

Lake of Lotus

Bimonthly



ISSUE No.35
Hong Kong September 2011
Taiwan October 2011

2011年9月香港 2011年10月台灣 (建期初出版) 雙月刊

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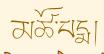
All Limitations of Dharma Practice

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English Version

Series of Talks on 'Science, Life and Death, Reincarnation'- (2) Series of Talks on 'Science, Life and Death, Reincarnation'- (3) Would "Consciousness" Still Exist After Death? Would You Like to Know the Frontier of Scientific Research?

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What is Your Most Wanted Thing When You Come Across a Major

How to Express your Genuine Concern to a Seriously-Ill Patient?

by Vajra Master Pema Lhadren, translated by Simon S.H. Tang

The Application of Wisdom: The Wisdom in Directing One's Dharma Practice (35)

Human Sounds can Arise from Both the "Conscious" and the "Unconscious" Levels. Are They Useful in One's Practice of the Holy Dharma? How to Use the "Sound of Mantra" to Transcend All Limitations of Dharma Practice

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isher & Copyright Owner: Dudjom Buddhist Association International Limited : 香港柴灣常安街77號發達中心4字樓 Address: 4/F・Federal Centr Address: 4/F · Federal Centre · 77 Sheung On St. · Chaiwan · HK. 傳真 Fax : (852) 3157 1144 網址 URL : http://www.dudjomba.org.hk Tel: (852) 2558 3680 Email: info@dudjomba.org.hk

台灣通訊地址:台灣台北市105南京東路四段171號12F之4

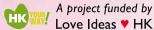
創刊於2006年1月 Inaugurated in January 2006

: ycmag@popularworld.com

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Would Consciousness Still Exist After Death?

Would You Like to Know the Frontier of Scientific Research?

Don't Miss This Great Opportunity to Attend the Most Authoritative Keynote Speeches Ever to be Given in Hong Kong History

Series of Talks on Science, Life and Death, Reincarnation² (2) & (3)

> Due to Limited Seats Available. Don't Miss This Rare Opportunity & Reserve Your Seats A.S.A.P.!



Series of Talks on 'Science, Life and Death, Reincarnation' (2): **Near-Death Experiences**

Date: 9th October, 2011 (Sunday) Time: 2:00PM - 6:00PM

Keynote Speakers & Topics:

- 1. Dr. Peter B C Fenwick Are Mind and Brain the Same? Can the Near-Death Experiences Help Us to Resolve this Question?
- 2. Dr. Pim van Lommel Nonlocal Consciousness: A Concept Based on Scientific Studies on Near-Death Experiences
- 3. Professor Erlendur Haraldsson Belief in "Life after Death" and Reincarnation, with Arguments For and Against Such an Afterlife

Venue: Meeting Room N101 (Expo Drive Entrance), Hong Kong Convention and Exhibition Centre, 1 Expo Drive, Wanchai, Hong Kong.

Fees: HK\$50; An additional fee of HK\$30 for those requiring professional simultaneous interpretation services with headphones (services available for English to be translated into Cantonese and Putonghua)

Series of Talks on 'Science, Life and Death, Reincarnation' (3): **Scientific Research in Spirituality**

Date: 15th October, 2011 (Saturday) Time: 7:00PM - 10:30PM

Keynote Speakers & Topics:

- 1. Dr. Peter B C Fenwick End of Life Experiences A Spiritual Perspective
- 2. Dr. Pim van Lommel Implications of Nonlocal Consciousness for Survivors of Cardiac Arrest: How Recent Research on the Continuity of Consciousness Could Affect the Treatment of Patients Reporting Near-Death Experiences?
- 3. Professor Erlendur Haraldsson Deathbed Visions: Visionary/ Hallucinatory Experiences Close to the Time

Venue: Auditorium, 3/F, Kowloon Bay International Trade and Exhibition Centre, 1 Trademart Drive, Kowloon Bay, Hong Kong.

Fees: HK\$50; An additional fee of HK\$30 for those requiring professional simultaneous interpretation services with headphones (services available for English to be translated into Cantonese and Putonghua)

Application Form:

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I would like to order tickets			
1st Session : 9th October	er, 2011 (Sunday)		
ticket(s) at HK\$5	60 each, and/or	ticket(s) at HK\$80 each (HK\$80 ticket includes professional
simultaneous interpretation service	e with headphone);		
2nd Session: 15th Octo	ber, 2011 (Saturday	')	
ticket(s) at HK\$8	50 each, and/or	ticket(s) at HK\$80 each	(HK\$80 ticket includes professional
simultaneous interpretation service	e with headphone);		
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You can also download the Application Form from our website at http://www.dudjomba.org.hk. or call us to fax you the Application Form. After you have filled in the form, please send it back to us, together with the necessary amount, by either fax or mail. Thank you very much!

4th Floor, Federal Centre, 77 Sheung On Street, Chaiwan, Hong Kong

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Series of Talks on 'Science, Life and Death, Reincarnation' (3) 3 Scientific Research in Spirituality

SYNOPSIS

Our Association has held the first session on the Series of Talks on 'Science, Life and Death, Reincarnation'- (1) in 2010 which was very popular and well received, resulting in many people having difficulties in trying to get tickets. This year we are most glad and thankful to have received the sponsorship from the Love Ideas ♥ HK Campaign of The Li Ka Shing Foundation, and thus we are now able to invite three world-renowned professionals and scholars to come to Hong Kong in sharing their top-notched frontier medical and scientific research findings, by exploring the key areas on the relationship between the human brain and the "consciousness", as well as by investigating into whether or not the "consciousness" still continues to exist after death. and so on. In this way, it is hoped that these authoritative keynote speeches will enlighten us, those who are living in this modern world, to have a better understanding and analysis of the interrelationships between 'Science, Life and Death. Reincarnation'.

These authoritative keynote speeches will cover such major topics as "Near-Death Experiences, Out-of-Body Experiences and Death-bed Visions" which may scientifically point out the possibility of 'life after death'. Information concerning those various topics is now quite readily available in various media for those who are interested; yet, it is quite difficult for one to judge upon the correctness and authoritativeness of those information. It is, indeed, a rare opportunity for one to be able to listen in person to such authoritative keynote speeches on these topics that will be presented by three top-notched scientific and medical experts and authorities in their respective fields. Such an event is believed to be the first of its kind ever to be held in the history of Hong Kong; as such, it will be even rarer for the general public to be able to listen to such distinguished guests and their speeches in an open forum. Hence, we sincerely hope that you can take this great opportunity and do not miss this rare occasion!

The speeches will discuss the following issues:

- When the function of the brain stops, is it possible that the "consciousness" still continues to be active? If so, what does it mean?
- While the "consciousness" remains active even when the function of the brain stops, then what is it that is being active? Is this what common people usually called it as the "Soul"?
- Is the Eastern folklore of "An Apparition Coming Out of a Living Person" having a similar meaning to the Western definition of the "Out-of-Body Experience"? Is it real?
 And if so, what does it mean?
- "Death-bed Vision" are some kind of visions that dying patients may see, and normally these are the scenes when they see their passed away relatives. Are those visions of relatives simply "Apparitions"? Or whether they are just hallucinations of those dying patients?

All these related questions and their puzzling issues will be introduced and answered by these three experienced researchers and experts who are of the highest caliber of international standing and authority, together with professional **simultaneous interpretation services** to be available from English to both Cantonese and Putonghua for the general audience.

- Can science unveil the profound mystery of "Life and Death"?
- What kind of evidence does the scientific community have in reference to the issue of "Life and Death"?
- Can scientific research on "consciousness" at the moment of "clinical death" prove the existence of "life after death"?

- Other such topics as: Among the different research findings and analyses on such topics as "Near-Death Experiences", "Out-of-Body Experiences", and "Death-bed Visions", do they have enough evidence for the proof?
- As for the various case studies on "Reincarnations" and "Past Life Memories", can these be used as part of the scientific evidence for the proof on the existence of "life after death"?
- If you are interested to know more about the answers to these questions, then you should not miss this rare occasion!

Our association have already invited three world-renowned and authoritative professionals and scholars to come to Hong Kong and deliver important keynote speeches on those areas of concern.

Introduction of Keynote Speakers & Topics:

1. Dr. Peter B C Fenwick

BA (Cantab), MBBChir (Cantab), FRCPsych



Dr. Fenwick has a wide area of professional expertise which covers psychiatry, neuropsychiatry, neurology and neurosurgery, head, brain and spinal cord disease and injury, sleep disorder and especially epilepsy. He has had a special interest in the relationship between brain function and the mind, and with longstanding and intensive research in this area.

Dr. Fenwick had held many key positions in several medical and academic institutions. He had been Consultant Neuropsychiatrist at the Maudsley Hospital which he ran for 20 years, Senior Lecturer at the Institute of Psychiatry, Consultant Neuropsychiatrist at the Radcliffe Infirmary, Oxford and Senior Lecturer at the Institute of Psychiatry, Kings College, London.

Currently, his is the Honorary Clinical Consultant neurophysiologist at Broadmoor Hospital, UK and Honorary

Senior Lecturer at the Institute of Psychiatry, University of Southampton, UK. In the past ten years, he has spent several months per year in a research laboratory for the study of Magnetoencephalography in Japan. He also involves in large hospice projects in UK, Holland and Japan. He is the Chairman of the Scientific and Medical Network, as well as the Chairman of the Research Committee, Integral Medical Foundation.

Dr. Fenwick has longstanding research in the areas of "near-death experiences and the dying process". He has studied over 300 cases and has strong expertise knowledge in this special area. He has published over 240 academic papers and 6 books of special topics. He is considered as the major authority in clinical research on "Near-Death Experiences" (NDEs) in the United Kingdom.

Topic of Talk on 9th October, 2011 (Sunday):

Are Mind and Brain the Same? Can the Near-Death Experiences Help Us to Resolve this Question?

Anecdotal accounts suggest that during Near-Death Experiences (NDEs), many experiencers say they leave their body and become aware of what is going on around them, or even 'travel' to other rooms in the hospital, and report other events there. A number of studies have set out to investigate this using cards or numbers placed in such a position that they could be seen by someone leaving their body. These studies will be described. In order to take this further, the AWARE project was launched at the UN in 2008 by Dr. Sam Parnia and his team. The aim of the project is to understand what happens at the onset of death and to see if there is evidence for mind and brain being separate. It is now well known that 10% of people with cardiac arrest have NDE experiences, and a third of these may have Out-of-Body Experiences (OBEs).

During cardiac arrest OBEs, the brain is non-functional, so it is important to verify that these experiences do occur at that time. If this is true, then it suggests that our mind is independent of the brain and this would have widespread implications for neuroscience. The AWARE project sets out to test whether these reported experiences are indeed veridical.

Cards containing information have been put up near the ceiling in resuscitation areas in hospitals in the UK, France, Austria and in the USA. Over 60 cards are put up in each hospital, so it is hoped that a cardiac arrest out of body experience will occur in one of the areas where

there are cards. Each subject with a cardiac arrest will be interviewed to find out whether they had an OBE and if they did, to describe what happened. Each subject will be given a questionnaire to decide on the nature of their NDE and they will be asked about their OBE, particularly in relation to anything they may have seen. Data from this will be analyzed. Because of the importance of the program, information about the results will not be given until the study is complete. However, the study has necessitated a reformulation of the way that we measure cerebral activity during cardiac arrest, and an examination of cerebral processes during the acute cerebral anoxia of the arrest. This study raises questions about the nature of consciousness and examples of wider states of consciousness will be given. Brain mechanisms which may be involved, and how these lead to different models of consciousness which go beyond those of purely mechanistic brain function will be explored.

Many individuals report that after having an NDE they either become healers or are themselves healed. The evidence for this will also be reviewed.

Topic of Talk on 15th October, 2011 (Saturday):

End of Life Experiences – A Spiritual Perspective

Spiritual awareness is an important part of care for the dying. Our research with a palliative care team, and with the carers in hospices and nursing homes, has confirmed that end of life experiences, which occur in the last few days of life, have spiritual implications for the dying and their families, and are not uncommon. Besides our formal research data we have numerous anecdotal accounts following a TV broadcast, a radio broadcast in the USA and articles in the UK press.

These experiences include powerful visions by the dying of dead relatives who they say have come to 'take them on a journey'. These deathbed visions occur in the last few days and hours before death, usually in the setting of clear consciousness. The 'visitor' is usually a dead relative or close friend, and appears to be in real space as the dying direct their gaze and comments at a particular place. Sometimes the recipient is unable to speak but will often show facial recognition. Their presence is felt as reassuring and comforting. Occasionally spiritual beings or angels are seen, but in the UK culture this is rare. Very rarely these visions were seen by others in the room.

Deathbed 'coincidences' are also reported, in which someone close to a dying person reports being 'visited' by

them at the time of their death. The form these coincidences take depends on the mental state of the recipient. If the recipient is awake, they report usually a sense of presence or an overwhelming emotional feeling that compels them to take action. Less commonly they hear a voice or a touch, very rarely a vision. If the recipient is asleep the coincidence takes the form of a dream, which is narrative and complex, with a vision of the dying person and a message conveying that they are alright and the recipient is not to worry.

Carers of the dying also report that at the moment of death they may see the body surrounded by light, mists leaving the body, or an intense feeling of love in the room. Other phenomena reported at the time of death are clocks stopping, mechanical devices malfunctioning, e.g. alarms going off and TVs stopping, and odd animal behaviours. Carers also report the desire which the dying often show for reconciliation with their life and, importantly, other family members.

In our prospective and retrospective studies of experiences related to carers, over 90% rated these as transpersonal experiences, Less than 10% thought they were due to imagination and less than 30% to medication. Nearly all the reports (85%) suggested that they are profoundly comforting to the dying, and seem to help achieve a peaceful death for the dying and comfort for their families, whose grieving process seems to be helped if they are fortunate enough to witness these phenomena.

The study has clear implications for theories about the continuation of consciousness after death.

2.Dr. Pim van Lommel



Dr. van Lommel graduated from the Medical School of Utrecht University, Netherlands. In 1976, he became a cardiologist and worked in the Rijnstate Hospital for 26 years. He has extensively published many professional papers on cardiology.

Due to his work, he has come across many patients who survived a cardiac arrest informing him about their "neardeath experiences". This had taken his attention and so he became interested in the subject. In 1986, he started studying "near-death experiences" in patients who survived a cardiac arrest. He has studied over 500 cases.

In 1988, he co-founded the Merkawah Foundation, IANDS (the International Association of Near-Death Studies) in the Netherlands. In 2001, Dr. van Lommel and others published their Dutch study in the reputable medical journal "The Lancet". In addition, he has authored chapters in several books about "near-death experiences" and also published articles about the subject. In 2007, he published his book in Dutch 'Eindeloos Bewustzijn' (Endless Consciousness) in the Netherlands. This book was a bestseller, and within one year over 120,000 copies were sold. Thereafter, the book has been translated into English and French.

In the past several years, Dr. van Lommel has been invited to give talks on the topics of "near-death experiences" and the relationship between brain function and the mind all over the world. In 2005, he was granted the 'Bruce Greyson Research Award' on behalf of the International Association for Near-Death Studies. And in September 2006, the President of India, Dr. A.P.J. Abdul Kalam, awarded him the 'Life Time Achievement Award' at the World Congress on Clinical and Preventive Cardiology in New Delhi, for the recognition of his great contributions.

Topic of Talk on 9th October, 2011 (Sunday):

Nonlocal Consciousness: A Concept Based on Scientific Studies on Near-Death Experiences

'To study the abnormal is the best way of understanding the normal'

.... by William James

According to our current medical concepts, it is not possible to experience consciousness during a cardiac arrest, when circulation and breathing have ceased. But during the period of unconsciousness due to a life-threatening crisis like cardiac arrest patients may report the paradoxical occurrence of enhanced consciousness during the period of a non-functioning brain.

Recently several theories have been proposed to explain such a so-called Near-Death Experience (NDE). The challenge to find a common explanation for the cause and content of an NDE is complicated by the fact that an NDE can be experienced during various circumstances, such as during severe injury of the brain as in cardiac arrest to continuum when the brain seems to function normally.

In four prospective studies with a total of 562 survivors of cardiac arrest between 11% and 18% of the patients reported an NDE, and in these studies it could not be shown that physiological, psychological, pharmacological or demographic factors could explain the cause and content of these experiences.

Since the publication of several prospective studies on NDE in survivors of cardiac arrest, with strikingly similar results and conclusions, the phenomenon of the NDE can no longer be scientifically ignored. It is an authentic experience which cannot be simply reduced to imagination, fear of death, hallucination, psychosis, the use of drugs, or oxygen deficiency, and people appear to be permanently changed by an NDE during a cardiac arrest of only some minutes duration.

The current materialistic view of the relationship between the brain and consciousness held by most physicians, philosophers and psychologists seems to be too restricted for a proper understanding of this phenomenon. So it is indeed a scientific challenge to discuss new hypotheses that could explain the possibility to have clear and enhanced consciousness with memories, with self-identity, with cognition, with emotion, with the possibility of perception out and above the lifeless body, to explain the reported interconnectedness with the consciousness of other persons and of deceased relatives, to explain the possibility to experience instantaneously and simultaneously (nonlocality) a review and a preview of someone's life in a dimension without our conventional body-linked concept of time and space, where all past, present and future events exist, and even to explain the experience of the conscious return into the body.

Based on these recent prospective NDE studies, as well as on recent new insights in the neurophysiology during cardiac arrest and in a normal functioning brain, and in combination with concepts from quantum mechanics, one has to come to the inevitable conclusion that consciousness can not be localized in a special time nor place. This is called nonlocality. There are good reasons to assume that our consciousness does not always coincide with the functioning of our brain: enhanced consciousness can sometimes be experienced separately from the body. I have come to the conclusion that most likely the brain must have a facilitating, and not a producing, function to experience consciousness. In this view, there is no beginning nor will there ever be an end to our consciousness.

It looks as if a single unusual finding that cannot be explained through widely accepted concepts and ideas is capable

of bringing about a fundamental change in science. By making a scientific case for consciousness as a nonlocal and thus ubiquitous phenomenon, this view can contribute to new ideas about the relationship between consciousness and the brain, because it questions the purely materialistic paradigm in science. Moreover, a near-death experience appears also to be an intimately personal rediscovery of age-old, cross-cultural knowledge, seemingly forgotten by modern society. In other times and places such experiences were often known under different names, such as visions or mystical, religious or enlightenment experiences. Among the diverse understandings of death, one constant across all times and cultures, except our own, has been a sense that the personal essence, commonly called the soul, has an existence independent of the physical body. Recent research on NDE seems to be a source of new insights into the possibility of a continuity of our consciousness after physical death.

Topic of Talk on 15th October, 2011 (Saturday):

Implications of Nonlocal Consciousness for Survivors of Cardiac Arrest: How Recent Research on the Continuity of Consciousness Could Affect the Treatment of Patients Reporting Near-Death Experiences?

Dr. Pim van Lommel, a renowned European cardiologist, is the first medical practitioner to have undertaken a full and systematic study of near-death experiences. While practicing cardiology, he was struck by the number of heart attack survivors who reported having had neardeath experiences during full cardiac arrest. His scientific training and his acceptance of the prevailing wisdom that consciousness is impossible once circulation and breathing have ceased made such reports difficult for him to accept. However, he found it ethically untenable not to investigate the phenomenon under the controlled conditions of a cluster of hospitals with medically trained staff. For more than twenty years, he has systematically studied neardeath experiences in a wide variety of patients who had survived a cardiac arrest, encountering consistent reports of full cardiac arrest coincident with clear consciousness with full cognitive functions, emotions, self-identity, and sometimes memories from childhood and even (nonsensory) perception outside their lifeless bodies and beyond the dimensions of physical time and space.

In 2001, he and his fellow researchers published the results of the first scientifically rigorous longitudinal study of near-death experiences in "The Lancet", challenging

the foundations of neurological theory and causing an international sensation in the medical community. In four prospective studies with a total of 562 survivors of cardiac arrest, between 11% and 18% of the patients reported a near-death experience (NDE), and in these studies it could not be shown that physiological, psychological, pharmacological, or demographic factors could account for the cause and contents of these experiences. Based on such research, van Lommel asserts that the prevailing idea of most physicians and neuroscientists that the brain entirely encompasses consciousness does not account for the observed phenomena, because there are good reasons to assume that our consciousness does not always coincide with the functioning of our brain: enhanced consciousness can sometimes be experienced separately from the body.

The conclusions of these scientific studies on NDE may have practical implications for the care for comatose or dying patients, euthanasia, and the removal of organs for transplantation from a person in the dying process with a diagnosis of brain death, yet with a still-beating heart in a warm body. Health care practitioners of all kinds, along with terminal patients and their families, have been shown to benefit from an awareness of the extraordinary experiences that may occur during a period of clinical death, or coma, and even after death.

3. Professor Erlendur Haraldsson



Professor Haraldsson studied philosophy at the University of Edinburgh, Scotland and the University of Freiburg, Germany. He furthered his study in psychology and obtained a Diploma in Psychology from the University of Munich, Germany, and a Ph.D. in psychology from the University of Freiburg respectively. During the interim period, he held an internship in Clinical Psychology at the Department of Psychiatry, University of Virginia, USA.

He had been teaching at the Department of Psychology at the University of Iceland for over a quarter of a century. He has been a visiting professor at the University of Virginia, Adjunct Research Faculty Member at the Institute of Transpersonal Psychology, California, USA, and Research Professor at the Institut fur Grenzgebiete der Psychologie und Psychohygiene, Freiburg, Germany.

Professor Haraldsson has a wide range of research interests, including psychic experiences and folk-beliefs, miracle makers, death-bed visions, apparitions, contacts with the dead, and so on. His study on reincarnation is especially famous worldwide, and is considered one of the pioneers of western scholars in this special field. He has been researching in places like Sri Lanka, India and Lebanon for studies of children who claimed that they could recall memories of their previous lives. The cases studied are over 100 and more than 100 academic papers and five books of special topics have been published. He is a world-class authority in contemporary research study on the cases of reincarnation.

Professor Haraldsson had been in longstanding research collaborations with Professor Ian Stevenson of the Medical School, University of Virginia, USA, and with Dr. Karlis Osis, a world-class leading psychologist. The book "At the Hour of Death" (co-authored by Drs. Haraldsson and Osis) is a rare book on death-bed visions, which has been translated into 12 languages. Over the years, Professor Haraldsson has been invited across the world to give over one hundred academic talks and lectures which are highly appreciated by his fellow colleagues, as well as by the general public.

Topic of Talk on 9th October, 2011 (Sunday):

Belief in "Life after Death" and Reincarnation, with Arguments For and Against Such an Afterlife

Views about life after death and reincarnation vary widely; "extinctionists" believe that death is the end of human existence; "agnostics" believe that it is impossible to know if life continues after death; "immortalists" believe that after death we live in an afterworld forever; "reincarnationists" believe that we are born again into a physical body. How widespread are these beliefs? Surveys show inter-national and inter-religious differences but not necessarily in line with the dogmas of the dominant religion of each country.

What are the main empirical arguments for and against survival? The dominant scientific perspective views

consciousness as completely dependant on the condition of the brain. Research in some areas indicate that this view needs revision:

- <u>Death-bed visions</u> are sometimes observed near the time when people die indicating contact with a postdeath reality.
- <u>Near-death experiences</u> have been brought into focus with several studies conducted in university hospitals.
- Enounters with the dead are reported by every fourth person in Europe.
- Reincarnation memories. Many cases by young children have been verified. Some children have phobias and birthmarks which they relate to how they died in the previous life.
- Mediumistic communications, particularly in the 19th and early 20th century, revealed highly interesting findings.

Research in these areas, using scientific, empirical methods, have resulted in empirical arguments suggesting "life after death".

In the latter part of the lecture, a newly researched and well documented case will be presented. It took place in Copenhagen and Reykjavik and has close resemblance to a famous older case from Sweden.

Topic of Talk on 15th October, 2011 (Saturday):

Deathbed Visions: Visionary/Hallucinatory Experiences Close to the Time of Death

It is an old observation that terminally ill patients sometimes have visionary experiences shortly before they die. Karlis Osis and Erlendur Haraldsson conducted a major comparative study in USA and India which confirmed this observation across two countries with different religions and cultures. Over 400 physicians and nurses in each country reported observations of dying patients who told of visions of deceased relatives or angelic beings shortly before they died. They told the dying person that they had come to take them away. After that, the dying patients were "ready to go" and they felt much better. This occurred independent of the medical condition of the patient, and factors which may lead to hallucinations. Were the patients observing glimpses of a life that was waiting ahead of them?

Tickets Will Be Available at the "Hong Kong Book Fair" Booth No.3G-F35

Book Signing Ceremony After the

Series of Talks on Science, Life and Death, Reincarnation (2): Near-Death Experiences

The Dudjom Buddhist Association International ("Association") has held the first session on the Series of Talks on 'Science, Life and Death, Reincarnation'-(1) in 2010 which was very popular and well received, resulting in many people having difficulties in trying to get tickets. This year we are most glad and thankful to have received the sponsorship from the "Love Ideas V HK" Campaign of the Li Ka Shing Foundation, and thus we are now able to invite three world-renowned professionals and scholars to come to Hong Kong in sharing their top-notched frontier medical and scientific research findings, by exploring the key areas on the relationship between the human brain and the "consciousness", as well as by investigating into whether or not the "consciousness" still continues to exist after death, and so on. In this way, it is hoped that these authoritative keynote speeches will enlighten us, those who are living in this modern world, to have a better understanding and

analysis of the interrelationships between 'Science, Life and Death, Reincarnation'.

All three speakers have plenty of publications in articles and books. Their books have either been the bestseller of the year or translated into numerous languages. Two of the speakers have recommended one of their books and so we would like to take this opportunity to hold a book signing ceremony after the Talk. Copies of the book will be available in advance. Audience can place orders for the book(s) through us when they purchase the tickets for the Talk. The books will be distributed at the lecture venue upon the showing of the "book purchase receipts".

Date: 9 October 2011 (Sunday)

Talk: 2:00 PM -- 6:00 PM

Book Signing Ceremony: 6:00 PM

Venue: Meeting Room N101 (Expo Drive Entrance),

Hong Kong Convention and

Exhibition Centre, 1 Expo Drive, Wanchai, Hong

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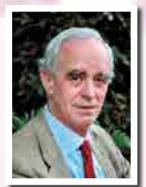


BOOK SIGNING(1)

Consciousness Beyond Life: The Science of the Near Death Experience, Harper Collins, 2011

Author: Dr. Pim van Lommel.

Price: HK\$150.00

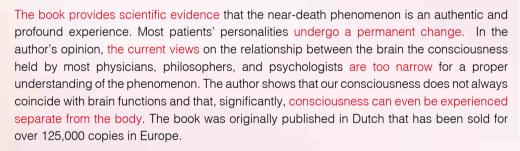


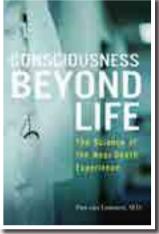
As a cardiologist, the author was struck by the number of his patients who claimed to have near-death experiences as a result of their heart attacks. As a scientist, this was difficult for him to accept: would it be scientifically irresponsible for him to ignore the evidence of these reports? He then decided to design a research study to investigate into the phenomena under the controlled environment of a cluster of hospitals with a team of medically trained staff.

For more than twenty years, he systematically studied such near-death experiences in a large

number of patients who survived the cardiac arrest. In 2001, he published the study on near-death experience in the renowned medical journal "Lancet". The article caused an internationally sensation as it was the first scientifically vigorous study of this

phenomena. This book, now available first time in English, offers an in-depth presentation of the results and theories.





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BOOK SIGNING (2)



At the Hour of Death: A New Look at Evidence for Life After Death, 3rd Edition, Hastings House, 1997

Authors: Dr. K. Osis and Prof. E. Haraldsson

Price: HK\$160.00

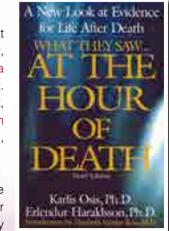


"At the Hour of Death" is a book that is different from many others that deal with near-death experiences. It directly approaches the possibility of life after death on the basis of a scientific evaluation of a substantial quantity of data.

The authors have convincingly demonstrated the argument that the support we need when facing death. As the end draws near, the deceased may require social warmth and understanding, a spiritual outlook, or pharmaceutical alleviation of pain, and comfort. Knowledge of what happens when one is dying, what to expect, and what we may reasonably hope for form a vital part of such support. This book might be handy for those who are facing death,

as well as for those who counsel the terminally ill and bereaved.

The value of this book is its detailed information, not philosophy. It carries out the subjective feeling of the experiencers that death is a mystery that is real and unavoidable. The despair and sorrow engendered by the approach of death shake us out of superficialities and may invigorate the heart to feel its deepest roots of existence.



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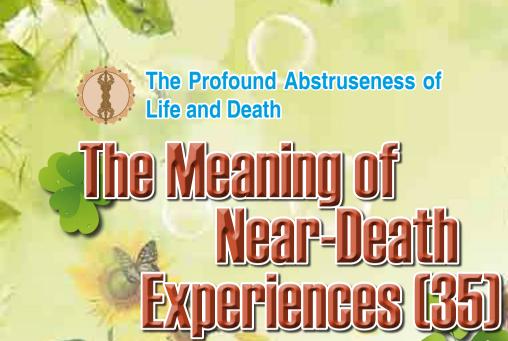
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By Vajia Master Rema Lihadian Translated by Simon SHL Tang

What is Your Most Wanted Thing When You Come Across a Major Crisis?

How to Express your Genuine Concern to a Seriously-III Patient?

Excerpt of Last Chapter: Various
Reasons on the Formation of Different
Scenes at the "Moment of Death"

The "scenes at the moment of death" can be roughly classified in the following categories in accord with the varieties of the "main causes" and "auxiliary conditions":

The "Separation of the Four Elements" – the "main cause" (the internal "consciousness" and "sub-consciousness", including all kinds of memories) conjoins with the "auxiliary conditions" (the 'Separation of the Four Elements' in the external circumstances) in forming the "scenes at the moment of death" (please refer to the articles on "The Meaning of Near-death Experiences" in Issues 8 and 20 of the "Lake of Lotus").



- 2. The "Endorphins Inside the Brain" the "main cause" (the internal "consciousness" and "subconsciousness") conjoins with the "auxiliary conditions" (the "endorphins inside the brain" of the external circumstances) in forming the "scenes at the moment of death" (please refer to the article on "The Meaning of Near-death Experiences" in Issue 21 of the "Lake of Lotus").
- 3. The "Karmic Forces" the "main cause" (the internal "consciousness" and "sub-consciousness") conjoins with the "auxiliary conditions" (the "karmic forces" of the external circumstances) in forming the "scenes at the moment of death". This can be further classified into the following two kinds:
 - i. Wholesome Ones arising from: (a) virtuous retributions (please refer to the article on "The Meaning of Near-death Experiences" in Issue 21 of the "Lake of Lotus"); and (b) the efforts of one's Dharma practice (the main theme of this article in this issue).
 - ii. Unwholesome Ones arising from: (a) vicious retributions; and (b) the forces of karmic creditors in seeking compensations on one's karmic debts.

According to the records of different surveys, most of the dying people had seen the following scenes:

- 1. Protectors or avengers: (i) good ones saw kith and kin who had passed away, unknown protectors, deities or Buddhas coming to fetch for oneself
 - (ii) bad ones being besieged by a crowd of ferocious persons or beasts, and going along in company with groups of people who looked confused.
- 2. Strange places: (i) good ones saw pavilions, balconies, buildings, flower fields, rivers, light zones, towns or cities.
 - (ii) bad ones saw wilderness, forests, darkness, caverns, hells.
- 3. Messy Issues that cannot be recalled clearly.

How would the Buddhist point of view comment on these phenomena? According to the Buddhist teachings, it was said that rebirth would take place within forty-nine days after a person has passed away, then why would a dying person see the kith and kin who had passed away long time ago still coming to fetch for him or her? Why had not the kith and kin taken rebirths after so many years posthumously? Are the appearances of these deceased persons merely the illusions of the person who is going to die? Or were they really true? Are there any other reasons? Are those strange places the destinations where they are going to be reborn into? Under what circumstances would the normal rebirth of a dying person be negatively encumbered? Is there any way to help a deceased per-

son to avert sufferings and elevate to a better place of rebirth?

four kinds of conditions of consciousness (please refer to the article "The

Human beings have Wisdom in Directing



One's Dharma Practice" in Issue 26 of the "Lake of Lotus") as follows:

- 1. Beta Bwaves the "conscious condition" of daily living;
- Alpha a waves the relaxed "consciousness condition", such as in entering into the elementary stage of 'visualization", or at the first stage of "mental concentration"; or the condition when the "spiritual body" is slowly separating from the "physical body";
- Theta ⊖ waves the peaceful "conscious condition" of having entered into higher levels of "visualization", or at the deeper levels of "mental concentration";
- Delta δ waves slow "conscious condition" of not having any dreams, and in a stage of slow-wave deep sleep.

In fact, how does the arising of the different stages in approaching death and its "transformation of consciousness" affect the thoughts and behaviors of dying patients? What are their relationships with the "scenes at the moment of death"? How should the family and kin and kith who take care of

the dying patients respond to the "transformation of consciousness" and change of "scenes at the moment of death" for guiding the emotions and spiritual direction of the dying patients? Could the "transformation of consciousness" and the change of "scenes at the moment of death" be complementary to each other? Furthermore, the "disintegration of the Four Elements" of the physical body also affects the "transformation of consciousness", as well as on the change of the "scenes at the moment of death". Hence, how should one support and provide guidance to a dying patient in order to reduce or resolve the predicament from these problems?

What is the Ultimate Assistance in the First Stage of Approaching Death?

The care-givers, kin and kith and professional counselors should perform the following steps when a dying person is approaching the "first stage of death":

- 1. Accepting and Understanding
- 2. Listening and Observing
- 3. Analyzing and Adopting
- 4. Leading Out and Guiding In
- 5. Accompanying with Unspoken Consensus



The key points of application and their importance on the issues of "Accepting and Understanding" and "Listening and Observing" had been clearly highlighted in the cases of the previous chapters (please refer to the articles on "The Meaning of Near-death Experiences" in Issues 29-30 of the "Lake of Lotus"), as well as on the issue of "Analyzing and Adopting" by

the dying persons (please refer to the article on "The Meaning of Near-death Experiences" in Issue 31 of the "Lake of Lotus") have been clearly explained.

To most people, the issues of "Accepting and Understanding" and "Listening and Observing" are not difficult to do and it is relatively easy to carry out under the call of "love" and with one's wisdom. Not too many skills will be required. Even though a person has never learned of the relevant know-how, nor have received any such relevant training, he or she can still spontaneously provide proper care or resolve various problems for the seriously-ill persons, or dying patients.

However, the quality and depth of the resolution to a problem would be inadequate or imperfect, due to the lack of relevant know-how or training by the participants. In order that both the care-giving family members and the dying patients do not have remorse which will be too late to repent later on, but only ultimate offering in farewell with a "heart-to-heart connection and having no trace of regret", the following three steps should be included in the issues that must be done when a dying patient is approaching the "first stage of death".

There are at least two parts to the issue of "Analyzing and Adopting" in the third step. The first part of "Ana-

lyzing and Adopting" is to be directed by a dying patient, while the second part of "Analyzing and Adopting", which is to be directed by the care-givers, kin and kith and professional counselors, have already been discussed in the previous two chapters (please refer to the articles on "The Meaning of Near-death Experiences" in Issues 32 and 33 of the "Lake of Lotus"). The fourth step on "Leading Out and Guiding In" has already been discussed in the last chapter (please refer to the article on "The Meaning of Near-death Experiences" in Issue 34 of the "Lake of Lotus"). Now, we are going to discuss the fifth step on "Accompa-

nying with Unspoken Consensus".

What is Your Most Wanted Thing When You Come Across a Major Crisis?

When a person comes across a major crisis, some expectations will certainly arise from oneself. Besides some vague wishes, it is crucial that some pragmatic needs should be satisfied which would are more significant to them. For instances, when a person gets cancer, the most needed thing would be that someone is caring about him, understanding him, accepting him, making company with him and assisting him to go through the proper treatments.

Therefore, a care-taker must stand by the side of the patient and understand what is the patient's most wanted thing. At the same time of understanding, the care-taker would best be able to develop a relationship on the issue of "Accompanying with Unspoken Consensus" with the patient. There





are a few key points in the development of such kind of a relationship:

- On the same camp of companionship comprising of
 - a) Listen to the patient empathically,
 - b) Express the empathic feelings as personal experience to the patient,
 - c) Pass on the message of accepting, understanding and tribute with genuineness.
- (2) Unspoken Consensus from Heart to Heart comprising of
 - a) Develop Unspoken Consensus under reasonable circumstances, carry out more welcome behaviors to the patient,
 - Express Unspoken Consensus with the attitude to express feelings that the patient recognizes and considers as of same direction,
 - c) Coordinate Unspoken Consensus when deviation appears, employ proper approach to coordinate mutual thoughts to shorten the distance and seek for building of common ground for unspoken consensus.
- (1) In the same camp of companionship -
 - a) Empathically listen to the voice from the bottom of the patient's heart:

When a patient comes to know that he or she is seriously ill and might not live long, the kind of complicated emotions would certainly cause confusion in thoughts.

Among which the most commonly-arisen emotion that is often seen is that "how is my illness seen in the eyes of others?". Apathy? Gloating over the mishap? Grieving excessively? Giving no weight to it? Paying no attention to it? Intending to help out but lack of ability? Caring with genuineness? Providing assistance?

As a patient, he or she would have certain anticipation or viewpoint upon the response of each and every person. If the response of the kith and kin differs too much from the anticipa-

tion of the patient, a certain unspeakable feeling of absence of mutual understanding would result. It would affect the caring provided by the kith and kin, or the care-giver, which might worsen the negative emotions of the patient.

Therefore, kith and kin, or care-giver, must figure out a way to develop a good relationship of mutual understanding and trust with the patient. For the first step, one must listen to the patient with empathy. The first thing is to find out what is the expectation, or viewpoint, of the patient upon you. Therefore, at the same time of listening to the patient, it



is better to guide him to express to you what is his or her expectation or viewpoint on you.

In fact, this is a rather important step. It is a quick and effective way of breaking the septum and doubt among each other. There is a case about a husband who was diagnosed with terminal cancer. Under the situation of not many alternatives, he decided to go for naturopathy. Moreover, he thought that the "fung-sui" of his residence was not good, such that



he ended up with an incurable disease. For the sake of a slim chance of survival, he expected to live in the best living environment to cope with the naturopathy. As such, he proposed to his wife for moving to another residence.

(Remark: "Fung-sui" is a kind of traditional Chinese metaphysics dealing with the environment, setting, construction, decoration, etc. in the residence or graveyard with which, it is believed to be connected to the fortune, health, wealth and so on of those people concerned.)

It was a pity that the wife firmly refused to move as she regarded that it was too troublesome to move out. As a result, the husband declared to the wife, "if you don't want to move, I will move out. I will separate from you and I can take care of myself." Everybody has gotten one's own reasons for doing things. However, as the kith and kin or care-giver, please keep in mind that this is a moment of life and death, and so a person should not merely take one's own viewpoint for consideration and keep arguing but not giving way for any concession. Instead, one should listen to the patient empathically.

As a patient, if he firmly believes that his disease was derived from the residence, then the home is definitely the origin of sickness to him and is thus not suitable for rehabilitation. This rationale is very simple:

"Dislike" is a sort of negative emotion which would worsen or accelerate the symptoms. Changing the residence to a place where the patient likes would definitely bring a fresh and peaceful feelings to the patient, which will be good for the recovery of the patient. Therefore, it is no longer an issue of whether it is "a superstition or not, or not to be as superstitious as the patient". Rather, it is an issue of whether one is "willing to devote to the patient for his well-being or not, or whether one really loves the patient or not".

In avoiding the troubles by refusing the requests of the patient, which is undoubtedly an expression of the wife's behavior that made the patient felt that his wife did not care about his feelings and situations, but only cared about her own benefits and standpoints. To the patient, it was such a gesture of message that really hurts deep down inside. From the statement he made, one can deeply feel that he was so desolate, and was thus thinking, "I don't need your help. I will save myself."

Apparently, the patient didn't feel being accepted or sympathized. He had decided to face all those challenges all by himself in walking alone on the road. Therefore, during this critical period of life and death, the kith and kin, or care-giver, should not offer an opinion or make a decision casually. One should first listen to the patient empathically. Only then, can a direction of "companionship" be figured out.





How to Express your Genuine Concern to a Seriously-III Patient?

b) Express your empathic feelings as personal experience to the patient:

After listening to her husband's heartfelt words, his wife should have thought of the following points:

- 1. How should I vent out his unfolded emotions at the present moment?
- 2. How should I convey the message that his emotional exposure is a normal reaction and not to be surprised?
- 3. If I follow his requests, how many and how great would be the benefits to him?
- 4. How should I convey the message that I do share the same opinion with him, so that he would feel pleased and comforted?
- 5. How should I convey the fact that, even though there are messages that we don't share the same opinions, I have made concessions purely on the ground that I love him so as to make my sacrifice as a tribute to him?

- 6. How should I convey the message that, even though I didn't make any concessions, it is purely because I have better and more suitable suggestions for the betterment of his benefits?
- 7. How should I convey the message that he has full authority in making choices and he is not being forced or being isolated?
- 8. How should I express my feelings so that he can feel that those feelings of mine are to be in congruent with his?
- 9. How should I convey the message so that he can feel that I am totally on his side for a "heartfelt companionship"?
- 10. How should I convey the message so that he can feel that, even though our thoughts may differ only slightly and if given some minor coordination and readjustment, I will be totally on his side for a "heartfelt companionship"?

When the kith and kin, or care-giver, encounters emotional reactions of the patient, it is best to pass out such a message: "It is better to be just an ordinary person, and don't strain oneself to be an angel." Therefore, we should accept that it is normal to see

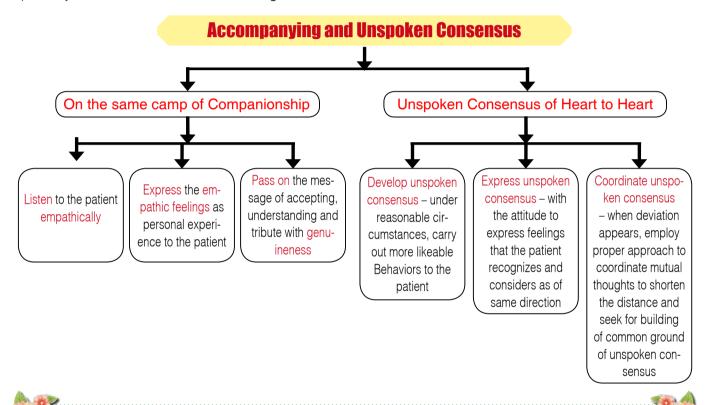
emotional reactions of a patient, and this is just natural for such kind of responses. In dealing with the situation in such a way, the patient will feel that he is being accepted and understood, which would help to vent out his emotions.

Since "listening to the patient's needs" is the top hierarchy in the procedures "for caring



the patient", the kith and kin or care-giver should not make any casual remarks or suggestions to the patient before having thorough understanding, analysis and preparation. If the patient express dislikes to the medical staff in "anger", the kith and kin or caregiver should listen to the patient with an attitude of attempting to realize the situation, and should not defend, or battle against the medical staff with the patient. Any actions to heighten the confrontation, or to "express an opposite opinion", should never be employed. One should merely show an attitude to listen patiently for "realization and understanding".

After listening, and if the circumstances allows, we should attempt to resolve the existing problems under the consideration that it would not disturb the patient's emotions too much. Genuine concern is not only limited to the expressions by spoken soft words, but it should also include actual support and assistance. This sort of sentimentally attentive and intimate caring would shorten the distance between oneself and the patient, such that both would feel that they are on the same side for "companionship"....(To be Continued)



Remarks:

- 1. The newly-released book on "The Meanings of Near-Death Experiences (1)" has been published. Its contents include the articles on "The Meanings of the Near-Death Experiences" from Issues 1 to 10 of the "Lake of Lotus".
- 2. The newly-released book on "The Meanings of Near-Death Experiences (2) The Key Points at the Moment of Death and the Essential Revelations of the Tibetan Book of the Dead" has been published. Its contents include the articles on "The Meaning of the Near-Death Experiences" from Issues 11 to 20 of the "Lake of Lotus".
- 3. The newly-released book on "The Meaning of Near-Death Experiences (3) The Various Ways of Realization and Rescue of Dying Kith and Kin" has been published. Its contents include the articles on "The Meaning of Near-Death Experiences" from Issues 21 to 30 of the "Lake of Lotus".]



- Human Sounds can Arise from Both the "Conscious" and the "Subconscious" Levels. Are They Useful
 in One's Practice of the Holy Dharma?
 - How to Use the "Sound of Mantra" to Transcend All Limitations of Dharma Practice

Excerpt of Last Issue

For the general populace, and even up to the great Dharma practitioners, their objectives of Dharma practice should be more or less of the following types:

1. Praying for worldly desires – For example: to seek for oneself and one's own relatives to have "longevity, recovery from illness, success in one's career, good marriage, wealth increase, averting disasters and relief from sufferings, as well as reunion with those deceased loved ones". Also, there are those who hope to get the "ease of heart and security at the present life", etc.; or for "fame, wealth, respect" in order to study Buddhism; as well as for those who put in efforts to practice the Dharma.

- 2. Rebirth in the good realms For example: to hope and pray for rebirth in the heavenly realm, or in the human realm, and not to fall into the evil realms (of animals, hungry ghosts and hells).
- 3. Liberation from the tractions of the "cycle of karmic existence" to hope and pray for the freedom in deciding for oneself as to whether one would be reborn into the six realms (of heavens, asuras, humans, animals, hungry ghosts and hells), or whether to remain in

the highest level of the "Realm of Form", such as the "Akanistha" (the "Heaven at the End-of-Form-Realm"), which is beyond the control of the tractions. (Please refer to the explanations on the "Three Realms" in the article on the "Profound Abstruseness of Life and Death: The Meaning of Near-Death Experiences" in Issue 17 of the "Lake of Lotus").

- 4. Attainment of Buddhahood
 - The recovery of one's

"Primordial Nature" and the originally possessed and boundless capabilities, which are free from any bondages and to remain in the "Dharma Realm". (The "Nature of the Mind", also known as the "Buddha Nature", or the "Primordial Nature", refers to the original possession of that most crystal clarity of awareness. Please refer to the articles on "The Meaning of Near-Death Experiences" in Issues 4 & 5 of the "Lake of Lotus").

What are the methods that one can choose in order to achieve these four types of objectives? What will be their effects? What are the critical key points that one should pay attention to when judging upon and in choosing those methods of Dharma practice? Regardless of what kinds of religions, the practice methods can be broadly divided into the following types:

- Prayers Including confessions, repentance of one's conducts, and in the making of aspirations and wishes;
- Recitations mantras, Buddhas' Holy Names, or sutras;
 - 3. Visualizations themes include the formulae for different types of "meditation", or even the making use of the internal functions of one's body for coordination.

Irrespective of which types of practice methods, it must include the training of one's "mental strength". Otherwise, it would not be able to produce any effects. One of the important points for judging which of the practice methods are the most effective ones is the degree of influence that these can have on one's "mental strength"? What

percentage will they constitute?

The previous five chapters have clearly explained the effects and mysteries that the sound has produced upon people (Please refer to the articles on the "Wisdom in Directing One's Dharma Practices" of Issues 24, 25, 26, 27 and 28 of the "Lake of Lotus"). The part on the rationale for the "resonance" and "operations of particles" is one of the functions on the recitation of mantras. Since the sound of mantra does not necessarily have to be words that could be translated or understood, particularly those mantra which are meant for the following purposes:



- 1. linkage or condensation;
- 2. cutting off the linkage or condensation;
- 3. taming and shattering.

The previous few chapters (in particular please refer to the article on the "Wisdom in Directing One's Dharma Practice" in Issue 26 of the "Lake of Lotus") have mentioned that the merits of having received the "relevant teachings" in the recitation of mantras are remarkable and vast. As to its abstruseness, apart from relating to its rationale on "resonance" and the "motions among the particles", it is also very much related to the different high or low levels of the "Right Concentrations" (or "Samadhis" in Sanskrit). According to Bodhisattva Maitreya's classification, in Volume 45 of the "Yogacaryabhumisastra", "Dharanis" are divided into the following kinds:

- (1) Dharma Dharani the successful symptom for the receiving of the "relevant trainings" in the proper recitation on this type of "mantras" is that one would be able to remember the words and sentences of the various Sutras in one's numerous lifetimes (please refer to the article on the "Wisdom in Directing One's Dharma Practice" in Issue 26 of the "Lake of Lotus").
- (2) Meaning Dharani the successful symptom for the receiving of the "relevant trainings" in the

proper recitation on this type of "mantras" is that one would be able to remember the meanings of the Sutras in one's numerous lifetimes (please refer to the article on the "Wisdom in Directing One's Dharma Practice" in Issue 26 of the "Lake of Lotus").

- (3) Mantra Dharani the successful symptom for the receiving of the "relevant trainings" in the proper recitation on this type of "mantras" is that, through one's "meditational power", one would be able to experience the special effects of the "mantras", and would thus be able to help other sentient beings to remove all kinds of calamities and illnesses (please refer to the article on the "Wisdom in Directing One's Dharma Practice" in Issue 27 of the "Lake of Lotus").
- (4) Endurance Dharani the successful symptom for the receiving of the "relevant trainings" in the proper recitation on this type of "mantras" is that one would be able to know the true existence of, and the real meanings behind, the various Dharmas, as well as the ability without losing them (please refer to the article on the "Wisdom in Directing One's Dharma Practice" in Issue 28 of the "Lake of Lotus").



Human Sounds can Arise from Both the "Conscious" and the "Unconscious" Levels. Are They Useful in One's Practice of the Holy Dharma?

As for the origin for the sound of the human body, where does it actually come from? Does it come

from one's physical body, or from one's "consciousness"? Does it come from the superficial level of one's "consciousness", or from the deeper level of one's "subconscious"? To what degrees can they render assistances to one's Dharma practice?

There are many people using the "Healing With The Voice", "Healing Vibrations", the "Power of the Resonating Voice" as the foundation for healing one's physical or spiritual traumas.

Usually, the effects are there, although they are requiring a long period of time for progress. For emergency cases, these methods are not suitable.

However, for one's Dharma practice which also takes a long period of time for progress, its functions will be much greater. The "Power of the Resonating Voice" is sufficient enough to make the long progress period of one's Dharma practice to become a rapid achievement of goals. Why is it so? The most important key point for one's real Holy Dharma practice is on one's "mind training". And the highest level of one's "Mind" is to restore the state of "Emptiness: Neither Existence Nor Voidness". Then, what is the "vibration frequency" that is closest to this state? A good mastery and application of this special "vibration frequency" is undoubtedly the "shortcut" for one to enter into this state of condition.

Therefore, the arising of human sounds (regardless of whether they come from the "conscious" level, or from the "subconscious" level) will be extremely useful in one's Dharma practice if one knows how to use them.

From time immemorial, countless Dharma practitioners have gone through countless lives (the floating of ups and downs) in the "ocean of sufferings" of

reincarnation (Skt: Samsara), only to seek liberation from those kinds of invisible tractional forces (that have continuously manipulated them to take "different forms of life existence") known as "karmic forces". This "karma" is, in effect, a gigantic force that have been formed by the interlocking entanglements of the "collective mental strengths" of all sentient beings.

Why does one have to be liberated from these tractional forces? Isn't it very interesting to be continuously reborn into "different forms of life

existence"? For those people who live in favourable conditions, they can think, savour and cherish it that way. Yet, for those others who are forced to bear the pains and sufferings, such cases as when one is in the animal jungle of fighting for existence, of the hunger and chill amongst the hungry ghosts, of the imprisonment torture in hells, they will deeply understand

and realise why they have to get liberated from the controls of these kinds of "karmic forces", at all cost and with all efforts, without any bargaining due to hesitations.

The question is how can one be liberated from the controls of these kinds of "karmic forces"?

There is only one answer, that



is, to enter into the state of "Emptiness: Neither Existence Nor Voidness". This is the essence of the "Heart Sutra", and also the only exit for countless sentient beings. To be able to master and apply this state of condition, one will then be able to restore one's boundless potentials originally in one's possession, which is known as the "Buddha" (meaning "the Enlightened One"). If one is to remain permanently and constantly in this state of condition, without linking or connecting to any physical materials, this is known as the state of "Nirvana" (meaning the "annihilation of all sufferings").

From time immemorial, many sentient beings, because of their abilities to master and apply this state of condition, have become "Buddhas", thus enjoying freely the eternal happiness of "Nirvana". Unfortunately, the number of sentient beings that were left behind in the ocean of sufferings is in countless multiples of these "Buddhas". Why is it so? Why is it not the case that, if the number of sentient beings who have become Buddhas is deducted from a gross number, the number of those remaining sentient beings should have been reduced?

Of course not. The reason is that the existence of sentient beings is derived from the variation of the "Mind" which combines with physical materials to become the physical forms of various sentient beings. Hence, the number of sentient beings is countless, and cannot be dealt with by just "addition or subtraction". The only way to save all sentient beings is by teaching them to enter into the state of "Emptiness: Neither Existence Nor Voidness".

The variation of the "Mind" can only be stopped if all the sentient beings can simultaneously enter into the state of "Emptiness: Neither Existence Nor Voidness" altogether. However, such kind of a possibility is actually extremely low. It is because the level of individual awareness of this kind of knowledge varies greatly amongst the sentient beings, while their respective abilities are so different. Therefore, there is no way that they can reach a point of simultaneously entering into the state of "Emptiness: Neither Existence Nor Voidness" altogether. And so the salvation of all sentient beings has almost become an unattainable idealistic goal forever.

As a secondary option, to "save as many sentient beings as possible" has become the realistic goal of all those Buddhas and Bodhisattvas who are willing to stay behind to continue with their salvation of the sentient beings -- a kind of their dauntless spirit

to "pursue what is known to be a mission impossible". The sentient beings are fortunate enough to have these Buddhas and Bodhisattvas who are willing to remain behind in order to save them from the ocean of sufferings. Their compassion in "taking painstaking efforts to save sentient beings by forgoing their enjoyment as the Enlightened Ones" should be highly respected. Otherwise, we do not even have the slightest

chance to know and understand what is meant by "Emptiness: Neither Existence Nor Voidness".

How to Use the "Sound of Mantra" to Transcend All Limitations of Dharma Practice

The teaching and guidance of sentient beings to enter into the state of "Emptiness: Neither Existence Nor Voidness" is, indeed, extremely difficult. It is because most of the sentient beings do not possess such a high level of intellectual capacity. Of course, one would not have any difficulty in reciting the

tra". However, in order for one to thoroughly understand, master and apply the ways so as to enter into and remain in the state of "Emptiness: Neither Existence Nor Voidness" is not something that can be achieved within one's lifetime of Dharma practice.

Are there any shortcuts for it? For those Buddhas who have already attained "Buddhahood" (perfect enlightenment), they should have understood it. Can they teach us? The Lord Buddha Shakyamuni had given a lot of teachings, some of which could be found as either Sutras or Tantras in the "Taisho Shinshu Tripitaka":

- 1. "Guhyasamaja Tantra"
- 2. "Mahavairocana Sword Mudra"
- 3. "Bodhisattva Manjushri's Secret Eight Mantra Words of Mandala Practice Ritual"

- 4. "Manjushri Ratnagarbha Dharani Sutra"
- 5. "Aryamanjushri Mulakalpa Sutra" and "Ritual for the Twenty-eight Constellations and Seven Luminaries"
- 6. "Mayajala Tantra"
- 7. "Sarva-Tathagata-Tattva-Samgraha-Sutra"
- 8. "Sarvadurgatipariśodhana Tantra"

There are many such kinds of Sutras and Tantras,

and is difficult to set them all out in details. All these teachings, as given by the Lord Buddha Shakyamuni with compassion. were all shortcuts for one's Dharma practice. (For details, please refer to the different articles on "The Wisdom in Directing One's Dharma Practice" of Issues from No. 24 to No. 34 of the "Lake of Lotus"). Among these teachings, it has been mentioned that the "sounds of Mantras" can ultimately lead one to transcend all limitations, such that one can use the "vibration frequency" close to the state of "Emptiness: Neither Existence Nor Voidness" for its direct entry. This state of condition belongs to the deepest level of one's "subconscious" state, impacting most directly

on the nature of one's "Mind". The question is how to recite those sounds of Mantras in order to find out one's own "vibration frequency" that is nearest to the state of "Emptiness: Neither Existence Nor Voidness"?

Since the "characteristics of one's habitual tendencies, features of karmas, orientations of aspirations



and degrees of mental concentrations" are different amongst individuals, it follows that the use of "vibration

frequency" to bypass these obstacles for

one to enter into the state of "Emptiness: Neither Existence Nor Voidness" will also be different from one to another. This is the main reason why there are different "seed syllables" (Bijas) in each of the "Families" of all the Buddhas' Mantra sounds. [The "Families" of all the Buddhas - "there are Five Families for the "Complete Enjoyment Body" of all the Buddhas, namely: the Buddha Vairocana (east) of the "Buddha Family", Buddha Ratnasambhava (south) of the "Ratna Family", Buddha Amitābha (west) of the "Padma Family", Buddha Amoghasid-

dhi (north) of the "Karma

Family", and Buddha Akşobhya (central) of the "Vajra Family" - they are generally known as the Five Families of the Five Dhyani Buddhas. Please refer to the articles on "The Profound Abstruseness of Life and Death: The Meaning of Near-Death Experiences" in Issues 4 and 5 of the "Lake of Lotus" concerning the detailed explanations on the three different states of "Dharmakaya" (Truth Body), "Sambhogakaya" (Complete Enjoyment Body) and "Nirmanakaya" (Emanation Body)]. Furthermore, the Mantra sounds of each of the Buddhas are not the same due to the differences in their respective unique "vibration frequencies". Hence, the "Seed Syllable" (Bijas) of the Mantra sound of each Buddha is the sound that is most beneficial and closest to the unique "vibration frequency" of this particular Buddha.

For each of the Buddhas, they can attain "Buddhahood" (perfect enlightenment) because they are able

to find out their own unique "vibration frequency" that conforms to their own individual "characteristics of habitual tendencies, features of karmas, orientations of aspirations and degrees of

mental concentrations". They can thus bypass all those obstacles, and in using their most unique "vibration frequencies" that were closest to themselves in order to successfully enter into the state of "Emptiness: Neither Existence Nor Voidness". They also learned the tips of "mastering and application" through continuous drillings.

In other words, after a "Guru" has transmitted and taught the sounds of Mantra to you, it is still necessary for one to learn how to recite the Mantra sounds in order to find out one's most unique "vibration frequency" that is closest to one's own self for entering into the state of "Emptiness: Neither Existence"

Nor Voidness". All these are important indicators of whether a "Guru" has possessed "an in-depth understanding

of the Buddhist teachings, rich experiences in the actual practices of the Holy Dharma, and the abilities to teach" or not, but not just "empty talks" of having the "power of blessings". Yet, this so-called "power of blessings" is nowhere to be found, and that this type of "guru" does not even know how to explain the Buddhist teachings, except repeating

the deceptive tricks as mentioned in the story of the "Emperor's New Clothes".

To know the differences in the skills for reciting the "Mantras, Buddhas' Holy Names, or the Sutras", one must first have to understand as to how many types of reciting techniques are

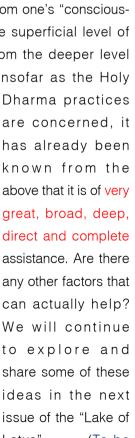


there? Whether "visualization" is involved in any of them? And if so, what are the substances of the "visualization"? Are they static or dynamic, or whether it is some kind of a "visualization programming", and so on? All these would have different kinds of handling skills and techniques in order to induce greater and faster effects. As for the way to know how to find out one's most unique "vibration frequency" that is closest to one's own self for entering into the state of "Emptiness: Neither Existence Nor Voidness", such teachings and skills will only to be transmitted to qualified disciples who have the affinity. As such, this will not be explained here. It follows that detailed analyses on the differences in the various skills and techniques for reciting the "Mantras, Buddhas' Holy Names, or the Sutras" will not be given here as well.

For the origin for the sound of the human body, where does it actually come from? Does it come from one's physical body, or from one's "consciousness"? Does it come from the superficial level of one's "consciousness", or from the deeper level of one's "subconscious"? Insofar as the Holy

> Lotus".....(To be Continued) 🛼

director and their





Notes:

- 1. The newly released book on "The Wisdom" in Directing One's Dharma Practice (1)" has already been published. The content includes the articles on "The Wisdom in Directing One's Dharma Practice" from Issues No. 1 to 10 of the "Lake of Lotus".
- 2. The newly released book on "The Wisdom in Directing One's Dharma Practice (2) - Seven Methods of Strengthening One's Mind to Counteract Adversities" has already been published. The content includes the articles on "The Wisdom in Directing One's Dharma Practice" from Issues No. 11 to 20 of the "Lake of Lotus".
- 3. The newly released book on "The Wisdom in Directing One's Dharma Practice (3) -One of the Pivotal Points in Practising the Holy Dharma: The Mysteries and Usage of the Mantras and Sounds" has already been published. The content includes the articles on "The Wisdom in Directing One's Dharma Practice" from Issues No. 21 to 30 of the "Lake of Lotus".

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also a sign of "everything comes from the mind". Furthermore, the "tractional forces of the cycle of karmic existence" are, in fact, originated from the combinations and permutations of countless "mental strengths", thus constructing a grand design and blueprint of "everything comes from the mind".

The Key Points of Everything Comes From the Mind

1. The Mind (Mental Strength)

The "Avatamsaka Sutra" has mentioned that "everything comes from the mind". What does this saying of "everything comes from the mind" actually mean? Its literal meaning is that "everything which will include all things in the universe, the life worlds and the material world" all are manifested from the "mind". What is the "scientific" viewpoint on this?

The world famous mathematician Dr. John VonNeumann had mentioned that:

Human beings consist of a "non-materialistic thinking" which controls the brain of the physical body.

In fact, for the past few chapters, we have already mentioned that those scien-

tists have been saying that the brain of the human body is in control by some "non-material".



For example, the winner of the Nobel Prize for Medicine in 1981, Dr Roger W Sperry (who was a neuroscience biologist) considered that:

The ego of a human being is a type of "non-material", which exists in the complex layers of the tissues of the human brain and controls every part of the brain, in which the mechanical function of one thousand millions nerve cells exist in total.

Now, this mathematician Dr. John VonNeumann has further mentioned the fact that this is in "remote control of the materials". What does this mean? It means that one can be direct, without the using of





either the physical body or any other objects, only with the using of one's "mental strength" and "will" in doing a particular thing.

Another famous physicist Dr. Fritz London has mentioned that:

The materialistic substances are merely formed by the notions of human beings, and the real substances are the thoughts and the notions.

What this scientist has said is that basically "all things come from the mind". He said this because there was a "scientific basis" for it and not because he has read a "Buddhist Sutra". All scientists have found these truths through conducting experimental

tests and proofs. In fact, all the materialistic substances are created by the thoughts of human beings. Their real substances are the "thoughts and the notions".

Are there any other scientists who held the same view? Yes, indeed, since this is just a simple kind of "law". In 1963, the Nobel Prize winner for physics Dr. Eugene Paul Wignor has said that:

Human beings are in possession of a "non-materialistic ment" al consciousness which could influence the changes of materials!

What this scientist has said about this "non-materialistic mental consciousness" is actually one's "mental strength", which can influence materialistic changes.

Dr. John Archibald Wheeler, who is a physicist on "quantum mechanics", has discovered that in the microscopic worlds of atoms and sub-atoms, substances exist in a physical state which could be calculated statistically (that is, before they have changed into any shape or form) before they are put under observation. However, once when they are put under the observation of the human eyes, or to

be observed under the instruments, it will result in the sudden change of the atoms, and would then show a certain "form" (i.e. referring to a "fixed form") in accordance with the "conditions" at that time. This explains what is meant by this phrase of "everything comes from the mind"..... (To Be Continued)





The Buddhist teachings are meticulous and profound, while its methods of practice are practical and achievable. Nevertheless, the teachings are as abstruse and comprehensive as an ocean such that it is not an easy task for one to even just trying to grasp its contents in a concise and accurate manner. Therefore, our Association aims to help reveal the abstruse meanings of the Buddhist teachings in such a way that it can be easily understood by the general public through the distribution of CDs, VCDs and DVDs, either free of charge or with a cost.

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