

Equanimity

Larry Culliford

Equanimity is useful for a psychiatrist, even if (especially to start with) it simply comes and goes. It does not seem right to consider equanimity as a trait of character. There may be some characterological or temperamental predisposition, but it is more correctly an *attribute* which people acquire, lose and regain. Equanimity is achieved particularly through experiencing the ups and downs of life positively. There is an element of consciousness involved: of will-power, effort, and determination. Why might one not set oneself on this path to more frequent and abiding episodes of equanimity? Perhaps through misunderstanding.

Equanimity may usually be attributed to a person displaying few (or no) signs of either excitement or distress in the face of stimuli, events, situations which do tend to provoke such reactions in others. Also, on reflection, one may attribute equanimity (in greater or smaller measure) to oneself.

Misunderstandings arise when the absence of external signals is taken for no reaction at all. Worse, with supreme equanimity, bad news may be greeted by a paradoxical smile, even with a laugh, and good news with a fleeting frown. Yet this is not perversity; quite the reverse.

It is not an absent response which characterises equanimity but the opposite. There is full appreciation *and* acceptance of a situation – with both heart and mind – and a simultaneous adjustment, letting go, moving on. There is an almost palpable sense of release accompanied by the idea, “It’s alright”, or, “Everything’s fine”: a kind of psychological as well as biological exhalation after the first sharp intake of breath.

For advanced players – gurus, mystics, contemplatives, saints – there may even be no pause at all in the rhythm of respiration at times when others feel stressed.

But those who do not recognise the complex and subtle interplay of thought and emotion within the individual who stays calm, centred, self-controlled at such a time, the lack of reaction signifies (falsely) at best indifference, and at worst callousness, even cruelty. Disappointment, resentment, even rage may result. The temptation is there to provoke, to goad, to get a reaction. One’s equanimity may further thereby be tested. Psychiatrists, and others who face human suffering regularly, tend to know about this.

Equanimity serves most evidently in the face of loss (when this occasions anger, sorrow, guilt,

shame or bewilderment) and threat (when this gives rise to doubt and anxiety). But it serves too in the face of both minor and inordinate gain. For example, to win the lottery is a challenge better faced with equanimity than with elation unbridled to the point of intoxication.

How may indifference and equanimity be distinguished? By taking account of both temperance and perspicacity. A warm heart and a cool, clear mind: this is what to look for, and this is what to cultivate; then no mistakes will be made.

And there are other pointers. The mind held in equanimity is motivated both by kindness and compassion. The most discerning may become aware too that such a mind, such a being – in sympathy with all and with all that occurs – is suffused through, at the deepest level, with joy. Joyful compassion is felt for a short time by many at moments of equanimity, but for this to be sustained in anyone is both special and rare.

There is a great and truthful paradox: joy in the full awareness of fellow human suffering and pain. It is the joy of hard-won detachment. There is the fullest involvement in life, the fullest acceptance too of even its meanest vicissitudes, psychiatric disorders and other psychological afflictions included.

To respond with kindness, compassion, equanimity and (at least sometimes) joy; to celebrate life where there is suffering, even of the most dire type; this is what psychiatry and psychiatrists are asked by others to do. This is what we have let ourselves in for, and it is to our credit that this is indeed what we so often succeed in delivering. A warm heart as well as a cool, clear head: that is what is best to display.

Equanimity is a useful attribute for a psychiatrist to acquire. (Do not worry if you lose it again, once achieved. Luckily, for the most part, those who have expectations of us are both realistic and grateful.) It is good for self-esteem. It points to maturity. Equanimity provides an example, a lesson in *how to be other* – other than how one normally finds oneself in the face of challenge or stress; a lesson in acceptance. It provides reassurance to others (when they learn to distinguish it from indifference). It provides reassurance . . . and hope.

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