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“It’s like a charge - either fuses you or burns you out”: An Interpretative Phenomenological Analysis of extreme mental states in meditation context

Abstract (150/150 words)

Meditation, an ancient Eastern spiritual practice, is increasingly being practiced in the West where its benefits for mental and physical health have been established. Extreme mental states that can be encountered in the context of meditation have also been reported and often have been labelled as psychosis or spiritual emergency. This study aimed for more nuanced understanding of the phenomena. Interpretative Phenomenological Analysis was employed to explore the meaning making of three meditation teachers from different philosophical traditions. The teachers described phenomenology of various extreme mental states, explained their nature according to their traditions and discussed ways of helping persons who experience these. Significance was given to having a spiritual teacher to provide guidance and support. The study highlights the importance of acknowledging the diverse understandings of the phenomena and cultivating a non-judgemental attitude towards it, which could help clinicians and meditation teachers work together to support persons experiencing these.

Keywords: meditation; Kundalini Yoga; phenomenology; spiritual emergency; psychosis

Introduction

Meditation is a spiritual and healing practice that is considered to be at least 5000 years old (Suchday et al., 2014; Ospina et al., 2008). While there are a variety of different kinds of meditation, the essential elements of its practice generally involve the use of a defined technique, logic relaxation and a self-induced state (Bond et al., 2009). It can also include psychophysical relaxation, self-focus, altered states of consciousness and is often rooted in a religious, spiritual or philosophical context (Bond et al., 2009). Two main Eastern philosophies that meditation originates from are Buddhism and Hinduism (Suchday et al., 2014).

Buddhism which has been described as “an Eastern form of spirituality” and a “philosophy of life” (Conze, 2001, p. 1) focuses on realising the mind’s full potential (Nydahl, 2011). Meditation is perceived as a way to relieve suffering which stems from our attachment to or repulsion from things and ideas (Scotton, 1996a; Suchday et al., 2014). Different Buddhism branches, Theravada (Southeast Asia), Zen (China and Japan) and Tibetan Buddhism, may emphasise different aspects of meditation practice (VanderKooi, 1997). For example, achieving “vipassana” (insight) which involves focused awareness of the phenomena that arise and pass away in one’s consciousness is emphasised in Theravada meditation (Scotton, 1996a; VanderKooi, 1997) while zazen (Zen Buddhist meditation) may involve “shikantaza” or “just sitting” in open awareness (Goleman, 1988).

While Buddhism places emphasis on connection with emptiness (*shunyata*) and non-self, in Hindu philosophy, the focus is on connecting with an immortal version of the Higher Self (Suchday et al., 2014). The system of practices designed to achieve spiritual developments, such as higher states of consciousness, is called “yoga” (Scotton, 1996b). Meditation is an integral part or in other words one of the Eight Petals of Yoga (Iyengar et al., 2005). There are numerous yoga paths with slightly different emphasis, for example, Kundalini Yoga, focuses on the spiritual energy (Kundalini), residing at the base of the spine and, when awakened, “travels up the spine through six centres, or “chakras”, reaching the seventh at the top of the head” (Goleman, 1988, p. 77).

The ancient practice of meditation has recently become increasingly popular in the West, where it is often seen as a tool to achieve discrete ends such as stress reduction (Suchday et al., 2014). Scientific research has focused on neuropsychological and neurophysiologic mechanisms of meditation (Chiesa, 2010; Fox et al., 2014; Hazari &

Sarkar, 2014; Sedlmeier et al., 2012) as well as its therapeutic benefits on mental and physical health (Ospina et al., 2008; Chiesa, 2010; Chadwick, 2005; Shonin et al., 2014a).

Amongst the mostly positive reports in the literature, calls have also been made to investigate potentially distressing effects of meditation practice (Shapiro, 1992; Farias & Wikholm, 2015) which may involve hearing voices, seeing frightening images, confusion and psychomotor agitation amongst other experiences (VanderKooi, 1997; Ossoff, 1993). These “extreme mental states” may often prompt a response from meditation teachers or mental health services (VanderKooi, 1997, p. 31). A discursive divide exists in reporting these experiences which have predominantly been constructed by the biomedical discourse as “psychosis” requiring psychiatric interventions (Chan-Ob & Boonyanaruthee, 1999; Kuijpers et al., 2007, Sharma et al., 2016) while the alternative discourse introduced other conceptualisations such as “spiritual emergency”(Lukoff et al., 1998) and “Kundalini awakening”(Ossoff, 1993) .

It could be argued that these discursive constructions can to a greater or lesser degree obscure the nature and phenomenology of extreme mental states and hinder our understanding of these. To date the focus in the literature has been on identifying risk factors of these in case reports (Kuijpers et al., 2007; Yorston, 2001; Paradkar, & Chaturvedi, 2010; Sharma et al., 2016) with only a few qualitative studies that explored experiences of meditation practitioners or meditation teachers (Lomas et al., 2015; VanderKooi, 1997). Therefore there is the need for in-depth phenomenological exploration of the meaning-making of persons who have encountered extreme mental states in their practice using a method such as Interpretive Phenomenological Analysis (IPA) which privileges hermeneutics and is sensitive to cultural context of the person.

This study employed IPA to explore how three experienced meditation teachers from different cultural traditions (Theravada Buddhist, Zen Buddhist and Kundalini Yoga) make sense of the phenomena of extreme mental states that they encountered in their practice either themselves or in their students. With this study we sought a more nuanced understanding of the phenomena taking into account different systems of knowledge which could benefit meditation practitioners, teachers and clinicians who may encounter extreme mental states in their practice.

Method

Interpretative Phenomenological Analysis (IPA) focuses on meaning-making and is concerned with the detailed examination of personal experiences, perceptions and views of the participants (Broki & Wearden, 2006; Smith et al., 2009). It “gives voice” to the participants (Larkin et al., 2006) and is not concerned whether their accounts are “true” or “false”, or to what degree their understanding correlates with an external “reality” (Broki & Wearden, 2006; Willig, 2001).

Phenomenology, idiography and hermeneutics are the theoretical keystones of IPA (Smith, 2011). Phenomenology focuses on the world as it is being experienced by individuals and is interested in the phenomena that occur in individuals’ consciousness as they engage with the world that they live in (Willig, 2001). IPA’s concern with idiography manifests in two ways: it focuses on the detail and the depth of analysis and is also interested in “the particular” in that it aims to understand how a particular phenomenon is perceived by particular people in a particular context (Smith et al., 2009). In order to understand participants’ terms of reference a level of cultural competence is required (Smith et al., 2009).

Finally, a degree of engagement and interpretation is needed from the researcher as the experiences cannot be simply extracted from the heads of the participants who are constantly engaged in making sense of these experiences (Smith, 2011). Smith (2011) described it as “double hermeneutic, whereby the researcher is trying to make sense of the participant trying to make sense of what is happening to them” (p. 10).

Sampling

Purposive sampling was used to select participants who can provide insight into a particular phenomenon (Smith et al., 2009) and to find a fairly homogenous group of people for whom the research question was meaningful (Smith & Osborn, 2008). In this study, the sample was homogenous in that it consisted of people who have been practicing and teaching meditation or yoga for a number of years, although each came from slightly different traditions.

Due to IPA being strongly idiographic and used to analyse cases in fine detail, it is recommended for the use on small samples of participants (Smith, 2004). A sample of three was chosen as suggested by Smith et al (2009), which allowed for a nuanced analysis of each case and enabled the researcher to micro-analyse differences and similarities across cases.

Participants

Participants were recruited from various meditation and yoga schools in London and Glasgow. The inclusion criterion for the participants was the experience of or encounters with any extreme mental states in the course of their own meditation practice or in their students. Participant T1 was a Theravada Buddhist monk who taught Vipassana mediation classes and a mindfulness-based stress reduction course, and led silent meditation retreats. The second participant (T2) was a Kundalini yoga teacher who ran group and individual Kundalini classes and was undertaking training in psychotherapy. Participant T3 was a Zen Buddhist nun who taught meditation and led zazen (traditional Soto Zen meditation) groups.

Ethical considerations

The study was approved by the Research Ethics Committee at the College of Medical, Veterinary and Life Sciences, University of Glasgow (Project number – 200140107). All participants were provided with information sheets about the study and gave written informed consent before taking part in interviews.

Interview procedure

Semi-structured interviews were chosen for their tendency to produce rich data by providing the participants with an opportunity to freely tell their stories, reflect on their experiences and introduce novel issues (Smith et al., 2009; Smith & Osborn, 2008). This approach requires the researcher to be open-minded and “bracket-off” or suspend their own preconceptions during the interview (Smith et al., 2009). Therefore open-ended and non-directive questions were used, followed by some probing questions to encourage the participant to elaborate more on the topic (Willig, 2001).

The interviews were conducted by author [*author 1 initials removed*] in a quiet space to protect participants’ confidentiality. Two interviews were conducted face-to-face and one was undertaken using videoconferencing on Skype due to distances involved. All interviews were approximately 45 minutes long and were audio-recorded.

At the beginning of the interview, participants were asked to briefly provide some background information about their involvement with meditation. The set of questions which guided the interviews was as follows:

- 1) In the course of your experience have you encountered any “extreme mental states”?
- 2) Could you give some examples of the sorts of experiences you have encountered?
- 3) How are these experiences understood in your tradition?
- 4) What has been a helpful way to respond to these sorts of experiences?

The interviews were transcribed verbatim. Detailed prosodic aspects of the audio records are not generally required in the transcripts used in IPA, as it focuses on the meaning of the content of the participant’s story, however, it is recommended to include notable non-verbal expressions such as laughter and significant pauses (Smith et al., 2009). It is important to note that the interviews in this study were originally transcribed in a very detailed way, including word repetitions, filler words, slang and false starts. However, some sentences were edited to increase their coherence when citing in paper as recommended by Kvale (1996).

Data analysis

The analysis in this study followed the steps outlined in IPA methodological literature (Smith et al., 2009; Smith & Osborn, 2008; Smith, 2004). The authors were aware that their own professional backgrounds and personal standpoints might influence the interpretation of data and they aimed to adopt the insider’s perspective and an open explorative stance as much as possible.

Firstly author [*author 1 initials removed*] read and re-read the interview transcripts. This was followed by noting initial observations and comments in the right-hand margin of the transcript. Descriptive comments were made to describe the content. Linguistic comments revolved around the participants’ use of language and conceptual comments “focused on engaging at a more interrogative and conceptual level” (Smith et al., 2009, p. 84). Following this emergent themes were identified and noted in the left-hand margin (Smith et al., 2009). Author [*author 2 initials removed*] independently checked coding and emergent themes in the transcripts to ensure these were grounded in the data.

The emergent themes were then listed and the authors looked for connections between them, drawing important themes together, discarding others and introducing structure which facilitated further analysis (Smith & Osborn, 2008). As recommended by Smith (2004), transcripts were analysed in detail one-by-one first before attempting to conduct analysis

across the cases and looking for convergence and divergence. A table of superordinate and subordinate themes with transcript line numbers and key words for each transcript was produced followed by a master table of themes (Smith et al., 2009) which reflected the consensus between both authors.

Finally, verbatim quotes from the interviews were included for transparency to demonstrate that the themes were grounded in the accounts of the participants, and enable the reader to trace the analytical process and make their own judgement of the interpretations made (Brocki & Wearden, 2006).

Results

The teachers talked openly about various mental states that may arise in the context of meditation, which they experienced themselves or were reported by their students. They described their students' experiences with compassion and respect to their confidentiality. The teachers' language was rich with metaphors and idioms. When discussing these experiences, they situated themselves in their particular traditions and brought in specific terminology to explain them.

Participants reflected on how they got involved with teaching meditation. While each participant's path to becoming a teacher was different, their stories shared a common element of gradual development and continuous learning throughout their spiritual journeys. They expressed commitment to meditation practice and spiritual community which was seen as a way of life.

In order to avoid imposing authors' own terminology when describing the participants' meaning making, the themes were named using quotes from the participants. Three superordinate themes emerged from the data: "experiences are always unique... like a fingerprint", "things are arising, continuing, passing away" and "we never walk alone". Each superordinate theme and its subordinate themes are described in detail below and supported with extracts from the interview transcripts.

Experiences are always unique... like a fingerprint

This theme was named after the quote taken from the interview with the participant T2 where he pointed out that everybody would have a specific experience "because everybody is unique, has a different karma, has a different life style pattern". The theme encapsulates a

range of different experiences that may be encountered by persons practicing meditation or that manifest spontaneously. When describing phenomenology of these experiences teachers used concepts deeply rooted in the traditions they represented.

All participants talked about deep relaxed or calming states which may arise as part of one's spiritual development such as feelings of floating when someone is in a deep relaxed state which can be understood as a "development of a meditative mind (T1) or "satori" which may feel like "dropping away of worries and anxieties" (T3). Gentle spiritual awakenings according to participant T2 manifested in his students as "a great realisation for what's happening around them, in their life, around their lives. A real feeling of things not quite making sense".

Participant T1 also described what he called "powers of the mind", consisting of supernormal hearing or vision, ability to read others minds and see the past lives, which one can develop in more advanced stages of meditation practice.

However, the teachers also discussed a variety of phenomena that some of their students or themselves found distressing. "Things from the past" emerged as one of the subordinate themes from the interview with the participant T3:

T3: I've definitely encountered a lot of people who have had disturbing things come up from their past while they're sitting. ...myself I've had things while I'm sitting memories that I'd forgotten ever happened that cause me anxiety sometimes that just come up. ...some people had a lot more suffering in their past and sometimes that suffering comes up during zazen, and sometimes it can make them very upset or very depressed because they thought they've put those things behind them.

T1 was approached by some students who heard voices during their meditation practice: "I heard someone was just talking". T3 also encountered some people reporting similar experiences, which she explained as "makyo", as described in the Zen tradition:

T3: Literally it means (pause) the home of devils (both laugh) and it refers to extreme mental states, it refers to people who sit and experience hallucinations, voices, visions, sights, feelings that are tangible ...and the idea in Zen is that makyo arises sometimes and you have to recognise it as makyo, as a delusion ... whenever you talk about makyo, you're talking about something, which is not helping you.

Participant T2 introduced the concept of Kundalini awakening, which according to him, can be an overwhelming experience to people and can manifest in ecstatic or disturbing ways or can even “end badly” for some. One of his students, for example, experienced “moments of tears, moments of happiness” and felt she “was dancing and sharing that”. However, his own Kundalini awakening was a frightening experience, which he struggled to make sense of when it occurred unexpectedly:

T2: I woke up in the middle of the night very very early. ...and I heard some movement. ... like sofa being dragged and shelves being moved ...I started to feel very scared I became very very hot I was very very sweaty and very short of breath ...the sounds they got stronger, louder... I felt I was in an electric shock. My body started to vibrate very very fast and my hands were moving, my legs were moving and my teeth were (chatters his teeth) chattering like this. ...I am thinking, what’s going on? ...I’m trying to scream but I couldn’t open my mouth and then there were lots of images of blood and of death, and of cutting. I was soaked in the images. Felt like a dream of sorts ...I didn’t really understand what was going on for me. I needed a way to get out of my head, because you feel like you’re going crazy.

Participant T2 also reflected on how the distress manifests in people who had spontaneous extreme experiences when they start interpreting them through the lenses of their mind:

T2: The way people deal with the unknown... (pause) it’s a feeling of being out of control. So it’s a feeling of not having control of something, when normally they’re in control of everything, and I think that’s the alarming part. Is not the actual energy or the feeling um... it’s when the mind comes in, and starts to interpret... I think that’s what makes people to become... (pause) scared maybe.

All three teachers pointed out that not every experience is necessarily part of spiritual development and that sometimes it can indicate mental health difficulties. The degree of their certainty in being able to tell the difference between the two varied:

T1: If someone is extremely disturbed with those experiences, then I would say definitely that’s a kind of mental health issue. If someone is so relaxed and sharing it, that’s part of the spiritual development. It’s very clear!

T2: I would say that at the moment I wouldn’t be able to tell one hundred percent if somebody is either clinically psychotic or if they are having a genuine spiritual experience.

T3: I don't think that it's possible (pause) necessarily for somebody outside (pause) to know truly whether somebody is experiencing hallucination or somebody has had an actual spiritual experience, which is something that they can use to deepen their practice.

“Knowing the person's background” emerged as a subordinate theme from all interviews, which enabled the participants to better understand the person's experience and help them accordingly. Participant T1 even incorporated mental and physical health screening interview into registration process for his silent meditation retreats.

Things are arising, continuing, passing away

The theme “things are arising, continuing, passing away” (T1), encompassed a number of subordinate themes, which reflected some common and unique aspects emphasised by the teachers in relation to the nature of things, which was grounded in the traditions they belonged to. The participants' philosophical stance contributed to the way they interpreted the experiences and also influenced their approaches towards dealing with these.

Both T1 and T3 often referred to the Buddha's teachings when explaining things to the researcher (“that's the Buddha's teaching”, T1) and emphasised the impermanence of states:

T3: All presently arisen states appear and disappear. In Zen, we talk about one thing which doesn't appear and disappear and that is that which is unborn doesn't die, which is our true nature, which is our Buddha nature. So everything else is impermanent.

“Letting go” emerged as a subordinate theme from the interviews with both Buddhist teachers. It describes their approach towards dealing with various mental states that may arise in one's meditation practice. They believed that one should let go of any kind of state be it distressing or calming:

T1: If you are seeing any images, they are images. Consider them as events of your mind. So then let go, come back to your breath and pay your attention to the body and bodily sensations and noticing your thoughts as thoughts, your feelings as feelings.

T3: It doesn't matter what your experiences are, you can't hold onto them. Otherwise, your practice stops, otherwise, you start grasping and rejecting. ...And any time you try and grab a hold of anything, it evades you (laughs). So you have to be willing to let go of everything.

Participants T1 and T3 were sceptical about those practitioners who became “caught up” (attached too much significance, became preoccupied) with their mental states or who shared these as achievements in public. They felt this was not a helpful thing for one’s practice. Participant T1 was against sharing his inner developments with lay persons and told a cautionary tale about a monk who did not listen to his teacher’s warnings, used his supernormal powers for mundane things and lost them as a result of that. Participant T3 explained:

T3: They’ve given them too much attention (pause) and as a result it probably led them into some very interesting delusions about themselves and the nature of things. ...they get so caught up in this idea that this is a good thing, and oh my goodness! ...when people do this practice a lot, sometimes they can have experiences which they can go, “oh!” flashy sort of, “oh I’ve had this great enlightenment thing!” (pause) If that happens, I always say to people, ...“what are you going to do with that, are you going to put that in ...a frame on a wall?”.

In contrast, participant T2, who came from a different tradition, frequently described Kundalini energy as highly powerful and equated it with electricity – “it’s like a charge ...either fuses you or burns you out”. He explained that in Kundalini Yoga teachings, “the emphasis was on strengthening your nervous system and your body, and your mind, connecting with something stronger and higher than yourself”. “Higher will” was a subordinate theme which emerged from the interview with him:

T2: I had this huge experience that I couldn’t forget, and trying then kind of almost bring back my old life together but the old life had gone ...I thought I’ve done my spiritual stuff and now I can go and live my life happily ...but spiritual (laughs) doesn’t work as smoothly as you want. It’s not your will, it’s somebody else’s higher will ...and this is the thing about the journey. I haven’t gone anywhere. I’ve been taken wherever I’m supposed to go.

According to T2, Kundalini awakening may be “a silent grace ...it’s like a blessing in some ways”. He believed that his experience was a gift and felt that Kundalini awakening “is sacred art as opposed to sacred technology or a method” that changes the way the person lives their life and relates to others. However, if the experience is not congruent with the person’s context and beliefs, they may not understand or appreciate it and feel distressed by it:

T2: But if the person has no understanding or appreciation for it, never asked for it, and it's just happening, then they would more than likely want to get rid of something they can't control because it starts to interfere with your life. Even a very gentle spiritual practice will in some ways interfere with your life. You will have to change maybe the way that you view and think about things... And somebody going through a big shift and energy and a big change in this way can feel completely disorientated. It's like plugging into the other half of you that you've completely ignored for many many years.

Being a trainee psychotherapist participant T2 he also reflected on the approaches of the discipline:

T2: It's about self-actualising, realising the self, connection to something higher. ... looking at your connection to spirit, to God, to yourself. ...and the way I work is to recognise and appreciate that aspect of the Other.

We never walk alone

All participants talked about the importance of having a teacher in one's spiritual journey, which ensures that "we never walk alone" (T3). This theme covers different aspects that participants ascribed to the teacher's role and its limits. It also encompasses various qualities of the teacher which the participants felt were important.

"Teacher as a mentor" emerged as one of the subordinate themes. Participants T1 and T3 felt that one's spiritual development should always be guided by a teacher:

T1: Therefore, for the meditation for spiritual development, find a proper experienced spiritual teacher to guide this, to get the guidance.

T3: It requires that you have a teacher who you regard as a mentor, and you agree to look to them and to walk with them on this path, and to take your guidance from them ... I think that it's very difficult to get deeply into this practice unless you (pause) have some sort of a guide.

The teacher's role as a mentor consisted not only of providing guidance and advice but also assessing the situation when the student is experiencing various extreme mental states and helping them examine their own ideas in a different light. Furthermore, it was felt that teacher is not only a mentor but also a "spiritual friend" who "helps you on this path" (T3). Another subordinate theme "teacher as a guardian", someone "who's got our back" emerged from the interview with participant T3 where she reflected about her own role as a meditation teacher:

T3: So my job as a meditation teacher is to protect this practice, and part of protecting the practice is protecting the practitioners. ...All we can do is look after each other and do the best that we can to protect each other and our practice, and our health - mental and physical.

All participants discussed the essential qualities of a teacher and considered the teacher's experience to be important:

T2: Somebody who has some experience of spirituality and meditation. Somebody who has been practicing maybe for a number of years, somebody that (pause) somebody that understands.

T3: Even knowing that he's been doing this thing off and on for ...40 years now I find that encouraging and so I gain a lot ... I find his practice encouraging.

Having been a monk for three decades and having undergone extensive monastic and secular training, T1 felt the most strongly about the experience and qualifications of a "proper" teacher and warned about the dangers of incompetent teachers:

T1: If you don't know how to teach the next meditation technique for this person, I think that person is in danger ...you get the script and you read it, and if you have beautiful voice, then you need a Tibetan singing bowl (laughs) and become a mindfulness teacher (laughs). But from your heart you know that you don't have that personal experience. You are reading someone else guided meditation notes! You haven't developed it yourself. Therefore, my advice is: please take the qualifications or the experience of this teacher.

Participant T2 emphasised that a teacher needs to have "compassion and a warm heart", especially when someone is experiencing Kundalini awakening: "it's so intense you really need that love and that holding and that caring".

Teachers T1 and T3 were very clear about the limits of their knowledge and their role as meditation teachers as well as what meditation practice was not for. The subordinate theme "I'm not a qualified mental health professional" emerged from their reflections on the inability to provide clinical advice to their students:

T1: Not being a clinically trained person you can't give clinical judgement to the meditator. This is ethically and practically wrong. ... I don't teach mindfulness for people who had more

than three episodes of depression because if something was wrong, I can't handle because I am not a health professional.

T3: My job is not to dig in and I am not a qualified psychotherapist, not a qualified psychiatrist. ... if there's something going on inside your head, I can't tell if that's something that's going to cause you harm or not.

Both teachers did not recommend meditation practice to those who were going through difficult times or already had mental health difficulties and felt that meditation should not replace medication and teachers are not there to replace doctors and therapists. They also believed that those meditation practitioners who become greatly disturbed by the extreme mental states they experienced during meditation should seek qualified help. Mental health professionals and their expertise were spoken of with respect:

T1: Maybe someone in the second or third episode of depression or ... grieving time, relationship broke down, and this kind of very difficult mental situations. Then I wouldn't recommend this kind of silent retreat ... Fifty percent of people, who had been to here, didn't like to take Prozac ... my advice is – you need medication! Don't stop your medication due to any reason until your health professional says to do so. ... When I teach meditation for people who got depression, then my co-teacher is a GP, a health professional. So it's a nice team.

T3: If somebody is already in a fragile state, I don't recommend zazen to them because that could be too much ... If you find these disturbing, I would urge someone to seek a qualified therapist. To seek somebody out who can help them through a difficult time.

However, participant T2 felt that health professionals may take a technical approach towards those who are going through a spiritual crisis or Kundalini awakening:

T2: You're dealing with the scientific mind that wants to help you. They want to help you but they have their way of helping, the only way they know. They may even be open to what you're saying but ... the way they're there to help you is to prescribe, diagnose and to get you back on your feet and up and running. Whereas sometimes one needs ... just to be heard, just to be understood, just to be told that ... it doesn't necessarily mean that you're going mad or that there's anything wrong.

He also believed that when the number of Kundalini awakenings increases, clinicians will need protocols to be able to help them. As a trainee psychotherapist he shared various

approaches that can be used to help the person such as normalising the experience and grounding techniques: “long walks, good food, plenty of water, rest, sunlight, sitting near trees ...gardening”.

Discussion

Main findings

This study explored the experiences and views of three meditation teachers from different traditions (Theravada Buddhism, Zen Buddhism and Kundalini Yoga) who encountered extreme mental states either in their own or their students’ meditation practice. The teachers spoken to acknowledged the phenomenology of these states and conceptualised them according to the traditions they belonged to while cultivating a non-judgemental attitude towards them.

Three superordinate themes were identified in the data. Diverse phenomenology of extreme mental states was described by the participants who also explained the nature of things from the philosophical point of view of their traditions. All participants emphasised the importance of having a teacher or spiritual guide in one’s spiritual practice and shared a range of ways of helping persons with extreme mental states that they would use.

Comparison with literature

Participants from the Buddhist tradition encountered extreme mental states such as hearing voices, seeing visions and having unusual bodily sensations in their students’ meditation practice. Participant T3 conceptualised these phenomena as “makyō”, which in Zen Buddhist tradition are understood as an unhelpful experience. Both teachers also emphasised the importance of “letting go” of extreme mental states and guarded against getting caught up with them, or in other words not becoming preoccupied with and not attaching too much significance to these experiences, which could lead to difficulties. These findings are consistent with Kornfield (1979, 1994) and VanderKooi (1997) who documented a wide range of unusual somatic, visual and mental states reported by meditation practitioners and suggested that one should be open to these phenomena with a full awareness (Kornfield,

1994). Over-identifying with, clinging to these experiences, admiring or fearing makyo was seen as potentially hazardous and obstructive to one's spiritual development (VanderKooi, 1997; Kapleau, 1980).

The phenomenon of Kundalini awakening, vividly described by participant T2 in this study, has also been reported in the literature. Various signs of Kundalini awakening, which may arise as a result of spiritual practice or occur unexpectedly, such as spontaneous body movements, abnormal breathing patterns, sensory experiences and intense emotions, have been documented by Sannella (1987) and shared in autobiographic account by Krishna (1985), who remarked that he “had to live suspended by a thread, swinging between life ...and death, ...sanity and insanity” (p. 17).

This study also highlighted the importance of having an experienced teacher in one's spiritual journey that could guide and support the student and walk with them on their spiritual path. As Kornfield (1994) put it “guides and teachers drawing on ancient traditions can understand and assist our journey when we ourselves are lost” (p. 231). Furthermore, Lomas and colleagues' (2015) qualitative research study found that not having a teacher to guide meditation practice and help interpret arising experiences contributed to feelings of distress and extreme fear when meditation practitioners encountered episodes of unusual mental states.

However, the limits of the teacher's knowledge and their role were also pointed out by the participants T1 and T3 who saw themselves as not qualified enough to provide therapeutic support to students distressed by the extreme mental states and were willing to refer them to mental health professionals. Moreover, participant T1 introduced screening for the attendees of his meditation retreats which is similar to the calls made by Lustyk and colleagues (2009) advocating safety of meditation practitioners. In contrast, participant T2, who was a trainee psychotherapist himself, felt that clinicians who tend to take a technical approach (diagnose and prescribe medication) require specific protocols, more sensitive to spiritual experiences, in order to fully help the person. He suggested supportive listening, grounding exercises, validation and normalisation of one's experiences. This is in line with transpersonal psychology and psychotherapy approaches that focus on supporting spiritual growth as well as dealing with personal difficulties (Bagdon, 1990) in the case of extreme mental states that are conceptualised as ‘spiritual emergencies’ (Grof & Grof, 1989a). Psychiatric treatment and diagnostic labelling here is seen as potentially harmful and hindering one's spiritual growth (Grof & Grof, 1989a; Johnson & Friedman, 2008; Lukoff et al., 1995).

Furthermore, the difficulty with differentiating between genuine spiritual experiences and mental health problems emerged from the interviews with the teachers. This echoes the debates in the existent literature. It has been suggested that while traditional approaches tend to view spiritual experiences as pathological, there is a similar danger of “spiritualising psychotic states” (Grof & Grof, 1989, p. xiii). Attempts have been made to develop criteria for differential diagnosis of spiritual experiences (Johnson & Friedman, 2008). Transpersonal psychologists have also achieved the inclusion of a diagnostic category “Religious or Spiritual Problem” in the fourth edition of the Diagnostic and Statistical Manual of Mental Disorders (Lukoff et al., 1998).

On the other side of the debate is the argument that “neither experience is a self-evident datum”, and that spiritual experiences or mental illness do not exist independently as “two distinct natural phenomena “out there”, but are interpreted through sociocultural lens (Littlewood, 1997, p. 67). Therefore it is paramount to consider values, beliefs and interpersonal context of the person when making sense of these experiences (Jackson & Fulford, 1997; Heriot-Maitland et al., 2012). All participants in this study emphasised the importance of knowing the person and their background in order to help them better. This could be a good starting point for teachers, therapists and clinicians who encounter these experiences in their practice and aim to help their students or clients.

Strengths and limitations

This is the first study to our knowledge to employ interpretative phenomenological analysis to explore the views of meditation teachers who experienced or encountered extreme mental states in their practice. This hermeneutic approach allowed for nuanced exploration of the phenomenology of extreme mental states that is often obscured by discourses present in the published case reports. We avoided using terms such as ‘psychosis’ or ‘spiritual emergency’ in the interviews and tried to suspend our preconceptions about these phenomena. At the same time we acknowledged from the outset that our background and beliefs would influence the interpretations to some extent. To demonstrate that the themes were grounded in the data, extensive quotes from the interview transcripts were provided.

As the focus of this study was the phenomenology of experiences that have a degree of intensity and the ways to respond to these, the interviews did not capture the deeper more expanded experiences of the Self and what changes might occur for the individual in relation to their environment. This could be explored in future studies with long-term meditation

practitioners. Furthermore, the professional background of the participants (e.g. T2 being a psychotherapy trainee or T1 conducting stress-reduction courses) may have influenced the language they chose to describe their experiences. Different set of participants may have chosen other discourses to express their views.

The small and fairly homogenous sample dictated by the method in this study could be considered a limitation as it may not allow for transferability of the findings to a wider context (Pringle et al., 2011). Future research could focus on exploring experiences and meaning making of a larger number of meditation practitioners and teachers from a range of cultural traditions. Mix methods studies combining larger scale surveys of people with extreme mental states with insights gained from qualitative methods could also be valuable.

Implications

The focus of this exploratory study was the meaning-making of meditation teachers who had encountered extreme mental states in meditation practice either themselves or in their students. The findings demonstrate that there are a range of frames of reference utilised when conceptualising these experiences that may be distressing to some individuals but also can change the way they relate to the world. The meanings of these are often grounded in the cultural and philosophical traditions the person belongs to. Acknowledging these diverse understandings of the phenomenon of extreme mental states and cultivating a non-judgemental attitude towards them may help support individuals experiencing these.

Furthermore, the study highlights the importance of finding a way for these different cultural contexts to interact and communicate in order to fully support persons with extreme mental states. Bridges between different cultural contexts are already being built in the West by incorporating Eastern philosophical concepts in psychological therapies. For example, Acceptance and Commitment Therapy (ACT), which includes elements of mindfulness, encourages people to embrace various psychological phenomena that arise without avoiding or clinging to these and focuses on tuning into one's personal values (Hayes et al., 2006;). It has been found to be effective in helping people to deal with a variety of distressing experiences (A-Tjak et al., 2015; White et al., 2011). Another example is Razaque's (2014) work in promoting mindfulness approaches among clinicians and his clients. After practicing meditation for a number of years and having experienced extreme mental states in meditation himself he felt he was able to better relate to his clients' distress. According to him, "we all

possess a vulnerability to mental illness and ... the potential for awakening. ...one cannot exist without the other” (p. 48).

Contextualising the person’s life situation, their beliefs and values, and respecting the tradition they belong to become paramount. With the number of people practicing meditation in the West increasing a more supportive environment should be created for people to integrate their extreme experiences more easily where spiritual teachers, therapists and clinicians work collaboratively.

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