

AN ESALEN TEACHING STORY

Esalen is an international, cross-cultural exchange of people, ideas and human potential experiments. It was here that I learned about the Basque culture. I was particularly intrigued by the training that the children receive. At age sixteen those that feel called for the task go on a year walk, a year alone in nature that they embark on with only a very minimum of survival tools. They train for two years prior to the year walk. In the history of the Basque culture there have been only five children that have not survived. The bodies were found and teaching stories grew up surrounding each death. In that way the loss of life was not in vain. Rites of Passage necessarily imply some risk, usually they involve death on a symbolic level and often extreme methods are used that mimic and even approach biological death. This is part of the process and it is usually worth the risk for all the individuals involved. Those few that do die teach us, the living. If no lesson is learned, if the death remains a mystery or if several alternate explanations might be true, then a subtle fear is bred—and it festers until the real lesson is learned. This process is rather like an unconscious repression finding a way to manipulate behavior until it surfaces, is recognized and then is resolved.

Over the years Esalen has seen several members of its' community meet untimely deaths. Esalen is on the edge, and some people have gone over the edge, literally and figuratively. The most recent death occurred several months ago and involved a woman under the influence of LSD. What follows in this essay is the beginnings of a teaching story.

J. was a work/scholar. She was hoping to improve the feeling tone of her life for she was deeply unhappy and had quite a few unresolved problems at home. At various points in her life she had contemplated suicide. Esalen would, she hoped, help her resolve some of her conflicts. She came here with a strong intention to do some inner exploration and was attracted to the idea of doing an LSD trip with eyeshades and headphones. Several other work scholars were asked to be sitters for her and they agreed. They had an understanding that the trip was to be kept internal for six hours and that the eyeshades and headphones were not to be removed.

Her first trip was with about 300 micrograms. She had a little trouble adjusting to the changes happening within her but as a whole she spent the first four hours going deeper into her images and her self. At a certain point four hours or so into the trip she encountered a profound unhappiness and deep pain and was unable to contain the emotions within. She took off the eyeshades and headphones and the rest of the trip was spent avoiding and running from her feelings. The next day she looked back at her experience with a deep disappointment. However, the encounter with her own unconscious had shown her the efficacy of the technique and she decided to try again. Her sitters were very reluctant to participate because they felt that she had ignored their original agreement to keep the experience internal. After much reflection they agreed to sit for her once more. They thought that she had control over her impulse to avoid and they made the same agreements about keeping the trip internalized.

Three weeks after her first adventure she ingested about 350 micrograms with the same two sitters. The pain and suffering that she had struggled to avoid the first trip came back almost immediately. It was once more too much for her to feel. After forty minutes she took off the eyeshades and headphones.

With an increasing desperation she said "I've got to hurt myself." As the intensity of the inner images rose she resisted more and more violently. She pounded on the window with her fist. She rolled off of the bed onto the floor and intentionally hit her head against the floor and the bed. The sitters placed a pillow under her head to protect her from herself. She refused to internalize the experience and posed a great problem to her sitters. As her panic rose she demanded to leave the room and go outside into the environment, even though she was clearly unable to cope with the physical and political realities outside the room. Even for Esalen her behavior would have been temporarily unacceptable. Fearing for her safety her sitters refused to allow her to leave and attempted to remind her of their original agreements. That failed and she physically attempted to leave the room. She was restrained and not allowed to leave. After a period of time she lay back down on the floor. The pillow was under her head. The eyes were not put back on but the pillow covered her eyes a little. Music by Mozart was played. Surprisingly, she lay quiet. There was no sign of a smile on her face, or of relaxation in her facial muscles. However, she seemed by her lack of physical motion and by her quiet manner to be experiencing some sort of a breakthrough. She lay quietly for about an hour.

Ironically, she was experiencing a breakthrough of a kind. Her sitters noticed that she had stopped breathing. They attempted artificial respiration and felt that first they had to purge her body of a quantity of air that was difficult to push out. To their horror, the sitters realized that J. was dead. Five and a half hours had elapsed since she began the trip. Now we the living are left with a mystery that demands to be examined with a great deal of clarity.

The first attempt to understand the death was the performance of an autopsy. Unfortunately this only made the mystery deeper. No physical cause of death was found. There was no heart attack, no burst blood vessels in the brain, no poisons in the LSD (Other people took trips from the same batch and felt that the acid was clean), no choking on vom or blood, no internal bleeding, there was nothing that could be found that would cause death. The cause it seems is entirely psychological.

The experience gathered from the mystical traditions throughout the ages and from scientists who have observed thousands and thousands of LSD sessions indicate that the experience of blissful states of awareness do not carry within them the seeds of biological death. In thousands of legal and controlled LSD sessions with terminal cancer patients and with deeply unhappy and disturbed people not a single fatality or near fatality occurred. Many of those people experienced intense fear and anguish and felt as if they were dying. The experience of ego death most often seems to be confused with biological death to the experimenter. The actual experience of death while under LSD in an unpremeditated manner is a phenomena that my knowledge has occurred only one other time out of millions and millions of LSD trips that have happened since the discovery of LSD in 1942.

J.s' death was a suicide. She made an internal decision. We can only wonder if she knew the ramifications of her choice; if she was totally ignorant then her death can be seen as an accident. A.A., a psychic, felt that J. was in the middle of a hellish vision, a no exit BPM 2 experience, and saw an old bearded man who looked a bit like Father Time. He offered her peace and quiet if she would join him. She felt deeply misunderstood by her sitters and felt that no one had understood or cared for her in her life and that no one would care in the future. She chose to go away with the

robed, bearded man, but was unclear about the lethal aspects of that decision. She had an inkling but was uncertain. Clearly, the no exit quality of her inner experience was reinforced by the no exit tone of the external experience, and her feelings were amplified to panic proportions. M., her sitter, after great personal anguish and much thought, felt that he did indeed face such a choice. He felt that she was aware that death was indeed part of the peace that she sought. We will never know for sure.

There are, however, a few critical lessons that can be learned.

Any work with LSD must be voluntary. Agreements should be made between the sitters and the experiencer to keep the experience internal if at all possible. Removing the eyeshades and headphones should be discouraged, but if the experiencer needs to reconnect with the outside reality his/her request for support should be met with compassion. The contact should strengthen the person to help them in their confrontation with difficult aspects of their unconscious. No blame should be communicated to the tripper nor any disappointment with their inability to keep the experience internal. The sitter should ideally have no fear of entering similar spaces within him/herself or else that subtle fear will be communicated to the experiencer and the sense of fear and panic will increase. The moments that people reach out from their trips are the very moments where the art of the sitter is demonstrated.

If the experiencer refuses to stay internal due to an overwhelming fear the sitters next responsibility is to protect the person from dangers in the external reality of a physical and political nature. This is very difficult, extremely tiring and not very satisfying for the sitter. This responsibility essentially involves babysitting, yet each experiencer should be respected for their decision as to how much of their unconscious they can handle at any particular time. The wisdom of the process itself must be listened to,

even if the process attempts to abort itself. The sitter should take every opportunity to gently guide the experiencer back into an internal mode, but must not force. Force can and must be used to protect the experiencer from dangers in the external reality.

The most awesome lesson is the realization of the the incredible power of the human mind to regulate and influence our physical nature. The potential to create hell on earth rests within our minds. The delicate act of unfolding, the beautiful art of the therapist, the job of the sitter is to help in the manifestation of heaven on earth.

J.s' death will remain shrouded in mystery. We, the living, must learn what we can and carry on the process of assisting the Phoenix to die and be reborn.