), not to blur any activity with work but to avoid the identification of work with employment. This enlarging of the field beyond the employment-focused orientation enables us to view in a new light the former dichotomies: paid and unpaid, private and public, etc. material and non material, "inner" (such as emotional) and outer work.

In the 90s, a wave of comparative studies about care for the elderly in Europe paid specific attention to long-term care and recognized the fundamental role played by informal work. It was in this specific area that the concept of *prosumption* arose (Evers 1996)—service production and consumption together—gaining its part in the development of co-production; a form of service delivery that Roustang (1993) defines as a hybrid form of work.

After the client focused-policies and the managerial approach to health care of the 90s, some make a claim for an integration of a lifeworld perspective (Dahlberg et al. 2009) in health policies: from a *patient-led to* an *experience-led* approach. The debates and experiences on the expert patient issue in the UK over the past years (Department of Health 2001; 2005; 2006; Lindsay and Vrijhoef 2009) seem fine candidates to pick up the challenge of co-production (NEF 2002; NEF 2006; Boyle and Harris 2009).

© 2014 John Wiley & Sons Ltd

An illustrative application of contemplative methods is my own Auriga smoking-cessation program, which shows *in vivo* how contemplative practices work in a lay context and how people manage themselves and try to change their health and most of all their inner schemes of reference consequently. In such ways, it demonstrates an experiential approach to co-production.

The *AURIGA* Program: A Trans-disciplinary Approach to Smoking Cessation and Reduction

Ironically, the highest smoking rates among professionals in Italy can be found among health workers—namely nurses and doctors—whose own personal healthcare appears far from congruent with cognitive assumptions and knowledge about smoking behaviour. From a methodological point of view, the use of journaling makes it possible to describe what kind of work is requested when contemplative practices are applied in a lay context.

The role of social context is important to the entire process of the smoking experience, from the beginning to eventual cessation (Secher-Walker 2002 quoted in CRA 2007). Smoking is constituted by multiple interactions in which smokers are involved: they can facilitate the entry or the exit from a specific experience, as shown by studies on the influence of interaction on health (Cohen, Underwood and Gottlieb 2000: 4–5).

The *AURIGA* smoking cessation and reduction program was intended as an experiential-based action research program with a mixed methods approach. The program was formulated as an application of the recent policy for organizational well-being in the Piedmont Region, Italy and is targeted at smoking health workers of two local health agencies of the town of Torino. Its aim is to help health workers to stop or reduce their smoking habit through a two month program, based on one weekly group session lasting approximately two and a half hours at the beginning of the week and individual daily exercises at home for approximately 50 minutes a day. It was carried out in 2009 (January–March) with four follow-ups.

Methodologically, third person data (questionnaires) & personal inquiries (journals and self-observation) were integrated with observations on the experience emerging from the contemplative practices. As the program assigns a crucial role to the meditation practice itself and intends transformation as a co-production, it is of particular interest to the sociology of health and could represent a significant contribution to its renewal.

The main assumption is that the general process of smoking can be understood only by integrating biomedical and experiential data. This means overcoming the current divide between different kinds of data and promote a behavioural transformation deeply rooted in the socially situated bio-cultural experience of the participants. The framework of which the study is part constitutes a recent trend

© 2014 John Wiley & Sons Ltd

of a post-constructivist turn in science. Combining these lines of research with contemplative methods allows the development of an experience-based model, in which the body-mind divide is overcome.

Contemplative practices—such as sitting and walking meditation, body scan etc.—are integrated with sociological methods to favour a process of a progressive movement toward a broader feeling/sensing of the smoking habit, achieving an increasing intimacy with this behaviour.

Participants overcome a self-reflexive, strictly cognitive approach, getting used to opening themselves to an embodied understanding. Progressively, the cultivation of the social process of attention nurtures a form of acceptance of the social conditions of everyday life. An improvement in the quality of life itself is expected, in which smoking has its own place. The contemplative practices offered during the workshop rotate in different but complementary ways around an *immersion* in the present moment. In other words, participants learn how to live in the flux of experience, developing their meta-observational skills. This process differs from introspection as it is at the same time an inner and outer process: the fact is that we are not separate from the world around us. The individualistic jargon by which it is usually described is inadequate, but still is the only one available.

This suspension of any action refers to the body's stillness and silence, the progressive calming of the mind, the relenting of the physiological mind working and the stabilization of the emotional processes. Participants develop their attention, intended as a general sensitivity to any inner or outer condition and so doing (or *not doing*) sharpen step by step their skill of being present without action. All the program's exercises are anchored in breathing and its awareness, for the function this process plays in human life: for a insightful analysis of breathing in a sociological framework particularly careful of the senses, see Lyon (1994).

Coding what is going on at sensory, emotional and thinking levels helps participants to achieve a broader awareness of their behaviour, discovering how difficult it is to control our mind. It is an experience contrasting with a cultural context in which control, self-coherence of the individual biography and autonomy are shared and taken for granted values; the same could happen for the usual separation between outer and inner interactions.

A greater confidence with these practices implies a deeper intimacy with one's own inner world, from time to time less and less a stranger and more and more a companion to anyone's life. This cultural ability is achieved, it has nothing to do with "spontaneity"; in other words, it does not lead us to our most "sincere" and "inner" self, to what "we really are," as any essentialism is out of the question, disappointing any hyper-humanist perspective of current interpretative social sciences.

This social space of "suspended action" favours the acceptance of what human beings are *here and now* and of the world as it is, shortening the judgmental and pre-comprehensive attitude any human animal has culturally internalized and which works on its own, semi consciously, in everyday life.

© 2014 John Wiley & Sons Ltd

People's cultural schemas—the emotional, sensitive and cognitive strategies adopted—are smoothly challenged by these practices in an unwilling and subterranean form; they act tacitly. They do not fix human beings or make them more functional to societal pressures but help them to elaborate cultural answers that take into account a broader life horizon than that of the limited self they inhabit in that specific social situation and moment.

The daily journal requires a narrative of events with associated body states, thoughts, feelings and moods put down in writing. First person method means any kind of method oriented to develop one's own observer skill of being present to experience and later to be able to describe what happened and code it. Narrative inquiry is systematic observation—intended as wakeful presence or attention—of internal events, including sensations, i.e. physical reactions that can occur in specific social situations (internal or external). Journals and first person observations are learning aids for the contemplative practice and strategic sources of knowledge and sense making (Schwartz and Jacobs 1979). This is true also for group dialogue and conductor-participant interview. All of them fulfill their double function of knowing and transforming.

Contemplative practices are kinds of learning methods that participants have to apply to themselves. As methods of inquiry into the self, they also have an interesting methodological component that calls for scientific attention as well.

The Diaries

In a detailed review of different approaches to stress, Cohen et al. (1997) write, "By recording the details of human thoughts, feelings and actions, diaries have a resolving power that cannot easily be achieved through the use of" other tools. In the social sciences, the narrative form has a productive value, as it is useful to show the social construction of reality. In some cases, this line is forced to the point of identifying in it a tool of liberation, as in Denzin's (2001) paper on interviewing.

In this case, the social process triggered by sitting meditation—and by any kind of contemplative practice—puts the observational resources of any individual in contact with the stream of consciousness itself, the "pure" experience or "life as it is". The identification of experience with the narrative form, as currently done in sociology, i.e. the elicitation of the expression by the sentient actor of his own perspective about life events—through different methods—is like a door prematurely closed. The result is that what is declared of the highest value and worth of being known—subjectivity—is left in the shadow and what the scientist gets home is a black box in which nobody knows what's going on. These kinds of practices could help the sociologist to observe and understand the same formation of meaning as a social process only if s/he is able to abandon a representational model of knowledge and recognize them as the original source of first-person inquiry.

© 2014 John Wiley & Sons Ltd

In the beginning, the description of daily events borders on meaninglessness in the literal meaning of the term. A yawn, a sensation of nervousness . . . participants are invited to tell them, not to capture hidden meanings: it is a form of learning that leads to the awareness of their essential relativity and impermanence. In the present approach awareness is not primarily intellectual. It intrudes a non-cognitive form through the senses and emotions.

It is not clear yet how this process happens. We have some descriptions by recognized practitioners and more recently through the neurosciences. This process seems to address the existence of a social space beyond emotions. Emotions themselves cannot be anymore interpreted following the dominant Meadian tradition in social sciences (see for a well known example: Arlie Russell Hochshild 1979); it is more fruitful to retrieve the approach offered by William James, along a recent line of thought in sociology (Barbalet 1997; 1999). Barbalet recognizes James's contribution to a non-cognitive based theory of action and in which emotion are interpreted within a somatic approach.

As Barbalet observes, James attributes to habit a function that allows less conscious skills to be involved ("mere sensations" are guide to action, conscious volition is reduced). This is especially worth of note if we believe that our society is characterized by what Ulrike Beck (1996) calls reflective modernization: routinary strategies are often unsuccessful and institutional devices have lost appeal with the affirmation of the individualization process. Tacit knowledge and sensations—no more "mere" ones—call for a different approach in social sciences.

Nevertheless, the recognition of James's contribution should take into account the possibility of a different conception of action, will and the self, a step that Barbalet cannot follow because he stresses James' attention to the future (futurity) in opposition to the usual academic attention to the past. In order to develop a coherent model, we must recognize the present: it has a heuristic value that is usually underscored. Following Barbalet, we are a step beyond the impasse of the symbolic interactionism about the mirroring self—and the constructionist or post-modern text-based orientation—but there is room for further work. In fact the social space can include also sensorial processes: social processes are constituted by bodily based interactions, not yet patterns, as Eugene Gendlin (1992) suggests. *Felt sensations* are often the precipitate of previous interpretations of the world, but the process occurs *beyond* patterns. In other words, the creation of meaning has not a symbolic base, firstly because "experiencing exceeds concepts" and secondly because there are not the external conditions that make experience possible (Gendlin 1997).

In the *Auriga* case, accuracy in description is achieved week by week by any participant, based on the instructor's guidance and support during the common session and homework. The journal describes what happens during each day and how the diarist answers to it. The analyst's attention goes to the possible variations of the "how" or, more congruently, "know how." The following excerpts with my

© 2014 John Wiley & Sons Ltd

own commentaries from the AURIGA diaries can give to the reader a more vivid representation of the process. The diary questions were adapted from Kabat Zinn's Awareness calendar (1990):

Question 1 What happened today? (positive and negative events)
Question 2 Were you aware of the pleasant and unpleasant feelings felt during this experience
Question 3 How did your body feel precisely during this experience? (describe the sensations you felt)
Question 4 What moods, feelings and thoughts accompanied the event at that time?
Question 5 At that time, did you feel that experience stressing?
Question 6 What thoughts are in your mind *now* as you write this down?

During the course participants become familiar with their reactions to life events, including body sensations. The sequence below shows the link between events, body reactions and feelings. Events are interpreted at body level: the diarist's concern for her mother's health is described through her (the diarist) body suffering, which is a good starting point for the practice proposed.

PRECOURSE WED JAN 7
Q1. 1. *Snow shoveled*
2. *Mum asks me to book a breast visit*
Q3. 1. *Hot from shoveling*
2. *Knot in the stomach*
Q4. *Fear, apprehension, anger, tenderness*

FRI JAN 9
Q1. Going with mum to have examinations
Q3. Closed stomach and trembling hands
Q4. Anger, impotence, I would have being able to do more before. I am afraid of not being able to support her, neither her nor the others . . . I feel some friends very closed to me . . .

SAT JAN 10
Q1. Living with the sadness of all my family all day long
Q3 gastrointestinal troubles, closed stomach
Q4 Feeling afraid of not being able to cope

Learning how to be present in the moment. The following initial excerpt shows the process of attention suggested in the program and its consequences for one diarist during the first days of practice alone at home.

TUE JAN 13
Q1 First experiment of meditation
Q3 stretched, irritated, I had difficulty to stay still
Q4 I do not believe to make it. How much to the end of it? What have I to do after? I can't stay still.

© 2014 John Wiley & Sons Ltd

Two main elements are embedded in the practice: attention and acceptance. Attention is achieved by different techniques that are mainly based on *concentration*—as above about breathing—or on a *general attention* without any specific object. Objects of attention become all the events occurring in the body ("*the contraction of abdominals and dorsals")* and at emotional or mental levels (*"many thoughts came to my mind"*).

WED JAN 14
Q8 Today a little better, not so nervous, even if I have always thought about how much time lasted to the end. I did not have the pressing desire to move. I practiced soon as I was awake, feeling some cold but hanging on fine. There are still too noises distracting me. Always many thoughts came to my mind but I concentrated on my breath and they changed continuously. I sneezed two times feeling the contraction of abdominals and dorsals. I wasn't able to move immediately at the end of the exercise as I had to get in touch slowly with the context.

THU JAN 15
Q8 Even today it went quite well, in the sense that I stood well the exercise without many tensions and I endure it without moving.
I have been distracted by many incoming and outgoing thoughts, withdrawn any time I concentrated on breathing.
Many times I was itchy and it overcame when I concentrated on breathing.
Two or three times I was obliged to reposition myself as the body went back.

In reading these diaries, the researcher's attention is oriented to the process itself and contents, but contents come second. The interpretation of the researcher-instructor is twofold. As a meditation teacher, she helps participants to live in the stream of experience with presence, i.e., paying attention to events without acting, which includes judging, evaluating and taking action. As a sociologist and transformative researcher, he can be of help in letting patterns emerge from the individual life or, in a group session, from the emergent properties of that group.

I prefer the term transformative researcher to action researcher for some evident reasons linked to the kind of process I am describing in this paper. The learning process in its unfolding allows subjects to identify events, code them and be aware step by step of their inconsistent nature. This adds something crucial to patterns of individuation:

(a) Such patterns are not stable elements of the context, to which attach single individuals. People can accept them uncritically or learn in the course of their lives that they are following them.
(b) Individuals can challenge their own patterns: there is no need of a change in structures "outside there." Context and situations can help or not this process but they cannot determine it. This can sounds commonsensical but reveals, if applied, an extraordinary transformational power in the situation at hand.

© 2014 John Wiley & Sons Ltd

(c) At the same time it is true that individuals cannot do very much about their own will. The action-oriented model does not work here. Agency is elusive and ungrounded as the main discovery of the contemplative practice about our ordinary life is that we do not usually control our own mind. This recognition is the first step of the awareness process.

About smoking itself, the social sciences cannot say anything about the specific smoker's trajectory. We cannot figure out the exit of her efforts to stop. The social sciences can only give a general background on which cessation is more probable. This leaves room for individual work about conditions. Some conditions cannot be changed easily by the single individual, others can; in any case, the change process is seen under a new perspective. The transformation includes inner and outer elements in a web of interactions. It does not start from a change in structures. It is a situation in which non-action plays a fundamental role, challenging known patterns (by social scientists at least). Transformation is a process not fully conscious, not fully cognitive, that happens at individual level, an individual not seen as separate from others and the context in which she lives. Individuals are no more isolated atoms, as usually defined in social sciences.

In the following descriptions, different kind of moods and feelings are witnessed and the contemplative practice helps to separate usual, well known feelings from action: a subtle space of no-action is gaining room, interrupting routinary behavior, and the awareness of it pops up.

TUE FEB 11
Anxiety, curiosity, fun: re-seeing the scene occurred a thousand' times with a pack of cigarettes
Funny self-image and self-satisfaction.

THU FEB 12
Stable mood, happiness and satisfaction for not having listened too much to my thoughts suggesting the desire of smoking.

MON FEB 16
Today somebody says something hurting me.
Thoughts of that "me" protesting

Being hurt is registered above as something happening from the outside and immediately the attention is diverted to the inside life, listening to the process of inner complaining without re-acting. The inner space is filled with contentiousness—among other feelings—and this is the color of any interaction in the moment; the space of the relationship with others is filled by this: this is the concreteness of it from one side, and it will certainly influence the other side as well. Through the repetition of the practice, her body-mind attentional skills develop, she becomes observer of what is going and from time to time, this allows

© 2014 John Wiley & Sons Ltd

the recognition of the impermanence of any event—inner or outer -. It is not a process shown by a single evident event: it's a felt process.

This could change the context as interpreted by her: i.e. fear could become something else, the properties of the events change as well, so the full description of what is going on. New meanings occur, emerging from this displacement. It's through observation of thoughts, from the outside, to say, that we can witness the process of meanings emerging, weakening and often disappearing. The awareness of this and other similar—apparently inner—processes (they are always inner–outer, as it is impossible to separate the mind from the body and the latter from the environment) is exactly what happen to the diarist. Contemplative practices, the group meetings, the instructor's attention and availability etc. all this plots for the "awakening." The cultivation of her observational skill is worthwhile as she, later, is able to write:

When thoughts lessen, I felt a great calm and some gratitude

I am using this diary to indicate useful examples and underline what the participant does in terms of experiential and contemplative work. This kind of awareness integrates the sociological one: the former focuses the attention to the moment at hand, learning that we are usually not able to control our mind—saying nothing about the outside.

The latter helps us to recognize the conditional world and its intricacies: the connection between the economic condition of a person or a group can be related to specific circumstances that must be known. Nevertheless, they are not the focus of the first kind of learning process: one is oriented to disentangle the invisible thread connecting any human condition (oneness), the other is interested in the almost infinite varieties of conditioned interactions. This is a general reflection about the different aims of the two kinds of awareness: sociological and contemplative one. In the following excerpt, the diarist displays her condition: mind over-working (uncontrolled elucubration), some nervousness, her body sensations and emotional states connected to them.

WED FEB 25
Just at home from work I was running after by thoughts about all the stuff I had to do
Head full of thoughts and being poorly there
Busy and electric; strain
Neutral mood; anxiety, confusion. Thoughts about all the stuff I had to do and all seemed urgent to me.

In another day the participant is living an opposite condition: the ability to be present in the moment with a different mood. And there are good reasons to think that the practice has generated this condition: she describes what seems to be quite a new experience, even if not lasting. It is possible to sustain that the practice nurtured her personal awareness of the relativity of our inner condition and the possibility of its transformation.

© 2014 John Wiley & Sons Ltd

Again, this is not the consequence of a cognitive reflection by the diarist: it's a *felt sense* coming from a learned skill. This can only be witnessed by first person inquiry. What we can do is to develop new methods able to refine personal skills of self-observation.

SAT FEB 28
I did a number of tasks without feeling any burden
I was "in" any thing I was doing
Light, almost inconsistent and without resistance
Mood tuned high, joy, vitality

MON JAN 26
A general sense of well being, thoughts and feelings are present but less pregnant and I relaxed very much

People's narrative about their everyday life are less important than their descriptions about their inner processes in connection with those contents. Contents, i.e. meanings about life events, so crucial in any interpretative based model in sociology, here are a medium, an opportunity to get in touch with our functioning as "human becomings."

The development of a detached observation from the inner event enables us to discover the empty nature of the self. In fact, recurrent thoughts and their persistence do not mean stability at all: it is just the emergence of a stronger pattern. Moreover, all this does not mean that society does not exists, that everything is in our mind: on the contrary, everything is both, (societal) interaction and patterns. We can discover the empty spaces within the experience itself. The contemplative claim about the interconnectedness of everything can have a stronger support. Looking at the single moment, the self shows its lack of substance.

The possibility to be observer of our own life experience suggests that we are not living in a world made of patterns, because any individual exceeds patterns (as Gendlin 1992 maintains): she is more than that. The following excerpt shows how a pattern linked to smoking and the emergence of a new behavior: no compulsion to smoke. One event does not change her life, but it is important to be able to get the signal. It can be cultivated further.

THU FEB 12
Q1 *five cigarettes a day.*
Q4 I am quite happy of not feeling the compulsive need to smoke. Later I will see what I will be able to do about.

It can happen that the past pattern reaffirms its power like below.

SUN FEB 15
Q1 I have been at home. I smoked 8 cigs so more than usual.
Q4 Phew! It well expresses my mood, I feel restless, I am sorry for the cigs in addition instead of less.

© 2014 John Wiley & Sons Ltd

It does not mean that nothing happened before or that it was an irrelevant event. What can remain is the felt sense of the relativity of both and, obviously, what is more relevant is the felt relativity of the smoking pattern that once was interrupted.

Some observations about the practice concern the context in which it occurs: they are important because she can underline the effect of outer variables on it and can be aware of how the same practice changes when the context changes. From time to time, the growth of personal skills can reduce this gap between contexts.

MON FEB 23
Q4 It looks to me that I can find harmony between body and mind [in the weekly group session], meditating alone does not offer these sensations.

Another aspect of the learning process relates to the experience with time. Its relativity is a matter of everyday practice. During the exercises, she can feel that time is relative and its relativity depends on many momentary factors affecting our momentary mood: this "discovery" seems to suggest that there is room for a stabilization of ourselves.

TUE JAN 27
Q8 I had the sense that the time spent in meditation passed on very quickly. I realize that I cannot keep the right position for the required 30 minutes and so I come back to it at a loss of concentration. I have the sense that the time needed to immerge myself into the meditative practice correctly, becomes with training less and less. (As at the beginning, once taken the right position and the breath ongoing, I took almost ten minutes, now after few breaths I achieve the right state).

Emerging patterns and meeting emotions. The description of a conflict in a hospital ward is an opportunity for the diarist to discover with some surprise that the expression of her anger popped up in public, something that never happened before, and this apparent lack of control is felt as a form of liberation from other's people judgments, being this the pattern to which she is aware to be attached to.

Q4. Feeling guilty for having surely get a rise out of the head nurse, even if I am repeating to myself that I had good reasons for my choice.
Q6 I think to be very influenced by others' judgment and by what they expect from me.

In the following excerpt, the diarist applies in real life what has learned in formal practice, apparently to get some relief.

THU FEB 26
(post surgery mum at home)
Q8 Few times I have tried to put the attention to my breath and "seeing from the outside" what's happened to me. Later on, a grain of serenity.

© 2014 John Wiley & Sons Ltd

Bad news is coming and a sense of guilty emerges in knowing that smoking is back again and more than ever. In spite of this, if the practice is followed with some discipline, it is possible to feel that the inner choice to smoke right now is the only well known strategy, not simply a past pattern stronger than ever. In a sense, it is something new any time from the point of view of the practice. The experience of relativity of any kind of event can open to new solutions.

MAR 2
Mom must re-undertake surgery
Q4 I wanted to scream, to punch the wall, I wept desperately asking why.
NOTES
I smoked a lot, more than 20 for sure. I am sorry but I cannot resist to light them up, I take shelter in a gesture that I know useless. At the bottom of my heart I think to smoke less and try—like some weeks ago—to avoid some of them but in a few time. . . .

As shown below, in the Auriga case, the social scientist' attention to content is not the unique goal. The instructor-researcher reads with a filter that interposes a space of suspension between the narrative descriptions based on events, evaluations of them etc. and the flow of diarist's life and of life in general. What is there in that space? It is a groundless social space not yet socialized, a social space in which meanings come to life.

Events are just temporary phenomena and so the meanings we attach to them. It is an exploration in a taken for granted world in which the diarist finds a breakthrough, like a scientist in a serendipity process. At some point in time, meaning vanishes. The practitioner just codes events and lets them go. Just be close to them as much as possible. It means to develop an attention to the process of meaning formation, transformation and, eventually, decay/cessation. Whatever the medium of them: thought, emotion or sensation. They are not the bricks of meaningful interactions.

WED JAN 24
Q1 I tried to live with more awareness any situation, emotion or feeling, the day.
Q2 I was aware that the day succeeded little by little easier than many others.
Q3 A little more present in each situation even if it is very easy to distract with thousand thoughts.
Q4 Every feeling has been lived in the right moment it happened, with a predominance of positive perceptions.
Q6 I am afraid of not being succeeded to repeat the experience, that it was only a coincidence and I want to put myself to the test.
Q8 I tried not to set up a goal to meditation and let it happened as it occurred, I tried to label thoughts as they emerge, trying to get back attention to breathing when I was aware that they diverted myself. I have noticed an acceleration of breath rate when attention were diverted from breath to various thoughts.

THU FEB 12
Q1 I have smoked till now only two cigs.
Q2 I realized while smoking that I could manage without it.
Q3 Craving of smoking seemed particularly present, so I did it trying to pay attention to what benefit I would have had.

© 2014 John Wiley & Sons Ltd

Q4 I felt more irascible than usual, but—being aware of feeling that way—I put the attention to breathing, with benefit. The wish to smoke comes and goes and most of the times it is easily surmountable thinking to what one is doing in that moment.

Similarly to another excerpt, the following shows that sometimes anger can be acted.

Q1 I have answered back to the group (at work): I have never done it before.
Q2 aware of being angry.
Q3 I breathed more or less fast and I felt red in my face but not so much.
Q4 Maybe I have exaggerated, but I wished to say that from a long time.
Q6 Now I am keen to smile cause I let my unease coming out and I wasn't able to do it until now. It's a liberation.

Contemplative knowledge suggests that "normal" adaptive behaviour is very often not "pathological" but maladaptive, as it is lacking of any effort helping the subject to understand his suffering and learn how to overcome it. From a more careful and closer observation it follows that the usual approach toward the *one dimensional reflective actor* ought to be substituted from an approach considering the multidimensional and apparent incoherence of the actor, with different degrees of awareness, not a consequence of a spontaneous personal endowment, but more simply consequence of self-work (working on the self).

I suggest to take Strauss and colleagues' methodological notes on body work (ib.: 261 onwards) to the extremes. In the above experience, I am not paying attention to the case of somebody working with his own body, that has it and uses it separated by himself: I made an attempt to take into account a body-mind in which self and body are the same thing, a sentient body.

For everything else, this sentient body can be read at the light of a trajectory, of types of work (component types of work: ib. 261), phases of it and a kind of division of work. For example, in the specific case of the Auriga program, this kind of work takes place through the mediation of the instructor and is a typical co-produced work.

In comparison to the professional work (Strauss et al. cited the case of the dental hygienist), it is worth the specification that the mediator does have the need of person's cooperation but he is not the main character—as any other service worker—of his own work on other's body because he is working with a sentient body; a situation that calls for a revision of the idea of body and social actor as usually intended.

However, also in this case everything happens through specific organizational conditions, often neglected by actors, including the experts, a negligence occurring above all in the field of *self work*. Therefore the work of self includes sensing, feeling and thinking. Open coding includes codes situated on different dimensions of ongoing processes. In the specific case, the organizational conditions are the health organization in which the program was developed, the non denominational orientation of the proposed practices, the possible process of transference

© 2014 John Wiley & Sons Ltd

between participant and teacher/instructor. The trajectory includes essential parts of the process that cannot be observed by the researcher but only by the sentient body. The work on the self can be observed only by who is living it (the living experience) and, in a second time, it can be described as *lived* (the *lived* experience).

The practices in question are grounded on the assumption of modifying the way we interpret the world in and around us, mainly helping us to observe without acting the model or pattern we adopt in our social relationships. This pattern usually consists in only one modality of reaction, found useful in difficult situations adopted since the past. It is not per se wrong or right, simply its systematic application in every situation shortens the range of possible answers and close us in an enclosure in which unwillingly we self-condemn us, raising up our sufferance. The understanding of the model is not intellectual, or at least not only, and not fundamentally: it is experiential. In other words in a first stage it is based on learning the skill of observing and giving attention.

This practice involves principally our sensorial dimension. The pattern is pointed out at its roots, where it took form and reproduced itself. A *sui generis* social practice like contemplation helps practitioners to overcome or shorten the weight of patterns grounded in them, the strength of socially acquired habits and from which it is difficult to part. So far the analysis does not concern the open coding of events in order to achieve—through the *constant comparison*—a sort of substantive grounded theory (GT), singling out emerging general categories, i.e. a sociologically meaningful pattern. The scope is to observe systematically our feelings and point out existing patterns; during this learning process they are deconstructed by participants. For this reason, even dimensions/events lacking of meaning (for the practitioner as well as the researcher) are part of the diary work, to say the description of the body state in a given moment. Events and meanings attached to them are not a scope in itself, as in ethnographic analysis or in GT, but only the initial step of a first person inquiry related to the ways we build social reality. The comprehensive pattern (sensations, emotions and cognitions) could change over time due to the contemplative practice.

The diary describes what happens in the day and how one responds to what happens. Analyst's attention goes to the possible changes of the how. People's expressive skills are one of the main tools for analysis but not the only ones for the instructor, which has the opportunity to observe participants' behaviour during the course, in which body work prevails; the founded difficulties can be expressed by voice, in the group or privately with the instructor.

CONTEMPLATIVE KNOWLEDGE WITHIN A TRANSDISCIPLINARY PERSPECTIVE

In this paper, I have made an effort to build a bridge between contemplative knowledge and the social sciences grounded on an unusual definition of experi-

© 2014 John Wiley & Sons Ltd

ence: embodied, interactional and presence-based. This process is a real challenge to our discipline as it indirectly questions the current meaning of the self, embodiment, tacit knowledge, suffering and the methodological tools to understand them.

As far back as twenty years ago, Anthony Giddens (1991) delineated a sort of Rubicon for our society: the passage from a relatively long historical phase based on *emancipatory politics* to the current one, mainly oriented to *life politics*. With his contributions, this British sociologist offered a brilliant intuition about the late or postmodern condition (see also Giddens 1990). My assumption is that the effort I present here is a pragmatic answer in line with the need to elaborate tools of inquiry that fit with the process and content of what he named "life politics".

Currently, as a matter of social concern, questions about the meaning of our life—which in the near past were relegated to the private existential sphere—arise and take a relevant place in the collective agenda. As social sciences seem to gain energy and commitment from the unsatisfactory "state of the world," with a consequent orientation for achievement to a never ending list of goals at personal (i.e.: "empowerment") and collective levels, they remain vulnerable in grasping this new cultural requirements. As they also follow a divided approach, they are used to concentrate their intellectual energy on the world "out there": the problem—the *enemy*, the social pathology—is outside ourselves. And ourselves are well separated from the world *somewhere out there*.

In other words, a science mainly oriented by the "lack of something" model, and self-condemned to the emancipatory realm, meets serious difficulties in elaborating an effective answer to any kind of existential issue as it sustains a "general vision almost based on the liberation of individual and groups from the constraints that affect negatively their life opportunities" (Giddens 1991).

I think we should look at the way we build our knowledge, which consequently affects how we define social problems and deal with. The mélange between these lines of research with contemplative methods allows the development of an experience-based model, in which the body-mind divide could be exceeded. An effort in this direction could also be found in a work on the introduction to social research methods by Malhotra-Bentz and Shapiro (1998).

Contemplative knowledge and practices imply an unusual form of self-observation of "inner" states, opening the way for an embodied understanding of the process, recognizing the distinction between the *lived* experience, evocated for example by personal narrative (Ellis and Bochner 2000), and the *experiencing* itself.

First person methodology means any kind of method oriented to develop one's observer skill of being present to experience and, later, the ability to describe what happened and coding it. In narrative inquiry the systematic observation—intended as wakeful presence or attention—of "internal" events includes

© 2014 John Wiley & Sons Ltd

THE TRADITIONAL APPROACH	THE EXPERIENTIAL APPROACH
cognitive and disembodied	experiential and embodied
expert / not expert divide	co-production
separate realities "outside there"	co-produced realities
action oriented	suspended action and acceptance oriented
Disciplinary, interdisciplinary or multidisciplinary oriented	mainly transdisciplinary oriented

Figure 1. Characteristics of the experiential approach compared to the traditional one.

sensations (physical reactions that can occur in specific social situations (internal or external).

So far, the introduction of contemplative methods in social science extends the toolkit of the *wakeful practitioner* oriented to a *life politics* model of transformation. It also constitutes a major challenge for the social sciences. At a theoretical level we can achieve a more complete understanding of the way people behave—i.e. how they deal with their habits. It could also be a successful enterprise if social sciences took the opportunity to improve their tools of inquiry in an area for a long time left at the margin of its interests. In fact, these methods challenge them in the methodological realm as they revive interest in first person accounts, for their invaluable relevance on the understanding of crucial aspects of the human experience, that otherwise would remain unknowable. I sum up in Figure 1 what I discussed above.

In general terms it calls for a new paradigm in science and culture, representing one of the highest and for certain most interesting and thrilling interpretations of the *Zeitgeist*. It also suggests new forms of social action and expresses an innovative model of aware change in society at any level, resumed in the message of "transformation from within", far from being another version of an individualistic-oriented change. This last process is particularly clear in these months, after the birth of the *Occupy Wall Street* movement almost three years ago and attempts to convergence between contemplative and political movements in the pursue of social justice (see online the Buddhist Peace Fellowship 2013 campaign on the economy "The system stinks": http://www.buddhistpeacefellowship.org/our-work/training-and-education/the-system-stinks/).

A sociological contribution referring precisely to the construction of a wisdom culture that fits our time of transition is in the studies on the Cultural Creatives (see Ray and Anderson 2000), a term in which two main social movements are included, the "green" one and the "human potential" one, the latter being identified with the wisdom culture. The main specificity of this new cultural wave is to be based on a pragmatic approach and a lay perspective, preserving the core questions founding their original sources.

© 2014 John Wiley & Sons Ltd

Vincenzo M.B. Giorgino
Dept. of Economic and Social Sciences, Mathematics and Statistics
University of Torino
Corso Unione Sovietica 218 bis
Torino 10134 Italy
vincenzo.giorgino@unito.it

REFERENCES

Barbalet, J. M. (1997). The Jamesian's theory of action. *The Sociological Review*, *45*, 102–121.

Barbalet, J. M. (1999). William James' theory of emotions: filling in the picture. *Journal for the Theory of Social Behaviour*, *29*(3), 251–266.

Beck, U. (1996). *Reflexive modernisierung*. Surkhamp Verlag (in Italian: Beck et al. *Modernizzazione riflessiva*. Trieste: Asterios Editore).

Bennett-Goleman, T. (2001). *Emotional alchemy: how the mind can heal the heart*. London: Rider.

Bolletino, R. (2001). A model of spirituality for psychotherapy and other fields of mind-body medicine. *Advances in Mind-Body Medicine*, *17*(1), 90–101.

Boyle, D., & Harris, M. (2009). *The challenge of co-production. How equal partnership between professionals and the public are crucial to improving public services*, December. London: NESTA. http://www.neweconomics.org/sites/neweconomics.org/files/The_Challenge_of_Co-production.pdf

Butler, K. (2002). On the borderline: how a Zen-friendly psychologist revolutionized the treatment of patients once thought hopeless. *Tricycle: the Buddhist review*, Spring.

Cahn, E. S. (2000). *No more throw-away people* (reprinted: 2004). Washington, DC: Essential Books.

Cohen, S., Kessler, R. C., & Underwood, L. (Eds.) (1997). *Measuring stress: a guide for health and social scientists*. Oxford: Oxford University Press.

Cohen, S., Underwood, L., & Gottlieb, B. H. (Eds.) (2000). *Social support measurement and intervention: a guide for health and social scientists*. Oxford: Oxford University Press.

C.R.A. (Commissione Regionale Anti-tabacco) (2007). "Cessazione del fumo di tabacco. Linee Guida clinico-organizzative per la Regione Piemonte" in Piano Regionale Anti-tabacco (PRAT). Torino: Regione Piemonte.

Dahlberg, K., et al. (2009). Lifeworld-led healthcare is more than patient-led care. An existential view of well-being. *Medicine, Health Care, and Philosophy*, *12*(3), 265–271.

Denzin, N. (2001). The reflexive interview and a performative social science. *Qualitative Research*, *1*(1), 23–46.

Department of Health (2001). *The expert patient: a new approach to chronic disease management for the 21st Century*. London: DH. http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuiance/DH_4006801

Department of Health (2005). *Creating a patient-led: Delivering the NHS improvement plan*. London: DH. http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4106506

Department of Health (2006). *A stronger local voice: a framework for creating a stronger local voice in the development of health and social care services. A document for information and comment*. London: DH. http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4137040

Duerr, M. (2004). A powerful silence. The role of meditation and other contemplative practices in American life and work. *The center for contemplative mind in society*. http://www.contemplativemind.org/

© 2014 John Wiley & Sons Ltd

Ellis, C., & Bochner, A. (2000). Autoethnography, personal narrative, reflexivity: researcher as subject. In N. Denzin & Y. Lincoln (Eds.), *The handbook of qualitative research* (pp. 733–768). Sage.

Epstein, M. (1995). *Thoughts without a thinker: psychotherapy from a Buddhist perspective*. New York: Basic Books.

Evers, A. (1996). Quality development. Part of a changing culture of care. *Personal social services' developing quality in personal social services, international seminar*, 12–14 April. Helsinki: Stakes.

Gendlin, E. T. (1992). The primacy of the body, not the primacy of perception: how the body knows the situation and philosophy. [Excerpt from pages 343–353, slightly revised]. *Man and World*, *25*(3–4), 341–353. http://www.focusing.org/gendlin/docs/gol_2162.html

Gendlin, E. T. (1997). Preface to the paper edition. In E. T. Gendlin (Ed.), *Experiencing and the creation of meaning. A philosophical and psychological approach to the subjective* (pp. XI–XXIII). Evanston, IL: Northwestern University Press.

Gerhardt, U. (1989). *Ideas about illness: an intellectual and political history of medical sociology*. London: MacMillan.

Gergen, K. J. (2009). *Relational being: beyond self and community*. Oxford: Oxford University Press.

Giddens, A. (1990). *The consequences of modernity*. Cambridge: Polity Press.

Giddens, A. (1991). *Modernity and self-identity: self and society in the late modern age*. Cambridge: Polity Press.

Goffman, E. (1961). *Asylums: essays on the social situation of mental patients and other inmates*. Chicago: Aldine Co.

Hochshild, A. R. (1979). Emotion work, feeling rules, and social structure. *American Journal of Sociology*, *85*(3), 551–575.

Hochshild, A. R. (1983). *The Managed heart. Commercialization of human feeling*. Berkeley: University of California Press.

Hughes, E. (1956). Social role and the division of labor. *Midwest sociologist*, Vol. XVII, republished in Hughes, E. (1971). *The Sociological Eye*. Chicago: The University of Chicago Press.

Kabat-Zinn, J. (1990). *Full catastrophe living*. London: Piatkus.

Kabat-Zinn, J. (2005). *Coming to our senses: healing ourselves and the world through mindfulness*. London: Piatkus.

Kornfield, J. (2000). *After the ecstasy, the laundry: how the heart grows wise on the spiritual path*. London: Ryder.

Lindsay, S., & Vrijhoef, H. J. M. (2009). Introduction: a sociological focus on "expert patients". *Health Sociology Review*, *18*(2), 139–144.

Linehan, M. M., et al. (1999). Dialectical behavior therapy for patients with borderline personality disorder and drug-dependence. *The American Journal on Addictions*, *8*, 279–292.

Lyon, M. (1994). Emotion as mediator of somatic and social processes: the example of respiration. *Social Perspective on Emotion*, *2*, 83–108.

Magid, B. (2002). *Ordinary mind. Exploring the common ground of Zen and psychotherapy*. Boston: Wisdom Publication.

Malhotra-Bentz, V., & Shapiro, J. (1998). *Mindful inquiry in social science*. London: Sage.

NEF (2002). *The mutual health service*. London: NEF.

NEF (2006). *Aspects of co-production: the implication for work, health and volunteering*. London: NEF. http://www.neweconomics.org/publications/aspects-of-co-production

Nonaka, I., & Takeuchi, H. (1995). *The knowledge-creating company: how Japanese companies create the dynamics of innovation*. Oxford: Oxford University Press.

© 2014 John Wiley & Sons Ltd

Ospina, M. B., et al. (2007). Meditation practices for health: State of research' evidence report/technology assessment. N°155, University of Alberta, AHRQ Publication N°07-E010, Agency of Healthcare Research and Quality, June. http://www.ahrq.gov/downloads/pub/evidence/pdf/meditation/medit.pdf

Ostrom, E. (1996). Crossing the great divide: co-production, synergy, and development. *World Development*, *24*(6), 1073–1087.

Perry, J., et al. (2006). *Confronting the challenges of work today: new horizons and perspectives*. In L. Pettinger, et al. (Eds.), *A new sociology of work?* Oxford: Blackwell Publishers.

Ray, P. H., & Anderson, S. R. (2000). *The cultural creatives: how 50 million people are changing the world*. Harmony. On the emerging planetary wisdom culture see also: www.culturalcreatives.org

Roustang, G. (1993). Personal social services: the nature and consequences of their special Economy. In A. Evers & I. Svetlik (Eds.), *Balancing pluralism. New welfare mixes in care for the elderly*. Vienna: Avebury.

Roth, J. (1963). *Timetables: structuring the passage of time in tuberculosis treatment and other careers*. Indianapolis: Bobbs-Merrill.

Schwartz, H., & Jacobs, J. (1979). *Qualitative sociology: a method to the madness*. New York: The Free Press. (quotation from the Italian edition 1987: page 131 *Sociologia qualitativa. Un metodo nella follia*. Bologna: Il Mulino).

Senge, P. M. (1990). *The Fifth discipline: the art and practice of the learning organization*. London: Random House.

Stacey, M. (1993). *The sociology of health and healing*. London: Routledge.

Strauss, A., et al. (1985). *Social organization of medical work*. Chicago: The University of Chicago Press.

Veenhoven, R. (2006a). Sociology's blind eye for happiness. Paper presented at the 16th World Congress of Sociology. Durban: South Africa. http://www1.eur.nl/fsw/happiness/

Veenhoven, R. (2006b). Happiness in hardship. In L. Bruni & P. L. Porta (Eds.), *Economics and happiness: framing the analysis*. Oxford: Oxford University Press. http://www1.eur.nl/fsw/happiness/

© 2014 John Wiley & Sons Ltd