

Breaking Open

*Finding a Way Through
Spiritual Emergency*



Edited by Jules Evans
and Tim Read

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AEON

First published in 2020 by
Aeon Books
PO Box 76401
London W5 9RG

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British Library Cataloguing in Publication Data

A C.I.P. for this book is available from the British Library

ISBN-13: 978-1-91280-769-7

Typeset by Medlar Publishing Solutions Pvt Ltd, India

Printed in Great Britain

www.aeonbooks.co.uk

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INTRODUCTION

Tim Read and Jules Evans

The fundamental mistake was supposing that the healing process was the disease, rather than the process whereby the disease is healed. The disease, if any, was the state previous to the “psychosis”. The so-called “psychosis” was an attempt towards spontaneous healing, it was a movement towards health, not a movement towards disease ... it could be called mystical, a re-owning and discovery of parts of myself.

—Dick Price

This book was conceived one evening in London in spring 2018, at an event organised and hosted by Jules Evans on the topic of spiritual emergencies. Tim Read gave a perspective from psychiatry and transpersonal psychology while Jules, Anna Beckman, and Louisa Tomlinson spoke about their own experience of psycho-spiritual crisis; how they not only survived it, but came to see it as a transformative journey. Their stories were beautiful, funny, discombobulating, sometimes frightening, but ultimately life-changing in a good way. It was a rich evening that left a powerful resonance with those of us who were there. It seemed extraordinary that the prevailing psychiatric and psychological paradigm dismisses such meaningful experiences as the empty epiphenomena of pathology.

We all felt that we were pushing against the walls of stigma and silence. There's a prejudice against talking about *any* sort of altered state or spiritual experience in Western culture, and the result is that when people do publicly share their spiritual experiences, there is a pressure to make it all positivity and light. But sometimes experiences of ego-dissolution are messy, confusing, even quasi-psychotic. These are alterations to your habitual model of self and reality, after all. That can be scary, for you and the people around you. There's also a great deal of fear and prejudice around psychosis in Western culture.

Can one walk the line between the vapid positivity of some New Age spirituality, and the doom-and-gloom pathology of mainstream psychiatry? We felt, that evening and in the months since, the tremendous value of speaking truthfully and publicly about a realm of experience that is so important, yet so ignored. We've had messages from people since that day, thanking the project for helping them come to terms with the most powerful and most disturbing experience of their life. And we feel this project is important at this particular historical moment, as old structures of meaning break down, and *homo sapiens* enters a collective spiritual emergency. What insights and tools can help us find a way through the darkness?

The editors of this book (Jules and Tim) have different professional backgrounds—one of us is a philosopher, the other a psychiatrist—but we share a passion for transformative growth and have each written about our own turbulent journeys. We thought it would be helpful to put together a collection of personal accounts. We have three aims: first, to help people going through similar crises. Second, to see what parallels and patterns one can observe in these postcards from the edge. Third, to see what insights these experiences can offer, not only to us as individuals, but also to us collectively, as humanity moves deeper into our current crisis of meaning.

How do we describe these states of mind? Terminology is always difficult. The psychiatric term *psychosis* is often associated with medical reductionism, pathology, medication, and stigma. Terms such as spiritual awakening or shamanic initiation may come with their own baggage. Perhaps the best-known term is *spiritual emergency* (introduced by Stanislav and Christina Grof), which we offer here as a helpful model, suggesting both a serious crisis but also the inherent opportunity for *emergence* to a higher level of psychological organisation with

an enhanced sense of spirituality. We accept that *any* term for this type of experience will miss something—some might find “spiritual emergency” too spiritual, and prefer a term like post-traumatic growth.

There are three crucial points that the Grofs emphasised:

- Visionary states have played a crucial part in our social and religious heritage.
- Such states are perfectly natural, although they can be painful and disturbing dissolutions of the ordinary ego and ordinary reality. Properly managed, they have a natural tendency towards positive resolution and should be supported rather than suppressed with medication.
- They should not be confused with conditions that have a biological cause and which require medical treatment, but modern psychiatry and psychology have little interest in or understanding of these non-ordinary states.

The Grofs’ third point is perhaps the most controversial. Is it really possible to reliably distinguish between “spiritual emergencies” and other types of psychosis? Can one separate conditions that may have a more biological cause from those which don’t? Many mental and emotional problems seem to arise from a combination of genetic, biological, psychological, and sociocultural factors, and we still know so little about consciousness and how it behaves. But we can say this—many of the strategies and self-care practices which our contributors discovered and found helpful in their crises (meditation, body practices like Tai Chi, love, and connection to others) are increasingly found to be helpful not just for those suffering from psychosis, but for *all* humans.

We sought contributions from authors who could articulate their lived experience in navigating the tortuous process of spiritual emergency and offer the fruits of their journeys for all of us. We welcomed different voices with a diversity of experience, terminology, and explanatory framework. We wanted the narratives to *show* rather than *tell*. This is not a book of theories—the focus is not so much on ontological questions (What’s the nature of this reality?) as practical questions of self-care (What helped you through the crisis?). Still, part of the journey involves finding maps and guides, and the authors talk about the books and teachings that they found helpful, such as the Buddhist teachings

of Pema Chodron and others, the transpersonal psychology of Carl Jung, William James, and Stanislav Grof, or the body-work of Qi-Gong, Gestalt therapy, and shamanic energy healing.

We acknowledge that conventional psychiatric treatment is helpful to some but woefully lacking for others. Many people undergoing psycho-spiritual crisis feel unsupported by psychiatric services that focus on symptom-control rather than *meaning*, and risk management rather than *integration*. We believe that support and integration are crucial to the endeavour. We also believe that there are important methods of self-care that people going through spiritual crises can use to take care of themselves. These basic spiritual methods work both in everyday life, and in the most altered states.

Our authors have their own suggestions as to the significance of their experiences. We do not want to try to say what these experiences are or what they or not. We want to hear *what worked for them*—they are the masters, the experts of their experience. But as editors we see certain parallels and patterns emerge in their stories. We thought it would be helpful to share our thoughts about what we have learned in a concluding chapter. We also share our thoughts in that final chapter as to why these experiences might be happening now, at this particular historical moment of collective spiritual emergency. To anticipate, we think they may point a way to a different model of reality, which is less egocentric and more interconnected and *eco-centric*.

Finally, this book comes with three health warnings—please take these seriously for we would hate for anyone to come to harm. These are deep and perilous waters.

First, we recommend that anyone who is considering changing their treatment or coming off their medication after reading this book has a careful discussion with trusted health professionals and important others before making a decision. The stories here are from a group of people who found their own way through their crisis and generally did not feel that psychiatry had anything useful to offer, although psychotherapy was often crucial. But there are many people who feel helped by conventional psychiatric services, who feel that the diagnostic labels such as bipolar disorder or recurrent depressive disorder are appropriate to their experience and that the medication they take offers relief from destabilising symptoms and improved quality of life. We honour and respect diversity in how we choose to manage ourselves through life's challenges and the vicissitudes of being human. But we do feel that

psychiatry has ignored or denigrated the psycho-spiritual perspective in favour of the medical model, despite the growing body of evidence that finding a positive and meaningful frame for difficult experiences is a crucial part of integrating them.

Second, the cardinal rules for navigating potentially transformative mental states are *set*, *setting*, and *integration*. We will come back to these concepts repeatedly as they are of such central importance. The set or mindset needs to be able to conceptualise (at least sometimes) the crisis as an inner journey that has potential value. The setting is the environment and the support structures, while integration refers to the long, hard work of trying to make sense of it all. These three principles are woven together, so a supportive setting helps maintain a positive mindset that makes integration easier, which reinforces the mindset, which in turn makes the challenges easier to manage. On the other hand, in psychiatric practice we are very familiar with the mindset that sees everything as *out there*, in external paranoid conspiracies, and with people who may have little concept of an inner transformative journey.

Third, although some of the authors feel they have benefitted from *sacred medicine*, we don't endorse the use of psychedelic substances. Of course, there is ongoing clinical research looking at possible therapeutic benefits, many people use psychedelics responsibly to support their own healing with due attention to set, setting, and integration, and we support people's right to make their own informed choices. For those who feel irresistibly drawn to the medicine path, we urge caution and meticulous attention to set, setting, and integration. We suggest that there are non-drug methods (meditation, holotropic breathwork) that serve a similar purpose with less risk and we say more about this in our concluding chapter.

This book owes everything to the authors who have had the courage to put their heads above the parapet, resurrect difficult periods of their lives, and write about them. These gritty, resilient, funny psychonauts are models of Joseph Campbell's archetypal hero's journey, but they're also models of what Alan Watts called "no fuss spirituality". They've learned to walk through intense experiences with equanimity, humour, and cool. Each one has returned to consensus reality with a transformative mission, to heal, to educate, or to facilitate the passage of our fellow human beings in some way. Joseph Campbell wrote: "The psychotic drowns in the same waters in which the mystic swims with delight." Our contributors were thrown into the ocean and learned how to swim.

They have much to teach us, at a time when our societies are going through a collective spiritual emergency. How do we fall apart and come together again with courage and grace? The environmental activist Joanna Macy wrote:

In humans, our internal codes and organizing principles are basic to our sense of self. The realization that they are no longer valid can be very disorienting, making us frighteningly unsure of who we are. This sense of being off track can be experienced in religious traditions as a call to repentance. This loss of previously valid norms is painful and confusing, but psychiatrist Kazimierz Dabrowski calls it positive disintegration, because it allows more adaptive understandings of self and world to arise. In periods of major cultural transition, the experience of positive disintegration is widespread.

These stories show us all the art of positive disintegration—and reintegration—in a time of major cultural transition. Perhaps these stories suggest the dying of an old model of the self—separate and alone in an inanimate universe—and the birth of a new model, of radical interconnection within a universe brimming with fiery intelligence.