

FEATURED

A Theological Reckoning with 'Bad Trips'

We need a more sophisticated assessment of these experiences.

Illustration by Debora Cheyenne Cruchon

Autumn/Winter 2022

By Rachael Petersen

EVERYTHING WAS THE SAME. The same voice—mine—declaring, "I'm ready." The same watchful gaze of two expert guides kneeling on the ground before me. The same soft tan couch in the same cocooned windowless room. The same hands reaching into the familiar clay chalice for a giant blue pill. My throat, the same, swallowing. Same molecule affecting the same mind. Same mechanism of action. The same subject: me.¹

But was I the same? Seven days prior, lying on that couch under a high dose of psilocybin, I had the most religious experience of my life. An encounter with divine darkness, a nothingness that held and beheld me, benevolently welcoming me into my rightful place in the order of things.

That experience upended my understanding of ultimate reality—an upending I sometimes refer to as an "ontological insurgency." And, perhaps, only after such an experience could I, a mere week later, have what William James termed a "reverse religious experience." Perhaps only after an initiation into the ultimate could I know the

bottomless panic of being ripped from it. The very quality that made my first experience so profound—its felt sense of authority—made my second so indelibly harrowing, a trip after which nothing felt the same.

In 2018, I participated in a clinical research trial using high-dose psilocybin to treat major depression. I have shared my story in articles, talks, films. The story I have told is one of transformation—but not a simple transformation. Not of a depressed woman cured but a woman granted greater fullness and meaning. Not of a despair diminished but a life enlarged.

The story I have told is not false; neither is it complete. It is incomplete because I have never elaborated on my second experience in that same trial, which impacted me in ways that I still grapple with. I understand, however, that some impacts were un-therapeutic. Anti-therapeutic, even. Amid growing hype that psychedelics are a panacea for mental illness, I worry: Is my partial testimony being co-opted to support a medicalization effort I increasingly doubt can fully attend to the weird wildness of these medicines?

SEE ALSO:

The Greening of Psychedelics

We must hold all these experiences up to the light; see how they refract our expectations; watch how, when we turn them, we see the kaleidoscope constellating, the same pieces reconfiguring into horror, beauty, meaning, nothingness.

The effort to medicalize psychedelics has focused on a narrow subset of experiences that are positive and therapeutic. Variations are dismissed as statistical outliers, flukes resulting from flaws in set and setting or vulnerabilities in the patient. A serious effort to examine bad trips can be perceived as positioning oneself "against" the movement. This, I think, is a shame, because a full account of *what* psychedelics are, *how* they are, and—most vexingly—*why* they are, is as beholden to the harrowing as it is to the heavenly, to abject terror and to unbearable

bliss. If we believe psychedelics afford new vantages on mind, matter, and spirit, how do bad trips—in all their dazzling, endless diversity—complicate our prevailing notions? What methods does examining the full array of psychedelic experiences require? We must hold all these experiences up to the light; see how they refract our expectations; watch how, when we turn them, we see the kaleidoscope constellating, the same pieces reconfiguring into horror, beauty, meaning, nothingness.

Historically, in the West, terminology developed within mainstream psychiatry centered the perceived "negative" aspects of these substances: hallucinogen (generating hallucinations), psychotomimetic (mimicking psychosis), deliriant (inducing delirium), dissociative (causing dissociation). The current preferred terms, psychedelics (mind or soul manifesting) and entheogen (generating the god within), position themselves against this history, implying good that can come from these experiences, imbuing them with epistemological and ontological weight.

No matter which term we choose—psychedelic or entheogen—we must reckon with how mind, soul, and gods can conspire against us. To encounter them

completely entails risk and, sometimes, unwanted surprises.

Though my first psilocybin experience has ossified into story, the second is alive and slippery; it evades my conceptual grasp. I chase after it, hurling lassos of theology, psychology, philosophy, neuroscience, hoping to wrestle it to the ground. Nothing catches. Experience bucks and bears its teeth, feral. It refuses to be tamed.

A SMALL KERNEL OF DOUBT: a splinter wedged between me and the world. Drugs work this way. Splinters grow into battering rams, pebbles bulge into boulders. All I know is that for a moment, I opened to the possibility of being outside everything that matters, and the space between threw me back on myself, rendered me uncanny. Cast out, I could not find my place again in the order of things. Choking, breathless, I was having a grief-tinged cosmic panic attack. In the trip report I wrote the next day, I captured this immensity in a small word: "doubt." I described it as pain lodged in my chest.

Apparently, as I rocked back and forth, clutching my chest,

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eyes squeezed tight, the only word I stammered was: why? Why why why why why?

IT WAS THE SECOND century ad, and the bishop of Lugdunum (now Lyon) brooded. A question haunted his sleep, the same question that haunted countless people who posited an all-knowing, all-powerful, benevolent God.

The question, of course: Why suffering, and why evil?

And like many theologians stumped by this problem, Iranaeus resorted to tautology. He posited that this is the best possible world, because God would not have created it otherwise. But for Iranaeus, God allows suffering so that we become better people, evolving in God's image. In other words: suffering makes souls. Origen followed Iranaeus, casting the world as a schoolroom or hospital. We are dumb, and evil is the teacher. We are sick, but suffering heals. God is a compassionate, discerning teacher, physician, father, who employs suffering for amelioration we cannot fully understand.

It's a paternalistic stance, and a hopeful one. And it echoed

throughout consolations offered by psychonauts after my experience.

You get the trip you need, not the trip you want.

AS I STRUGGLED TO answer "why?," I learned that to confess to enduring challenges from a psychedelic trip is to render oneself a dartboard pierced by a million speculated whys: latent psychological problems provoked by the experience, the wrong set and setting, the wrong medicine, the wrong dose, the wrong day, the wrong guides. Tellingly, I have never encountered an analogous reaction to "positive" trips; when I share healing experiences, no one rushes to diagnose what enabled them to occur.

Then there is a deeper diagnosis: Why did this happen to me in particular? Here, too, popular psychedelic discourse stood ready to explain. These responses can feel predictable and unhelpful. They might be generously grouped under the banner of "normative post-traumatic growth." They go something like this: "Things have to get worse before they get better"; "The spiritual path is hard." Or, as Harvard-educated psychologist of religion Walter H.

Clark put it, "bad trips may be the best trips." (This posture reflects a therapeutic "technique" popularized in the 1960s and 1970s, when underground therapists intentionally caused "bad" trips by blasting loud music and projecting videos of porn and war to patients on wildly high doses of multiple drugs. (6)

As a budding scholar of religion, I suspect that what gets labeled as "secular" is often much less so than it seems. And I have begun to wonder if "post-traumatic growth" narratives are some of the most secular theodicies we have today—lurking recapitulations of millennia-old religious debates.

I am sympathetic to the impulse behind these statements: to offer hope, to promise that not only will suffering cease, it will pay dividends in ways we can't imagine. But, like Iranaean theodicy, these statements reveal a compulsion to place hardship in an imagined trajectory that terminates in goodness. And, like all theodicies, in their rush to exonerate some higher authority (God? the medicine? the wisdom of the inner healer?), they diminish suffering to the sufferer. Perhaps the durability of these narratives reveals less about the inherent didactic, theological, or evolutionary function of suffering than about our

discomfort with suffering.

What if terror is just that—terrible, terrifying, absolute?

IN PARIS, IN 1935, Jean-Paul Sartre was injected with mescaline by the psychiatrist Daniel Lagache. Sartre wanted an experience that would allow, as Edmund Husserl proposed, a stripping away of attribution, of categories of difference, of theories, meaning, and definition. He wanted to really see the things themselves. And he hoped mescaline would help.

Once injected, Sartre found it nearly impossible to witness his own experience, to hold it at the exacting distance that Husserlian phenomenology might require. Instead, he "felt submerged against his will in a miasma of sensations that assailed him viscerally at every turn, a world of grotesque extreme close-ups in which everything disgusted him." The best-known aspect of this "bad trip" was the presence of the lobster-like creatures that haunted him for weeks after the experience, scurrying around his periphery. As he recalled later, in 1971: "After I took mescaline, I started seeing crabs around me all the time. . . . I mean they

followed me into the street, into class." They spoke to him, made demands. (The crustaceans would later appear in his play *The Condemned of Altona* and then, less explicitly, in *Nausea*.)

Sartre and I had such wildly different "bad trips" that it seems absurd to include them in the same category. But, like Sartre, I was pursued by my experience long after the molecule had run its course. Like Sartre, my functioning diminished. Like Sartre, I sought help: he from Jacques Lacan, me from a small cadre of psychiatrists, somatic-experiencing practitioners, and psychedelic integration therapists.

Most importantly, like Sartre, I had learned the hard way that taking a good look at reality always risks unwelcome surprises.

THE PROBLEM COMES DOWN, as it so often does, to language guage. We lack the vocabulary to describe the vast diversity of experiences that might fall under the banner of challenging, difficult, bad, or adverse and the attunement to understand why people differentiate

between them.

Someone may describe a psychedelic experience as challenging because of what their body did: engaging in behavior that could harm themselves and others during the session—swan diving off a couch, for example. Another may use the same term to refer to intense emotions of grief, anguish, sadness, or despair that may or may not resolve during the session, though they often do. It could refer to the frenetic encounter with weirdness, an experience that shatters preconceived notions of matter, agency, the cosmos. "Challenging" may describe traumatic memories, confrontations with familial dynamics, or painful insights. Someone may even have a "meh" experience—uninteresting—but call this "difficult" for not living up to some hoped-for breakthrough.

Challenges may occur during the trip that then resolve during the trip. Challenges may occur that do not resolve during or after the trip. It may become difficult to delimit where experience begins and ends: "experience" may come to refer to the days, weeks, or months after a molecule has run its course

To say a psychedelic experience can be "challenging" is like

saying that running a marathon can be hard. By design, the extreme emotions, visualizations, insights, encounters, exchanges challenge one's felt sense of the normal, the real, the true.

But what tips an experience from challenging to bad, from difficult to adverse? The level of distress? Functional impairment? The ability to control or modulate the experience? The ability (or lack thereof) to maintain a critical attitude? The impact of the experience on the person's relationships, personality, resilience? How does a guide or a community's ability to hold an experience determine how it evolves, and how it is appraised?

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We need terms, perhaps entirely new words—words that move away from appraisal ("good" or "bad") to

phenomenology (descriptions of what happened). We need a more sophisticated assessment of these experiences, a lexicon in which Sartre's crabs and my cosmic, grief-laden anxiety can commingle but not meld, their contrasts made meaningful within a shared framework of inquiry.

MY SECOND TRIP REPORT ends with the following: "these feelings persist well into the evening, and I can't sleep. I sit in bed meditating, beholding this sadness and anxiety. I feel as though something is unresolved in me, but am unsure what." The night after my first session, I stayed with a friend in Baltimore, sobbing on her futon, restless throughout the night. When writing this piece, I reached out to her about how she had perceived me. "Shaken," she said. "Intensely shaken."

In spite of this, for some time after my second experience, I could still function. Admittedly, I was less depressed than before the trial, but also more anxious. I slept less and less, clutching my pounding chest at night and praying that whatever wanted to bang down the door I had slammed shut between me and oblivion didn't break through. And because I have always coped by out-succeeding my

torment, I distracted myself with work. The government of Norway flew me to Oslo to speak on the future of forests. I hopped over to Germany to eat *Currywurst* with my brother and bike around the Tiergarten.

I made an appointment with my primary care physician. Something must be wrong with my heart, I thought. This was a physical problem, like plumbing or wiring. Once fixed, the fear would dissipate. I adopted a convenient dualism: mind would stop chasing body in search of story.

I sent my guides an email with the subject line "recurrent distress after second session." I am embarrassed to ask, I wrote, but "is it possible for someone to get physiologically stuck in an experience?" They assured me it is not.

My PCP referred me to a cardiologist. He hooked me up to electrodes and I ran, fast, on a treadmill for seven minutes. He sent me home with a wearable device that sticks to my chest for a week, recording every torturous beat.

There was nothing wrong with my heart.

The phenomenologist Maurice Merleau-Ponty took mescaline shortly after Sartre, though in a much lower

dose. He found it philosophically useful. His biggest impression? "All hallucination bears initially on one's own body," a physical product of the senses.

My mind lost the plotline, but my body can't forget the message. My anxiety became nonreferential, totalizing. I could not consciously locate the object I feared.

What I remembered of that second experience, I knew in the body. What I knew was in the flesh.

THERE ARE MANY REASONS I have not told the story. The most complicated of them is that my second trip feels inseparable from a silent meditation retreat I attended two months after. While the psilocybin experience had initiated in me a deep, existential insecurity, it was only when I sat in silence for a week in the Shenandoah Valley that it reached its fullest expression.

The wisdom of Buddhism is that by witnessing states, they morph, mutate, pass. "This is terror," I noted. "This is panic." But like Sartre in his mescaline trip, I found mere witnessing impossible. I was pursued, overtaken. I stopped

sleeping.

My teacher told me to keep practicing: "The only way out is through." By the time I left the retreat, I had metabolized this message and stubbornly believed more spiritual practice would "fix" me. It only made things worse.

I distinctly remember the moment when my psychiatrist suggested we explore Seroquel to help me sleep. *Seroquel*. The name sounded nice. Tranquility. Serenity. Quelling of fears. All in one. Then I learned this was an antipsychotic, and the name pierced my tongue with its spikiness. Antipsych-otic. The word shared a root, of course, with psychedelics: *psukhē*. Wasn't manifesting my psyche supposed to heal me? Why was I against it now? Or rather, why was it against me?

RECENT RESEARCH SUGGESTS psychedelics and deep meditation can induce comparable nonordinary brain states. Could they not also lead someone into greater transcendent terror?

After the retreat, I am introduced to Dr. Willoughby Britton at Brown University. A neuroscientist and clinical psychologist, she has dedicated her research career to systematically cataloguing the ways in which meditation practice can harm.⁹

Britton also runs a nonprofit support group, Cheetah House, for individuals who have been destabilized from meditation practice. She invites me to participate. The variety dazzles: different traditions, techniques, lengths of practice, challenges. There is an award-winning journalist who began hearing voices after a Vipassana retreat. There is a yoga teacher whose body moves involuntarily, arms flailing, right cheek twitching. Many people struggle to reconcile persistent, debilitating dissociation with the theory and practice of not-self, or anattā. Is their experience progress or pathology? Most have suffered functional impairment: jobs lost, relationships dissolved, trips to the ER. There are car accidents—many car accidents—often following extended retreats. Like me, several people battle nonreferential anxiety and persistent insomnia.

Remarkably, most of these people do not have mental health histories. Britton and other researchers have

analyzed many variables—age, race, sex, income, education, meditation experience, type of meditation, intensity of practice, drug use, mental health history—but have found no consistent patterns for who has severe adverse events in meditation and who does not.

One of the ways psychedelic clinical trials attempt to minimize negative experiences is by screening for vulnerability factors like personal or family history with schizophrenia, bipolar disorder, as well as personality disorders. As a precautionary principle, this is important; but we still don't understand if certain things unequivocally "cause" bad trips. The last and only study looking at this was published in 1965 and found no significant difference between LSD users who ended up in psychiatric units and those who didn't. Previous psychiatric history was not a guarantor of difficult experiences.

Why?

THE COLLATERAL DAMAGE from mainstreaming mindfulness can serve as a cautionary tale for psychedelic

medicalization: important wisdom is lost when technologies of transcendence are stripped from their spiritual and religious contexts and presented as psychological treatments. Meditation, once a practice of a very select group of virtuoso monks in Buddhist cultures, is now a wellness program offered by schools, prisons, hospitals, and corporate America. Psychedelics are no longer just visionary tools of shamans or sacraments guarded by complex rituals; they are on the way to becoming medical interventions. People will be harmed. How many, how, and why, we don't yet know, in part because so few are given voice to share their stories, and little research exists.

Psychedelic science does an odd dance with the spiritual. On the one hand, studies (mostly out of Johns Hopkins University) have popularized the notion that a mystical-type experience leads to better therapeutic outcomes. This frame reduces transcendence to its therapeutic potential—a breathtakingly transactional posture to the divine that creates a sort of tautology whereby the mystical is therapeutic because the therapeutic is mystical. This is most evident in the narrow definition used in the Mystical Experience Questionnaire (MEQ): to qualify for a "complete mystical experience," one must report a

concurrent "positive mood."

This frame reduces transcendence to its therapeutic potential—a breathtakingly transactional posture to the divine that creates a sort of tautology whereby the mystical is therapeutic because the therapeutic is mystical.

No wonder a recent popular book about psychedelics posited that the divine is simply a cosmic surgeon who, through psychedelics, "cuts out anxiety and depression." This is like calling a knife a surgical instrument, without acknowledging it can also kill. Or, to use a different surgical metaphor, as one recent Multidisciplinary Association for Psychedelic Studies MDMA trial participant put it during a podcast interview: "In the trial it's like they did open heart surgery . . . they fixed what was

wrong with my heart but they left my chest wide open."12

William James insisted on keeping a value-neutral stance on mystical states, arguing that they include pleasure and pain, darkness and light. And the therapeutic instrumentalization of transcendence ignores volumes of wisdom from traditions that emphasize the dangers of nonordinary experience. The full archive of mystical experience demonstrates that seeking to know God, truth, reality—going beyond—can terrify, maim, even kill.

In my own tradition, Buddhist meditation has long been understood by practitioners as dangerous. Many are familiar with "Zen sickness," popularized by the eighteenth-century monk Hakuin Zenji who experienced extreme, persistent somatic and physiological distress from sitting zazen. But the understanding of the perils of meditation is much more wide reaching. Recent translations of early Chan texts reveal how the otherwise highly praised meditations on the impurity of the body can lead to suicide, and even introductory meditation can disturb the body's "winds." In short, meditation has been understood—especially in the history of Zen—as a highrisk, high-reward activity. All of the earliest Jewish hekhalot literature of traveling to the upper realms in

Judaism is about avoiding danger. In the old Talmudic tale of Pardes, four rabbis encounter God. One becomes a heretic, one goes crazy, one drops dead, and the final—the only one!—returns home with his faith affirmed. In the famous chapter 11 of the Bhagavad Gita, Arjuna sees the universal form of Krishna, but he taps out. It's just too much.

Some things threaten to overwhelm, tearing at the seams of our senses. They are not ours to safely know.

WHEN I GRAPPLE WITH making meaning of my experience, I think about Job. I am neither Jewish nor Christian, but I find the story comforting. It is the ultimate answer to the problem of suffering: the answer of no answer.

Job is a good guy. Righteous. We might even say the set and setting of his life are optimal. Intentional. Job aims to serve God.

But his life turns into a bad trip. He watches his livestock, children, servants die. Then, sores: a body pockmarked by

painful boils of pus. He wants to know why. His friends have ideas. You must have done something wrong, they say. Try harder next time. You get the trip you need. Suffering is an opportunity to realize love!

Job pleads with God. Why? Why me? To what end? He senses he cannot truly plead his case with God—for God is so removed from human understanding—but he still tries.

God appears, but not with answers. He hurls questions back at Job. Who are you to ask? To think you could understand? Sure, the content is unsatisfying, but the delivery dazzles: a furious whirlwind, a show of power and might. Basically, "I'm God, you're not, this is not about you."

Job recants; not because he has the answers, but because he knows he never will.

Every time I ask—the medicine, the nothingness, God, mystery, anything at all—why this suffering, and why me?—I am struck dumb. No story I try to hang on it—psychological, physical, metaphysical, religious—feels sufficient to explain the encounter.

I recant. Not because I have found a compelling answer but because the blaze of reality comes at me with its forceful refusal. The fury, questions thrown back at my questions. The lurking sense that this is somehow not about me.

AS I STRUGGLED TO process my experience, I ran across the book *Rational Mysticism*. In it, journalist John Horgan describes a psychedelic trip he experienced in 1981. When I asked him about the episode, he wrote to me:

I suffered from terrifying flashbacks and psychotic delusions (I thought I had discovered the secret of existence, and that reality was going to vanish as a result) for months, and then sank into a deep depression, which lasted for almost a year. I felt alienated from life, and from everyone I love. I only pulled out of it when I met a woman I ended up marrying. It was the most meaningful experience of my life. I still think and write about it. I don't regret it, but I wouldn't wish it on anyone.

In a Johns Hopkins survey of 1,339 participants who reported a "bad trip" a year or more in the past, 24 percent said they experienced psychological difficulties (depression, anxiety, paranoia) for a week or more after the bad trip, and 10 percent reported these symptoms

lasted longer than a year (all these trips were in nonclinical settings).¹⁴

But 84 percent said they benefited from their experience, and 46 percent said they would do it again. Notably, according to this survey, three in four said the experience "led to increased personal well-being and life satisfaction."

This one study has overwhelmingly influenced the discourse around challenging experiences, reinforcing post-traumatic growth narratives. I don't want to diminish people who do grow from disruption; the data speaks for itself. Yet the research framing saddles bad trips with the very same, uninteresting questions the therapeutic model asks of all trips: "Did it work?" Or, more cynically, "Are you satisfied?"

What if we asked: "How did it shift your notion of the potentiality of your own mind? Of the affordances of soul, world, spirit? What do you know now that you didn't before? How do you know that you know?" These are the questions I think bad trips stand to answer.

PERHAPS ANOTHER REASON I have not shared any of this before is because I feel that a bad experience —pervasive, shattering—does not necessarily negate the others. Trips are not arithmetic: add up the good and subtract the bad. They do not move along linear axes; rather, each introduces a new dimension. They are accretive. Psychedelics, I have found, always bend toward possibility, even when that possibility is one that forecloses all others.

While writing this essay, I went on a walk with a friend—let's call her Leia—who is recovering from a bad mushroom trip. Her trip, like mine, left her with constant anxiety. When I asked her what the most enduring mark of the experience was, she didn't hesitate.

"I now have more on-ramps to darkness," she said. "I think that's really it."

Leia told me about her car. For weeks, an ominous noise emanated from somewhere under the hood. She assumed it was a problem with the engine, a problem she could not afford to fix, and so she ignored it. Each time she drove on the highway, she panicked, wondering if the car would combust, stall out, malfunction, and she would die.

Some weeks later, a friend got in the car and calmly told her that a stick was stuck somewhere underneath the car, rattling around, making the noise.

Did psilocybin trip some sort of latent neuropsychiatric disposition in me toward panic—anxiety rushing in where depression rushed out? Did I experience a kind of divine abandonment, a loss of the ultimate I had only recently known? Was one small thing in the setting amiss, a twig tapping on my open mind?

I am left with the question *Why?* The irony is that the clinical container facilitated an experience that seemed to lay bare the very limitations of that container. Some days, I think psychedelics healed me by not healing me at all—which may just mean they made me more comfortable with paradox. In a humble commitment to unknowing is where I now make my home.¹⁵

Notes:

In 2022, I was asked to deliver remarks at Esalen's Center for Theory
and Research during an event titled "The Psychedelic Turn: Mind,
Matter, and Method." This essay is a revised version of those remarks.

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- 2. I discuss this term in the October 2020 panel "Medicalizing Mysticism" at the Center for the Study of World Religions; the video is available at cswr.hds.harvard.edu/news/2020/11/03/video-medicalizing-mysticism-religion-contemporary-psychedelic-trials.
- 3. William James, *The Varieties of Religious Experience* (Macmillan, 1902), 120.
- 4. This essay does not address the very real, and preventable, harm of sexual abuse committed during psychedelic treatments, an important issue that has been extensively reported on in *New York Magazine* and *Psymposia*.
- 5. Walter Houston Clark, "'Bad Trips' May Be the Best Trips," *Fate*, April 1976.
- 6. This unethical "method" is most commonly associated with Salvador Roquet, who himself had a yearlong dissociative break following a 1957 mescaline trip. Alexander Dawson, "Salvador Roquet, María Sabina, and the Trouble with *Jipis*," *Hiemic American Historical Review* 95, no. 1 (2015): 103–33.
- 7. Mike Jay, "Sartre's Bad Trip" The Paris Review, August 21, 2019.
- 8. Ibid.
- 9. Jared Lindahl et al., "The Varieties of Contemplative Experience: A Mixed-Methods Study of Meditation-Related Challenges in Western Buddhists," *PLOS ONE* 12, no. 5 (2017).
- 10. Thomas Ungerleider et al., "The 'Bad Trip': The Etiology of the Adverse LSD Reaction," *The American Journal of Psychiatry* 124, no. 11

(1968): 1483-90.

- 11. Thank you to Dr. Elias Dakwar for first introducing me to this metaphor.
- 12. "Cover Story: Power Trip," The Cut, March 8, 2022.
- 13. See, for example, Eric M. Greene, *Chan Before Chan: Meditation,*Repentance, and Visionary Experience in Chinese Buddhism (Kuroda
 Institute, University of Hawaii Press, 2021).
- 14. Frederick Barrett et al., "The Challenging Experience Questionnaire: Characterization of Challenging Experiences with Psilocybin Mushrooms," *Journal of Psychopharmacology* 30, no. 12 (2016): 1279–95.
- 15. Thank you to Erik Davis for his help.

Rachael Petersen is a writer and a second-year MDiv student at HDS. Her writing has appeared or is forthcoming in *The Sun*, *The Rumpus*, *Peripheries*, and elsewhere.



Amazing read, Positive site page, where a couple of the articles on your site now, and I really like your style. You rock and liberally keep up the astonishing work. websitekan

REPLY



Nikolai on June 28, 2023 at 11:12 am

One week later? No one should ever take high doses of psilocybin only one week apart. The doses should at least be 4 to 6 months apart, preferably 12 months or more. It's a complete overload to the mental system to do it with such a short interval. It takes months, if not years, to absorb these experiences. I would never participate in a study that did not have a good understanding of this aspect of utilizing psilocybin.

REPLY



Costa on May 2, 2023 at 1:47 pm

Rachel, please look into the writings of the Greek Orthodox
Fathers, you can start with those that lived in the previous
century or more recent centuries, St. Siluan the Athonite, St.
Seraphim of Sarov, Geronda Josef the hesychast, St. John of
Shanghai and possibly others. The designation "mystical"
experience assigned to psychedelic trips is not appropriate. From
all the orthodox christian books that I read, genuine mystical
experiences leave peace onto one's soul – they do not want to
leave those places or that state. They also describe when that
grace leaves them and the pain of not having it.

REPLY



Eli on April 27, 2023 at 2:27 am

Thank you for writing this Rachael. I have had adverse experiences from both a single psychedelic trip and an intensive meditation retreat, and it is heartening to know there are others like me. Language used in both of these communities can often

be victim blame-y and I've felt frustrated by this in the past. It seems that since the outlawing of psychedelic substances, there is a need within portions of the psychedelic community for press to be overwhelmingly positive and ignore the less sexy reality that these drugs remain complicated and could potentially lead you to experience something akin to Hell on Earth. The substances are fundamentally neutral. They are not miracle drugs. I wish both high-level meditation teachers and psychedelic proponents would do more to acknowledge and highlight more of the possibility of bad trips and dark meditative experiences, although admittedly I'm not sure of how they would do this in a skillful way. However, I'm confident that there could be a way to do this without coddling people. I also wish more people realized that stories like yours and mine don't negate any of the positive experiences people have had with these substances. Our stories simply coexist with theirs, and as psychedelics and meditation continue to get more popular I think it is essential that there be a more expansive roadmap of the territories these paths might take you. – Warmly, Eli

REPLY



Thomas B. Roberts on March 21, 2023 at 12:28 pm PS.

The language that is needed is in Chapter 4 "Perinatal Experiences in LSD Session," of Grof's book "LSD: Doorway to the Numinous." (Originally: "Realms of the Human Unconscious")

REPLY

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Thomas B. Roberts on March 21, 2023 at 12:06 pm

Difficult problems on subsequent experiences are to be expected.

Although people may experience an overwhelming positive, mystical experience on first experiences and even overcome a presenting specific problem at a transcendent level, there remains autobiographical unresolved materials that need to be faced and resolved. Grof's 4-level theory of the mind describes these unresolved experiences as well as the unitive consciousness experiences. One should not suppose that a one-time powerful mystical experience will resolve all problems. However, it is likely that having had a mystical experience, people will be more willing and more able to face their still-existing autobiographical and perinatal problems.

REPLY



Jeannet Weurman on March 15, 2023 at 4:44 pm

Thank you so much, Rachel, for your honest sharing of what you have been through. I find it deeply helpful. I wish you well.

REPLY



James on March 3, 2023 at 7:54 am

I had another response: the author invokes the notion of "transcendence" several times as the expectation of a "good" psychedelic experience, and I would caution against this idea as a relic of western, Christocentric religious studies theory and theology.

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If you only think psychedelics as transcendence as rising above the everyday plane of existence or some notion of exultation that involves height and altitude, then you will not know how to handle psychedelic experience that goes down deep into the underworld. Shamanic journeys are not one-directional travels of transcendence and ascent, they are voyages into the deep and the beyond of all all possible spatial realities. It is the western assumption of transcendence as the only direction of spiritual movement that creates unhealthy expectations for what a thorough going psychedelic experience can entail. And fwiw, the notion that the sky is "above" the earth is the sort of simple and fascicle human perceptions of transcendence we have to counter. The sky is also "under" the earth and "next" to the earth as the earth is a sphere surrounded on all sides by sky. You can move in any direction to reach the heavens, they are not fixed above us.

Destroy the false notion of transcendence and you will have many other spiritual worlds and geographies opened unto you once more.

REPLY



marie on May 28, 2023 at 8:30 am

This is one of the best responses here, I appreciate all you say. We are conditioned, we have attachments and expectations based on our Western culture. Shamans in indigenous cultures will journey into the spirit world, encounter entities and different dimensions, and learn how to navigate all this. These trials and tribulations, ego death and dismemberment- are all part of their shamanic

initiations. It is how they gain wisdom, and then bring this knowledge back to their community to help others. So no, it is not easy, and this type of work is not meant to be. The marketing of psychedelics as always being wonderful lovely-dovey trips is problematic and inherently not true.

REPLY



James on March 3, 2023 at 7:43 am

Thanks for sharing. Perhaps a more generative frame however would be to interrogate social structures and systems that force people to go right back to the status quo social world after a profound psychedelic experience. I actually don't think the anxiety generated by "bad trips" has much to do with the individual at all — I reject individualized notions of psychopathology— and rather is more an indication of how repressive the capitalist world is. It's not the set and setting of the psychedelic experience that is at play; rather it's the set and setting of quotidian life that relentlessly seeks to annihilate us all.

REPLY



Alex on February 24, 2023 at 12:34 pm

Thank you for sharing! This has been helpful for my integration and in directing my search for meaningful work in this field.

REPLY



Siva on February 14, 2023 at 1:09 am

Rachael,

Thank you for sharing your experience with authenticity & raw emotion. You're right that the hyperbolic marketing of mystic experiences very often leaves out the fact that coming face to face with nothingness is far from a pleasant experience and can leave the psyche shattered. It seems like thats not an accident but intentional to annihilating our human sense of reality... and I don't think there's anything "wrong" or "different" with you that you had this experience. You just dug deeper than most.

It seems to me that reality is not just unending joy but but also equally unending terror. One can't be created without co-creating the other. There's a reason why the human mind is veiled from ultimate reality ... our very human brain seems very ill-equipped to cope with it.

My learning ... after spending time feeling that human existence is utterly pointless ... is to then start to recognize that there is no "other" to help me or give me joy or meaning. It's up to me to do all that for myself. That's the reality of being your own creator ... there's no one else here but you.

Siva

REPLY



Nicole on February 10, 2023 at 6:46 am

There is a complete explanation available for these experiences in one and only one place – the Bible. There are real dark/evil entities in the unseen world. To open ourselves up via psychedelics or via meditation is to open ourselves up to control by evil spirits. They create depression, fear, anxiety, darkness,

and they inhabit anyone they can find who opens themselves up. There is only one way to reverse the effects and get rid of them, and that is by submitting oneself to Jesus – not the New Age Jesus who is simply another evil spirit pretending to be good, but the real, personal Jesus of the Bible. Job himself called for Jesus in the oldest section of the Bible, by calling for a mediator that would make his case before God. Jesus answers our question of suffering – we suffer because we have created evil, and God through Jesus is desperately seeking to help us defeat evil. There is no other way to a real spiritual life and real connection to God without him.

REPLY



Matthew Bush on November 13, 2023 at 6:02 pm

I agree with Nicole. Perhaps the most powerful experience in my life was a mushroom trip back in 1975 where I experienced pure bliss in the form of direct, intuitive connection with the universe far beyond human language. There has rarely been a day since that I have not thought of how beautiful life was when experienced from that level of ego-free perception.

Many years later I learned through bible reading that our creator strongly warns us to steer clear of any spiritistic practices including Pharmacia, the use of drugs for reaching higher states of consciousness or having anything to do with Shamans/sorcerers. Why? our normal boundaries of consciousness aren't there to deprive us of deeper insights and connections, but to protect us from powers that exist in those realms, demons that can cause

us unimaginable harm. Spiritistic practices put us in touch with such demons who can transform themselves into beings of light to dupe us into believing they are "guides" and benevolent friends who have our best interests at heart. They do not.

The time we are living in is described in the bible as "the last days". These times are marked by selfishness, greed, a lack of love and affection and a lowering of moral standards. I think anyone with his eyes open can see these qualities worsening as time goes on. It's no coincidence that so many "new age" spiritistic practices have gone mainstream, Yoga which was practically unknown 50 years ago is now practiced by soccer moms.

I am not saying that psychedelics may not hold some therapeutic benefit for some under certain conditions. I myself had an incredibly profound experience under their influence. But as the author warns, there are some things we are not meant to know. More importantly our loving heavenly father makes it clear that the dangers of using these substances or in engaging in other similar practices are real and to avoid them at all costs. The bible also promises us a future in paradise conditions if we follow our creator's directions.

REPLY



Barry Geister on February 9, 2024 at 6:07 pm

Far be it from me to oppose Jesus. I consider myself a Christian, albeit a Roman Catholic. I know many Christians,

including priests, who have used psychedelics and remain faithful practitioners of the faith. The idea that every untoward experience with psychedelics or meditation is from evil spirits is a lot of fundamentalist hokum. This is the problem with many Protestants (I'm making an assumption here)—they think theology and real Christianity only started in the 1500s. They have almost no knowledge of the early church fathers (except maybe Augustine, who greatly influenced Luther and Calvin), nor of the mystical tradition in Catholicism and Eastern Orthodoxy.

Almost all of the Catholic mystics, including may who have been deemed saints, practiced some form of nondiscursive or wordless meditation. The author of the Cloud of Unknowing, a classic of mystical Christian spirituality, advocates a form of contemplative prayer that is not much different from the type of mantra meditation practiced in Hinduism. So the idea that Christians should never "empty the mind" is absurd. What does the Psalmist mean when he says "Be still and know that I am God"? I should also add that the idea that non-discursive meditation involves "emptying the mind" is a bit of a misconception. A better way to think of it is simply turning off the constant "inner chatter" that all of us have in our skulls almost 100% of the time...to quiet down so God can speak in the depths. Sometimes doing this may entail focusing on something specific, like a crucifix, or an icon, or perhaps a holy word that gets uttered again and again.

Moreover, the notion that Christians who meditate have an easy time of it and that all is sweetness and light just

doesn't square with experience. St. John of the Cross suffered from and wrote about "the dark night of the soul." St. Antony of the Dessert was surrounded and tempted by devils—not because he did something wrong, but more likely because he did something right. Remember, even Christ was tempted, so why should we be exempt.

REPLY



morgan machen on February 4, 2023 at 2:55 pm

It's interesting to me how every once in a while I'll read something that drops piece of the integration puzzle in place. I have been enjoying Jules Evans blog posts drawing attention to the need for more understanding of the integration process, particularly for helping people recover from bad trips. I've had some terrifying experiences that involved the absolute certainty that I needed to go blind in order to save the world from annihilation. It wasn't a sense that I would go blind sometime in the future but much sooner, like TOday.

The belief that nobody could possibly understand that mixture of dread, terror, grief, sadness, you name it was really hard to cope with. When I read Rachael's account of being rendered 'uncanny' I decided to look up the meaning of that word. I ended up reading about Freud's work on the subject which then lead me to read about the Sandman story. The gist of it is that a subconscious fear of castration can be masked by a fear of going blind, and vise versa. So now I have a whole new area of inquiry for my ongoing integration process via 'bibliotherapy'.

If Rachael hadn't had the courage and intelligence to convey her

experience in the words she chose I might not have found that source of meaning to my bad trip.

REPLY



Matthew on January 26, 2023 at 1:19 pm

Rachel,

Thank you for this. I'm deeply interested in these things from both a pastoral and clinical (MSW) standpoint. And, my own experience of a "bad trip" occurred when I was 3-4 years old, and had a non-psychedelic assisted realization of what I call "the Void." In Christian literature, it's called doubt, despair, demonic and any number of sins. Yet my desire for Christ and God and to connect others to Them has never subsided. It transcends but does not exclude my dysthymic depression and existential junk. Your article gave me hope that maybe I just saw God's figurative "backside." I've been interested in how to make Christianity more practice-based as are Judaism and Buddhism. If appropriate, I'd love to connect and learn more from you about resources on bad trips – both on and off substances – and how folks have integrated "the void" into their overall religious/spiritual practice in life-giving ways.

Thank you, Matthew

REPLY



farmer on January 14, 2023 at 4:46 am

IMO, Terence McKenna gave the most useful description of what psychedelics basically do. They dissolve boundaries.

Boundary between me and others. Boundaries between objects you see. Boundary between smell and taste. Boundaries in your mind and memory, etc...

REPLY



Sean on January 12, 2023 at 7:10 pm

Interesting case report, thank you for posting it.

Although I cannot comment in much detail of the trip itself or the integration work which was attempted, one comment I would make is that in all the references, none mentioned Stanislav Grof, nor did there seem to be any familiarity with his theories and, more inmpotirtantly, his methods of working g with material like this. One possibility, for instance, is that the second journey opened you up to the perinatal domain of the u conscious. This domain is complex, but frequently involves intense anxiety and a confrontation with impending g death. And there are Grofian techniques for working with this material, but first it is necessary to recognize that this is where the problem lies.

As psychedelics become more common in Medical practice, this kind of story will be re-told repeatedly. I strongly urge anyone considering a psychedelic journey – and more importantly anyone intending g to practice psychedelic psychotherapy, – to become intimately familiar with this body of wok.

REPLY



Dr. Mary gresham on January 5, 2023 at 8:04 pm

There is a reason that we have psychological defenses. When those defenses are stripped away, we can feel sheer terror and all of our illusions of safety are gone..it is extremely frightening to be so open and vulnerable in the world, recognizing that at any time something terrible can happen to us. Most of us cannot stand to truly recognize this truth and pray for the illusion of safety to return so that we can resume our normal reality. I am a clinical psychologist who works and studies in the psychedelic field. I carry concerns that too many people do not realize that the best candidates for psychedelic therapy are those who are overly defended and stuck in life with a feeling of deadness because they are caught in conventional thought and highly defended.

I feel for you Rachel and hope for . your recovery of some of your sense of safety in the world. I have also worked with crime victims who recognize that for no reason, at any time, something terrible can happen to anyone, We have to work to find and reemploy our protective denial and close the curtain on our ultimate vulnerability in life. Your first trip where you were opened to a deep spiritual experience that was already disorienting should not have been followed by another so closely. It is too much, too soon, not possible to integrate so quickly. There is a reason some people suggest only doing psychedelics once a year.

REPLY



Ravi Chandra on January 4, 2023 at 7:18 pm

Thank you for this piece. I just finished watching Michael Pollan's

4 part infomercial on Netflix, and was aghast that so little time was spent on adverse effects. My experience is that almost everyone knows someone who's had a significant bad experience. As a psychiatrist, I think I tend to find the cause not in meaning, but in the mode of action. As ego boundaries dissolve and the default mode network and narrative sense of self subsides, primitive fears and despairs, and traumatic experiences can balloon beyond the containment. It's a lot – I'm sorry you had this experience. I hope you continue to recover and help others who have had adverse experiences.

REPLY



JEAN on January 4, 2023 at 6:12 pm

A friend struggled for many months with high anxiety and sleeplessness after a BUFO journey (a complete personality change) and we asked similar questions. Why? How? What did we miss in the process? The experience brought to light how important it is for education in paths to remediation which were hard to come by, expensive, and most often unproductive. After a year of searching, she finally found a doctor who knew what to do and prescribed Lithium while a short stay under the doctor's care. If only....

REPLY



Harrison Shields on December 30, 2022 at 6:09 am

Hi Rachel. I too had a difficult experience which followed me for years. Although I endured a lot of fear and uncertainty due to that experience I was not subjected to the acute anxiety you

describe. I am thankful for that and sympathize with your suffering.

In your essay you imply that psychedelic therapy cheapens the experience of transcendence by using it to affect a pragmatic end. I wonder if you have considered that in traditional societies that use psychedelic plants and fungi they are often referred to as "medicines" and used not only for healing the body and soul, but also for purposes which seem far more mundane by our modern cultural standards such as finding lost objects and determining who may have stolen said objects.

If the transcendent experiences these substances engender have always been used to heal how is it that our psychologists now cheapen them by using them to heal?

REPLY



Chris on December 23, 2022 at 11:29 pm

This essay has the feeling of a religious crusade. Please don't lead a flock anytime soon. Sorry for your pain.

REPLY



Ronan on December 18, 2022 at 6:47 am

Hi Rachel,

Thank you for this.

I was similarly blown apart by a number of essentially psychotic episodes as a result of psychedelics. In a sense, the 'meaning' of my life has been putting myself back together since.

If you ever feel the need to investigate your experience, feel free to drop me a line.

Best,

Ronan

REPLY



Renee on January 24, 2023 at 12:43 am

I suffered for two years after taking Ayahuasca. I too ended up on antipsychotics. I am finally medication free for over 1 year now. But my mental health is much more labile and I feel more sensitive in general. It has been a very long recovery. I lost money, relationships, and my overall confidence in life. It's slowly coming back. I really understand when the writer says this experience is in your body. I too could not intellectually grasp what I was ailing from. Thank you for this article.

REPLY



Jules on December 16, 2022 at 7:16 pm

This has put me off megadosing.

I like microdosing LSD & Mushrooms (seperately)

My past LSD trips (in my teens) were all cavalier dice rolls

I'm not sure I want to roll the dice again.

REPLY



linas on December 14, 2022 at 3:57 pm

One of the best texts on integrating 'bad trips' i have ever read.

REPLY



TORE on December 5, 2022 at 5:34 am

I work as a clinical psychologist in daily life. In my spare time I look at bad trip reports on reddit. Two themes can be extracted: fearing having a broken brain and fearing losing control. Any type of trip can give rise to these experiences and resulting beliefs about the mind.

After the trip, people dissociate, feel stuck in loops during dream time, worry about their loss of control and worry about their broken mind, tune in to the resulting symptoms, fear sleeping because of a belief of going back (and further ruin the mind/control) ruminate about having done the trip, ruminate about the meaning of the trip, meditating, journaling about after effects and asking anyone for help. And trying to integrate and in that way still keeping contact with the experience and problematic beliefs about the mind.

One psychological answer would be that all of this is getting in the way of experiencing a natural homeostasis of the mind and a normal regulation/control of the mind.

It should be possible to screen directly efter a trip or a few days

after for resulting negative experiences about loss of control and having a broken brain.

REPLY



Alex S on December 2, 2022 at 5:15 pm

Thank you for sharing this important and complicated perspective! I took a high-dose of psilocybin at a guided retreat in July. The trip itself was good – I experienced pleasant feelings of love and euphoria and surprised myself with how I was able to relax and enjoy the ride. But coming out of it, I felt extreme and uncomfortable anxiety. This anxiety persisted and worsened over the next few months - sending me spiraling into existential dread and an obsession with mortality (my own and everyone else's). Only now, in December, after months of therapy and finding the right fit of anti-anxiety medication, am I finally feeling more fully myself again. The question of "Why?" became obsessive – did my trip trigger some latent mental health issues, was my tough postexperience actually good for pushing me to focus on my mental health, or maybe it wasn't the trip at all that caused my anxiety but a pile up of life issues I had been ignoring? Ultimately, maybe the lesson is that the why doesn't matter as much as the healing.

While my set and setting was peaceful, safe and expertly facilitated, once the retreat ended I felt on my own, lost in the wilderness of what the trip opened in my mind. As my anxiety begins to ebb, I share the author's concern that the rush to apply psychedelics as a "magic cure" to a host of issues from addiction to depression, people will seek out these substances not just without a full understanding of the risks but without connections to post-trip supports. Hoping this piece opens up space for a

more nuanced discussion of the possible benefits – and harms – of the psychedelics renaissance.

REPLY



Marie on December 2, 2022 at 3:42 pm

I hope this author finds a qualified psychedelic integration therapist to work with. I would suggest that by asking why you are going to continually cycle around that question and stay stuck. The question is not why, it's about finding a way to accept and surrender and learn from your experience.

REPLY



James on March 3, 2023 at 7:45 am

Agreed.

REPLY



Mark on December 2, 2022 at 3:20 pm

This is an amazing piece. I wish I had more time to to specify my praise. But thank you for so eloquently opening up my mind to the range of possible experiences with psychedelics.

REPLY



Charis Cladouhos on December 2, 2022 at 12:44 pm

Dear Rachel,

As a ketamine practicing physician dedicated to oaths involving "First do no harm" as well as "grant me the strength, time and opportunity to correct what I have acquired, always to extend its domain; for knowledge is immense and the spirit of humanity can extend infinitely to enrich itself with new reqpirements". I am compelled by the parsing of your experience.

Thank you for writing it. I'd love to be in touch and am in Boston.

REPLY



Nikola Ognyenovits on November 30, 2022 at 9:15 pm

Thank you for the great essay, Rachael.

Allow me to share some of my reflections:

Humanity's newly found quest of "making sense" of everything does not seem to be helpful and leads us to distressing dead ends.

If we could just take what is given to us as they are, not trying to shove them into theoretical systems, may provide us with endless opportunities.

This effort stems from our hopeless desire to control the uncontrollable, as we are trying to control nature and destroying it instead of living with it and by it.

I view philosophy as an attempt to rationalise human experiences. In psychedelic therapy terms it is an attempt to integrate human experiences.

By doing this we are shutting the doors to the experiences themselves, imprisoning them into makeshift frameworks of theories. Giving names, definitions to our theories give us the

illusions that we are somehow in control of them.

We only have ourselves to change and the technology of using psychedelics may provide us with opportunities of getting in touch with the alternatives and potentials that lie inside us. Becoming friends with the idea of not knowing but living and

appreciating may help us to find new ways.

But as we heard it before "Our greatest fear is to become who we really are."

Warm regards
Nikola Ognyenovits

REPLY



Tom Lane on November 29, 2022 at 8:21 pm

You do not know what you are talking about because your language is based on Western Dualistic Hierarchical Vertically Oriented Metaphysics.

REPLY



Mark on December 16, 2022 at 5:54 pm

That's really unhelpful — and judgmental, too.

REPLY



James on March 3, 2023 at 8:13 am

A vertically oriented metaphysics of transcendence will lead one to spiritual poverty every time

REPLY



pablo on July 17, 2023 at 3:45 pm

that's really interesting, so you think platonism and neoplatonism is doomed????

REPLY



Brian on November 28, 2022 at 3:17 pm

Hi Rachael. On the question of why suffering/evil, my experience showed me something I call the necessary evil. It has to exist so that we have a reference against what is good. During my experience I was nothing but love and light, but I only knew I was love and light because there was this tiny speck of darkness amongst it, that darkness turned out to be physical reality/life. I was told I was down here to 'take one for the team' and experience the concept of evil. It has to be this way so that the darkness/evil doesn't spill over into the light when we go back 'home'. There is no such thing as a one-sided coin so that's why it has to be like this, it's to keep evil at arms length without becoming it. It's to keep it down here. I can only conclude from what I experienced that this life/reality is what some may refer to as hell, as this is the only place where evil is allowed. I don't know if this makes any sense or not, as you'll know yourself a lot of the experience is just too much for actual words to explain what occurs.

REPLY



catherine on November 23, 2022 at 7:41 am

Thank you for this thoughtful and important essay. May it lead to a more well-rounded understanding of all the potentials of psychedelics and meditation.

REPLY



Jason M. Clark on November 21, 2022 at 9:44 pm

Thank you for sharing. Very enlightening and useful. I was particularly struck by the research around negative meditation experiences—the practice absolutely made me more vulnerable to darkness.

REPLY