



The Seeing is the Doing
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January 3, 2024

Jiddu Krishnamurti, a noted dharma teacher said, “The seeing is the doing.” What did he mean by that?

Let me start with a story.

After graduating from medical school in 1972 (in the dark ages), I started my internal medicine residency at the University of Colorado Medical Center in Denver, Colorado on June 16, a Saturday. I was assigned to one of the medical inpatient services and was told to meet my second year supervising resident at the CCU (coronary care unit) at 8 AM. We started in the CCU and then moved on to the inpatients on the ward. Our service wasn’t assigned to take patients that day (every third night call) and so I wrote my notes and went home. The next day, Sunday, I showed up at the CCU; my resident was not there. After about 10 minutes, the nurse said that I had a call. It was my resident who said, “Hi Bob, since you did so well yesterday, I don’t see the need for me to come in. Go ahead and make rounds and call me if you need anything.” I had no problem with that, and I proceeded to make rounds and do my notes. There were no issues that I needed to call him about. The next week, my resident went on to another rotation and a new resident took over. We got along well, and the rest of the month-long rotation went well.

On my next ward rotation, my next supervising resident was a new hire having completed his first year at another institution. He turned out to be a micromanager, I think in part due to his not knowing how the system worked here. I began to feel smothered having someone looking over me that closely as opposed to my first day at work and the rest of the previous inpatient rotation. I started with frustration and then depression. The final straw came when, on call, at 2 AM, he paged me and said, “We have a new admission. The other team was supposed to take this patient but I talked them into letting us have him.” I felt that this was unfair, as I had to work up the patient, letting my resident get some sleep. I became more depressed, and I didn’t know what to do. The faculty physician in charge of the residency program had a reputation for being stern and uncompromising. After a few days, I felt I had no choice but to see him, thinking that he would not listen but see my problem as weakness. When I met with him, I broke down while telling him my story. To my surprise, he said that he understood and would take care of the situation. The next day, I had a new supervising resident, and I was able to get back on track.

Why am I telling you this story? In looking back from where I am now, I can see that at the time, I didn’t have the dharma understanding and tools to help me deal with this stressful experience. I had no understanding of what happened in terms of being able to prevent this from happening again in the future. In other words, I learned nothing from this experience or understood that the seeing is the doing.

Can you think of a past experience before you were aware of the dharma that you might have handled differently knowing what you know now.

What are the understanding and tools that I am talking about? What didn't I see?

To go back to the story and knowing what I know now, I did not see that I was not the mind. The mind was communicating to me via unpleasant body tones and unpleasant thoughts, and I had no idea what the mind was trying to tell me. The mind, as you know, was only trying to protect me from what it considered to be a dangerous situation. Since the mind is in charge of maintaining my physical well-being (survival), it was signaling me that it was having difficulty maintaining allostasis. Allostasis can be defined as the active process of maintaining/re-establishing homeostasis, when one defines homeostasis as those aspects of physiology (pH, oxygen tension, body temperature for homeotherms) that maintain life.¹ I didn't understand any of that despite completed a medical education. My body was taking the brunt of my continuing anxiety and depression. And I am sure that I was not an easy person to be around, to put it mildly.

Besides not understanding how the mind works, I had no inkling of what to do. I tried to take control of the situation without paying mindful attention moment to moment to what is. I didn't know what the what is was. I didn't know that any time stress arises, I was clinging to something. What was I clinging to?

What are the tools that could have helped me ? The Mindful Breath Pause and Mindful Inquiry.

The Mindful Breath Pause

When a stressful experience arises (unpleasant body tones and thoughts) and you recognize these symptoms as stress and that the mind is telling you to do something, stop ruminating about it and go to the Mindful Breath Pause. Thich Nhat Hanh explains the shift to being mindful of the breath: "So the object of your mindfulness is your breath, and you just focus your attention on it. Breathing in, this is my in-breath. Breathing out, this is my out-breath. When you do that, the mental discourse will stop. You don't think anymore. You don't have to make an effort to stop your thinking; you bring your attention to your in-breath and the mental discourse just stops. That is the miracle of the practice. You don't think of the past anymore. You don't think of the future. You don't think of your projects, because you are focusing your attention, your mindfulness, on your breath."² The Mindful Breath pause calms the mind and allow you to go back to the experience with equanimity, accepting things as they are rather than how you would like them to be.

Mindful Inquiry

When going back to the experience, you use mindful inquiry. Paying attention moment to moment to what is, you can now begin to see the what is. If I had known this during this experience, I would have seen what the what is was not what I was clinging to. It was not that life is unfair, it was not what I was wanting to happen, it was not my pitying myself, and it was not that the supervising resident was a bad person. The what is was simply that our relationship was not working.

Honing in on the relationship could have brought a number of alternatives to try, such as having a conversation with the resident, having a different conversation with the program director, exploring what my role in this situation was, setting boundaries, etc.

The point is that when in the midst of a stressful experience, it is all too easy to be angry with the situation, blame others, and pity oneself, rather than accepting the what is and going on from there.

Remember that you don't have to "do" anything but see. Once you see, the actions that are taken will just happen. The mindful breath pause calms the mind and gives you space to shift to mindful inquiry. Mindful inquiry is not brainstorming; it is about going to that place of silence and letting life come to you. You drop the commentary, the judgement and the decision-making. In that space is patience, courage, understanding, and determination to deal with the perceived problems, difficulties, and failures that arrive. Note the word, perceived. The mind is telling you that there is a problem, a difficulty, a failure. That is just the mind's point of view. There is only life.

Your thinking will not solve the perceived problem, difficulty, or failure because you end up ruminating on the same thought over and over. The only way to get new data is to listen.

So that's my story and I hope that you might benefit from this sharing.

¹ McEwen BS Wingfield JC [What's in a name? Integrating homeostasis, allostasis and stress](#)

² [Thich Nhat Hanh on The Practice of Mindfulness](#)