

Enchanted Madness

A Contemporary Case Study on the Sensed Spirituality of Psychotic Mania



Bachelor Thesis

Religious Studies

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Mike had his first manic psychotic episode in 2013, in Africa, triggered by antimalarial medication. Day after day, he started feeling more energized, and his lifeworld became more magical. He traded his wristwatch for an armlet with a Ghanaian. He was not interested in time anymore and preferred to wear the incorrectly spelled, yet highly meaningful slogan “determined to do explore” on his arm. God’s voice spoke to him, and told him he was on a mission. He became convinced he was the Messiah, a second Jesus. He exchanged his clothes for a white bed sheet, and went down the streets to preach: “World peace is coming, Jesus is returning, look into my eyes, you will see, it’s gonna be alright, I’m your savior.” His public, the Ghanaians, responded relaxed, and listened to him.

During his second psychotic episode, he took his mission to another level. He connected with cameras in a satellite, and made them point towards him. This enabled him to broadcast a message to the whole world, via tv-screens. He held up his hands, made sure he was visible, and made a double sign: interchangeably he made the peace gesture with his both hands, and brought them together to form a “W,” going back and forth between the two. His message for the world was, once again: World Peace.

Based on interview with Mike - informant.

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Abstract

This thesis provides a contemporary case study on the “sensed spirituality” of psychotic mania. The case is located within a context of growing uncertainties and debates concerning the nature of psychotic phenomena. These uncertainties are reflected in the manners in which psychotic spectrum patients relate to their psychotic experiences. The case consists of the works and practices of Sean Blackwell, who was diagnosed with bipolar disorder. To make sense of his experiences, he consulted sources stemming mainly from the field of transpersonal psychology.

Sean takes the effort to single out psychotic manic experiences as meaningful events, by referring to them as spiritual. I look at the material dimension implied in this process of meaning making by analyzing the various and complex ways in which the body is involved in experiencing and promoting psychotic phenomena as spiritual. Studying the role of the body is accomplished by describing a specific characteristic of the body of those experiencing psychotic phenomena, and discussing how this body is portrayed by Sean. Also, the reports of Mike – who was diagnosed bipolar and participated in retreat sessions with Sean – are used to uncover how his body was involved in aligning with Sean’s perspectives.

To understand this process of valuation in the aforementioned context of uncertainties, its discursive relation to the societal context is studied. This is analyzed by looking at the related issues of authenticity and authority as they come up when defining the nature of psychosis. These issues are related to embodied psychotic manic experiences deemed spiritual.

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Introduction

I. Madness!

Mental disorders form a growing topic of interest in contemporary society. A web search for mental disorders leads to many hits, including forum threads, documentaries and blogs. “Madness” accordingly gains growing societal interest. This is shown by, among other things, the publication of books on the topic. These are written by a variety of authors including philosophers, psychiatrists, psychotherapists, as well as those who have gone through a psychotic episode. The growing interest is also marked by the Waanzin [Madness] festival, a public event at which speakers present their views on the topic of psychosis. The first episode in 2016 hosted a variety of speakers interested in the topic including philosophers, behavioural scientists, and artists. How psychosis should be defined is debated upon within the sphere of psychiatry (Reininghaus et al. 2013). The publication of a revision of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5) in 2013 sparked debates on the proper classification of mental disorders characterised by psychosis (Cosgrove and Suppes 2013). One of the critical voices in these debate comes from Jim van Os, professor of psychiatry. He claims that schizophrenia, one of the mental disorders in which psychosis is a common feature, does not exist (van Os 2016).

Philosopher Wouter Kusters takes part in the wider, public debate on defining psychosis. He wrote a book on his experience with psychosis, *Pure Waanzin* (2013), and, after another psychotic episode, a more elaborated philosophical reflection on the matter: *Filosofie van de Vrijheid* (2014). In these books, he demands a broadened perspective on psychosis. He criticises the dominant biomedical view for being too narrow and shorthanded to gain a full understanding of psychosis (Kusters 2013, 168-175). In turn, his work is criticised, by psychiatrist

Esther van Fenema in the blog *De romantische flauwekul van Wouter Kusters* posted to *The Post Online* in December 2014. She criticises his work for being merely a literary exercise, an invalid romanticization of a condition that is, in fact, only to be interpreted as a wasting disease. Kusters, however, feels destined to share his ideas and convince others of the inherent value to be discovered in psychotic experiences (Kusters 2014). In addition to writing books, he presents his story on several platforms. He was one of the speakers on the Waanzin festival and the first edition of the annual Crazywise conference in the Netherlands, another event where alternative ideas on psychosis are shared (Crazywise Conferentie 2017). One year later, Jim van Os also gave a lecture on his ideas at this conference.

In his work, Kusters refers to religiously oriented aspects of psychosis, such as encountering divine revelations (Kusters 2014, 389–400). These aspects seem to have partly but at the same time highly influenced his experiences. The role of religiosity seems most striking in the case of bipolar mania (Cruz et al. 2010; De Fazio et al. 2015; Mitchell and Romans 2003). As defined in the DSM-5, bipolar-I-disorder is characterised by both manic and depressed episodes (American Psychiatric Association 2013, 123-124). A manic episode, also referred to as mania, is defined as “a distinct period of an abnormally and persistently elevated, expansive, or irritable mood lasting for at least 1 week,” and is associated with “inflated self-esteem, a decreased need for sleep, distractibility, great physical and mental activity, and overinvolvement in pleasurable behavior” (Sadock and Sadock 2015, 348). An estimation of 50–75% of those diagnosed with bipolar disorder experience psychotic symptoms (Baethge, Baldessarini, Freudenthal, Streeruwitz, Bauer, Bschor 2005, 137). When psychotic symptoms occur, a manic state is referred to as a “full-blown manic episode,” that “often presents with delusions and sometimes hallucinations. Delusions in mania are most often mood congruent and typically involve grandiose

themes” (Sadock and Sadock 2015, 317). Such “grandiose themes” may involve religious contents such as the belief that one is a saviour or Messiah (Brewerton 1994; Cook 2015).

In an article published in the journal *Transcultural Psychiatry*, Nev Jones, Timothy Kelly, and Mona Shattell (2014) mention the influence of non-secular explanatory frameworks for those experiencing psychosis in the twenty-first century, and a general lack of knowledge thereof. They suggest social and cultural aspects of the current age pose a new context that has a unique influence on experiencing psychosis, and indicate more clinical research needs to be done. Chaplain Eva Ouwehand, another lecturer at the Crazywise conference, currently conducts a doctoral research on the value of religious experiences for individuals diagnosed with bipolar disorder (Psychosenet 2015). Within the field of religious studies, however, no research has been done to topics directly related to bipolar mania. This bachelor thesis is aimed at filling this gap by dealing with a relevant case study, in which bipolar mania is interpreted as a spiritual crisis.

II. Sean Blackwell

The man who provides the source material for my case study played a central role in establishing the first Crazywise conference. Sean Blackwell, originally from Canada, was hospitalised because of a manic episode in 1996 and diagnosed with bipolar disorder (Blackwell 2017b). Sean claims to have experienced his manic episode as a spiritual crisis. Since 2007, he shares his ideas mainly via his YouTube channel *Bipolarorwakingup*. As for Kusters, his experiences are of high personal value. The high personal significance of his experience seems to be his prime motivation to promote an alternative interpretation of psychotic mania. Next to internet activism and promotion of his ideas on several platforms, he started a retreat center in Sao Paulo together with his wife

in 2013 (Blackwell 2017a), where they offer retreats for individuals diagnosed with bipolar disorder.

Compared to Kusters, Sean is far more concerned with religious frameworks to formulate the meaning of psychotic experiences. His book (Blackwell 2011) and videos (Blackwell 2017b) provide a rich source of narratives and images relating to his ideas. From the reception of his videos, it becomes clear that individuals diagnosed with bipolar disorder come into contact with his work. His activities can be seen within a broader trend of online sharing (personal) information on mental illnesses, also referred to as online peer support (Birnbaum et al. 2016; Naslund et al. 2014).

III. Theoretical Framework and Research Question

In the introduction to the volume *What Matters: Ethnographies of Value in a Not So Secular Age* (2012), Ann Taves and Courtney Bender articulate the aim of the essays in the volume as to provide “a focused example of ways that modern people actively engage in something that matters to them, while drawing on (or confronting) a set of secular, religious, and spiritual frames to represent what they are doing” (Bender and Taves 2012, 2). These examples show “processes of valuation” in modern society, in which “changing discourses around religion and secularity, and (increasingly) spirituality and other similar terms, create possibilities for marking, creating, and experiencing things of value” (2012, 9). With my case study, I want to follow a similar line of research and “examine the way people mobilize various terms (spiritual, religious, or secular) in specific contexts, as part of the process of marking thing of particular value or coming to experience them as such,” and “focus on the processes through which people mark things as special or singular both through discourse and behavior” (2012, 11–12). The “thing of

value” that is at stake for Sean is psychotic mania. He experienced, marks and actively promotes psychotic mania as spiritual.

Taves suggests, in the introduction to her book *Religious Experience Reconsidered* (2009), to study “experiences deemed religious,” instead of “religious experiences,” in order to bring into focus the process of valuation. “If we want to understand how anything at all, including experience, *becomes* religious, we need to turn our attention to the processes whereby people sometimes ascribe the special characteristics to things that we (as scholars) associate with terms such as ‘religious,’ ‘magical,’ ‘spiritual,’ et cetera” (Taves 2009, 8). I will go on to study the psychotic manic experience as deemed spiritual by Sean as well as by others.

To study the process of valuation involved in Sean’s endeavors to promote psychotic mania as a spiritual crisis, I use Birgit Meyer’s definition of religion as: “particular, authorised and transmitted sets of practices and ideas aimed at ‘going beyond the ordinary,’ ‘surpassing’ or ‘transcending’ a limit, or gesturing towards (...) ‘the rest of what is’” (Meyer 2012, 23). Sean’s work is “religious,” in the sense that he promotes psychotic mania as a condition that is characterised by “going beyond the ordinary,” and provides a means to experience it as such.¹

Meyer applies a material approach to religion, interpreting it as a practice of mediation or “aesthetic practices,” that “are the material basis for making sense. Meaning production is not disembodied and abstract, but deeply sensorial and material” (2012, 28). In line with this understanding of making sense, I will examine a material dimension involved in Sean’s application of the term spiritual.

I use Meyer’s concept of “sensational form” to bring together several related aspects applied by Sean in the valuation process. This concept refers to a “configuration of religious media, acts, imaginations and

¹ The term “religion” is in conflict with Sean’s understanding of his work as “spiritual.” However, I use the term “religion” as it used by Meyer, to refer to a practice of mediation with “a beyond.”

bodily sensations in the context of a religious tradition or group” (2012, 26). A religious medium could be anything from a book to a body. The body has a unique role as a religious medium, because of the “triple role of the body as a producer, transmitter and receiver of the transcendent” (2012, 28). The body is centrally involved in sensational forms that “induce in people, in a repeated and repeatable manner, sensations of reaching out which they experience as real” (28). To study the involvement of the body in the valuation process of Sean, I try to understand its role as a religious medium embedded in a sensational form. I will take a closer look at the cultural-religious context within which Sean came to his specific understanding of the body. Research on processes of valuation should also be “attentive to the articulation of meaning within networks of social relationship” (Bender and Taves 2012, 3). Sean promotes his interpretations within a context of contradictory views. In order get a fuller understanding of the process of valuation, I look at some of the discursive dynamics that come up as Sean promotes his stance. I will analyze these dynamics by looking at issues of authenticity and authority. The foregoing issues are brought together in the following question:

How is the body imagined and experienced as a religious medium in Sean Blackwells understanding of psychotic mania as a spiritual crisis, and how is this related to issues of authenticity and authority?

The first chapter deals with Sean’s cultural-religious context, which provided inspirational sources for imagining psychotic mania as a spiritual crisis. In the second chapter, I discuss the role of the body as it is involved, portrayed, and worked upon in coming to imagine and experience psychotic mania as spiritual. The last chapter deals with issues of authenticity and authority involved when this interpretation is

shared and debated upon in the broader societal context. In the conclusion, I will give an overview and compose an answer to the central question, evaluate the contribution and limitations of this thesis, and formulate a suggestion for further research.

IV. Methods and Objective

In my thesis, I work with online retrieved material, mainly the material offered by Sean Blackwell. Also, I conducted two interviews to gather information specifically on bodily experiences.² I held one interview with Sean Blackwell, with a duration of two hours, via Skype, on May 13 (Blackwell 2017a). I asked him about details he did not share online, such as his experiences with putting the videos together. Via Sean Blackwell, I came into contact with Mike³, a Dutch man (23) who had two psychotic episodes, and was diagnosed with bipolar disorder in 2013 (Mike 2017). He went on a ten days retreat with Sean Blackwell in 2016. I held one interview with Mike on May 13, for three hours, in a cafe in the city center of Rotterdam. I conversed with Mike in Dutch and translated his answers. I interviewed Mike to learn about his (bodily) experiences relating to his psychotic experiences and Sean's work. He delivered me more useful information than I had initially expected, enabling me, among other things, to give concrete examples of the bodily effects of the retreat sessions. Of both interviews, I use (translated) quotes as well as paraphrases. Both Mike and Sean read my thesis and confirmed the data I used from the interviews.

The data retrieved from both online sources and the interviews will alternately be used and analysed in my thesis. To answer my questions, I analyse the material mainly through the concepts and theories offered by Birgit Meyer. For describing the cultural-religious context, I make use of

² More information on the interviews can be found in Appendix 1.

³ I use the name Mike as a pseudonym for privacy reasons.

works by the religious studies scholars Wouter Hanegraaff and Jeffrey Kripal. To deal with religious and psychotic experiences I draw upon the work of anthropologists Julia Cassaniti and Tanya Luhrmann. Studying issues of authenticity and authority as part of the valuation process, I make use of concepts derived from Taves' and Bender's book *What Matters* (2012), and the article *God in the Brain* (Jones, Kelly, and Shattell 2016). Answering these questions, I hope to provide an insight into a contemporary process of valuation relating to the topic of psychosis.

I use Meyer's concepts and theory on religious mediation to analyse a peculiar case of religiosity. According to her definition, sensational forms are aimed at reaching out to, and also generate the experience of "something beyond" (Meyer 2012). However, Sean's work, next to invoking experiences of "something beyond," is also aimed at relating to prior *involuntary* experiences deemed religious or spiritual. In my thesis, I try to fit this case of relating to "something beyond" into Meyers definition of religion.

Chapter 1

Cultural-Religious Context

Sean had his psychotic manic episode in 1996. Although I do not go into detail about the period leading up to this experience, I do provide an overview of his cultural-religious background and developments as he moved from Toronto to Vancouver. Next, I provide a background to Sean's most important sources of inspiration. Sean's ways of interacting with these sources are described in the last paragraph.

I. Becoming the Missionary

Sean was baptised at birth into the Roman Catholic Church in a mostly Protestant neighbourhood (Blackwell 2011, 9). When he went to university in Toronto, he encountered ideas that conflicted with his Christian background and became more critical of his roots (2011, 9). He graduated, started with his job in advertisement and calls his years in Toronto “godless” (10). He got depressed, moved to Vancouver, and describes his stay there as “a period of transition, when I began to see God back in my life again,” referring to this time as a “spiritual transition” (8). He claims to have broken with his Christian roots. In Vancouver, he came into with a milieu that can be identified as New Age. It was during this period that he read *The Celestine Prophecy* by James Redfield, Buddhist literature, and other works that can be found within a typical New Age bookstore. During that time, he also entered a network of people interested in these subjects (18-22). He went back to Toronto, and experienced his psychotic manic episode at the last seminar of a course that was described as “very psychologically stressful” (32).

II. New Age & Transpersonal Psychology

In the period before his psychotic episode, Sean became familiar with what is called the New Age milieu. Sean's main sources of inspiration, shaping his perspectives on psychotic mania, stem from this milieu. In this paragraph, I will discuss some features of this milieu that are of relevance to his work. One central theme in Sean's work is the healing potential of psychotic mania, that can be set in motion by coming into contact with a "higher self." Paul Heelas described "self-spirituality" as the *lingua franca* of New Age (Heelas 1996, 18). According to Heelas, a basic idea of this emphasis on the self is "that what lies within – experienced by way of 'intuition,' 'alignment,' or an 'inner voice' – serves to inform the judgements, decisions and choices required for everyday life. The 'individual' serves as his or her own source of guidance" (1996, 23). According to Paul Heelas and Linda Woodhead, the emphasis on the "self" is part of a larger modern cultural trend referred to as the "subjective turn" by Charles Taylor in 1991. They describe this trend as "a turn away from life lived in terms of external or 'objective roles,' duties and obligations, and a turn towards life as lived by reference to one's own subjective experiences (relational as much as individualistic)" (Heelas and Woodhead 2005, 2). Such an emphasis on subjective experiences is clearly present in Sean's work, as he aims at healing bipolar patients by informing them about their "higher self," and bringing them into contact with this "self."

Wouter Hanegraaff mentions "healing and personal growth" as one of the major trends in New Age (Hanegraaff 1996, 42–43). Though healing is a broad term and denotes a wide variety of practices and perspectives, as a term it is often emically used by practitioners and thus denotes a key element in New Age sphere. The term healing is applied instead of curing, for the former refers to an approach that seeks to heal a

whole and complex person, instead curing of an isolated disease. Hanegraaff mentions that this is a form of implicit criticism of official western medicine, which is specialized mainly in the latter type of curing (Hanegraaff 1996, 43-44). New Age healing practices and beliefs typically make no clear distinction between physical and mental illness, and are concerned with meaning through symbolic interpretations of illness. Hanegraaff relates this type of healing to what he calls “traditional healing” as opposed to scientific western medicine and states

“alternative approaches to healing, in contrast, offer general interpretive contexts for giving meaning to illness. These contexts are generally of a religious (or ‘spiritual’) nature. In this way the new therapies attempt to reinstate the close connection between religion and healing abandoned and rejected by scientific western medicine” (Hanegraaf 1996, 44).

Healing practices deal with a broader context (physical, psychological, spiritual, social, religious) and can therefore also be seen as healing also in a broader sense as “promoting harmony in the world. (45)” Sean’s endeavours to heal bipolar patients fit into this description of New Age healing. He is aimed at “transforming the whole person,” through the retreat sessions, and offers a spiritually inclined interpretive context for giving meaning to bipolar mania.

The main inspirational figures to Sean are the psychiatrist Stanislav Grof and philosopher Ken Wilber. Both Grof and Wilber belong to what is called the field of transpersonal psychology, which is part of the

Human Potential Movement.⁴ Sean's proclaimed mission is to spread and practice their ideas and techniques in order to help those who suffer from bipolar disorder and feel insufficiently aided by mainstream psychiatry (Blackwell 2017a). Wilber is described, by Hanegraaff, as the "the foremost theoretician in the transpersonal movement" and he is known for his idea of the 'spectrum of consciousness'" (Hanegraaf 1996, 58). However, I make no further reference to Wilber, and the perspectives Sean derived from his work, for I consider his contributions of less importance to understanding the role of the body in Sean's work.

Hanegraaff mentions the Human Potential Movement as an offshoot of what he calls the countercultural values of the 1960s and names Esalen⁵ as a Human Potential center. Transpersonal psychology, according to Hanegraaff, can be seen as the theoretical wing of the Human Potential Movement. Hanegraaff quotes a proponent of Esalen who states that "It is the concern of psychiatry to adjust people to the social environment. Esalen, rather, is concerned with those who are too well-adjusted, too tight and controlled. It attempts to release them for growth and greater integration." (1996, 49). Hanegraaff states within the Human Potential Movement "the full development of a person's Human Potential is now understood to include conscious awareness of the transcendental ('transpersonal') realms experienced in altered states of consciousness. These experiences are sought not merely for themselves, but are also believed to possess strong therapeutic value" (1996, 50). Transpersonal psychology "takes religious and mystical experience seriously as constituting a domain *sui generis*, (51)" and "aims at a theoretical synthesis of western psychology and Oriental spiritual systems and technologies" (51). Hanegraaff concludes that therefore the

⁴ The "Human Potential Movement" is a term used to describe a group of related therapeutic practices that had developed since the 1940s, and developed from "a basically therapeutic movement into an increasingly religious one." (Hanegraaf 1996, 49).

⁵ Esalen institute exists since the 1960s and is located in California. It is described as "a center to explore those trends in the behavioral sciences, religion and philosophy which emphasize the potentialities and values of human existence" (Kripal 2007 27-28).

transpersonal school “resulted in an openly religionist psychology,” (51) of which Grof became a central proponent.

Hanegraaff describes Grof as the “leading empirical researcher in transpersonal psychology” (1996, 57). Jeffrey Kripal mentions that “in Grof, Tantric Asia, psychedelics, and psychoanalysis all meet within thousands of clinically regulated psychedelic sessions to form a corpus of writing and a body of therapeutic work that constitute some of the most intellectually developed, emotionally provocative, and aesthetically stunning displays of Esalen’s altered states of history” (Kripal 2007, 251). Grof integrated “the altered states catalysed by psychedelics into our modern psychological maps of the mind. (2007, 250)” His experiments with LSD led Grof to the conviction that LSD holds a therapeutic value, by enabling one to access “the subconscious” (Hanegraaf 1996, 57–58). He developed a practice called “holotropic therapy” that mimics the effects of LSD (58). Sean learned to apply this practice, being mainly of a breathing technique, by taking part in a certified training program. He slightly adapted the technique, and applies his variant under the name of bipolar breathwork in his retreat sessions (Blackwell 2017a).

III. Engaging the Context

Grof is one of the most important sources of inspiration to Sean. Other inspirational sources he mentions stem from fields of interest overlapping with those of Grof and topics that gained popularity within the field of transpersonal psychology in general (Blackwell 2012). Important themes for Sean are a focus on the “self,” or even “higher self,” healing and personal growth, and altered states of consciousness. Next to reading books, Sean engaged the cultural-religious context in various ways. As said, he took part in a training program to learn to apply the breathing technique as developed by Grof. Also, he took part in

a ritual in Peru that is referred to as “Inca Shamanism: The Inca medicine people of Peru meet the last of Inca shaman” (Blackwell 2011, 120). When Sean came to spread his ideas and started making his videos, he searched the web for images via keywords as “consciousness.” Sean told me that his search results inspired him in creating these videos, such as finding an image of an egg while searching for “ego” (Blackwell 2017a). The image of the egg came to play a role in his video narratives, and I deal with this image in a later chapter. The visual contents he discovered online have their own share in providing meaning.

We can see that in engaging the cultural-religious context, Sean actively uses various media and embodied practices. He takes up cultural contents, mediated via various senses and practices. He also uses these forms to communicate his perspectives, mainly via his videos and providing retreats sessions. Sean takes up this varied input in creating his own “sensational form.” The following chapter covers parts of his work and the involvement of the body therein.

Chapter 2

Involvement of the Body

The focus of this chapter is on the various roles played by the body in experiencing and promoting psychotic mania as a spiritual crisis. As described by Meyer, the body can have multiple roles as a medium for the transcendent (Meyer 2012, 28). First, I describe some special characteristics of the body experiencing psychotic episodes, to which I will refer as the “psychotic body.” It is this body that Sean relates to when he provides his sensational form through his book, videos and retreats. As he seems to portray two kinds of bodies, I call these the “mediated bodies.” The third body involved is also the psychotic body, as it becomes sensitised through the sensational form offered by Sean. I refer to this body as the “sensitised body.” In the last paragraph, I elucidate the sequence of interaction between these bodies and the “transcendent.” I will evaluate the consequence of this sequence for understanding the work of Sean as a religion, as Meyer formulates it.

I. Psychotic Body

Psychosis is mainly characterized by hallucinations and delusions (American Psychiatric Association 2013, 123-124). Luhrmann defines a hallucination as “a perception, while in a conscious state, in the absence of an external material stimulus. It should have the quality of real perception: It should be vivid, substantial, and located in external objective space” (Luhrmann 2017, 72). A milder variant would be illusions, which share the same qualities as hallucinations, except for being based on an external material stimulus. In the case of an illusion, one is mistaken about what is being perceived. Luhrmann goes on to specify the hallmark of psychotic hallucinations; these go hand in hand

with an impaired ability to distinguish between what is real and unreal. I would say this also goes for illusions in the case of psychosis. Distinguishing between real and unreal can take the form of questioning the originating point of the hallucination or illusion as being located within or outside one's mind (72).

Luhrmann interprets the cause of hallucinations as to stem from an error in the interpretive act of "the mind" called "reality monitoring," which leads her to the hypothesis that "hallucination-like experiences occur not because there is necessarily something wrong with one's mind, but because one interprets something imagined in the mind as being real in the world" (2011, 73). The mind in this perspective is "a mind that acts, creates, organizes, and constructs" (73). It has an active role in the formation of phenomenological experience.

In their article on "spiritual experiences," Cassaniti and Luhrmann aim at developing a comparative phenomenology of spiritual experience. One category for spiritual experiences is formed by "striking anomalous events." A hallucination goes under the name of an 'unusual experience' for it is "outside the range of everyday experiences" (Cassaniti and Luhrman 2014, 334). Such anomalous experiences are, according to Cassaniti and Luhrmann, across cultures and traditions "often, (but not always) identified as associated with the spiritual or supernatural" (2014, 334). Thus, anomalous experiences as hallucinations and illusions are prone to be deemed religious or spiritual.

Both Sean and Mike provide examples of psychotic perceptions during their manic episodes, which they interpreted in religious and spiritual terms. Mike told me about his first psychotic episode in Ghana (Mike 2017). In the days leading up to his hospitalisation, he had several "anomalous experiences." His preference for music style changed and everything appeared to him as "so beautiful." The walls started "moving," and became "transparent" or "fluid." He stared at a

grasshopper, stroked it, and communicated with it, thinking: “You and I, we are one. (Mike 2017)” He came to believe he was able to control his environment in ways he could not do before. Mike told me he was able to control the progress in music, and he moved his arms to show me how he performed this, stating: “It was as if my movements were in sync with the music as if it melted into one. (2017)” Mike is used to wear lenses but noticed his vision had sharpened. His vision was now upgraded to 360° and colours appeared more intensified and vivid. At one morning he woke up and said to himself: “There is no need to apply my contact lenses, I am the chosen one, I have received a message from God. And Messiahs, they are always involved in miracles. I just have to focus on my eyes with enough intensity, and I will heal them. (2017)” It seemed to work, and this convinced him even more of his “superpowers” (2017). Before this experience, Mike thought of himself as a down-to-earth atheist. But while he had these experiences, he was drawn to a religious discourse. These abnormal “superpowers” needed a proper explanation: “You just want to place it into a narrative, and, yeah, I came up with the idea that I must be the Messiah, you just want to give it a place, phrase it, and this was the reference frame I came up with. (2017)” We see that, during his psychotic episode, Mike’s perceptions altered in significant ways. He seemed unable to properly identify the source of these perceptual alterations as being an effect of his own mind, or caused by sensory input from the outside world. Also, he came to refer to these illusory perceptions in religious terms.

In her article, Luhrmann postulates an interaction between a cultural environment and physiological sensitivity (2011). This interaction influences phenomenological experiences. She claims that “what we can call the ‘cultural invitation’ shapes a good deal about whether people experience hallucinations and the way they experience them” (Luhrmann 2011, 76). Cassaniti and Luhrmann determine cultural invitation as “the

implicit and explicit ways in which a local social world gives significance and meaning to sensation, whether mental or bodily, and the behavioural practices (such as meditation) that may affect sensation” (Cassaniti and Luhmann 2014, 341-342). The active role of the mind is influenced by culture in interpreting sensations and organising phenomenological experience. The cultural or religious system in which an individual is embedded, will interact with the characteristics of their experiences (2014, 340-342). It also applies to such striking anomalous experiences as hallucinations.

Culture and religion are interpreted as having a function in “shaping the way people pay attention to what they sense and feel in search of evidence of the spiritual and lowering the threshold of its identification through the body” (2014, 341). Through, among other things, the use of specific concepts and valorizing specific emotions, such “features will interact with someone’s physiological responsiveness to influence the way they pay attention to their own minds and bodies. That attentional scrutiny may, we suggest, lower the threshold for identifying phenomena that indicate supernatural experiences” (341). The contribution of the body is bounded by a particular “physiological responsiveness.” Such a responsiveness can be a biologically, genetically, or historically determined vulnerability to psychotic experiences. If there is no such vulnerability, it logically follows that no psychotic hallucinations will occur. I will define the initial “psychotic body,” as the body that has a physiological responsiveness for hallucinatory experiences.

Cassaniti and Luhmann take the body as an important, but not the only factor involved in the formation of phenomenological experience. Another formative factor, mentioned by Cassaniti and Luhmann, is brought about by cultural invitation. In the following paragraphs, I approach Sean’s work as a form of cultural invitation. He gives a specific meaning and significance to psychotic experiences via his book, videos

and retreats, as he brings together ideas and images, and explains and provides behavioral practices that aid such interpretations.

II. Mediated Bodies

With his book and videos, Sean hopes to inform others of his perspective on psychotic mania as a spiritual crisis. Looking closer at these materials, I found that he portrays a certain picture of the body to make his point. He envisions a clash between two perspectives on the psychotic body. Meyer's perspective on such clashes inspired me to perceive it as such. She states that "tensions and clashes over body techniques between religions, or between secular and religious identities, may fruitfully be analysed as cleavages between sensational forms, and hence between religious aesthetics and broader modes of world-making" (Meyer 2012, 29). Sean seems to experience such a clash. The clash exists between the initial psychotic body as it is perceived through the lenses of what Sean defines as mainstream psychiatry versus his own perspective on this body. In this thesis, I will refer to the psychotic body, as seen through the lenses of "mainstream psychiatry," as the "medical body." I refer to the psychotic body, as promoted by Sean, as the "spiritual body."⁶ In this paragraph, I take some examples from Sean's book as well as his videos to show how he portrays these bodies.

I will start with the portrayal of the spiritual body, the psychotic body as perceived and encountered by Sean. The spiritual body is envisioned as being in touch with "something beyond." This is interpreted as a realm "beyond time and space" that is entered when the "ego breaks down" (video 1). Sean explains this perspective in his first

⁶ In our conversation, Sean agreed to my perspective on the opposition between these two bodies. He showed me a slide from a presentation he gave in a mental hospital, as part of the Emerging Proud campaign, Sao Paulo, May 14. This slide shows two bodies. I included an image of the slide in Appendix 2.

video. In this video, the ego is visualised as an eggshell (image 1).⁷ The video shows a variety of images with eggshells, leading to paintings showing a human apparently breaking out of the eggshell (images 2-7). This process is related to the “higher self” or “soul” breaking the protective shell of the ego (video 1). Via shared characteristics, the eggshell is used as a symbol for the ego.

Sean told me that he tries to make his videos as simple as possible, by cutting complex ideas in parts and link every element to an image (Blackwell 2017a). He added schemas to present his ideas (image 8). The “ego” and “soul” are both presented to be within the body, and it is their imbalanced interaction that makes up for the “ups and downs” characteristic in bipolar mania (video 2). During a manic episode, the “soul” takes control over the body, and all experiences and behaviours are interpreted as such.

Sean uses images of artworks and pictures of daily life situations to portray typical manic experiences. Typical manic experiences such as a “very high energy” (image 9-10), “heightened senses” (image 11), and mixed sensory experiences (image 12) are portrayed in ways that supposedly match the intensity of mania experience (video 6). Also, a sense of sacredness is portrayed by a Dali painting (image 13). A sense of “all-knowingness” is represented by a non-bodily image of an explosion, tagged “Aha!” (image 14; video 2). Mike especially liked the images of daily life situations used in the videos, for they seemed familiar to him and enabled him to relate to the content of the videos.

Hallucinations are in a way objectified or even portrayed as entities by Sean when he states that, “rather than looking at hallucinations as meaningless because they are not real, we need to start seeing them as special messengers from our souls, messengers that will try to help us heal. (video 4)” For example, he advises to “let them come to the surface

⁷ Screenshots of video images are included in Appendix 3.

like a monster” (image 14; video 5). Delusional experiences, such as being the Messiah, are also interpreted in this light:

“it is in being in psychosis that our true selves or our souls are set free on this material plane of reality! The soul is an incredible thing, so connected to God, that once you are in an acute psychotic episode, you may feel that you are God himself, or Jesus or Buddha or some other spiritual figure. In fact without the ego there to protect the behavior of the soul is compelled to being completely unrepressed, so looked at from this perspective rather than being an mental illness we can see bipolar disorder as being an epic battle in the psyche, between the soul that wants to be free and the ego that attempts to suppress any emotions that it deems to be dangerous. (video 2)”

The preferred interpretation of psychotic behaviour is also visually communicated in the videos. Typical manic behaviour such as taking off ones clothes is shown by various images. Image 16 shows a painting by Dali with a naked man in a surreal environment; the image is tagged by Sean with the phrase: “Release of repression” (video 6). This interpretation of behaviour is placed within the narrative of the “soul” that broke out of the “ego” (shell).

The spiritual body is filled by and expresses the “soul,” is therefore “connected with God,” and has to be encountered in a “loving way” (image 17, video 7). It is in this light that the spiritual body should be addressed by others. In his book, Sean also describes the psychotic episodes of his nieces. As he vocalises his perception of his niece Eliana while she was in a psychotic state, we learn about some characteristics of his stance. “As the evening progressed, Eliana shared with us many new

ideas, but she was having trouble expressing them clearly. However, I immediately understood where she was coming from. She was in an enlightened state” (Blackwell 2011, 198). He interprets her psychotic state as a form of enlightenment. He relates to her accordingly when he is convinced she temporarily lost that state: “she awoke, stood up to move towards me, then collapsed in my arms. I envisioned light-energy radiating out of my heart and into hers, so that she could regain consciousness. Ligia hugged her from behind. It seemed to work. After about a minute, she was back with us, barely” (2011, 200). In conversation with her, he has the sense he encounters a “pure spirit,” about which he writes: “Nobody had ever spoken to me like that – no ego at all... just a pure spirit expressing her feelings. ‘I believe in you too,’ I said. I kissed her on the forehead. She was a saint to me” (203). Also, her body is connected to an “Other Side” when, “Back on the couch, Eliana was ‘flying’ again. I was perplexed, as I thought she was coming out of her altered states. Apparently, she had more work to do on the Other Side” (204). When his niece went through another psychotic episode, Sean “brought a box of matches into the room to light some candles for one last, sacred evening together” (213). At this “sacred evening,” he approached his niece in a specific bodily way:

“I was not sitting across from a young woman now. I was sitting across from a jaguar. A jaguar that was testing me, and any sign of fear could have meant a serious problem. Facing her, I shifted up onto my hands and knees, moving my nose within inches of the match. Through the flame, I calmly stared into her eyes, letting her know that I was ready for anything - one jaguar to another. With that, she blew out the match, sending the sulphur smoke into my face” (214).

He portrays this role play game with his niece as a meaningful event. In his book as well as in his videos, Sean shares his interpretation of psychosis, thereby showing his preferred relational stance.

The spiritual body is opposed to the medical body, which is represented as a physical body, containing an illness in videos 1 and 2. It is the body as mainstream psychiatry professionals would approach it, according to Sean. One video shows a naked man, running away from a policeman (image 18). This image is placed within the medical body narrative. The policeman represents a proponent of the medical body perspective, who misrecognizes the psychotic body and acts too violently, scaring the patient off. Other images show an aggressive attitude, and forced pharmacological treatment (images 19-21). The medical body is portrayed as a “broken brain” with a band-aid (image 22), a medicated brain (image 23) and a representation of the body as a chemical machine (image 24). Obviously, this interpretation of the psychotic body and the concomitant relational behaviour is portrayed as mistaken and harmful.

The spiritual body is portrayed as the medium for “something beyond,” and the experiences and behaviours characteristic to psychotic mania are interpreted as mediations or communications via the body with this realm beyond. This “beyond” is conceptually defined by Sean somewhat loosely with different terms as “a plane beyond time and space” and a “restore of traumatic events” (Blackwell, 2017a). Sean opposes this perspective to the medical body perspective, in which manic experiences and behaviours are misunderstood. Since it is one psychotic body, that is being interpreted as two varying kinds of media, the body in this sense is a contested medium as described by Meyer (2012, 29). With his representations of the body, Sean culturally invites his viewers to come to understand and relate to manic psychotic phenomena as

spiritual, as bodily mediated messages from a realm beyond time and space, as opposed to signs of chemical imbalance.

III. Sensitized Body

Sean portrays two types of bodies that, according to him, can be experienced and approached as such by those diagnosed bipolar as well as those surrounding them. These portrayals can be interpreted as “imagination” as conceptualised by Meyer:

“Imaginations, though articulated and formed through media and thus ‘produced,’ appear as situated beyond mediation exactly because they can be – literally – incorporated and embodied, thus invoking and perpetuating shared experiences, emotions, and affects that are anchored in, as well as triggered by, a taken-for-granted lifeworld, a world of, indeed, common sense” (Meyer 2009, 7).

In this paragraph, I take a closer look at the process of incorporating the “imagination” of the spiritual body by the retreat sessions and videos. Sean explained, in the interview, the main purpose of the retreats as to get access to a subconscious realm that is beyond time and space (Blackwell 2017a). This realm is entered when going into a trance state induced by breathing practices. Within this realm, the “higher self” or “soul” is present and at work. Also, all memories of an individual, including traumas, can be found and experienced in this subconscious realm. These trauma’s are stored in a bio-energetic system of the body. Traumatic memories are not in the past, but become totally present, enabling an individual to literally live through them by embodying memories during the retreat sessions. What happens with the body in

these sessions is interpreted as the “higher self” narrating a story by inducing traumatic memories in the body. Different types of music are used to guide the unfolding narrative. Participants are encouraged to narrate the story of their “higher self,” by drawing mandalas immediately after the breathing sessions (2017a).

Mike brought his mandala drawings to our interview meeting in order to narrate his story. He told me about a bodily experience he had during the first breathwork session (Mike 2017). After a long period of hyperventilating, he laid down for ten minutes, in trance, without breathing. He started to get unpleasant cramps in his arms and his hands. He informed me that in medical terms, these cramps are referred to as tetany, but were explained as a form of trauma release by Sean. I asked him whether he experienced it as such, and he assured me he did. He exclusively experienced this during the first breathwork session, and this to him was a sign that after these initial cramps, he had released that energy, and that is why the cramps did not occur in later sessions. Also, some physical signs he showed while being in a trance, such as facial expression, were interpreted as behaviour accompanying the process of going through birth traumas. After one the last sessions, he felt refreshed, and “in line” with himself and with the whole world,

“I lay on my stomach on the mattress, with my arms and legs spread out, it was really nice. I felt so connected with my body, I felt every cell, every heartbeat. And then I started thinking about the earth's rotation, and I just felt; I embrace the earth like this, I feel its orbits. My heart was connected with my body, everything was” (Mike 2017).

He interpreted this as another sign that he had successfully lived through and thereby released his traumatic energies. He visually represented this embodied experience in his last mandala, of which a picture can be found in Appendix 4.

Mike also described that he felt cold, pleasant chills during his psychotic episode, that at first he thought of symptoms of fever. As it was very hot in Ghana, he experienced these cold chills as rather strange. Sean, however, explains in his videos that such chills are not caused by fever, but rather the effects of kundalini energies flowing through the body. Mike mentioned these kundalini energies earlier in our conversation, only later telling me that he previously held another interpretation of those feelings. As he came to reinterpret these past experiences, he also relates differently to current similar experiences. Still, he told me, he sometimes experiences “energies flowing up through his spine and body,” indicating “he is on the right track.” The interpretations proposed by Sean shifted Mike’s stance towards past sensations accompanying his psychotic state, and also created alterations in his stance towards current sensations. As such, watching the videos and going through the retreat sessions, functioned as a form of cultural invitation, (re)shaping parts of Mike’s sensitivities.

IV. Sensational Psychosis

Anomalous experiences accompany psychotic mania. Sean provides the “imagination” of the spiritual body to invite those diagnosed with bipolar disorder to come to a spiritual understanding of their anomalous experiences. When succeeded, the body is turned into a medium for a transcendent realm. Can this practice be understood as religious? Meyer describes religion as “offering select strong stimuli for perception, mobilizing and training particular senses so as to invoke more or less intense emotions, providing an imaginary that pulls together various

sense impressions into some kind of whole” (Meyer 2012, 27–28). In the case of bipolar mania, strong stimuli for perception and intense emotions are already provided for. However, with the “imagination” of the spiritual body, Sean pulls together these various “sense impressions into some kind of whole.” When Mike came into contact with Sean’s work, he experienced that his memories of the psychotic manic episodes started to form some kind of whole. He told me:

“I really had a million pieces of a puzzle, and I had absolutely no clue about the meaning of this puzzle. And then Sean came, and everything fell into its place. I was reading and watching, and I had goosebumps all over my body. All these examples, of spiritual breakthroughs, all these symptoms, characteristics, I was able to relate to almost all of it! See! I knew there was more than what I had learned in the mental hospital! (Mike 2017)”

Meyer is aimed at studying “the standardized methods that yield the fabrication of some kind of excess, (Meyer 2014, 18)” but Sean’s methods yield not only the fabrication, but also the reinterpretation of some kind of excess. As soon as it becomes a standardised method, however, I think it is appropriate to speak of “religion.” The psychotic body is now turned into the spiritual body, a religious medium, culturally invited to relate to a sensational realm beyond time and space. This transformation is not accomplished without its problems, however, when facing society at large. The next chapter deals with issues of authenticity and authority that come up when the psychotic body is (re)interpreted as a spiritual body.

Chapter 3

Authenticity and Authority

In the contributions in *What Matters: Ethnographies of Value in a Not So Secular Age* (2012), processes of valuation are studied by looking at issues of authenticity and authority. Issues of authenticity are studied by answering questions as: “How does one know that the experience ‘itself’ is authentic or that the purported object of one’s experience is ‘authentic’ or ‘real’? In what ways do people question the authenticity of their experiences or leave their authenticity an open issue?” (Bender and Taves 2012, 22). Questions of authority are studied by looking at “authorities people call upon to justify and defend their claims” (2012, 24). Answers to these questions concerning psychotic phenomena seem to shift in contemporary society, leading to uncertainties.

It is within this context of uncertainties that Sean offers his perspectives via the Internet and several other platforms. In this chapter, I deal with issues of authenticity and authority that come up when his work is placed within the broader societal context. First, I will look at the role of uncertainties in clinical practice. Then, I show how authority plays a role in Mike’s quest to get validation for the spiritual nature of his experiences and healing process. Next, I discuss the reception of Sean’s work by analysing a few comments on his YouTube channel. In the last paragraph, I trace connections of Sean’s activities to broader societal networks active in promoting a spiritual nature to psychotic phenomena.

I. The Art of Double-Book Keeping

In the article *God in the Brain*, Jones, Kelly, and Shattell claim that growing societal uncertainties about the nature of psychosis have an

effect on the way individuals interpret their psychotic experiences (2016). They connect these uncertainties to broader societal trends under the name of “postsecular life,” to which the authors refer as “a heightened recognition of the ongoing entanglements of supernatural and scientific discourse” (Jones, Kelly, and Shatell 2016, 2). They relate this to consequences for clinical practice, as they found in their study that their participants, subjects with life-time schizophrenia spectrum diagnoses, “frequently expressed a complicated, self-conscious awareness of cultural tensions between the secular and nonsecular” (2016, 2) and, they identified “a parallel, partly overlapping, awareness of tensions between psychiatric and nonpsychiatric interpretations of psychotic phenomena” (2). Their participants “frequently emphasized both personal uncertainties and awareness of broader societal doubts concerning the ontological and/or epistemological status of their psychotic experiences” (7). They are confronted with perspectives that seem contradictory, and “frequently spoke in ways that underscored both the belief that their unusual thoughts and experiences were supernaturally or spiritually real and the belief that they were not” (7). The authors refer to the practice of “blending and blurring of belief and doubt” as “psychiatric double-book keeping” (4). This practice “involves the subjective comaintenance of clinical insight into the subjective and/or 'irrational' status of psychotic experiences alongside enduring conviction” (4). The participants in the aforementioned study are diagnosed with life-time schizophrenia spectrum diagnoses. Although these are diagnostically differentiated from bipolar disorders, bipolar patients going through a psychotic manic episode may share similar doubts and practice double-book keeping.

II. What is the Big Deal?

Mike's story neatly fits Sean's narrative of conflict in understanding and treating the psychotic body as either a spiritual body or a medical body. He mentioned in our interview that Sean's critical attitude towards psychiatry, which he encountered in Sean's videos and book, was appealing to him, for he had negative experiences with professional caretakers during his hospitalisations (Mike 2017). In this paragraph, I draw upon the information given by Mike during the interview.

Mike states he felt poorly understood by his caretakers: "I came in the healthcare setting, supposedly in the hands of those who understand what was happening to me, but they had no clue about what I was going through." Mike handed over his psychiatric case report to me. I read it and my attention was grabbed by the phrase: "Patient thought he was the pope." Because Mike had not mentioned the pope in our conversation, I was curious and asked him about it. Mike responded: "Does it really say that?" I said yes, and returned the report to him. He looked at it and laughed: "No, I was no pope! That's what I mean; this is where the confusion of tongues starts! I have never mentioned the pope." Apparently, the caretakers had picked up Mike's self-description as a religious figure but exchanged his actual words for "pope" when noting it down in his case rapport. Mike felt they had not carefully listened to him, saw this confusion as a sign of their carelessness, and regretted it.

During the psychotic episodes, Mike strongly valued his experiences and thoughts, writing his thoughts down to remember them. He claims that, in the mental hospital, he got no approval of the value inherent to his thoughts. Apparently, those surrounding him granted no authenticity to his experiences as being meaningful. Yet, he kept these valuable experiences in the back of his mind, thus practising a form of double-book keeping. He used this practice trying to leave the Erasmus MC during his hospitalisation. He was in a psychotic state but was at the

same time able to act and speak in such a manner as to convince a judge in trial to set him free. His desire to get out was motivated by the anger he felt towards the professional caretakers. He felt they did not understand him, and was enraged by the authoritative position they took towards him.

When Sean announced a trip to Europe, Mike quickly decided to take a retreat with Sean. He told me he needed a strong motivation because, next to a financial barrier, some of his relatives resisted his decision. After the retreat sessions with Sean, Mike wished to get off medication, a plan obstructed by his psychiatrist in the Erasmus MC. Also, Mike was not satisfied with the therapy sessions they offered him. He thought by himself, “Well, thank you for everything, but it would help me even more to regularly visit my grandma and tell her how I am doing,” and said “Goodbye” to the Erasmus MC. He lowered the doses on his own initiative, while having his own support network as a backup. This network consisted of his girlfriend, close relatives and some others. Sean, his wife Ligia, and Moni, who was also a supporter during the retreat, were available for Skype conversations when needed. Mike also mentioned counselor Ruud van Rijsingen, one of the organizers of the Crazywise conference, as a potential back up. When I spoke to Mike, he was off medication for eight months. He proudly mentioned that Sean was convinced his healing process had been successful. Sean promised that, if Mike would have a relapse within five years, he would offer him a free retreat session, and even (probably joking) would stop providing retreat sessions. For Mike, getting off medication was an important event, for the daily intake of lithium (the main prescribed drugs for bipolar disorders) had a negative influence on his experienced quality of life. For Mike, at least, experiencing psychosis as spiritual was not just a matter of (re)interpretation. Issues of authenticity and authority entered in, and even became problematic, when dealing with his relatives and professional caretakers, objecting his views and hindering his decisions.

Finding his initial interpretations of his psychotic experiences as spiritual validated by Sean, he granted him the authority to explain and treat his condition.

III. Voices beneath the Videos

The comments on Sean's YouTube channel show responses ranging from approving and thankful to critical and even upset or shocked. Positive voices show a sense of recognition, that ranges from full agreement to partial approval. The following comment tends towards the positive end of the scale:

“I've been waiting for someone to validate these so called delusions (Mania) ever since I was 17 when I was diagnosed as bipolar. I had the best 'ego collapse' experience of my life...even in my church found me to be so in tuned with the spirit and inspirational and profound, until I was hospitalized, drugged up so bad I couldn't lift my head up most of time, and completely overdosed, but I thought it was me being sacrificed for the greater good, so I was okay with it, even though I almost died. After months of doctors and family, school teachers tugging me back into reality, the most depressing thing was telling me that all the joy and love I felt, all that adventurous feeling and purpose...was all a disorder, a disease that had to be controlled and medicated. So watching this video gives me so much hope and relief because it finally makes sense” (Comment 1).

This reaction shows a sense of disappointment with clinical diagnosis and a recognition of his/her own experiences in Sean's

interpretations. The commentator seems to hold an ambiguous stance towards the experiences, which are related to as a positive experience, but was by outsiders approached as “a disorder, a disease that had to be controlled and medicated.” The term “ego collapse,” used by Sean, is used by this commentator in quotation marks, supposedly because this is not his/her own language, but adopted language via the video. His/her own experience is now called an ego collapse experience, and “finally makes sense.” Another comment shows recognition and validation of experiences as well:

“i just stumbled upon your page today, i must say after only watching 4 or 5 vids Your message has kinda blew me away. of the little i have watched they have truly touched me deeply, its nice to know im not the only one thats been thru these types of spiritual experience during Mania. i Never knew it was the Norm to have these Experiences during Mania. Its something near impossible for me to explain to someone yet you have it layed out clearly Thank you so much for all you time and effort on this project, I have always felt very alone in my struggle over the years like no one could really understand. i know thats not true now. Thank you so much for the peace of mind. (Comment 2)”

In most positive reactions, such a general feeling of recognition and support for alternative, spiritual interpretations of psychotic episodes is expressed. Those who claim to have felt alone in their beliefs, now share an online social back up network of individuals convinced of the (partial) truth in Sean’s perspectives. Many also react positively while obviously holding a perspective that differs in significant ways from Sean’s

position, such as his ideas about spiritual evolution, as shown in the following comment:

“Great video. My psychosis was less than a year ago, and it lasted about a month. It was the best experience of my life. I was reading a lot of Freud, Nietzsche and a bunch of stuff about the universe and psychic powers and it got warped into its own crazy mythology. Funny, because I was/am a staunch atheist and nihilist. I thought I had become the first person to ever truly have free will. I had the Truman Show delusion (that was one of the paranoid, not fun, parts), also thought I was in a matrix-like VR simulation and everyone else were NPCs. I thought the hospital was purgatory (I eagerly checked myself in because I thought it was the best choice in the divine plan of the computer programmer who created me). I thought I knew every thing there ever was about life, etc. Time seemed to stand still. Now I'm just bored and miserable again, would like to go back into the matrix. (Comment 3)”

This comment is directed to specific hallucinatory and delusional events, without the commentator being convinced of a spiritual nature of these experiences. This is also the case with the following comment: “I wish my manic experience was reality but I can now see it was all a delusion. I thought I was saving the world. But now in reality, I see saving the world is impossible. Great video though. It nailed all my delusions. (Comment 4)” Such reactions show a partial approval of Sean’s perspectives, but a sense of recognition and receiving validation nonetheless.

Most positive reactions show that people feel their psychotic experience to gain a status of authenticity and provide authority to Sean to explain it for them. Negative reactions range from mild to very critical. Some claim to have bipolar disorder and do not agree, as can be seen in the following comment:

“I have BP2 [bipolar-II-disorder] and I have to say I don’t relate to your theories. I can’t speak for others, obviously, but, in my case, bipolar isn’t related to my macro environment, i.e., events in my surrounding world. It is related to my micro environment and the chemical imbalance, or whatever you’d like to call it, within my subconscious brain patterns. A disconnected wire. A blip in the programming. A cog in the machine. A gremlin. (Comment 5)”

This commentator disagrees and takes up a mix of technological and medical language to explain the nature of manic experiences. Some accuse Sean of being delusional, forming a threat to those experiencing psychosis by delivering false information, possibly making psychosis worse. One commentator is concerned about Sean’s sanity: “How about you get a reality grip and figure out that your bipolar truths are nothing but your brain telling you lies!! And honestly the people who are in your life are the people who suffer your illness. (Comment 6)” Sean is accused of “his brain telling him lies,” which is considered harmful to others. This commentator grants authority to scientific perspectives on hallucinations and delusions, challenging Sean’s perspective.

The comments show a variety of perspectives. It is clear that some can relate to Sean’s videos, while others are obviously concerned. Sean’s videos may provide an approval for those who claim their psychotic experiences to be spiritual in nature. Sean is becoming one voice in the

debate to which others can grant authority. In turn, Sean claims authenticity for his interpretations of psychotic experiences by referring to all positive comments he received as a response to his work.

VI. #emergingproud

When Sean announced a trip to Europe, he was invited by several individuals to present his ideas on a conference. He connected these people, and this led to the first edition of the Crazywise conference, named after a documentary by Phil Borges and Kevin Tomlinson (Blackwell 2017a). On the web page additional to the documentary, is stated that it “adds a voice to the growing conversation that believes a psychological crisis can be an opportunity for growth and potentially transformational, not a disease with no cure” (Crazywise 2017). The conference shares this motivation, and is aimed at spreading alternative perspectives on psychosis.

Emerging Proud was another similar conference held in May 2017 in London, with simultaneous related events in 12 other countries (Emerging Proud 2017). Sean and his wife Ligia set up an edition of this conference in Sao Paulo. Sean described the aim of the conference as to bring together those diagnosed with a mental illness, who self-identify as going through a spiritual crisis, with mental health care professionals and others. Initially, when he started his YouTube channel, he was far more critical of psychiatry. Along the way, he stance became milder. Sean describes his work, as well as the Emerging Proud campaign, as a new strand in alternative mental health networks. It differs from antipsychiatry movements, which, according to Sean, tend to be highly critical of mainstream psychiatry. Sean’s current objective, however, is aimed at collaboration (Blackwell 2017a). The Emerging Proud campaign has similar interests.

The Emerging proud campaign is supported by the International Spiritual Emergence Network. This network was founded under the name Spiritual Emergence Network (SEN) by Christina Grof, wife of Stanislav Grof, in 1980. Currently, it has the following self-description:

“Over the years, it has grown into an international organization that offers a referral service, education, and information to people going through transformational processes, as well as to the families, friends, and professionals around them. SEN is based on an expanded understanding of human experience offered by transpersonal psychology and is dedicated to helping people find their way through a process that is often misunderstood and mistreated in our culture. (ISEN 2017)”

The Emerging Proud conference was one of the steps undertaken in this project. One goal is clearly to connect people, and become a locus of authority in defining the nature of mental illnesses. Also, authenticity is claimed for meaningful but pathologized abnormal experiences, as expressed in their *Crisis Guide* (ISEN 2017). Other related networks and groups are linked those I mentioned.

There seems to be a growing network of people who identify as #emergingproud, #comingoutofthespiritualcloset and comparable other declarations. It are these online and offline groups and gatherings to which those who are diagnosed with bipolar disorder (and other mental illnesses) can relate. There seems to be a demand for the validation of the authenticity of anomalous (bipolar) experiences, deemed religious or spiritual, by those who have gone through them. This demand is fulfilled by these growing networks, that become a locus of authority. These

voices oppose bio-medical perspectives, speaking to the double-book keepers. As was the case with Mike, this may have an influence within clinical settings.

Conclusion

I. Overview and Answer to Central Question

In the introduction of my thesis, I mentioned general uncertainties about the nature of psychosis in our contemporary society, and pointed out that these uncertainties have an influence on those experiencing psychosis. The case of Sean provides one example of a specific alternative interpretation of psychotic mania, and Mike's case shows interference of this alternative interpretation with his clinical treatment.

In my thesis, I studied the process of valuation involved in Sean's mission to promote psychotic mania as a spiritual crisis. I approached this process of valuation firstly by taking it as a practice of "marking things as special or singular both through discourse and behaviour" (Bender and Taves, 11–12). I tried to come to an understanding of Sean's application of the term spiritual by zooming in to the involvement of the body in this process of valuation. For Sean, the body of someone in a psychotic manic state, is a medium for a "realm beyond the ordinary." Thus, the psychotic manic episode is portrayed and experienced as spiritual. This example of meaning making is "not abstract, but deeply sensorial and material" (Meyer 2012, 28).

In the first chapter, I sketched the context within which Sean came to his specific understanding of psychotic mania as spiritual. He related to the work of transpersonal psychologists, who took altered states of consciousness seriously, and ascribed a therapeutic potential to experiencing such states. Sean related his anomalous bipolar experiences to the experiences as described by transpersonal psychologists and considered these to be similar in nature. He interpreted bipolar mania as an instance of spiritual crisis, and envisioned the body of one in a psychotic manic episode accordingly. Sean came to interpret and

experience his own psychotic body, and by the same token of all those going through bipolar disorder, as a medium for a transcendental realm.

The second chapter dealt with Sean's output as it takes form in his videos, book and retreat sessions. As Sean's output is intended for individuals diagnosed bipolar disorder, I took in a specific characteristic of their bodies. Their bodies share a sensitivity towards psychotic experiences. These experiences, in turn, may be partially shaped into a particular phenomenological experience by "cultural invitation." I approached Sean's work as a whole as a sensational form, and explained it as working as a kind of cultural invitation. As a sensational form, it is culturally inviting bipolars to interpret and experience their psychotic manic experiences as spiritual. The portrayal of the psychotic body, as a medium of a transcendental realm (the spiritual body), is an important aspect herein. It is explicitly opposed to the medical body, in which all symptoms of psychosis are interpreted as stemming from an illness.

The involvement of the body as a religious medium, in interpreting and experiencing psychotic mania a spiritual crisis, is related to issues of authenticity and authority. Apparently, there exists a group of individuals like Mike, who long to gain a validation of the perceived spiritual nature of their experiences. Their spiritual interpretations do not fit into the bio-medical framework encountered in psychiatry. The sensational form, brought forward by Sean, is structured and intended precisely to authenticate their experiences as spiritual. By explicitly opposing the "spiritual body" to the "medical body," Sean underscores the difference between the two perspectives on the psychotic body. He highlights the gain of the spiritually inclined understanding of the body, as validating the spiritual (meaningful) nature of psychotic experiences. As some individuals relate to, and even embody the perspective of the spiritual body, they grant authority to Sean to explain the nature of their experiences.

II. Contribution

In my thesis, I provided an example of a developing alternative understanding of psychosis in contemporary society, and showed how this understanding gains authority. Also, I demonstrated the importance of the material dimension in valuating psychotic experiences, by uncovering some of the complex ways in which the body is involved in understanding and experiencing psychotic mania as a spiritual crisis.

Also, I attempted to apply Meyer's definition of religion and related concepts to Sean's work. In two ways, this was no perfect fit. First, when Sean's work is interpreted as sensational form, it is a form that is also applied to relate to previous experiences of "something beyond." This feature not implied by the original concept of sensational form. Also, a religious sensational form encompasses an authorized practice, shared by a religious community, which at first sight seems almost absent in the context of Sean's work. However, if we understand a sensational form as (also) enabling one to relate to past experiences of "something beyond," the form brought forward by Sean can be authorized retrospectively. The authorization of the form takes place by those who acknowledge its effectiveness in relating meaningfully to their prior psychotic experiences of excess. Thus, I have slightly adapted the concept of sensational form to fit this peculiar case of religiosity.

III. Limitation

One limitation of my thesis is set by the small group I have studied. Although the interpretation of psychosis and psychotic mania as spiritual gains a wider interest, my thesis focused mainly on Sean's share in this

valuation process. Also, I conducted only two interviews. Mike story provided the only example for the sensitising process. Another limitation was set by the methods I applied. I studied the role of the body solely by analysing Sean's work and the data I gathered from the interviews. I studied the reception of Sean's work by working with comments on youtube. Compared to a method as participant observation, this method clearly falls short in studying bodily and other relevant aspects involved in the valuation process.

IV. Further Research

I share with Ann Taves an interest in studying experiences deemed religious or spiritual. In the study carried out by Jones, Kelly, and Shattel, they observed that for their participants “the unfolding strangeness of psychosis,” engendered at times “something close to what anthropologists have called ‘liminality,’ a state of being betwixt and between that has its own particular features, including a sense of proximity and exposure to the limits of human experience” (2016, 9). Such experiences can be referred to as “anomalous,” and as prone to be deemed religious or spiritual (Cassaniti and Luhrmann 2014). Also, according to the anthropologist Robert Ranulph Marett (1866-1943), “religion was grounded in an emotional thrill that arose in moments of crisis, at the point where ‘thought breaks down.’ He speculated that such points might be at the origin of religion, and this was echoed in his philosophical idea that ‘religion is the facing of the unknown’” (Meyer 2015, 17). One could say that those going through psychosis are experts as it comes to “facing the unknown,” and thus form a group that may provide interesting cases for studying religiosity.

Because psychotic experiences are by definition highly subjective in nature, the involved ways of relating to “something beyond” are, at least partially, unauthorised. Still, I would argue that the concept of

sensational form is applicable to individual instances, when set apart from the criterion that it should be authorized through repetitive usage by a religious community.

The cultural-religious context of those going through psychotic episodes influences the phenomenology of their psychotic experiences deemed religious or spiritual. As was the case with Sean, such experiences may, in turn, function as the soil from which particular new religious media and practices grow. The concept of sensational form may be useful to study such complex interactions, as they take place in contemporary society.

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Appendix 1

Overview of topics covered in interview (duration 3 hours) with Mike, interview by Niki Haak, Citycenter of Rotterdam, May 13, 2017.

- Start of first psychotic episode in Ghana.
- Being introduced to Sean's work.
- Deciding & motivations to take the retreat sessions.
- Mike's recent conversations with Sean.
- Second psychotic episode in the Netherlands.
- Pictures of Africa, and stories related to it.
- Mike's evaluation of Sean's videos and books.
- Experiences during retreat sessions.
- Explanation of the mandala's and other materials brought by Mike.
- Struggles with psychiatry.
- Experiences in mental hospital during second hospitalization.

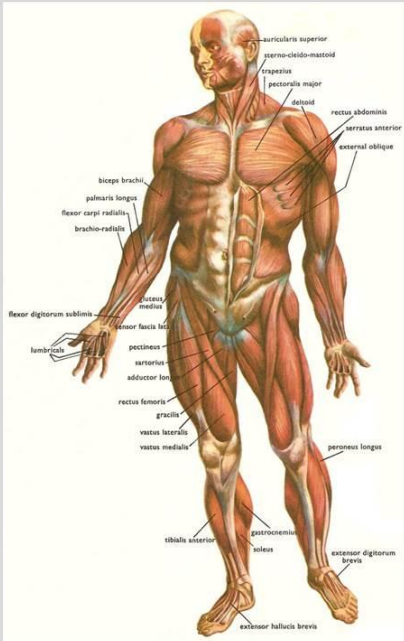
Overview of topics covered in interview (duration 2 hours) with Sean Blackwell, interview by Niki Haak, Skype (Netherlands and Sao Paulo), June 13, 2017.

- Struggles in finding a therapeutical form that fits bipolar disorder, discussing varying kinds of techniques and motivation to choose breathwork.
- Disturbances in the bio-energetic level. Basic ideas and in what way they are experienced.
- Developing the narrative of the higher self during the retreat. Use of mandalas.
- Material aspects of the retreat sessions, such as the role of the body, music, light, etc.

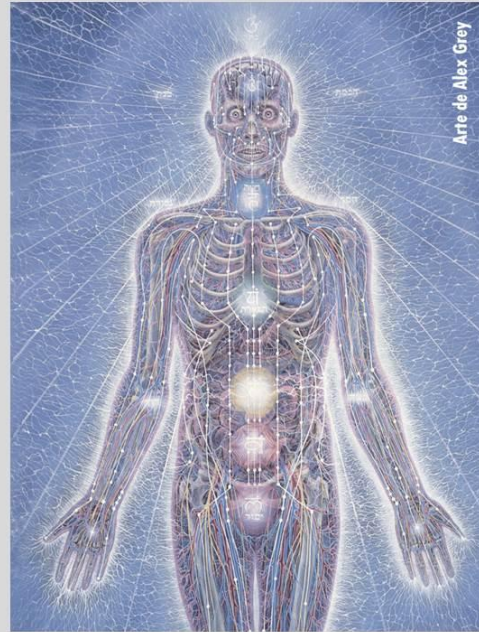
- Social networks, online as well as offline. Crazywise conference, Emerging Proud campaign, being rejected by TEDx.
- Creating the videos. Working with images, role of images.

Appendix 2

The Strength of Transpersonal Psychology



**Scientific/Materialist
Model of the body
(Soul is absent)**



**Transpersonal Model of
the Body/Soul/Psyche**

Presentation Slide by Sean Blackwell.

Presentation took place in a mental hospital, as part of the Emerging Proud campaign, Sao Paulo, May 2017.

Used with the following description:

“The model on the right does not reflect religious belief rooted in myth or dogma, but is best considered to be a scientific assumption, or perhaps an analogy, which reflects a subjective bio-energetic experience of the body/soul/psyche. Such experiences have been reported by countless mystics, people labelled with mental disorders, and those who practice transpersonal therapies which involve an immersion of the psyche into anomalous (non-ordinary) states, such as holotropic breathwork.”

Description by Sean Blackwell, shared by e-mail, July 2017.

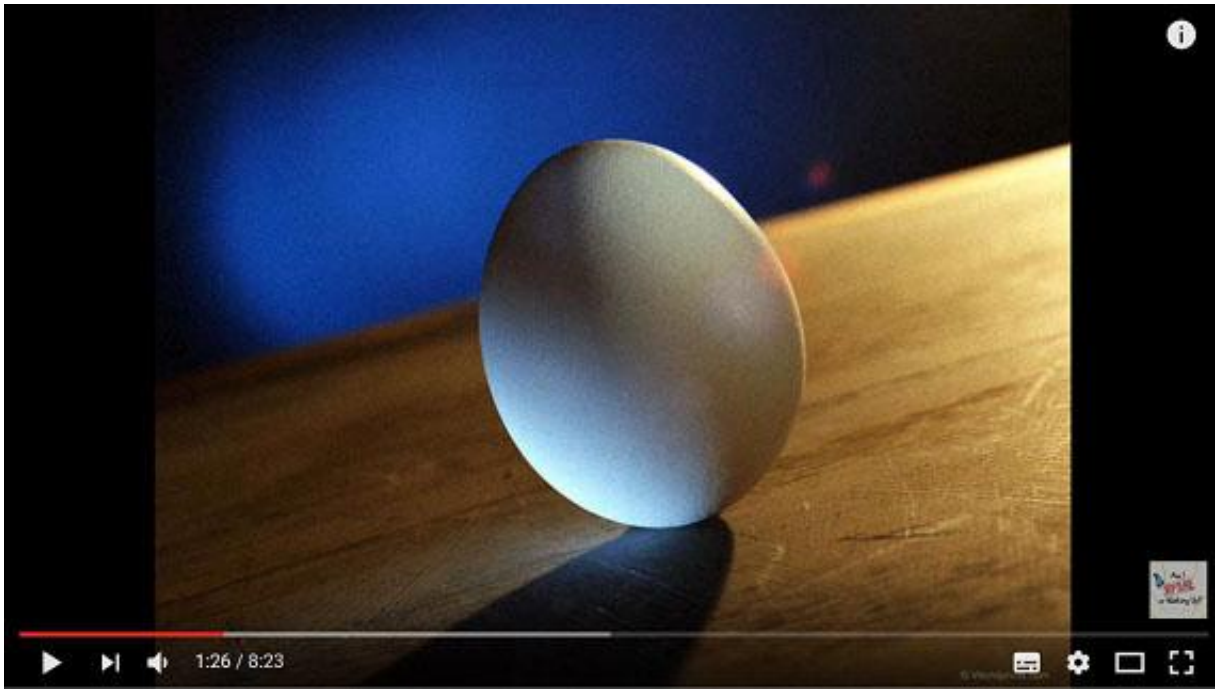
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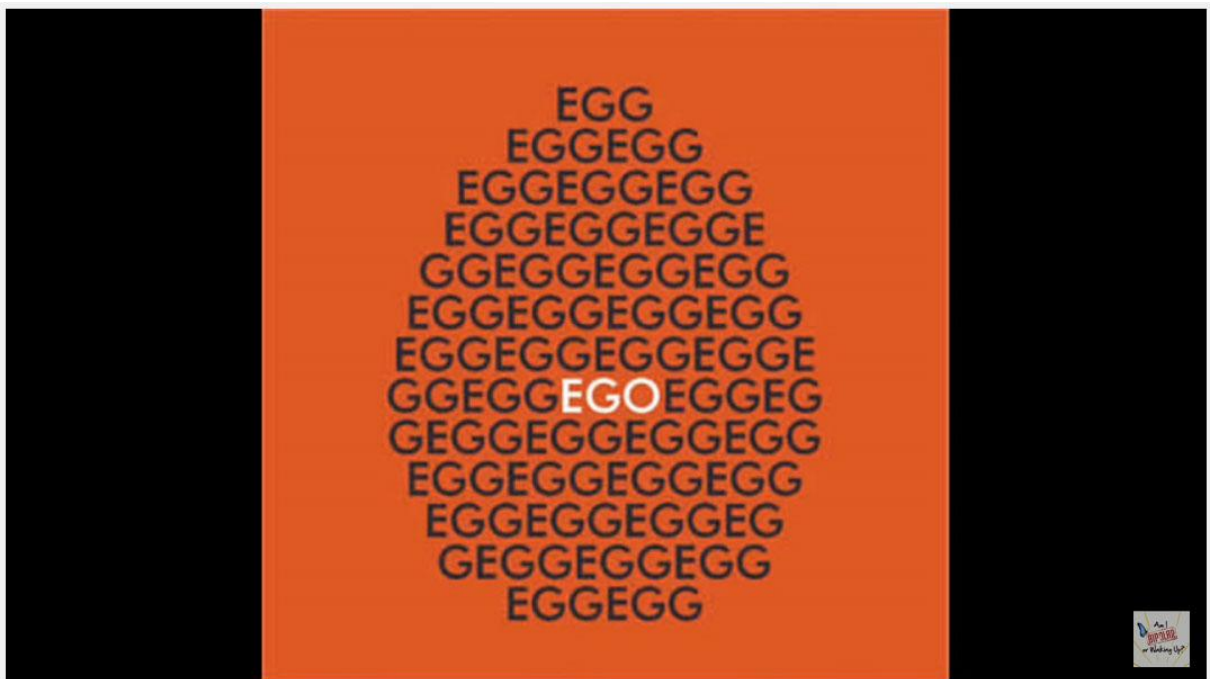
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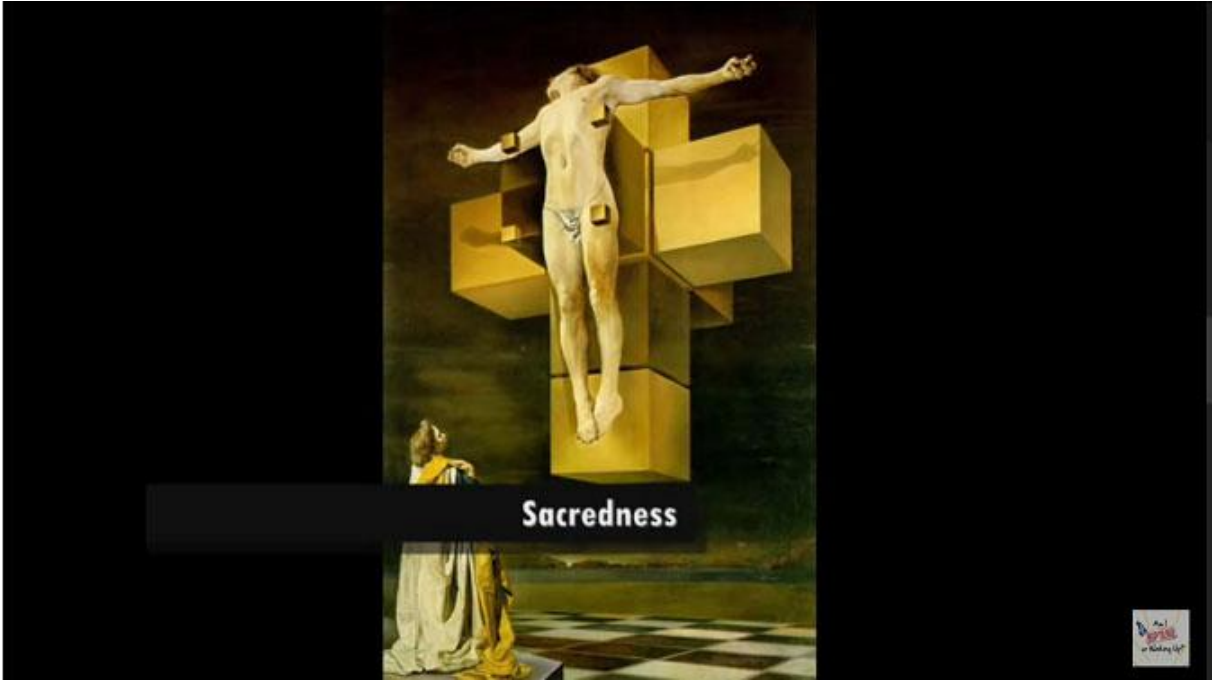
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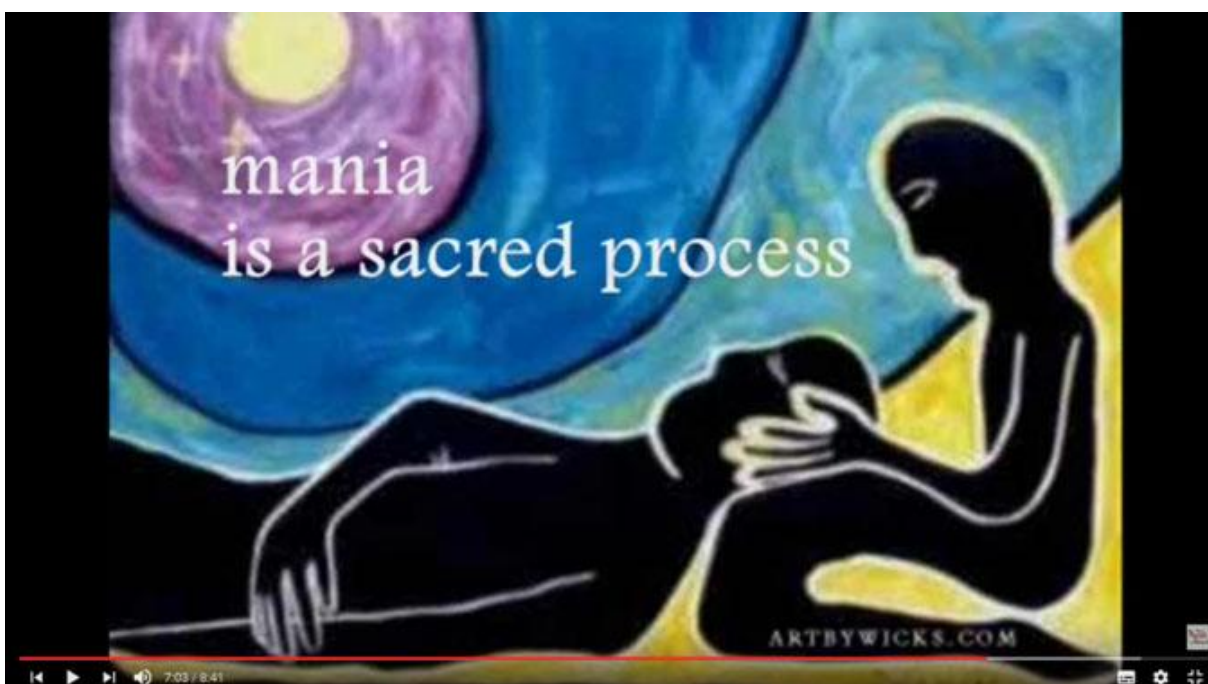
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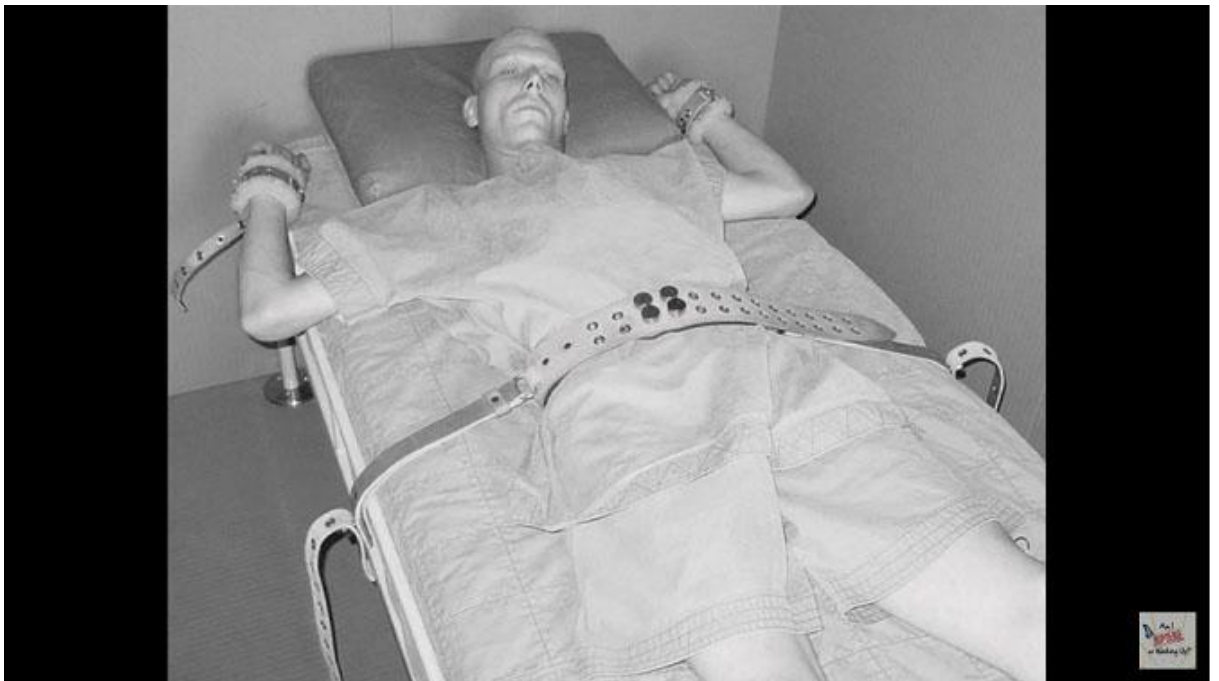
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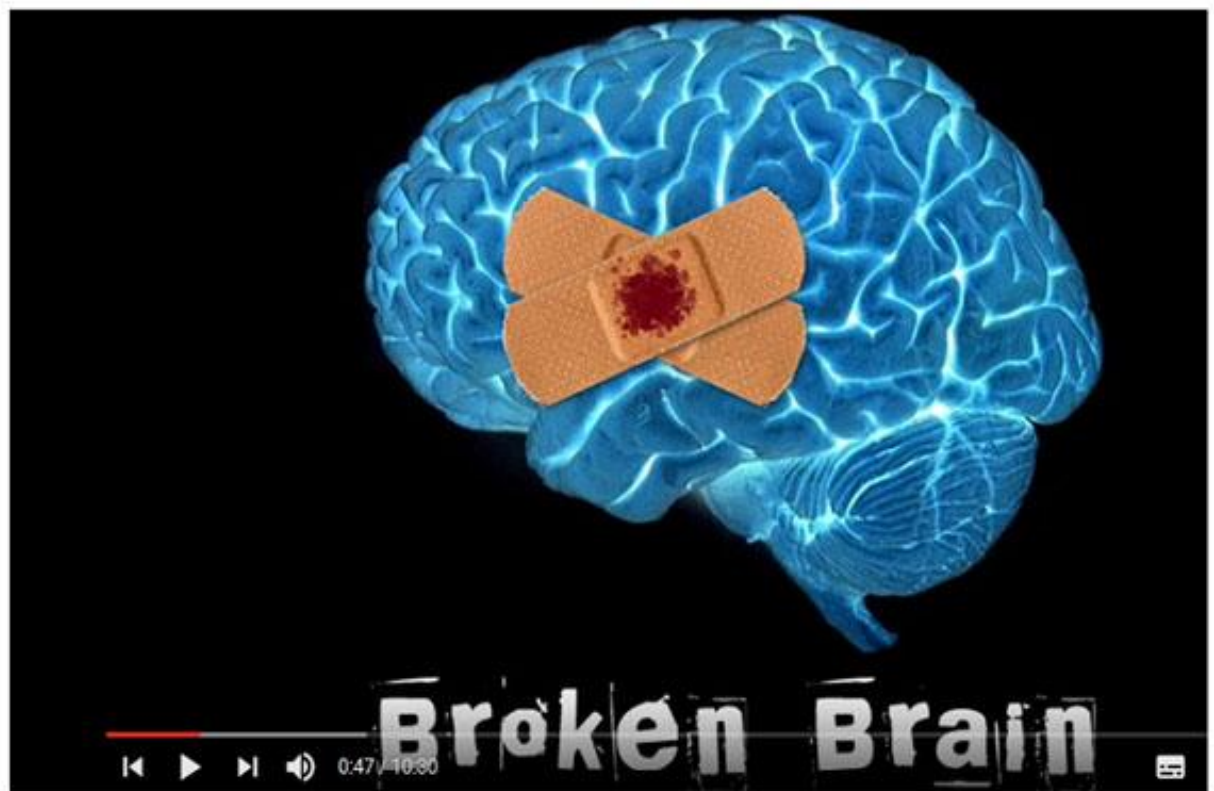
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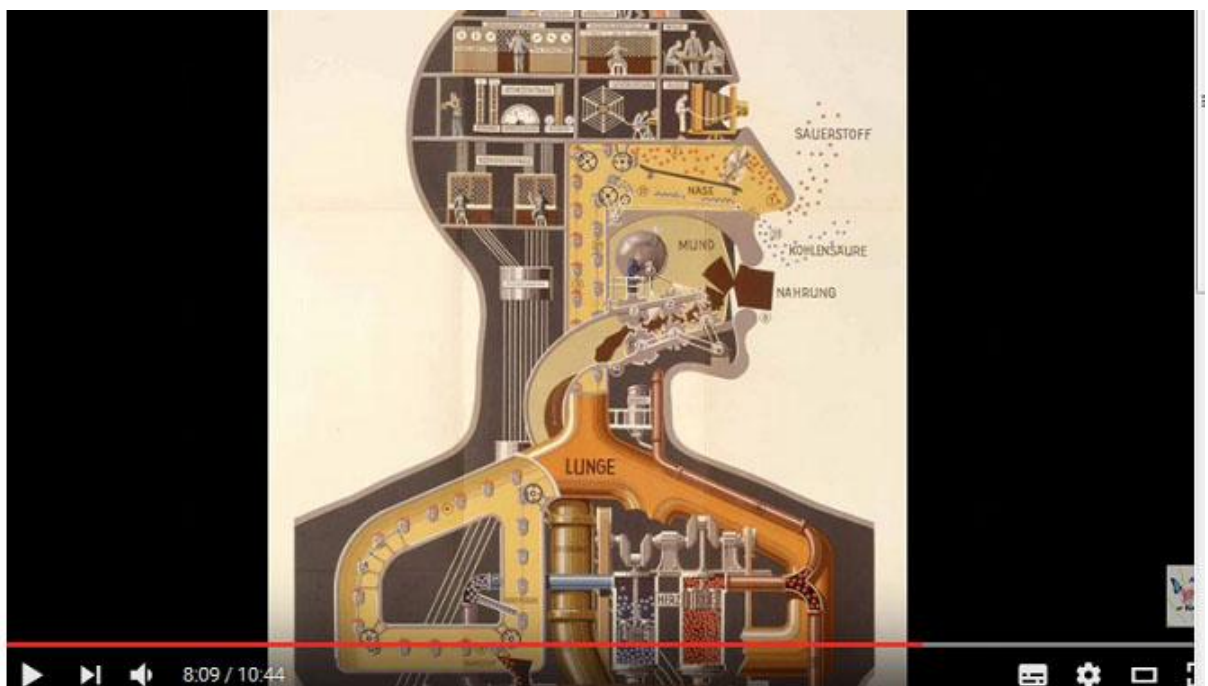
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Images retrieved from YouTube Channel Bipolarorwaking up,
May 2017.

<https://www.youtube.com/user/bipolarorwakingup>.

Appendix 4



Mandala by Mike.
Send by e-mail, July 2017.