Life in the Buddha’s Hospital

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The Dhamma is like medicine. You can see this from the way the Buddha teaches. He starts off with the four noble truths, which are very much like an analysis of how to care for a disease. In his case, he’s offering a cure for the basic disease of the mind: the suffering that comes from craving and ignorance. That’s what we’ve got to cure. So he analyzes the symptoms of the disease, diagnoses it, explains its causation, discusses what it’s like to be free of the disease, and then shows a path of treatment that leads to the end of the disease, to a state of health.

It’s important that we keep this in mind as we practice here together: We’re working on the diseases of our own minds. Each of us has illnesses. And although the basic causes of illness are the same—craving, ignorance—our cravings are different. Our particular brands of ignorance are different as well. This is why we have to make allowances for each other, because different people have to undergo different courses of treatment.

It’s like going into a hospital. It’s not the case that everyone in the hospital has the same diseases. Some people have cancer, some have heart diseases, some have liver diseases. Some people have diseases from eating too much, some from eating too little. There are all kinds of different diseases in the hospital. And it’s the same way here in the monastery. We each have our own particular diseases. And our duty here is to take care of our own diseases without picking up diseases from other people—and at the same time not getting upset that somebody else is taking a different kind of medicine than you are. Each of us has his or her own diseases requiring specific kinds of medicine. Some medicines are bitter and unpleasant to take; other medicines are a lot easier to swallow. So each of us has his or her own course of treatment. It’s important that we pay attention to our own course of treatment, and not worry about the treatments of others.

If some people don’t seem to be recovering from their diseases as fast as you would like them to, well, again, it’s their disease. Try to keep this in mind. Remember what Ajaan Lee says: “When you look inside, it’s Dhamma. When you look outside, it’s the world.” And it’s not just that you’re a detached observer looking at the world. Your whole mind becomes the world as well when you start focusing outside. “This person does that, this person does this”: That’s the world, even if you use the categories of the Dhamma to judge the person. You’ve taken the Dhamma and you’ve turned it into the world. So you’ve got to keep your gaze focused inside.

In other words, when you get upset at someone else, what is this quality of being upset? Focus on that. The events in the mind are the important issues. Those are the things causing your own illness. Do you want to cure your own illness or to aggravate it? Keep this question in mind as you practice.
As we live together and practice together, we see each other a lot, but try to make that fact have the least possible impact on the mind. Try to turn your gaze inside. Even when you’re looking outside, you want your focus to be inside: “How is your mind reacting to this? How is your mind reacting to that?” This is part of restraint of the senses. Several years back we had an elderly visitor from Thailand who was very serious about practicing restraint of the senses. She kept her eyes down and hardly talked to anyone. And then she overheard other people talking about how stuck up and unfriendly she was because she was trying to be so quiet and unresponsive. So she came to me to complain about how other people were not respecting her restraint of the senses. Of course, what kind of restraint is that, getting upset over what other people are saying about you?

Restraint is purely an internal matter. As you go through life you have to hear things, see things, taste things, touch things, think about things. The point of restraint is that you don’t make those things the main focus. The process of how the mind reacts to the seeing, how it directs the seeing, and so on with the other senses: that should be your focus. If issues come up and aggravate the illness in the mind, how are you going to deal with it? The Buddha laid out a lot of medicines for us to choose. The chant on the 32 parts of the body: That’s basically a reminder of his medicines for dealing with attachment to your own body and lust for the bodies of others. The chant on the four sublime attitudes: That’s for dealing with not only anger but also with resentment, jealousy, any cruel intentions in your mind. Many times you can get worked up about things totally beyond your control: That’s when you should reflect on the principle of kamma to develop equanimity.

There are antidotes for all these diseases, and our duty here is to use them. Because, after all, who’s suffering because of our diseases? Other people may be suffering to some extent, but we’re really suffering. We suffer very little from what other people do, and a great deal from the lack of skill in our own minds.

In the Canon the Buddha talks about how people should not give in to craving and conceit, and when we look at other people it’s obvious that he’s right. Their craving and conceit are obviously causing trouble. The trick, though, lies in seeing our own craving, our own conceit. If you find yourself using these teachings to judge other people, stop and ask yourself: “Well, wait a second. Am I the National Bureau of Standards?”

Then turn around and look at yourself. What about your own craving? You want things to be a certain way and then they aren’t the way you want them to be. This is a very important lesson I learned with Ajaan Fuang. He always seemed to fall sick at times that were extremely inconvenient for me. I’d have some project going on around the monastery, and it always seemed that just when I was really getting into the project, he got sick and I had to drop everything to look after him. I began to notice the sense of frustration growing within me and I finally realized, “Hey, wait a minute. If I let go of the desire to finish that project, things go a lot more easily.” At the same time, if I let go of my desire for him to care for his illness in the way I thought best, it made things a lot easier around
the monastery. Especially for me, and—probably in no small measure—for him as well.

When you start running into that reality, realize: Your cravings are the things that are making you suffer, so those are the things you have to let go of. When you let go, you find you can live with all kinds of situations. Not that you become lazy or apathetic, just letting things be whatever way they want to be. You become selective: Where can you make a difference? Where can you not make a difference? Where is your craving helping you in the path? Where is it getting in the way? You have to learn how to be selective, how to be skillful in where you direct your wants, where you direct your aspirations. Again, the problem is not outside. The problem is inside. We do suffer to some extent from things outside, but the reason we suffer is because things inside are unskillful. That's what we have to work on. Once the inside problem is dealt with, the outside problems don't touch us at all.

Conceit is another troublemaker. Conceit is not just puffing yourself up and thinking you’re better than other people. According to the Buddha, it’s the tendency of the mind to compare itself with others. Even if you say, “I’m worse than that other person,” or, “I’m equal to that other person,” that’s conceit. There’s an “I” there: the “I-making, mine-making, and tendency to conceit.” That’s a lot of the problem right there, a major cause of disease.

The Buddha describes the sense of “I am” as the underlying cause for the mind’s tendency to proliferate ideas, its tendency to make differentiations, to complicate things, and all the categories and conflicts that come from those complications: These all start with the “I am.” The basic verbalization of craving also starts with “I am.” It then goes on to “I was,” “I will be,” or “Am I? Am I not?” and all the other questions that come up from putting the “I” and the “am” together and then identifying with them. You start comparing this “I am” to other people’s, to your sense of what they are. So either you’re better than they are, or you’re equal, or you’re worse. Whichever side you come down on, though, it’s just a big troublemaker all around.

Just keep remembering: Other people’s diseases are their diseases. They’ve got to cure them. They’ve got to take their medicine. Your diseases are yours—your prime responsibility. And if the person next to you in the hospital room is not taking his medicine properly, that’s his problem. You can be helpful and encourage him, but there comes a time when you have to say, “Okay, that’s his issue. I’ve got my own disease to take care of.” This way it’s a lot easier for all of us.

When these attachments, cravings, and conceits don’t get in the way, then any place you practice becomes an ideal place to practice. People often ask, “Where is the best place to practice?” And the answer is, “Right here in the here-and-now.” It’s actually the only place you can practice. But you can do things to make the here-and-now a better place to practice wherever you are, both for yourself and for the people around you. It’s dependent not so much on changing things outside as it is on changing your inner attitudes. That way the place where we’re practicing becomes a good place to practice for us all.