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Buddhist Teachings for Improving Mental Health During the COVID-19 Pandemic

Sukhumpong Channuwong^{1*} and Suvin Ruksat¹

Author Affiliation

¹ Associate Professor, Graduate School, Mahamakut Buddhist University, Thailand.

*Corresponding author e-mail:
Kruprofessor@gmail.com

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Abstract

The purpose of this research was to determine how Buddhist teachings can be implemented to improve mental health during the COVID-19 pandemic. A sample of Thai residents (n=356), who practiced Buddhist teachings in the selected Buddhist meditation centers in Bangkok, completed the research questionnaire. Data were analyzed using structural equation modeling (SEM) technique. The research findings revealed that the model had an acceptable fit, chi-square = 127.99, df = 106, $p = .07$, CMIN/DF = 1.20, GFI = .96, and RMSEA = .02. The results indicated that Buddhist teachings about mindfulness had positive effect on mental health during the COVID-19 pandemic: mindfulness of breathing ($\beta = .95, p = .00$), mindfulness of feelings ($\beta = .91, p = .00$), mindfulness of the mind ($\beta = .85, p = .00$), and mindfulness of the truth of life ($\beta = .75, p = .00$). This study contributes to behavioral science by presenting practical ways for Thai people to improve mental health during the COVID-19 pandemic. The findings suggest that Buddhist teachings about mindfulness could be implemented to increase mental happiness, mental peace, mental energy, and mental stability.

In the midst of COVID-19 pandemic, human beings are experiencing both physical and mental suffering. Physical suffering includes sickness and death caused by the rapid outbreak of COVID-19, and some difficulties such as a loss of job employment and income, a lack of cash flow to run business and business closure. Mental suffering includes worry, anxiety, and stress caused by fear of COVID-19 infection. Kumar and Nayar (2021) and Lam et al. (2022) found that COVID-19 caused unprecedented mental health problems around the world. At this difficult time, many individuals feel depressed, frustrated, helpless and isolated. Therefore, it is important to find the ways to boost individual's well-being and promote their mental resilience. Sombultawee et al. (2021) and Wolor et al. (2021) stated that the rapid outbreak of the COVID-19 has significantly changed the ways people live, work and perform their activities. People have to adjust themselves to the changing situations of the new normal life in order to survive this pandemic and live with mental well-being. Phrakhrusripariyativitan (2020) found that people are now experiencing difficulties and sufferings caused by the outbreak of the COVID-19 pandemic, which started in the end of the year 2019 until the present time. In order to prevent the outbreak of the COVID-19, Thai people have to strictly obey and follow the COVID-19 Prevention Standards issued and controlled by the Thai government. The examples of these rules are that people are prohibited from going outside their residences in some periods of time; they are not allowed to travel to some risky places and cannot perform some activities with a large group of people.

Leela-Adisorn (2021) and Wongwassana (2021) found that in general, COVID-19 has a great impact on health, economic status, social condition and working environment. It also has a direct negative effect on happiness at work and costs a lot of money for prevention and treatment of the infected people. Moreover, the elder people with low immune system tend to be easily infected by the COVID-19 and have more chances to die than adults. When a number of infected people are increasing rapidly, the Thai government has to pay much attention on prevention and treatment of those people. However, the existing medical facilitations of the government which are limited cannot admit a large number of patients. So, many people have to take care of themselves by just temporarily receiving medical advice from a doctor. As such, some people are having more mental health problems.

Buddhism is the dominant religion in Thailand, and approximately 94% of Thai people classify themselves to be Buddhist. Most of Thai people believe in and adhere to Theravāda tradition; they follow the principles of Buddhist teachings to improve their mental health in daily life (Lertladaluck et al., 2021; National Statistic Office, 2018). Buddhism has been recognized for its great emphasis on an individual development, personal development, mental development, and self-awareness (Stein, 2017). Buddhism is accepted worldwide as an ancient religion, principle and philosophy of living. The recent interest in mindfulness as a useful tool to support mental health and well-being in the West has highlighted the importance of Buddhist-derived concepts and strengthened the desire to understand Buddhism in its more complete form (Laurent et al., 2021). Buddhism teaches that if we cannot change the external situations which are beyond our control, we should change our perspectives and control the mind not to be affected by unsatisfactory situations (Channuwong et al., 2022; Piuchan, 2021). By this way, one can still seek for happiness and peace within one's mind.

The Thai government is trying to find the ways to help people to prevent the spread of COVID-19. In addition to physical suffering, many people are experiencing mental sufferings such as stress, depression, worry and anxiety. In this regard, the researchers consider that Buddhism may provide the alternatives for the solutions to the current problems and give useful directions to those who seek for mental happiness and peace through practicing the four foundations of mindfulness: mindfulness of breathing, mindfulness of feelings, mindfulness of the mind, and mindfulness of the truth of life (Laurent et al., 2021; Phra Brahmaganabhorn, 2015).

Therefore, this research aimed to study mental health of participants who practiced Buddhist teachings, to analyze Buddhist teachings that could be used for improving mental health, and to determine the effect of Buddhist teachings on mental health during the COVID-19 pandemic.

Literature Review

This section presents the literature review about mental health and Buddhist teachings for improving mental health

Mental Health

Mental health is a state of being free from illness and mental problem, including the ability to cope with stress, worry and anxiety, the ability to work efficiently and effectively, and the ability to work for the benefits of oneself, the others, and the society where he or she is living (Ahipanyo 2017; Corrigan et al., 2014). Mental health is considered as the foundation of mental well-being and effective functioning for an individual and for a community. Mental health is fundamental to our collective and individual ability to think, perform activities, interact with each other, live and enjoy life (World Health Organization, 2004; World Health Organization, 2022). Mental health can be defined as cognitive, behavioral and emotional well-being (Kumar & Nayar, 2021). Usually, the term “mental health” means the absence of mental disorder, mental illness and mental problem. Mental health can affect daily living, relationships, routine jobs and physical health (Felman, 2020). Mental health, physical health, and social functioning are interdependent and may co-exist. Mental health affects physical health and social functioning, and vice

versa, physical health and social functioning affect mental health (Sartorius, 1990). Mental health influences how people think, feel and behave in daily life. It also affects the ability to cope with stress and overcome challenges and difficulties. In addition, mental health problem does not affect only mental sufferings such as distress, confusion, depression, worry and anxiety, but also affects physical conditions such as illness, headache, fever, insomnia, gastritis, muscle tension, and backache (Pfefferbaum & North, 2020). Ohrnberger et.al. (2017) and Wertheimer (1938) stated that mind and body are interrelated and cannot be separated apart from each other. Physical condition is affected by mental condition, and vice versa. In addition, individual reacts and responds to the stimulus through the processes of thinking, perception and insight.

Mental health is affected by three factors: biological, social and psychological factors. (1) biological factors are the internal factors resulted from different physical conditions such as chemicals in the brain, neurotransmitter and heredity, which can cause a major depressive disorder (World Health Organization, 2001). (2) social factors are factors related to social environments which include social structure and social processes, family, political, economic, and financial factors that have a positive or negative impact on the individual (Laurent et al., 2021; World Health Organization, 2001). (3) psychological factors are the internal factors related to the emotion, feelings, motivation, attitudes and beliefs of the individual which have a direct impact on mental health (Dillard & Meier, 2021; Shaku et al., 2014; World Health Organization, 2001).

Buddhist Teachings for Improving Mental Health through Mindfulness

Mindfulness can be defined as “remembering to pay attention to our present moment experience.” Paying attention to the present moment and activity can help people to avoid unexpected errors and to work effectively (Davis & Hayes, 2011; Black, 2011). Mindfulness refers to being attentive to and aware of the present moment by just observing without judgement (Lam et al., 2022; Shapiro et al., 2006). Mindfulness was associated with psychological well-being and mental health during COVID-19 pandemic, and was positively associated with constructive coping strategies such as planning, seeking support and reframing (Dillard & Meier, 2021; Majeed et al., 2020; Park et al., 2021).

Buddhist teachings for improving mental health in this study are the four foundations of mindfulness. According to Phra Brahmaganabhorn (2015), there are four foundations of mindfulness 1. mindfulness of breathing or body; 2. mindfulness of feelings; 3. mindfulness of the mind; and 4. mindfulness of the truth of life. The four foundations of mindfulness are considered as the most important Buddha’s teachings which can be implemented to improve mental health, to purify the mind and attain enlightenment. The Buddha encouraged his disciples to practice the four foundations of mindfulness by stating that the four foundations of mindfulness are the one and only path leading to mental purification, to passing far beyond grief and lamentation, and to the attainment of a state of eternal happiness (Khare, 2015; Kaviratana, 1980; Mahachulalongkornrajavidyalaya, 1996).

The Buddha also stated that cultivating the four foundations of mindfulness can bring the seven factors of awakening to fulfillment. The seven factors of awakening consisting of mindfulness, truth investigation, effort, rapture, tranquility, concentration, and equanimity can be cultivated to obtain knowledge and liberation. Obtaining knowledge and liberation leads to mental health development (Channuwong et al., 2018; Pali Text Society, 2013). Table 1 presents the processes of the four foundations of mindfulness which can be applied to improve mental health.

People can follow the four foundations of mindfulness to create mindfulness and peace of mind. There are four kinds of benefits which people can achieve from meditation practice according the four foundations of mindfulness i.e. happiness in the current life, vision of the truth through insight wisdom, completion of mindfulness and consciousness, and cessation of mental defilement and suffering. In addition, the four foundations of mindfulness can be implemented to improve mental health, a state of being free from mental

suffering (Channuwong et al., 2022; Brahmaganabhorn, 2015). Scott (2018) described that Buddhism provides many useful ways to cope with mental suffering. Buddhism teaches people to be aware of the present moment, and focus on the activity they are performing. Being mindful with the present activity and movement enables practitioners to control their mind and to avoid negative feeling that is the cause of stress and mental suffering.

Table 1*The Processes of the Four Foundations of Mindfulness for Improving Mental Health*

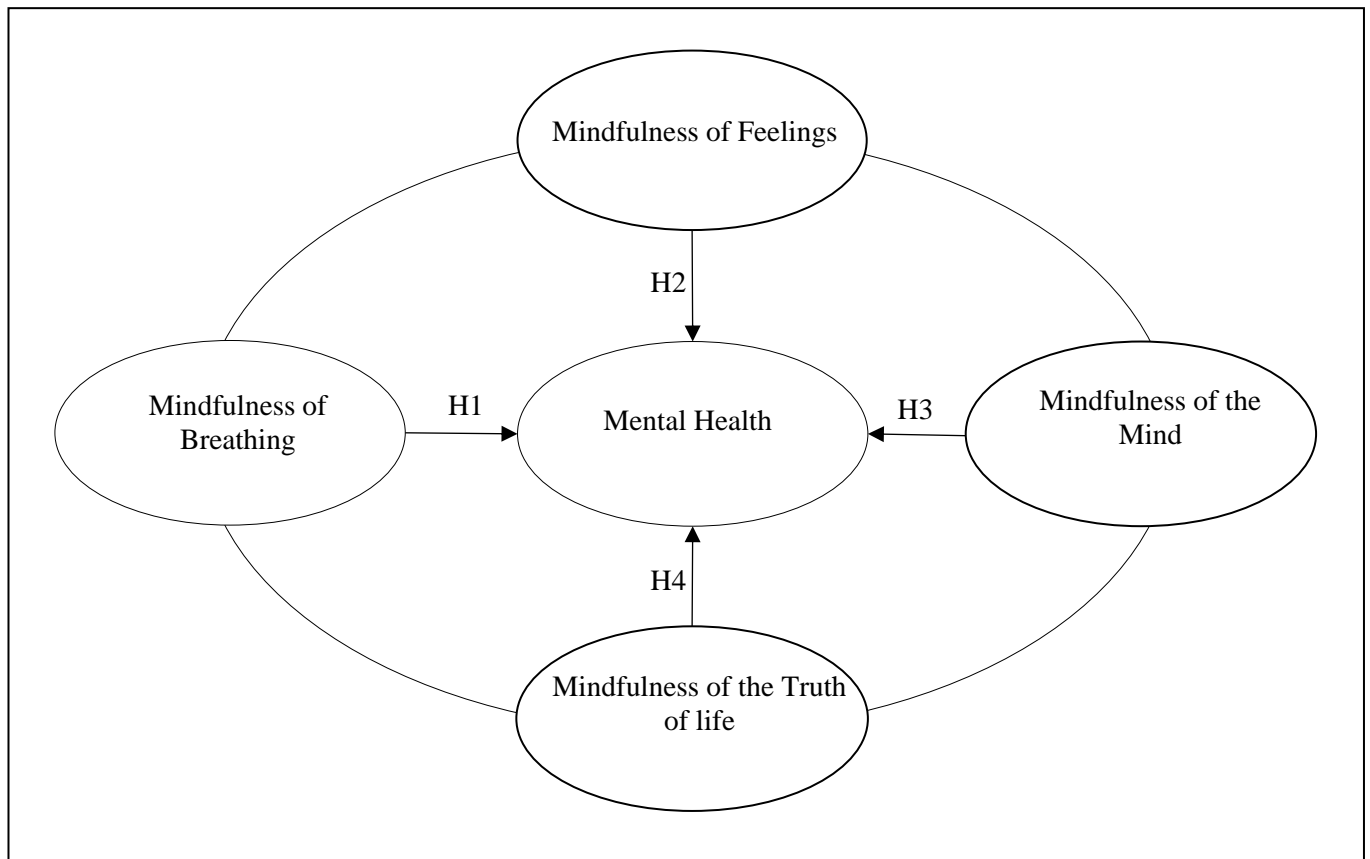
Four Foundations of Mindfulness	Processes for Improving Mental Health
1. Mindfulness of breathing or body (MB)	<ol style="list-style-type: none"> 1. Having mindfulness in contemplation of breathing in and breathing out for mental relaxation. 2. Having mindfulness in contemplation of each posture: standing, walking, sitting, and sleeping in order to be aware of the present moment. 3. Having consciousness of each bodily action in order to be aware of the current action and activity. 4. Having mindfulness in contemplation of body as if it is composed of four elements: earth, water, wind, and fire, in order to relinquish clinging and attachment.
2. Mindfulness of feelings (MF)	<ol style="list-style-type: none"> 1. Having mindfulness in creating positive feeling and attitude towards the experiencing problem. 2. Having mindfulness in contemplation of happiness, success, and hopefulness in life. 3. Having mindfulness in contemplation of mental formation to consider the causes, reasons, and truths of the problems. 4. Having mindfulness in contemplation of calming mental formation in order to stop the frustrating and muddling emotion.
3. Mindfulness of the mind (MM)	<ol style="list-style-type: none"> 1. Fostering mindfulness and making the mind to be joyful and happy. 2. Stabilizing the mind to be able to cope with unsatisfactory situations. 3. Practicing mindfulness in contemplation of each mental movement in order to be aware of negative emotion. 4. Making the mind free from emotions that are the sources of stress.
4. Mindfulness of the truth of life (MT)	<ol style="list-style-type: none"> 1. Having mindfulness in contemplation that everything is impermanent; it occurs, exists in one period of time, and declines by its own nature. 2. Understanding the reality of life in both positive and negative sides and being able to detach them without any attachment. 3. Understanding the changes of everything and detachment from all negative emotions. 4. Understanding the causes of suffering and being able to eliminate them so that suffering will never happen.

This study contributes to behavioral science by providing useful ways for Thai people to adjust their attitude and behavior to react and respond to the stimulus or arousing things in the most appropriate ways. Mindfulness of breathing can help a person to improve mindfulness in each bodily movement; it can help to reduce stress, muscle tension, headaches and abnormal blood circulation. Mindfulness of feelings can help a person to control his or her emotion, reduce negative thought and create positive feeling. Mindfulness of the mind can help a person to gladden the mind, and to make the mind happy and joyful. Mindfulness of the truth of life can help a person to understand and realize the reality of things that are conditioned to the threefold characteristics: Impermanence, suffering and non-self. It can help a person to release clinging and attachment to the worldly matters, and transcend unsatisfactory situations. Figure 1 presents the conceptual framework of this study. Based on the literature review, the researchers have developed the research hypotheses as follows:

- H1: Mindfulness of breathing has a positive effect on mental health
- H2: Mindfulness of feelings has a positive effect on mental health
- H3: Mindfulness of the mind has a positive effect on mental health
- H4: Mindfulness of the truth of life has a positive effect on mental health

Figure 1

Proposed Conceptual Framework



Method

Participants

The population in this study was 5,150 Thai residents, living in Bangkok, who practiced the four foundations of mindfulness in daily life in three Buddhist meditation centers: Wat Dhammamongkol, Wat Paknam and Wat Mahathat. The formula of Taro Yamane was applied to calculate the sample size from the whole population, yielding 370 samples. A questionnaire was used to collect data from 370 samples.

Participants who do not understand about Buddhist teachings and never practice meditation were excluded from this study. Incomplete questionnaires were discarded to ensure accurate and reliable data analysis.

Instruments and Procedure

The instrument used to collect data in this study was a research questionnaire, which was developed in Thai in order to provide best understanding and avoid excluding participants due to English proficiency and then translated to English. The questionnaire was developed by adapting several previous research findings about Buddhist teachings of mindfulness (Channuwong et al., 2022; Davis & Hayes, 2011; Phra Brahmaganabhorn, 2015) and mental health (Khare, 2015; Ohrnberger et al., 2017; World Health Organization, 2004). The researchers had conducted content validity and reliability test of this study with the following steps: 1) The research questionnaire was checked by three research scholars in order to verify the content validity using Item Objective Congruence Index (IOC), and the IOC value of .97 was obtained. 2) The researchers had conducted a try-out by distributing the research questionnaires to 30 people who had similar characteristics but were not the samples in this study in order to find the reliability value of the questionnaire, and the reliability value of .95 was obtained. 3) The researchers had corrected the research questionnaire according to the comments and suggestions of the research scholars before distribution to the targeted samples.

The questionnaire consisted of the following three parts; part one was a research questionnaire containing six questions with regard to demographic profiles of respondents i.e. gender, age, marital status, educational level, monthly income, and meditation practice experience. Part two was a research questionnaire containing 12 questions with regard to mental health in the form of 5-point Likert scales. An example of item was *“I am happy and satisfied with my life”*. The result after pretesting process indicated the internal consistency of .92. Part three was a research questionnaire containing 16 questions with regard to Buddhist teachings about mindfulness in the form of 5-point Likert scales. An example of item was *“I am mindful of breathing in and breathing out for mental relaxation”*. The result after pretesting process indicated the internal consistency of .95. The criteria used to interpret data (Preedy & Watson, 2010) were as follows: 1 = strongly disagree; 2 = disagree; 3 = neither agree nor disagree; 4 = agree; and 5 = strongly agree. Criteria used to interpret the mean value were as follows: 1.00-1.80 = strongly disagree; 1.81-2.60 = disagree; 2.61-3.40 = neither agree nor disagree; 3.41-4.20 = agree; and 4.21-5.00 = strongly agree.

Data Collection and Analysis

The researchers had distributed 370 research questionnaires to the targeted samples, using convenience sampling during September 1, 2021 - November 30, 2021, and 356 participants completed the research questionnaire, which can be calculated as 96 percent. Frequency, percentage, mean, standard deviation, and Structural Equation Modeling (SEM) technique were used to analyze the data. The collected data were analyzed, using SPSS AMOS Program Version 23.

Ethical Considerations

This research was approved by the Ethical Committee of the Graduate School of Mahamakut Buddhist University, Thailand on May 30, 2021 (GS-MBU 05/2021).

Results

Descriptive Statistics

The final sample size of this study was 356 participants. Table 2 showed that the majority of participants were male (55.05%). The largest age group was between 36-45 years (39.60%). Most of participants were single (49.43%). Most of participants graduated bachelor's degree (42.98%). The largest group of participants received monthly income between 25,001- 35,000 Thai Baht (\$757-1,006) (46.35%). The majority of participants had meditation practice experience between 6-15 years (33.15%).

Table 3 showed that mental health of participants who practiced Buddhist teachings, in total, was perceived at high level ($M = 4.00$, $SD = 0.63$). In particular, mental happiness was perceived at the highest level ($M = 4.19$, $SD = 0.56$), followed by mental peace ($M = 4.18$, $SD = 0.63$), mental energy ($M = 3.89$, $SD = 0.67$), and mental stability ($M = 3.75$, $SD = 0.69$), respectively.

Table 4 showed that Buddhist teachings for improving mental health during the COVID-19 pandemic, in total, were perceived at the highest level ($M = 4.28$, $SD = 0.93$). In particular, mindfulness of breathing was perceived at the highest level ($M = 4.45$, $SD = 0.90$), followed by mindfulness of feelings ($M = 4.35$, $SD = 0.91$), mindfulness of the mind ($M = 4.20$, $SD = 0.92$), and mindfulness of the truth of life ($M = 4.15$, $SD = 0.93$) respectively.

Table 2

Demographic Profile of Respondents (n = 356)

Profile	Category	Frequency	Percent
Gender	Male	196	55.05
	Female	160	44.94
Age	25 years or less	35	9.83
	26 – 35 years	59	16.57
	36 – 45 years	141	39.60
	46 – 55 years	71	19.94
	>56 years	49	13.76
Marital status	Single	176	49.43
	Married	153	42.97
	Divorced	12	3.37
	Widowed	14	3.93
Education	<Bachelor's Degree	130	36.51
	Bachelor's Degree	153	42.98
	Master's degree	47	13.20
	Doctoral Degree	26	7.30
Monthly	15,000 Thai Baht or less	59	16.57
	15,001 – 25,000 Thai Baht	83	23.31
	25,001 – 35,000 Thai Baht	165	46.35
	35,001 – 45,000 Thai Baht	35	9.83
	>45,000 Thai Baht	14	9.93
Meditation Practice Experience	5 years or less	83	23.31
	6 – 15 years	118	33.15
	16 – 25 years	71	19.94
	26 – 35 years	47	13.20
	> 35 years	38	10.67
	Total	356	100.0

The Measurement Model

Confirmatory Factor Analysis (CFA) was first conducted to evaluate the factor loading and the consistency between the empirical data and the model. The research results from Structural Equation Modeling (SEM) analysis in Table 5 showed that the Chi-square probability level was equal to .07, which was more than the cut-off value of .05 (Joreskog & Sorbom, 1996; Kamkede, 2008). The Chi-square Mean Index/Degree of Freedom (CMIN/DF) was equal to 1.20, which was less than the cut-off value of 3. The Goodness of Fit Index (GFI) was equal to .96, which was more than the cut-off value of .90. The Root Mean Square Error of Approximation (RMSEA) was equal to .02, which was less than the cut-off value of .06 (Kenny et al, 2015; Steven, 2009). Therefore, it can be concluded that four statistical tests passed the evaluation criteria at good fit.

Table 3

Mean and Standard Deviation of Mental Health of Participants Who Practiced Buddhist Teachings

No.	Mental Health	<i>M</i>	<i>SD</i>	Interpretation	Ranking
1	Mental happiness	4.19	0.56	High	1
2	Mental peace	4.18	0.63	High	2
3	Mental energy	3.89	0.67	High	3
4	Mental stability	3.75	0.69	High	4
Total		4.00	0.63	High	

Table 4

Mean and Standard Deviation of Buddhist Teachings for Improving Mental Health during the COVID-19 Pandemic

No.	Buddhist Teachings	<i>M</i>	<i>SD</i>	Interpretation	Ranking
1.	Mindfulness of breathing	4.45	0.90	Highest	1
2.	Mindfulness of feelings	4.35	0.91	Highest	2
3.	Mindfulness of the mind	4.20	0.92	High	3
4.	Mindfulness of the truth of life	4.15	0.93	High	4
Total		4.28	0.93	Highest	

Table 5

Comparisons of Measurement Model

No.	Relevant Statistics	Cut-Off Value	Result	Interpretation
1.	Chi-square	$p > .05$.07	Good Fit
2.	CMIN/DF	< 3	1.20	Good Fit
3.	GFI	> .90	.96	Good Fit
4.	RMSEA	<.06	.02	Good Fit

The results of statistical analysis in Figure 2 showed the causal relationships between Buddhist teachings of mindfulness and mental health during the COVID-19 pandemic, and factor loading of each observed and latent variable. From SEM analysis, it is found that mindfulness of breathing influenced mental health ($\beta = .95, p = .00$), followed by mindfulness of feelings ($\beta = .91, p = .00$), mindfulness of the mind ($\beta = .85, p = .00$), and mindfulness of the truth of life ($\beta = .75, p = .00$). Therefore, it can be concluded that the four hypotheses: mindfulness of breathing, mindfulness of feelings, mindfulness of the mind, and mindfulness of the truth of life had a positive effect on mental health at the statistical significance of .01 level as shown in Table 6.

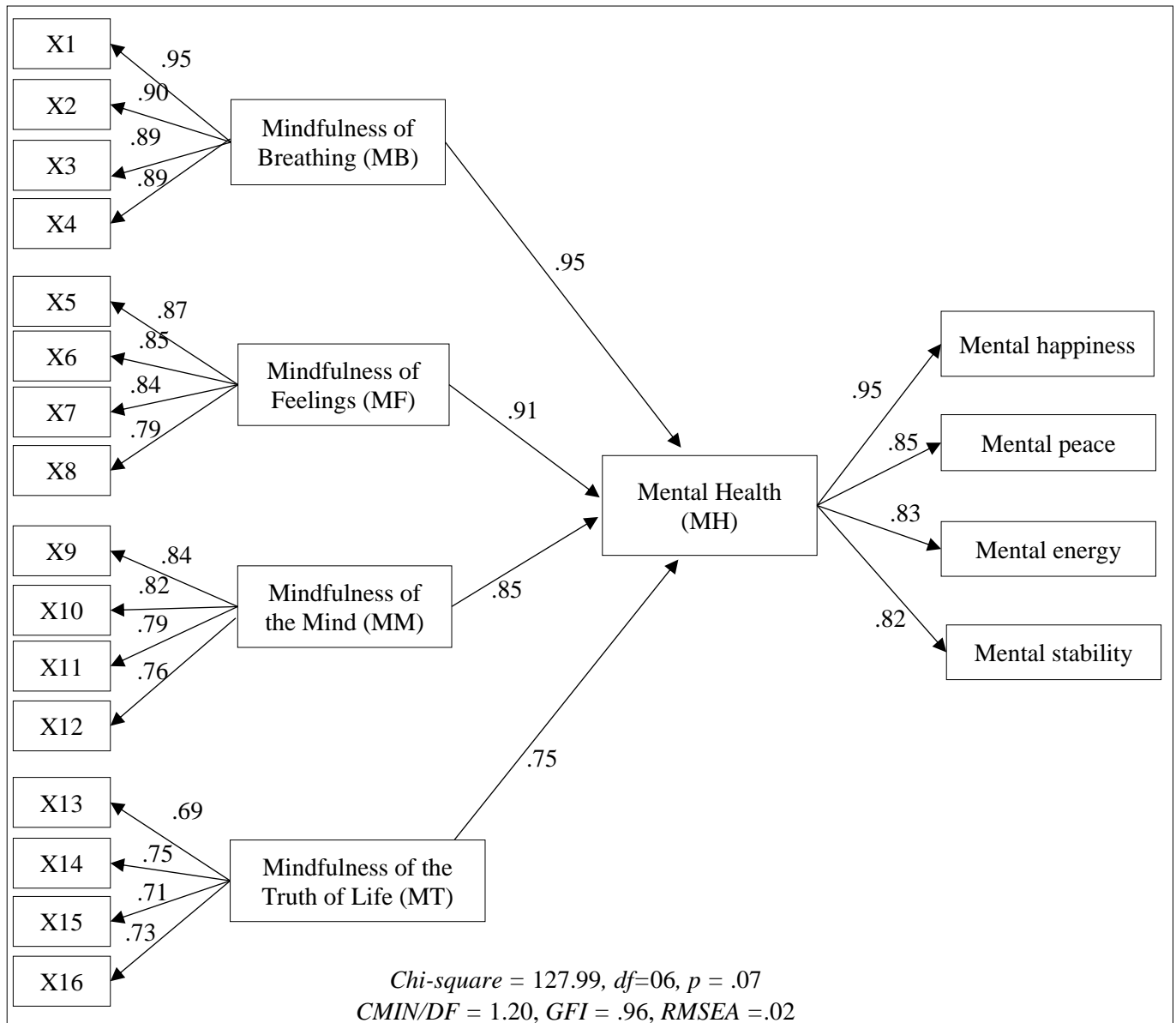
Table 6
Summary of Model Effects

No.	Path	β	t	p -value
1	Mindfulness of Breathing (MB) → Mental Health (MH)	.95	5.16	0.000
2	Mindfulness of Feelings (MF) → Mental Health (MH)	.91	4.12	0.000
3	Mindfulness of the Mind (MM) → Mental Health (MH)	.85	3.58	0.000
4	Mindfulness of the Truth of Life (MT) → Mental Health (MH)	.75	2.43	0.000

Discussion and Conclusion

The overall purpose of this research was to determine the effect of Buddhist teachings of mindfulness on mental health during the COVID-19 pandemic. The research results showed that Buddhist teachings consisting of mindfulness of breathing, mindfulness of feelings, mindfulness of the mind, and mindfulness of the truth of life had a positive effect on mental health.

Figure 2
A Causal Model of the Relationships between the Buddhist Teachings of Mindfulness and Mental Health during the COVID-19 Pandemic



The first hypothesis tested a relationship between mindfulness of breathing and mental health. The research result demonstrated a positive effect of mindfulness of breathing on mental health ($\beta = .95, p = .00$). The result of this research was consistent with a study of Phra Brahmaganaborn (2015) which found that Buddhist teachings, especially mindfulness of breathing can be implemented to reduce stress, and to create mental relaxation and happiness. By focusing on breathing in and breathing out, pleasure, rapture, calmness, tranquility and equanimity will arise. The result of this study was also consistent with a study of Piuchan (2021) which found that the main purpose of breathing meditation is to purify and strengthen the mind. Breathing meditation will generate mental power, mental energy and capability to deal with many problems and increase work performance. In addition, Kelly (2010) found that breathing meditation is promoted as a mental therapy to reduce human sufferings and increase physical and mental health. In this regard, Rattanayano and Phrakrubhavanabhodhikhun (2017) found that mindfulness of breathing is the way to increase physical and mental health. Breathing meditation can be practiced in all four bodily movements: standing, walking, sitting, and lying. It is an easy way to practice by just concentrating and paying attention on breathing.

The second hypothesis tested a relationship between mindfulness of feelings and mental health. The research result demonstrated a positive effect of mindfulness of feeling on mental health ($\beta = .91, p = .00$). The result of this research was consistent with the studies of Shonin et al. (2014) and Shaku et al. (2014), which found that using Buddhist practice, especially controlling one's feeling and sensation can increase both positive mental and physical health effects. In addition, Laurent et al. (2021) found that an adoption of basic Buddhist belief such as creating positive feeling, self-regulation, generosity, compassion and kindness may results in effective treatment of mood disorders and mental illness.

The third hypothesis tested a relationship between mindfulness of the mind and mental health. The research result demonstrated a positive effect of mindfulness of the mind on mental health ($\beta = .85, p = .00$). The result of this research was consistent with a study of Ahipanyo (2017) and Shaku et al. (2014) which found that mindfulness of the mind can help to improve mental health; this technique can be implemented to free the mind from negative emotions and train the mind to be in good quality, to have strength, stability and purity, to be optimistic, to be happy, and to create relaxation in the midst of difficult situations.

The fourth hypothesis tested a relationship between mindfulness of the truth of life and mental health. The research result demonstrated a positive effect of mindfulness of the truth of life on mental health ($\beta = .75, p = .00$). This result was consistent with a study of Rattanayano and Phrakrubhavanabhodhikhun (2017) which found that mindfulness on the truth of life can help a person to understand the reality of things and to realize that everything in the world is impermanent, and not suitable for clinging and attachment as it happens, lasts for a moment, and then comes to an end. In addition, Channuwong et al. (2022) found realizing that everything is impermanent, full of suffering and non-self is fundamental to increase wisdom, to release ego and attachment, and to transcend unsatisfactory events.

Limitations

The samples used in this study were limited to a group of people who followed Buddhist teachings and practiced meditation through the four foundations of mindfulness in the selected Buddhist meditation centers in Bangkok. It is possible that the results of this study might not represent the whole Buddhist populations who practice different kinds of Buddhist teachings. Moreover, this study was conducted during the rapid spread of the COVID-19, it is possible that the difficult situations caused by the COVID-19 might have both positive and negative effect on the consideration of participants who completed the questionnaire.

Implications for Behavioral Science

This study contributes to behavioral science by providing practical ways for Thai people to improve mindfulness, consciousness and awareness in order to adjust their attitude and behavior to live with safety and happiness during the COVID-19 pandemic. Buddhist teachings of mindfulness could lead to increase mental happiness, mental peace, mental energy and mental stability.

Conclusion

The results of hypotheses testing confirmed that mindfulness of breathing, mindfulness of feelings, mindfulness of the mind, and mindfulness of the truth of life had a positive effect on mental health. Since Buddhism teaches people to understand, realize the present moment and find the ways to cope with the current problems with wisdom, awareness and mindfulness, it is recommended that people in other similar cultural contexts explore how to apply Buddhist teachings by taking care of body, creating positive feeling, strengthening the mind, and understanding the nature of life in order to cope with the current situations of the COVID-19 pandemic and improve mental health.

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