

**An Exploration of the phenomenon of the Awakening experience and its effect on mental
health**

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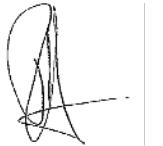
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I would like to thank most profusely my supervisor Steve Taylor for his support and advice and encouragement. Special thanks also to all of the participants who shared their personal experiences with such trust and openness.

DECLARATION

This dissertation and all its contents is my own work with the exception of cited references to other research and published work.

A handwritten signature in black ink, appearing to read "Ronan Rooney". It is written in a cursive style with some loops and variations in line thickness.

Ronan Rooney

July 2021

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ABSTRACT

This dissertation was an exploration of the phenomenon of the awakening experience followed by a focus on the effects on the participants mental health. It encompassed a psychological study adopting the phenomenological method of research and applying the interpretative phenomenological approach.

Purposeful sampling was carried out approaching individuals known to the researcher who had awakening experiences and mental health challenges. Seven participants were interviewed using a semi structured approach encompassing 10 questions.

All of the participants reported a sense of blissfulness and connection to something greater. All of them also experienced turmoil preceding the awakening experience and a positive effect on their mental health following the experience.

Keywords

Awakening, Spiritual Awakening, Spiritual Emergency, Spiritual Crisis, Mental Health, Depression, Consciousness, Phenomenology, Stress.

INTRODUCTION

Introduction

Awakening experiences have been termed as such because they represent a ‘waking up’ from our normal conscious states which have been deemed to be restricted by virtue of their rigorous mental structure which dissolves in the awakening experience. They have been defined by many as a higher state of consciousness (Taylor 2010).

In my study to date of the subject of awakening experience I have been personally inspired by the work of Steve Taylor (2010, 2013) who has documented at length the awakening experience.

The importance of this study can be understood when one considers that awakening experiences are predominantly described as blissful experiences. They dissolve our sense of separateness and instigate a feeling of connection to a greater or higher reality. The writings of White (1999) about awakening experiences who called them exceptional human experiences are also very apt. Awakening experiences bring us more in line with our natural surroundings and help us to ‘see things as they really are’ breaking down the perceptive limitations of the normal physical senses and unearthing our intuitive senses to decipher a greater sense of being and connection to same. Awakening experiences expand our consciousness and present the world around us as a vibrant living entity which we are in co-creation with giving a deeper sense of purpose to life. (Ferrer. 2002, 2008, 2010, 2011, 2017) They dissolve our idiosyncrasies and unearth our true self to us. This then is further supported by Kant the German philosopher who suggested that our awareness of reality is determined by the structures through which we perceive it as reconstructions of the world we have built up from sense data called phenomena rather than the world itself. (cited in Hartelius, 2015)

Awakening experiences can be temporary or permanent. When temporary they induce a glimpse of a greater level of perceptive reality and when permanent have the power to totally transform the person. Taylor (2013c) explains “in permanent transformational experiences, a new, stable and permanent self-system is established, whereas in temporary awakening experiences the normal self-system remains intact, even if temporarily disabled”. (p.41)

Even more importantly for the world as a whole “as well as transforming our perception and our experience, waking up transforms our relationships and affects society as a whole, even the world as a whole.” (Taylor 2010, p.xvii). Moreover, “we are beginning to see awakening experiences as natural and innate, as having their source inside us rather than arising from grace or God.” (Taylor 2010, p.xix)

The importance of awakening experiences and the reason I chose this phenomenon to explore was inspired by Taylor’s (2010) definition of same as

“we realize that our normal vision of the world is incomplete and delusory. The world around us comes to life and is filled with a sense of well-being. We become aware that the whole world is pervaded with spirit-force (brahman), spilling over the boundaries between things and folding everything into oneness. We become one with this force and therefore one with all things. And at the highest intensity of awakening, absolute awakening, the whole material world melts away and there is nothing but an impossibly powerful and radiant and harmonious force which is the ‘Ground’ of the universe, the essential reality.” (p.216)

I truly related to this having had a number of awakening experiences and felt compelled to explore this phenomenon further. For me personally when in that awakened state my sense of personal well-being has been at its highest. The first awakening experience I had was at an inspirational personal development seminar in which we were engrossed in enlightening

meditations and content. I remember feeling connected to something much bigger than me and a sense of joy and calmness and profound understanding. Another, I had was in San Diego with Dr David Simon who facilitated a breathwork regression not unlike holotropic breathwork but involving a type of hyperventilation followed by a shift in consciousness in which I experienced my evolution as a human being from now back to the initial big bang almost like a movie. Again the aftermath was a feeling of interconnectedness and felling part of one greater entity of love. More recently last year just prior to the Covid lockdowns I travelled to India to spend 10 days in the Ashram of Sri Ramana Maharshi. After a few days of immersion in meditation in the ashram I experienced a deep stillness and connection to a greater power that I understood to be the essence of Sri Ramana's spirit and once again felt as one with all around me. The common denominator in all of these experiences was one of connection to something greater and a feeling of blissful content.

There is tremendous value in highlighting the positive attributes of awakening experiences on mental health.

I feel quite strongly that humanity is going through a paradigm shift by an evolution of consciousness towards a more evolved sense of awareness. It is the sense of awareness that strips back ego to unveil the interconnectivity of humanity that is the key I believe to the next level of human development. I am in agreement with Taylor (2017) who substantiated the importance and collective benefits for the entire human species by stating that "Our own conscious efforts to awaken are important to intensify the shift that is already under way. Our own personal evolution will contribute to the evolution of our whole species." (p.9)

Even in the corporate world more and more businesses, organizations and corporations are focusing on wellness and I believe it would be hugely beneficial to confirm the link between

the awakened state and positive mental health and wellness. More and more organizations and corporations are focusing on mental well-being and my intention is that this research might confirm the connection, correlation and benefits of the awakened experience for mental well-being.

The phenomenon of the awakening experience has always intrigued me and some of the biggest breakthroughs I've had in my life have come from awakening experiences. I have also experienced depression and mental illness and wondered if there is a positive link between the awakening experience and one's mental health.

Taylor (2010,) defined the awakening experience as a state of being in which," our vision of the world and our relationship to it are transformed, an experience of clarity, revelation and joy in which we become aware of a deeper (or higher) level of reality, perceive a sense of harmony and meaning, and transcend our normal sense of separateness from the world". (p.xix)

I wanted to explore the very universal essence of this phenomenon in its own right by comparing my experience with the experience of others with the added intention being highlighting the effects of having the experience on one's mental health.

The focus is to explore the phenomenon that is the awakening experience and to identify if there is a link and correlation between mental health and the effects of the awakening experience.

With mental illness rampant throughout the developing world and its catastrophic effects for those suffering from the illness I believed that if it was proven that awakening experiences improved one's mental health then it would be embraced and practiced by more. In addition, I also wanted to ensure that more people understood the awakening experience which in the past has been described by many in the medical profession as a psychosis. I hoped that this

exploration of the awakening experience would throw further light on the differentiation between the two.

The catalyst to choosing this topic was Taylor (2017) emphasizing the importance of awakening for humanity overall. “The fact that enormous collective challenges almost certainly lie ahead for humanity – most of them self-created by the un-awakened, egoic state of consciousness that still has the majority in its grip – should not be interpreted as an indication that a more widespread awakening is not going to occur”. (p.xi)

There is very little research and literature on the connection between awakening experiences and mental health specifically following the experience. The literature is mainly concerned with awakening experiences in general terms and the differentiation between spiritual awakening and psychosis of which there is much study and literature. In relation to mental health, the literature predominantly focuses on psychological turmoil preceding the awakening experiences. There is little research or literature on the positive aspects an awakening experience can have on one’s mental health. This study is designed to address this gap.

This study documents my research into the phenomenology of the awakening experience adopting a qualitative investigation and has provided real evidence of the link between awakening experiences and positive mental health. It therefore outlines how awakening experiences can be a positive effect for mental health and as such a much-needed tool or technique for combating mental illness which is so prevalent amongst society in general.

I chose a phenomenological approach since phenomenology includes the phenomenon expressed as a universal idea, from an exploration of a number of individuals who have experienced the phenomenon. The experience is explored in the context of the individuals

subjective experience and their objective experience having had something in common with the other participants and group members. (Cresswell 2018)

The method I chose as appropriate to this study was that of Interpretive Phenomenological Analysis (IPA) which focuses as such on the nature of experiences, beliefs, values as they are described by the person having the experience filtered through the social and personal lens of the interviewer. As such it is a double hermeneutics methodology with the participants attempting to make sense of their experience and the researcher thereafter attempting to make sense of that. I chose IPA because it emphasizes the role of the interpreter in assessing the inherent meaning of the experience and then focuses on identifying meaningful themes in the experience.

The Research Question

Do awakening experiences have a positive effect on mental health?

LITERATURE REVIEW

Literature on the direct link between Awakening and Mental Illness was not found. Of interest was when carrying out a literary review the vast majority of research on the subject has been on awakening experiences (and spiritual awakening in general), awakening as a transpersonal experience and spiritual awakening versus psychosis. There was very little found specifically relating to the link between awakening and mental health or depression and restricted to spirituality & mental health, spirituality & depression.

While there is some research on mental turmoil as a trigger for awakening (Taylor 2010) there is very little scientific research on awakening experiences and their connection to mental health after the experience.

The results section of this study contains confirmation of a number of shared phenomena with crucially for this study a direct link and connection with a positive effect on one's mental health after the awakening experience shared by all.

The Awakening Experience

Defined by Taylor (2010, p. xviii) as "A state of being in which our vision of the world and our relationship to it are transformed, an experience of clarity, revelation and joy in which we become aware of a deeper (or higher) level of reality, perceive a sense of harmony and meaning, and transcend our normal sense of separateness from the world". Most hold their awakening experience as the most important in their lives changing their life's perspective (Taylor 2018).

In 2008 a study by Stange & Taylor (2008) found that 80% of a sample study reported having profound ecstatic experiences.

Most awakening experiences result in a combination of permanent and temporary changes but with the underlying understanding and knowledge and experience of a greater reality and a process of transmutation involving a period of transition. (Assagioli 1989) (Taylor, 2018).

There have been other references to the awakening experience to Spiritual Awakening, Peak Experiences, Exceptional Human Experiences and Mystical experiences. Assagioli, R. (1989, p.37) refers to a spiritual awakening as "a harmonious inner awakening is characterized by a sense of joy and mental illumination that brings with it an insight into the meaning and

purpose of life; it dispels many doubts, offers the solution of many problems, and gives an inner source of security.”

Abraham Maslow (1964) referred to awakening experiences as “peak experiences” stating the potential for same to live a more self-actualized life. He also made distinctions “between peak experiences and the self-actualised state”. (Maslow, 1970) Maslow saw the “peak experience” was fundamentally a psychological experience which could be interpreted in religious or spiritual terms but could exist outside such interpretations...Peak experiences can be likened to “raw materials which can be used for different styles of structures, as the same bricks and mortar and lumber would be built into different kinds of houses by a Frenchman, a Japanese, or a Tahitian” (Maslow, 1994, p.73).

White (1999) studied awakening experiences defining them as ‘exceptional human experiences’ (EHE) “as a means of moving the experiencer away from a more or less exclusive identification with a self-bounded by the skin and thought of as separate from others and everything else.” Similar to those defined for the awakening experience Brown & White (1997) reported the top triggers to be meditation, crisis situations such as depression, spiritual emergencies and grief. White (1997) wrote about how working with ones EHE’s can have life transformative effects by refusing to ignore the unusual aspects of the experience which cannot be explained by conventional means and to thereby actualise the experience.

Awakening experiences defined as mystical experiences according to Crowley (2007) are “a transient extraordinary experience marked by feelings of unity, harmonious relationship, to the divine and everything in existence, as well as euphoria, a sense of noesis (access to the hidden spiritual dimension) loss of ego-functioning, alterations in time and space perception, and the sense of lacking control over the event.” Psychology and psychiatry have traditionally labelled

mystical experiences and spiritual visions as pathological (Lukoff, 2005). Taylor (2013b) citing William James (1985) definition of mystical experiences as “states of insight into depths of truth unplumbed by the discursive intellect. They are illuminations, revelations, full of significance and importance . . . as a rule they carry with them a curious sense of authority for after-time.” (p. 380) No distinction is made between psychosis and mysticism treating most non-ordinary states of consciousness with suppressive medication (Grof & Grof 1989, p.xi) (Campbell, 1989). Spiritual practices are associated with increases in spiritual or mystical experiences (Walsh & Vaughan, 1991). Even though mystical and psychotic experiences are two different categories there are phenomenological similarities. (Parnas & Henriksen, 2016). Psychiatric literature has explored parallels between mystical experiences and acute psychosis associated with schizophrenia (Buckley, 1981) while mysticism studies distinguish between mystical states and pathological psychoses (Stace, 1960). “The mystical nature of many experiences in non-ordinary states of consciousness puts them automatically into the category of pathology.” (Campbell 1989, p.5) but if properly treated they can result in spontaneous healing.

The sometimes-challenging nature of mystical experiences by their very nature can sometimes lead to a spiritual emergency (Lukoff & Everest, 1985). Spiritual emergencies then are sometimes the most challenging to differentiate from psychosis due to the symptomatic overlap with pathological psychosis.

Differentiating between spiritual emergencies and genuine psychosis is of utmost importance. Traditional approaches pathologize mystical states but there is also the problem of spiritualizing psychotic states and glorifying pathology or ignoring the underlying problem. (Grof & Grof 1989., p.xviii).

The perrenialists as argued by Taylor (2017) would hold that mystical experiences share certain essential features and in this regard Taylor (2016a) listed the common themes associated with the processes of spiritual awakening.

James (1986), described mystical experiences as “windows through which the mind looks out upon a more extensive and inclusive world. The difference of the views seen from the different mystical windows need not prevent us from entertaining this supposition” (p. 428).

Awakening as transpersonal experience

Ferrer (2002, 2008, 2010, 2011, 2017) presents the awakening experience as a spiritual knowing fundamentally as a transpersonal experience. Transpersonal means “beyond the personality”. (Schaub & Schaub, 2015, p,3). By being beyond the individual or personality its very nature then is a connection to something greater than the individual. This dissolution of the sense of separateness that is inherent in the transpersonal awakening experience is supported by Ferrer’s participatory approach.

Ferrer’s (2002, 2008, 2010, 2011, 2017) participatory approach “holds that human spirituality essentially emerges from human co-creative participation in an undetermined mystery or generative power of life, the cosmos or reality”. Ferrer (2017, p10). It includes all aspects of the self and “presents an enactive understanding of the sacred that conceives spiritual phenomena, experiences, and insights as co-created events.” (Ferrer 2011, p.2)

What is occurring is a spiritual co-creation which is transpersonal and beyond the individual self. An understanding of this connection then beyond the self to something greater is invaluable.

In developing a deeper understanding of the awakening experience as a transpersonal experience Ferrer (2002) proposes that “transpersonal phenomena can be more adequately understood as ‘multilocal participatory events’. In other words, I am suggesting that what has been commonly called a transpersonal experience can be better conceived as the emergence of a transpersonal participatory event.” (p.116).

He contends that the transpersonal experience then comes as a result of a preceding transpersonal participatory event. “the emergence of a transpersonal event precipitates in the individual what has been called a transpersonal experience”. (p.116).

In correlation with Ferrer’s (2002, 2008, 2010, 2011, 2017) participatory approach is Taylor’s (2017) description of the awakening experience as” the expression of something greater than you, of a force that is flowing through you.” (p.40).

The understanding then presented with the participatory approach is that the awakening experience facilitates spiritual development in the person having it, by being initially awakened, then receiving a spiritual knowing, thereby being transformed and from this transformation is then able to partake in the participatory process which is evolving.

Since “the participatory approach affirms an underlying undetermined mystery or creative spiritual power as the generative source of all spiritual enactment’s” (Ferrer, 2017, p.17) the individual realising the interconnection to this will find it challenging to revert to their old individual sense of separateness.

In the context of a wider collective perspective and collaboration of Taylor’s Awakening experience and Ferrer’s participatory approach a common theme emerges. What presents itself is that the awakening experiences are emanating from a transpersonal participatory event which

involves a spiritual co-creation of growth and development in the realms of the individual, external world and transpersonal.

There are clear similarities in what Taylor (2017, p.251) defines as “An evolutionary leap” and describes as “a collective awakening” with what Ferrer (2002, p.vii) defines as a paradigm shift and describes as, “the emergence of a human community formed by spiritually differentiated individuals.” (p.15).

Spiritual Emergency & Psychosis

Psychosis has been defined as ‘any one of several altered states of consciousness, transient or persistent, that prevent integration of sensory or extrasensory information into reality models accepted by the broad consensus of society, and that lead to maladaptive behavior and social sanctions’. (Nelson, 1994).

Crowley (1989) discusses the challenges in diagnosing between spiritual emergency and psychopathology because the unusual behaviors can appear as mental disorder.

Randal & Argyle (2005) spoke of “The phenomenology of what might be interpreted as a “spiritual emergency” by the person or by an informed clinician, can be identical to other psychoses” (p.2)

Grof & Grof (1989) concur; “Some of the dramatic experiences and unusual states of mind that traditional psychiatry diagnoses and treats as mental diseases are actually crises of personal transformation or spiritual emergencies.” (p.x) Moreover, spiritual emergencies have positive potential as opposed to diseases with biological causes and medical necessity (ibid) and can result in emotional and psychosomatic healing, creative problem-solving, personality transformation, and consciousness evolution. (Grof & Grof 1986). Viggiano & Krippner (2010)

add that “the Grof’s model of spiritual emergencies was ahead of its time and that the medical establishment needs to catch up”.(p.118)

Assagioli (1989) noted the association between spiritual practices and psychological problems and Campbell (1989) noted the importance of treating spiritual emergencies as such in order to realise the potential for growth and healing.

The leading author on spiritual emergency is Stanislav Grof whose definition of spiritual emergency is “both a crisis and an opportunity of rising to a new level of awareness” (Grof & Grof, 1989, p.x). He proposes that “spiritual emergencies have a positive potential and should not be confused with diseases that have a biological cause and necessitate medical treatment”. (Grof & Grof, 1989, p.x). If properly understood and properly supported, they are actually conducive to healing and transformation’. (Redwood, 1995). Spiritual emergency is a process of deep psychological change often with non-ordinary states of consciousness. (Cortright, 2007). Individuals having a powerful spiritual emergency are at risk of being hospitalized as psychotic (Lukoff, 1985) and so it is important to have the distinction between spiritual emergency and a psychotic episode. Taylor (2013c) reported that “the concept of a latent higher-functioning self-system may help to distinguish states of spiritual crisis from states of psychosis. (p.41) There are many cases where the persons spiritual crisis process has been interrupted by psychiatric medication leaving them feeling as if they have a mental disorder. (Cortright, 2007). It is true that there are resemblances between spiritual emergencies and psychotic experiences. (Grof & Grof, 1989, 1990; Lukoff, 1985, 2005) but the treatments are very different. Powerful spiritual experiences can be at risk of hospitalization for psychosis (Lukoff, 1985). Hospitalization may be required for psychosis (Grof & Grof, 1990) whereas a safe and supportive setting such as a retreat center is provided for an individual having a spiritual emergency crisis to fully experience

the process. (Cortright, 2007). Furthermore, incorrect diagnosis and treatment can exacerbate the spiritual crisis (Whitney, 1998).

Transpersonal psychiatrists who have perceived of the human psyche as beyond the traditional reductionist model and incorporated other subtle modes of consciousness have conceived of ‘spiritual emergency’ (Crowley 2007). As a result, the neurobiology of psychosis must be expanded and redefined in order to include consciousness (Crowley 1980, 2007).

As a result of the Spiritual Emergency Network concerned with the pathological stances being adopted by most mental health professionals a new category known as *Religious or Spiritual Problem* was categorized by the Diagnostic and Statistical Manual of Mental Disorders (4th Edition APA, 1994) (Lukoff, Lu, & Turner, 1998).

Depression & Mental Health following an awakening

There was little literature found that specifically focused on the positive aspects of mental health following and as a result of an awakening experience. Miller (2013) spoke of a spiritually lived relationship with a higher power being the best antidote to depression. The literature focused on mental health challenges from those who were frustrated at not being able to ‘get back to’ the awakened state. In extreme cases the reaction by the person not being able to return to the exalted state of consciousness experienced in the awakening, results in a state of depression and despair. A person can also succumb to psychological challenges including insomnia, exhaustion, emotional depression, aridity, mental agitation and restlessness. (Assagioli 1989)

The two main challenges experienced by those going through an awakening experience can be defined as psychospiritual. Psychological turmoil can be the initial trigger. Further

psychological trauma can prevail thereafter as a result of an inability to sustain the awakened experience and a reversion to old past habitual un-awakened thought patterns.

Taylor (2017) refers to both when citing Roberts (1993) describing the wakeful state as “a new dimension of knowing and being that entails a difficult and prolonged readjustment.” (p.13).

The ‘new dimension of knowing’ refers to a deeper understanding of the awakening experience while the ‘prolonged readjustment’ refers to the ongoing challenge of remaining in that ‘readjusted’ or ‘awakened state’.

Taylor (2017) endorsed the importance of this ‘knowing’ or intellectual understanding stating the “importance of possessing an intellectual framework to make sense of one’s wakefulness. Without this, wakefulness can easily be overridden by confusion and frustration”. (p.73). “If awakened individuals don’t understand the process they’re going through (or have been through) their wakefulness will be overlaid with doubt and they may even try to suppress it.” (p.159).

Assagioli (1989) paid special attention to the relationship between spirituality and mental disorders. He describes when the personality is unable to cope and assimilate the inflow of light and energy and that there is an inrush of spiritual energy which becomes overwhelming.

The importance and collective benefits of awakening experiences for the entire human species has been substantiated by Taylor (2017, p.9) stating that “Our own conscious efforts to awaken are important to intensify the shift that is already under way. Our own personal evolution will contribute to the evolution of our whole species”. Taylor (2017) presents the case for the emergence of a collective awakening and refers to the inner dimension of evolution defining this as “the increasingly physical complexity is mirrored internally in the expansion of awareness and the intensification of consciousness. In these terms we can see evolution as a process by which

living beings become increasingly conscious and aware both of the world and of themselves. “(p.251).

In a similar context in the theme of evolution Ferrer (2017) contends that the “participatory approach aims at the emergence of a human community formed by spiritually differentiated individuals.” (p.15). He differentiates between a spiritually differentiated person and the disembodied modern self by describing the former as having an “embodied, integrated, connected and permeable identity whose high degree of differentiation far from being isolating actually allows him or her to enter into a deeply conscious communion with others, nature and the multidimensional cosmos.” (p.15). The latter he describes as “disembodied, plagued by alienation, disassociation, and narcissism.” (p.15).

A unification of both suggests that a paradigm shift in human spirituality is occurring. Initiated by a major shift in intellectual thought which brings about psychological turmoil which then acts as a trigger for an awakening experience.

An understanding of the participatory approach provides the initial understanding of the awakening experience which dissolves the challenges of personal psychological turmoil by providing an intellectually reasoned understanding of the experience. Thereafter, the deeper understanding that the awakening experience is actually a spiritual co-creation and emergence of spiritual knowing coming about as a result of an underlying transpersonal participatory event provides greater depth and understanding beyond the personality or individual self.

The penultimate understanding from the three dimensions of spiritual cocreation then ensures the full understanding and knowing is embodied within all aspects of the person to secure the continuity of the awakened state and consequential participatory spiritual co-creation.

Other Literature reviewed

Some of the other interesting literature reviewed included an article by Newberg & Waldman (2019) which involved using phenomenological data from spiritual awakenings experiences combined with neuroscience. The positive impact of spirituality on mental health was explored by Kliewer & Saultz (2018). In addition Albert (2017) carried out a phenomenological study of detailed self-transformation following a mental health crisis.

Taylor (2013d) refers to another phenomenological study he conducted with very similar results to this study. The predominant primary shift was sudden following intense psychological turmoil and forming a new sense of identity with a new permanent psychological state and major life changes. (p.43-44)

Rationale for this study

The research thus documented fills a gap in the literature research to date in the positive effects on one's mental health following the awakening experience. The aftermath of the awakening experience has not been researched specifically in conjunction with positive mental health.

This was a qualitative study with an idiographic focus exploring the phenomenon of the awakening experience and how it affected the participants generally and their mental health. On the basis that phenomenological research aims to uncover patterns and differences in human experiences while at the same time conveying its richness and fullness (Valle, 1998) the phenomenological research methodology was chosen.

METHODOLOGY

Phenomenology is a philosophy initiated by Edmund Husserl (Husserl 1917, 1970). It focuses on what it is actually like for the person having the experience and how it appears in their consciousness. The phenomenological approach was therefore deemed the most suitable. The focal point of the study was an exploration of the phenomenon of the awakening experience itself.

This research delved into the traits and characteristics of the awakening experience to explain the lived phenomenon itself with the added advantage of perceiving it in accordance with its effect on mental health. The initial focus was on the phenomenon that is the awakening experience and the awakened state, but it has then explored the link between this and mental health. This was ultimately a phenomenological study comprising an initial exploration of the awakening experience and its effect on one's mental health using the interpretive phenomenological approach (IPA) for the research. It begins with a human experience phenomenon and having collected data from those who have experienced the phenomenon the researcher develops a common composite description of the essence of the experience for all. This takes the form of "what" and "how" they experienced it. (Moustakas, 1994).

Cresswell & Poth (2018) describe Phenomenology as the common meaning which all of the research participants experience for a specific phenomenon culminating in a description of the universal essence of the phenomenon experienced. Van Manen (1990) describes its purpose as a "grasp of the very nature of the thing". (p.75)

Features of phenomenology include the phenomenon expressed as a universal idea from an exploration of a number of individuals who have experienced the phenomenon. The

experience is explored in the context of the individuals subjective experience and their objective experience having had something in common with the other participants and group members.

The fact that this related to a study of how individual participants experienced the awakening experience and how they interpreted it and applied it to their lives resulted in adopting the phenomenological method.

Interpretative phenomenological analysis (IPA) was chosen as the appropriate method to study the phenomenon of the awakening experience and its effects on mental health as the relationship between the person and society thereafter.

IPA focuses as such on the nature of experiences, beliefs, values as they are described by the person having the experience filtered through the social and personal lens of the interviewer. As such it is a double hermeneutics methodology with the participants attempting to make sense of their experience and the researcher thereafter attempting to make sense of that. I chose IPA because it emphasizes the role of the interpreter in assessing the inherent meaning of the experience and then focuses on identifying meaningful themes in the experience.

Design

This work sought to explore the lived experience of awakening and how specific individuals were affected by the experience and how they integrated it into their lives thereafter. It was a qualitative study with an idiographic focus exploring the phenomenon of the awakening experience and how it affected the participants generally and their mental health.

As a result, the interpretive phenomenological approach was perceived as the most suited. In IPA the researcher uses intuition, insight and reflective observation to identify meaning in the data analyzed. (Smith et al, 2009).

Thus, the qualitative aspect of the study had an idiographic focus, in order to explore the ‘lived experience’ of the awakening experience.

Smith et al also noted the importance of having ‘voices heard’ that might otherwise not be heard. In the context of the misinterpretation of awakening experiences as psychotic episodes this is fervently important.

In phenomenological research the aim is to uncover patterns and differences in human experiences while at the same time conveying its richness and fullness. Valle (1998) The study followed four parts as outlined by him.

1. The problem or phenomenon and the background to the study
2. Data Collection via interview transcripts
3. Data Study involving coding and transcripts analysis
4. Reporting on findings

Sampling

As recommended by Polkinghorne (1989) I interviewed seven participants (five women and two men) of different age and nationality. The participants were chosen from those who I had connected with through my work and studies as individuals who I understood had had an awakening experience and sourced from my close contact base with interests in personal development and spirituality.

Name	Gender	Country
P1	Female	Ireland
P2	Male	Azores

P3	Female	Azores
P4	Male	Ireland
P5	Female	UK
P6	Female	UK
P7	Female	Ireland

[Table 1]

I initially connected with each of them and outlined told them “As part of my master’s degree I am embarking on a dissertation and wondered if you have had an awakening experience and would like to take part as an interviewee and participant. The title of the dissertation is ‘An exploration of the phenomenon of the awakening experience and its effects on mental health’. If you would like to take part and feel you qualify then please confirm. Might I also confirm it is totally confidential, you can withdraw at any time and I have a psychologist available at any stage should you wish to engage with her”.

Whilst I understood this was a purposeful sampling strategy resulting in a small homogenous section of the population, I felt it was appropriate as I understood they had all had awakening experiences and mental challenges and so qualified for the study.

Once they confirmed their agreement I followed up with an email presenting the definition of an awakening experience as defined by Taylor (2010, p.xviii) “A state of being in which our vision of the world and our relationship to it are transformed, an experience of clarity, revelation and joy in which we become aware of a deeper (or higher) level of reality, perceive a sense of harmony and meaning, and transcend our normal sense of separateness from the world” and asked them to confirm they had had an awakening experience and were comfortable and

willing to partake in the interviewing process. I explained that the interview would begin with a short meditation to reconnect with the awakening experience followed by a series of questions about the experience.

The interview began as outlined with a guided meditation to relax the participant and to guide them back to re-experience their awakening experience. The participants were asked two broad questions (Moustakas, 1994): What was your experience of this awakening? How did it affect your mental health? This took the form of a number of open questions.

I created questions to encourage elaboration and disclosure to get to the very nature of the experience. Furthermore, I was mindful of the participants persona as they spoke and cognizant of the sections where greater emphasis was expressed.

The process of analysis involved gathering, confirming and organizing the data, conducting in-depth read throughs, coding and organizing themes and interpreting them. (Cresswell & Poth 2018). The themes were then analyzed subject to the four-phase protocol proposed by Finaly (2013).

- 1. “Seeing Afresh”. Remaining open and avoiding pre-conceptive tendencies in analyzing the interview transcripts**
- 2. “Dwelling”. Delving deep into the interview transcripts to identify meaning**
- 3. “Explicating”. Comprising of common themes being extrapolated from the transcripts into a common description of the phenomenon.**
- 4. “Languaging”. Describing the phenomenon in words.**

This sample of seven participants was chosen from a known close group who had all had an awakening experience and mental health challenges. The sample were contacted about the study explaining in full the reason for the research question, the interview procedures and confidentiality etc. Once chosen the participants were emailed a participant information sheet and asked to sign the participation consent form. They were then emailed confirming their interview time and date which included the definition of an awakening experience by Taylor (2010) to facilitate their recollection of the experience. I was cognizant of the fact that awakening experiences can be hugely personal and life changing and as such I emphasized the aspect of confidentiality for them and reinforced the option that they could drop out of the process at any time. I also provided a psychologist to be engaged with personally by any of the participants should the need arise. All were interviewed in February via the Zoom and WhatsApp platforms and with a series of 10 questions about their awakening experience and the effects on their mental health. In summary, they were asked two main questions, to describe their awakening experience and to comment on the effects of same on their mental health. The interview was preceded by a meditation designed to reconnect the participant to their awakening experience. The initial questions then focused on the awakening experience itself, what it meant and what change and effect it had for the participant and how they integrated it into their life. Then the final questioning centered on the connection between the experience and their mental health. The interviews were transcribed within 2 days of each interview and emailed to the respective participants for approval in advance of the data analysis. The data was then analyzed to identify common themes which were thereafter coded and ranked in order of appearance.

There seems to be different forms and levels of awakening. Gradual awakening “provides ample opportunity for people to build a framework to make sense of their experience” (Taylor

2017b, p.158) and same combined with spiritual practice can be smooth and gentle. Sudden awakening can also be smooth if supported with a spiritual practice to make sense of it and a supportive environment to allow it to evolve. All of the participants in the study experienced a ‘sudden awakening’. In most cases sudden awakening which Taylor (2017b) calls ‘spiritual crisis’ is challenging. (Taylor, 2017b, p.157).

Taylor (2013b, 2013c) distinguishes between temporary awakening where the ‘self-system’ is temporarily disabled and ‘suffering induced transformational experiences’ (SITEs) which are permanent awakening where it is replaced altogether. In the former the psychological structure remains but in the latter it dissolves. (2013c, p.41)

The main benefit of a permanent awakening is that it is more embedded in the psyche replacing the ‘self-system’ altogether and in so doing ensures lasting transformation (Taylor 2013b). The challenges are that most cases of permanent awakening come about as a result of turmoil and trauma (which all of the participants experienced) and so in the absence of support can present difficulties.

Ethics

I studied Hendrik Geldenhuys' paper on 'Applied Ethics in Transpersonal and Humanistic research', The Humanistic Psychologist Vol 47, No.2, 112-135, The American Psychology Association, 2019 and abided by its recommendations. I also studied The British Psychological Society 2009, code of Human Research Ethics, 2010. I also referred to the Section 9 of the Code of ethics of the European Society for Transpersonal Psychotherapy (ESTP, 2016).

I was very conscious of my ethical responsibilities for this dissertation agreeing at the outset to the MSc Ethics Release Form (Appendix no. 3) which was signed by both my supervisor and me.

The participants were each presented with a briefing meeting and document including the procedure involved, informed consent, benefit and managements of risk and privacy and confidentiality. With regard to informed consent, which is the right to refuse and withdraw without prejudice (British Psychological Society, 2014; Richards & Schwartz, 2002; Sales & Folkman, 2000; World Medical Association, 2001). I was mindful to have an in-depth discussion about this prior to the interview (Kaiser, 2009) to ensure they were comfortable sharing the information and happy to continue with the consent. I kept the process documented (Lamb, 2013; Ortlipp, 2008). Each of the participants were sent a participation information sheet (Appendix 1) and then signed a participation consent form. (Appendix 2)

In relation to benefit and management of risk I was continually mindful of the need to ensure the process was beneficial to the participant. More specifically I was concerned with the management of a number of aspects of risk which were to be considered and for which mitigation measures needed to be in place. The risk of triggering a spiritual emergency or

distressed emotive or mental state as a result of the questioning process in the participant was to be countered by my own skills as a Transpersonal Coach with a psychologist also made available free of charge to the participant if required. As an added benefit I also included a free Transpersonal Coaching session to each participant to help with any challenges following on from the research process.

The risk of me being pulled into the experience having had both a Spiritual awakening and Depression was also considered and for this reason Bracketing (Moustaka 1994) was decided upon to safeguard against same. Having experienced personally the awakening experience and mental health challenges preceding the experience and same challenges falling away after the experience I was cognizant not to allow my preconceived bias to interfere with the study and analysis. I also ensured I had my Transpersonal Coach and Psychologist available to me.

I considered the issue of sharing with the participants that I had a number of Spiritual Awakening experiences and Mental Health and Depression and reflected on the balance between the benefits of sharing this with them and avoiding coercion or undue influence as a result. I decided that the benefits outweighed the risk and included my story in the initial meeting and briefing.

To avoid personal bias and to stay focused on my purpose and motivation to do the research I had regard to Guillemin & Gillam, (2004) adopting Reflexive Ethics aware of the content and process at all times. (Braud & Anderson, 1998). This Reflective practice involved using my Transpersonal coaching skills to hold the space, maintain rapport, sustain mindful awareness of the Self, the participant, the interaction and any other element significant in the process. (Dangeli & Geldenhuys, 2018).

The interviews

The interviews were all conducted during February 2021 via Zoom for all but one which was conducted via WhatsApp. They lasted between 28 mins and 59 mins. All were recorded and transcribed. (Appendix 4)

From a phenomenological perspective the focus should be on the meaning of the experience to the participant and their personal interpretation of same. (Smith et al 2009) and so I was mindful to facilitate elaboration by reducing my input to just the questions without engaging in a full conversation. The participants were all encouraged to speak freely and elaborate as much as possible with very few interruptions. All of them spoke freely and extensively. I engaged in active listening, empathy, encouragement ensuring trust and openness (Rogers 2003). All of the participants shared a willingness to share their experience on the basis that it might help others, and all were very grateful for the opportunity to express their experience in a formal way.

This was a challenge, and I used my Transpersonal coaching skills to remain quiet throughout most of the interview to allow the space for the participant to engage fully and expand their contribution. There was a structure number of questions to be covered but other than that a free-flowing elaboration was encouraged. Some of the participants continued onto answer some of the other questions yet to be asked and so some were therefore not repeated having already been covered. Further it wasn't necessary to follow them strictly in order (Flick 2002) and some of the wording of the questions was changed to suit the specific interview and participant and their comments. There were 10 key questions as follows.

1. How long ago was your awakening experience?

2. What was it like? Describe it.
3. What did it mean to you?
4. Would you define it as a positive or negative experience?
5. How do you think you have integrated it into your life?
6. Was there any change in you as a result of having this experience?
7. Did it change the way you think about life?
8. Did your awakening experience have a positive effect on your mental health?
9. How long did it last?
10. Describe how it positively affected your mental health.

The first question which was preceded by a meditation designed to reconnect the participant with their experience asked them when their awakening experience was and was designed to focus them on one specific experience. This was followed by an open question encouraging elaboration. There were then questions concerning what the experience meant to them personally and in their lives and how they had been changed as a result of having the experience. The questioning developed into how they had integrated the experience into their life. Then the questioning finished up with the effects of the experience – how long it lasted and how it affected their mental health.

Data Collection

The focus of the study was a qualitative approach. All of the interviews were transcribed within two days of the interview and emailed to the respective participant for approval. This was followed by in-depth immersion and analysis of common thematic structures within the data. The

transcripts were then coded adopting thematic content analysis (Anderson & Braud 2011; Cresswell & Poth 2018).

I adopted ‘bracketing’ (Moustakas, 1994) to counter the effects of my predeterminations and conceptions. Conscious of my own awakening experiences I was mindful to block out as much as possible my preconceptions and interpretive tendencies. This proved challenging as I felt a deep connection to each participant as they shared what I related to as many commonalities with my own experiences. In addition, I had personally experienced a mental breakdown prior to my most recent awakening experience and same was the motive for choosing this topic of study. I was mindful to ‘bracket out’ as much as possible my own mental challenges and experiences while analyzing the data.

As Smith et al (2009) outlined the researchers preconceptions, previous experiences and can have an effect on the interpretation thus arrived at and so I was conscious of same and attempted to remain aware of the possibility of my personal beliefs and experiences affecting the interpretations arrived at. I understood as outlined by Smith et al (2009) that there could be no complete objectivity especially with the researcher themselves setting the goals, sampling, questions. Furthermore, my past experiences and history, beliefs and expectations could also be a factor. However, I also accepted that this form of research is a co-creative process between researcher and interviewee.

Whilst having recovered from a psychological breakdown eighteen months previously it was very much to the forefront of my interest and so quite possibly a factor affecting my interpretation. I, however, saw this as an advantage specific to the connection between mental illness and awakening that I could share with the participants at the outset, and which would facilitate in them sharing more openly the connection between their awakening experience and

their mental state or illness. In this regard I was very conscious of the connection between mental health awakening experiences and spiritual crisis or emergency (Grof 1989). I was aware that many of the participants had experienced trauma in their lives and so I was overly conscious of the possibility of a triggered spiritual crisis or emergency developing from a reminder of the trauma and mental challenge the respective participants may remember. The contrary was also prevalent in my mind that because of the intensity of my mental illness I may be prone to actively seeking same collaborative experience with the participants. I attempted to remain unbiased as much as possible in respect of same remaining focused on the task and present moment without becoming enthralled in the descriptive passages of the participants.

Coding

I reviewed all of the transcripts multiple times identifying themes relevant to the research question (Cresswell & Poth 2018) and finalizing thematic descriptions thereafter represented by codes. Initially this took the form of ‘seeing afresh’ by reviewing the recorded interviews while reading the transcripts and highlighting instances of high emotion, coherence and other somatic tendencies. The initial codes were highlighted with words and symbols. (See Appendix 5) The transcripts were re-read (dwelling) and themes began to emerge. Attention was drawn to instances of high emotion and emphasis in the language used by the participants. Physiological, emotional and physical responses were noted and collaborated with the transcripts. Congruency was also noted in some statements that were affirmed and reaffirmed and so allowed greater weighting. Repetition of certain words was also noted. I was also conscious to ‘bracket out’ my own identifiable preconceptions which proved a challenge as some of the references moved me emotionally as I concurred and empathized with the participants statement from my own

experiences. Further ‘dwelling’ on the themes resulted in a further conglomeration of themes into a more condensed table of superordinate and subordinate themes.

The themes were then confirmed (explicating) as outlined in Table 2. What followed was the ‘Languaging’ by putting the results into wording.

Superordinate Themes	Subordinate Themes
Change, Growth, Transformation	Calling & New Path Permanent & Integration
Connection	Something greater than myself and All One Expansion Spiritual presence
Trigger for Awakening	Turmoil & Depression Nature Surrender & Self-Healing
Effects of Awakening	Positive Emotion, Sense of Peace & Trust Shedding & Ego dissolution, True Self emergence Intense perception & emotion

RESULTS

Overview

All of the participants experience heightened trauma preceding the awakening experience two from grief and bereavement, two from a challenging incident in the sea, one from depression and two from psychological trauma (one of them an NDE).

P5 and P4 were processing deep grief and bereavement. P3 had a near escape in the sea and P6 had a challenging episode with a Dolphin in the sea. Interestingly P4’s awakening experience also involved dolphins swimming along the boat side. P7 was suffering from

depression since childhood. P1 was suffering from psychological turmoil while P2 also suffered psychological turmoil from being shot at during a tour in the army.

Themes

Change, growth, transformation & integration

All of the participants held a common positive growth referred to by Tedeschi, R., & Calhoun, L. (1998) as “post-traumatic growth” (PTG) and more positive and fulfilling relationships, a more positive self-conception and attitude to life (Fosse, 2005 cited by Taylor 2013b).

They all experienced transformation after intense psychological turmoil which Taylor (2013b) referred to as “suffering induced transformational experience (SITE) (p.1)” which Taylor (2013b) refers to as “sudden and dramatic experiences rather than gradual” (p.2).

All of the seven participants reported a calling or change to a new path in life or new perspective for living. P2 said, “I was led to Reiki” (191) and “eventually I was led to shamanism” (200). P3 told how she was “knocked off the path” (192). P4 spoke of being “put on a path of looking for healing” (169). P7 “kicked off all of these new journeys” (314) and “knew what I wanted to do”. (346) P5 “started learning reiki” (219). P1 “came back to Ireland and...started to follow a very different path” (273-274) and P6 said, “how it changed me was he showed me that I could trust”. (298)

The change was permanent for most of the participants with some confirming they had become a different person and had integrated fully the change into their lives. P2 “I was a different person” (237) and “It is my life” (268), P3 “it never left me” (259), P4 “it’s still

affecting me today" (340). P5 told how it "did change me, but it wasn't like it went away and suddenly I didn't have that impact anymore". (377-378)

Connection

Connection was mentioned 41 times in total and by all participants. All of the participants referred to a sense of connection to or part of something greater than themselves or being all as one.

P3	This almighty peace way bigger than me We're all part of that divine oneness There's also collective that I feel that you can connect with	116 162 278-279
P4	You are just part of this massive thing You just felt one with this big entity that you're in You see yourself as being very very small but as equal a part of that universe as anything else	134 160 236-237
P7	And we're all one	150
P5	An Inner knowing of being connected to something greater than myself I am again connected to something much greater	278 354
P6	You are your essence or whatever you want to call it, your consciousness.... it's very nothing and everything at the same time	216-218

While there were also three participants who referred to expanse and expansiveness as part of this connection.

P5	This massive sense of expansion...I felt like I was expanding and expanding and expanding. And I was just so in touch with that sense of expansion. That sense of expansion	157-158 224
P1	It was a state of transcendence, a state of expansion	197
P6	It's an expansion its expansive... it's just expansive Left me being able to expand. It was an expansive experience.	225-226 317

In discussing the sense of connection as a characteristic of the awakening experience Taylor (2018) refers to it as “a transcendence of separateness” (p.129). This is in correlation with Taylor (2017) “the expression of something greater than you, of a force that is flowing through you.” (p.40).

Awakening experiences are Transpersonal beyond ego and as such dissolve the concept of separation reinforcing the interconnectedness and unity with universal energy. As Taylor (2010, p.31) described “We only experience separation because we’re out of touch with the spiritual essence of our being.” It is this connection to one’s own spirit, spirits and a spiritual presence that emerged on numerous occasions.

P2	I could see the spirits looking in The spirits started coming The connection with spirits and stuff started to come back to me again And then the spirits started coming again In some way the spirits organised that my spirit their spirit my ancestor's spirits are there to do whatever needs to be done	159 197 217 229 279
P3	My spirit wanted me to do something more I feel that you truly surrender to make room for your spirit It's an embodiment of the spirit that occurs I noticed the presence of spirit That's where spirit can use your mind as a tool	182 198 210 219-220 309
P4	It felt like it was a spiritual shift	318
P5	An inner knowing of being connected to something greater than myself and feeling a spiritual presence Sense of expansion I was very much on the spiritual path	278 224 243
P1	A state of expansion	197
P6	It's just expansive It was a spiritual experience It was an expansive experience	226 272 317

Triggers for Awakening

There are many possible triggers for awakenings. Taylor’s (2010) research ranks psychological turmoil highest (23.6%) followed by nature (18%) and then meditative practices

respectively which concurs with Hardy's (1979) research (Taylor 2013b). Taylor (2018) found that the most common trigger of awakening experiences is 'psychological turmoil' or "and that one-quarter of awakening experiences occurred in situations of stress, depression and loss. Interestingly, all of the participants in this study fall into this category experiencing trauma leading up to the awakening experience in the form of psychological turmoil including depression, grief and near-death experience.

Depression was mentioned a total of 20 times by three of the participants with suicide and suicidal tendencies also mentioned by three of the participants as part of their depression.

P2	That led me to post traumatic stress, suicidal tendencies to depression And then that led to depression it led to suicidal stuff Depression was the bad unknown thing back then The easiest thing to do was leave I had depression for a few years To go into that depression	184-185 238 285 292 343-344 360
P3	There are a number of times I could have left	230
P7	No matter what I did to get out of my depression I was doing everything you're supposed to do to get out of depression Well, I was extremely depressed I wanted to get out of this depression It explained all my depression	106 108-109 177 264 447
P5	The depression in the past would be a sense of numbness	394
P1	I wanted to die	250-251

Taylor (Ibid) refers to the second major trigger being nature which is interesting since six of the seven participants had their experience connected to nature or natural surroundings. Hardy (1979), Laski (1961), Johnson (1960), and Hoffman (1992) found many awakening experiences induced by nature. P5 was experiencing grief and then the retreat in nature further triggered the experience. P7 was experiencing depression and then working in a retreat/health center she experienced her awakening again a further reference to nature. P3, P4 and P6 had their experiences in water (the Sea) the former from a situation of intense stress and the latter from a

period of intense grief. P2 had his experience as part of a near death experience (NDE) but then went onto have further awakening experiences in nature. P5's trigger for her experience was a meditation on a retreat.

Two of the participants P5 and P4 reported grief as their trauma and one Paul from a near death experience (NDE).

The process of surrendering and self-healing was referred to by a number of the participants. P3 who found herself surrendering which escalated the experience "I feel that you truly surrender" (198) and P1 found herself "surrendering into the turbulence". (186) P2, P4 and P7 and P1 spoke of a self-healing that emerged. P2 acknowledged that "you can't save the world until you save yourself" (249), P4 "it put me on a path of looking for healing" (169), "I gave myself space to heal" (203), P7 said she learned that "you have to learn to heal yourself" (117) and P1 that "I am my own healer". (275)

Effects of Awakening

All of the participants reported their awakening experience as a positive one with a predominant reference in this regard to peace and trust.

P3	This almighty peace way bigger than me I was in the process of becoming this peace This peace, it's like this peace comes, it's just pure peace, but it's a being peace, I become this peace I had total trust and total peace	116 117-118 128-129 152-153
P5	Feeling just so at peace, I felt so peaceful Sense of really trusting.... such a sense of peace An underlying sense of peace	168 178 240-241
P1	There was just this feeling of total peace It was just peace I trust now, trust brings me through each time	192 202 341
P6	Where you completely trust and just let go I could trust	168 298

Three participants referred to a belief that everything would be all right.

P2	You look after me, I don't have to worry about that	278
P3	I knew it was going to be okay	152
P5	It was just feeling that I was okay, like a sense of I'm ok and everything's going to be okay	179-180

There were references to the Ego dissolving or shedding of its layers and a search and an allowance for the true self to emerge. P2 said he “shed part of myself” (210) that “it brought me into who I am” (251) that “he wasn’t the same person” (237). He “started to see who I was” (375) to finally arrive at the conviction “This is just who I am”. (379)

P3 referred to “when we peel back the layers to get to our true nature spirit that’s what’s underneath” (130-131) comparing it to “peeling away the layers of the onion” (196). She called it a “moving from the Egoic mind” (211) to “an opening of spirit and an awakening that allows you to embody why you’re really here”. (222-223) P4 also spoke of the Ego going “the Ego went with that” (209) and “a lot of that was beginning to melt away” (363-364).

P7 said she “was searching for something or a true purpose” (264) when she had her awakening experience. P1 was “not the person I was seven years ago” (324) and she experienced a “fracturing of my Ego sense” (359). P6 said, “I know I was very changed after that experience”. (249-250)

Many of the participants reported moments of intense perception before during and after the experience. P5 spoke specifically about “looking at the world around me and seeing it in quite a vivid way, colors being quite intense my sense being quite attuned”. (396-397) P1 ‘went from being Polaroid to being psychedelic in my colors. “Everything was bright. The light...I was seeing light in everything. My eyes, my body, my experience was incredible”. (431-433)

A sense of appreciation and the beauty of and connection to nature was mentioned by many of the participants.

P2	I used to do a lot of work with trees, I used to sit with this tree in Coole Park	371-372
P3	I always go thank the sea	171
P4	My hand was trailing in the water and I was getting lots of extra luminescence, so it was very tactile, very...the water was warm	125-126
P5	It was a Buddhist retreat center in the north of India and so really beautiful location. I just remember sitting on the step and feeling so at peace And also, be in nature a lot. ...just being really connected to the earth	166-168 249-250
P1	It was like the sky was bluer, the birds were, the sound of the birds was clearer, more vibrant. The green was greener. I could almost see the trees giving off energy.	433-434

Four of them specifically spoke of places of darkness before the experience.

P2	I'd fall to the dark and big black hole and I felt so alone and down in that dark hole and I was down in that real dark big hole I started to climb out of that dark deep hole They've been down in that dark deep hole I remember walking around to wear black clothes I burst out crying	158 238-239 250 259-260 263 289 317
P3	All the darkness I've seen, or so much of the darkness I've seen in me	129-130
P4	You felt like you were in the middle of this black, kind of dark ...space You're such a tiny speck on this planet and there's massive amounts more up there	118-119 135-136
P1	I sometimes felt like I was walking in a veil of darkness	229

A heightened sense of perceptive awareness was mentioned by all of the participants.

P2	I start to see the sun again...I was able to connect the energy	371
P3	There was phosphorescence in the water The grass and the trees started to talk to me I saw this energy in the room	113 248 275
P4	I saw all this photoluminescence, it's a kind of greeney blue Like you just feel part of this big blob My hand in the water and just the little streams of water behind, the little way from your fingers and that all turning bluey green	121 145 370-371
P7	seeing people in different way, having heightened awareness	114
P5	Walking down the street after that retreat feeling so elated	202

	The world around me seeing it in quite a vivid way, colors being quite intense, my senses being quite attuned	396-397
P1	I stopped being frightened of it I went from being Polaroid to psychedelic in my colors. Everything was bright. The light, I was seeing light in everything. My eyes, my body, my experience was incredible. It was like the sky was bluer, the birds were...the sound of the birds was clearer, more vibrant. The green was greener. Could almost see the trees giving off energy. Breathing...it was like living in a wonderland	284 431-435
P6	Up until that moment it was a bit scary	175

In addition, expounded emotions were reported prior to and after the experience by all of them.

P2	First of all, there was fear...and then there was anger I started to cry because I knew I'd come home	177-178 201-202
P3	It just brought me back into my body and of course I started to cry	140
P4	Very emotionally connected to it and I would say I felt a lot less lonely A very strong emotional feeling of being connected In terms of my emotional state.... I definitely wasn't as teary I found I had a different emotional tool set for dealing with stuff	161 164 276-277 279
P7	Still came home crying my eyes out This whole piece of hopelessness I was driven by fear of what they thought I relaised how much I was driven by fear Because my heart was pumping in my chest Very driven and nothing's going to stop you excited about life	111 178 224 229 324 387-388
P5	I felt so peaceful, so joyful Feeling so elated feeling so at peace A lot of emotions coming up. I would have a lot of tears, a lot of crying, a lot of intense emotions	168 202 360-361
P1	Moving beyond anger and resentment I became wild, I became sexual, I became aggressive Another dark night of the soul or a tortured emotional period	217 244 420
P6	My whole body was vibrating, and I was bellowing with laughter It's a very euphoric, freeing, timeless, weightless It was a heart experience My heart goes hot...it's like a heat...its actually like a burning sensation, but its also a warmth, it's a heartfelt warmth that just spreads across my chest.	157-158 214 231 239-242

DISCUSSION

Overview & Interpretation of Results

While there was some phenomenological data combined with neuroscience (Waldman 2019), the positive aspects of spirituality and mental health (Kliewer & Saultz 2018) and self-transformation following a mental health crisis as mentioned in the literary review section there wasn't any direct literature on the link between awakening and mental illness. This study has addressed that by highlighting the link between positive mental health with all of the participants following the awakening experience. In addition, there was little to provide any direct links between depression and awakening. In this study a majority of the participants suffered from depression prior to the awakening experience.

Similar to past studies highlighting mental turmoil as a trigger for awakening experiences all of the participants reconfirmed this with all of them suffering turmoil in advance of the experience.

In correlation with Taylor (2018) that the experience changed the persons' life perspective this was further substantiated by all of the participants having had real life changes to them as a result of the experience. In addition, as outlined by Maslow (1964) all of the participants came to live a more self-actualised state.

The unanimous reference to a deeper connection to something greater than themselves was in keeping with White's (1999) definition of the awakening experience and the turmoil suffered by all of the participants prior to the experience was also in agreement with his triggers for the experience.

All of the experiences had by the participants could very well be defined as mystical and so agree with the consensus thus presented for mystical experiences as awakening experiences.

The aspect and close correlation and distinguishment between awakening and psychosis did not materialize with the subject participants all of whom recognized their awakening experience as such and not as a psychosis.

The participants all reporting a connection to something greater and many spoke of a dissolution of the Ego. This is in keeping with Ferrer's (2002,2008,2010,2011,2017) definition of the awakening experience as a transpersonal experience beyond the personality which is triggered at a deeper level by the emergence of a preceding transpersonal participatory event of change. This further supports the suggestion that the emergence of these awakenings are an evolutionary aspect of our development referring to a co-creative participatory event similar yet again to Taylors (2017) evolutionary leap and collective awakening.

Some of the participants referred to challenges in explaining the awakening experience to others and society in general without being labelled psychotic which concurs with the volumes of literature previously referred to as the argument between spiritual awakening and psychosis.

The growth experienced by the participants as a result of treating the experience as a spiritual emergency as opposed to a psychosis was substantiated by all of the participants who all benefitted from doing so.

Similar to Taylor (2017) and Roberts (1993) who referred to challenges in integrating the changes some of the participants experienced prolonged adjustments while others had an immediate change and new dimension of knowing incorporated into their life.

I agree strongly with Taylor (2017) that our awakenings are important to contribute to the evolution of the species. This is further substantiated when one considers the improved lifestyles of all of the subject participants in the study.

Ultimately, the results from this study further substantiated Taylor's (2013d) phenomenological study whereby the predominant primary shift was sudden following intense psychological turmoil and forming a new sense of identity with a new permanent psychological state and major life changes. (p.43-44)

Conclusion & Implications of the Study

All of the participants experienced intense trauma, experienced a permanent transformation following same and had to "create meaning through forming a new narrative of their lives and thereby create a new sense of self." (Taylor 2013b)

They all had an experience as Taylor (2013b) describes as "The previous self-system is dismantled or dissolved, and a new self-system emerges to replace it, one with a new, intensified perception of reality, an increased sense of connection, new values (including a less materialistic and more altruistic attitude), and an increased mental stillness (i.e., less random or automatic thought-chatter)". (p.7) Many also experienced a 'dissolution of psychological attachments' (Taylor 2012a).

Every one of the participants reported a change in perspective in life and living or a new life path. All of them were complicit with Kilrea's (2019) definition of the awakening as "a permanent, marked transformation in one's sense of identity, relationship to others, and the world at large. It includes an intensification of present-moment experience, and a greater sense of connection with all humanity". (p.67). They all followed Taylors (2013c) hypothesis of a "desire to return to this dimension of meaning and harmony, which often leads to an interest in spiritual traditions and practices." (p.42)

P2 followed a new path in Shamanism. P7 went on the personal development path. P5 as a Reiki master and healer while P3, P4, P1 and P6 all embraced a new life perspective.

Leading up to the awakening experience three of the participants P7, P1 and P6 spoke of losing control while P2 felt he had no choice to make in changing.

Four of the seven participants reported that the effects of the awakening experience were permanent and never left them while two said they had lost the connection and one didn't comment on same.

An interesting commonality emerged with Shamanism being reported by P2, P3, P4 & P5 as the practice they took on after their awakening. Reiki was also mentioned by P2 and P5. P7's transformation came as she changed her lifestyle "I stopped drinking and got really focused" (349) and P1 found the "ability to open in love to situations that previously I would have been in a place of anger and unforgiveness". (213-214)

Of interest was the reference by many to the fact that it was a challenge to explain the pre and post experiences they had to society in general and the lack of understanding from society.

Having had the awakening experience P2 referred to the inability to discuss same in society (186-187, 255, 285-286, 291-292) as confirmed by Taylor (2018) who refers to a "reluctance to openly discuss awakening experiences because they don't fit easily within the materialist paradigm". (p.130)

P3 felt forced by society to follow a certain path (180-181) and said there wasn't the allowance for spiritual awakening in society. (241-242). P1 followed the experience but "it wasn't easy because the supports weren't there". (298)

From the outset the differentiation between spiritual emergency and psychosis is imperative. From a mental health perspective while all of the participants experienced

psychological turmoil preceding the awakening experience, as regards the link to mental health, many of them reported a quietening and greater control of the mind and improvement in their mental state with three confirming it healed their depression.

It had a positive effect on P2's mental health (285) and helped him get "out of the depression". (343) He reported "monitoring the thought forms coming into my brain" (350-351) and replacing the negative ones with positive thought forms and that he had "no mental issues now" (343) and that his "mental state is a lot stronger" (314-315).

P7 confirmed that it "helped me get over my depression" (362-363). P5 confirmed she "had a reduction in my depression" (322-323) and that she "felt less lonely in relation to the feelings of depression". (390)

P3 called it "a moving from the mind" (210) and that she was "no longer trapped in my head" (297). Asked the question if it positively affected her mental health, she answered, "Yes it did, definitely it did" (240), "My mental state is a lot stronger". (314-315)

P4 confirmed that "a lot of those things that I was thinking about at the time kind of just dissolved" (139-140) and he "started to learn to cope with things" (208) and had a "lot more relaxed attitude" (219) and "things that would've got me tense or stressed out or annoyed ...lessened quite at a quick rate". (231-232). In terms of his mental health "it definitely de-stressed my wellbeing" (262-263) and he became "a lot more relaxed". (291)

P5 said, "it took me away from the mind and all of the thoughts and the chatter and the dialogue" (180-181) and asked if it had a positive effect of her mental health, she answered "with mental health yes" (322) and that "depression, anxiety, helping me with my grief, it was huge". (358) P1 said, "it definitely helped me navigate my mental health" (408) and reported not taking "the mental constructs so seriously". (452) She concluded that "Now my mental health when I

have those loops, when I have those dips, I can hold space for that". (457-458) P6 when asked if it had a positive effect on her mental health answered, "Yes very much so". (379)

Limitations

One of the strongest limitations of the study was the inability to allow the participants to diversify into other awakening experiences. They all reported multiple awakening experiences and a more in-depth study in which all of them were recorded and analysed would have resulted in a greater strength of study. In addition, some of the participants mentioned that they had had other awakening experiences that they associated fear with. Rather than pursue this I made the choice to refocus the participant on the awakening experience that resembled closest the Taylor awakening definition presented to them at the outset that referred to it in the positive tense. In hindsight a part of me feels that since the participant brought up the fearful aspect of an awakening experience I should have delved deeper into it.

The inability to conduct the interviews in person would have to have had some adverse effect on the results with electronic means certainly not as conducive as in-person interviews.

Critique & Further Research

Due to the constrictions forced by Covid all of the interviews were conducted using the Zoom and WhatsApp platforms. The latter proved less reliable and some of the connection was a challenge breaking down fully on one occasion. This in addition to the absence of the personal presence in Zoom meetings resulted in challenges for identifying somatic responses etc. In person interviews would most probably have presented stronger levels of connection and thereafter engagement.

Further study would be appreciated addressing awakening experiences in the negative and positive to understand same from a deeper perspective so that a more balanced assessment of the experience could be reported. It could then possibly be confirmed if a fearful awakening experience is incorrectly labelled as such and is in fact a psychotic episode. Personally, my suspicion is that once worked on and incorporated and integrated there cannot be a negative awakening experience and this is an area of study that would be well represented.

There is little research or literature focusing specifically on the positive attributes and effects on personal health following awakening experiences. This study has presented same as a reality for this sample and to this end further research would be invaluable to society in general to expose the correlation and benefits of same.

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APPENDICES



Participant Information Sheet

Name of researcher: Ronan Rooney

Supervisor: Steve Taylor

Title of project: An exploration of the phenomenon of the awakening experience and its effects on mental health.

Purpose of study: I have had a number of awakening experiences over the past 20 years and believe them to have all been very positive experiences. However, I did suffer from depression and mental illness in 2019 and was curious to explore if there is a long term positive mental health effect linked to having an awakening experience.

Procedures and Participants Role: The procedure involved will consist of an initial meeting via Zoom to explain the procedure involved and to discuss any issues or questions the proposed participant might have. Then interviews will be held on the Zoom platform following the reading of the Participant Information Sheet and signing of the Participant Consent Form. The interview will begin with a guided relaxing meditation. Two main questions will be asked; "What was your awakening experience like?." and "Did the experience have a positive affect on your mental health?."

Confidentiality: Your details will be kept completely confidential and the only people having access to your information will be me and my supervisor Steve Taylor. You will not be required to give full names for this project. I will be allocating participant numbers followed by dates of birth to ensure anonymity.

Please Note:

All participants have the right to withdraw from the project/study at any time without prejudice to access of services which are already being provided or may subsequently be provided to the participant.



Participant Consent Form

An exploration of the phenomenon of the awakening experience and its effects on mental health.

1. I confirm that I understand the information provided for the above study. I have had the opportunity to consider the information, ask questions and have had these answered to my satisfaction.
2. I understand that my participation is voluntary and I commit to taking part in this study for 30 days that I am free to withdraw at any time, without giving a reason and that this will not affect my legal rights.
3. I understand that any personal information collected during the study will be anonymised and remain confidential
4. I agree to take part in the above study

By signing your name below, you agree to all of the above statements.

Name of Participant

Date

Signature

Name of Researcher

Date

Signature

Ronan Rooney

10/1/2021

A handwritten signature in black ink, appearing to read 'Ronan Rooney'.

Name of Person taking consent
(if different from researcher)

Date

Signature



Ethics Release form for MA/MSc Projects

All candidates planning to undertake research are required to complete this Ethics Release Form and to submit along with their Research Proposal. Please note the following.

- It is essential that you have an understanding of ethical considerations central to planning and conducting research.
- Approval to carry out research does not exempt you from Ethics Committee approval from institutions within which you may be planning to conduct the research, e.g. Hospitals, NHS Trusts, Local Education Authorities, HM Prisons Service, etc.

Please answer all of the following questions:

1. Has the project proposal and ethical considerations in draft been completed and submitted to the advisor or consultant?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2. Will the research involve an intervention or change to an existing situation that may affect people and/or an evaluation of outcomes of an intervention? If yes, have participants been given information about the aims, procedure and possible risks involved, in easily understood language? (Attach a copy of any info sheet you may have provided)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
3. Will any person's position, treatment or care be in any way prejudiced if they choose not to participate in the project?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
4. Can participants freely withdraw from the project at any stage without risk or harm of prejudice?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
5. Will the project involve working with or studying minors (i.e. <16 years)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
6. Are there any questions or procedures likely to be considered in any way offensive or inappropriate?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
7. Have all necessary steps been taken to protect the privacy of participants and the need for anonymity?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is there provision for the safe-keeping of written data and video/audio recordings of participants?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>



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8. If applicable, is there provision for de-briefing participants after the intervention or project?
9. If any specialised instruments, for example psychometric instruments are to be employed, will their use be controlled and supervised by a qualified practitioner e.g. a psychologist?
10. Will you need to put your proposal through an ethics committee related to your professional work?

Yes

No

Yes

No

Yes

No

If you have placed an X in any of the bold boxes, please provide further information:

Further Information:

10. Ethics approval sought by application

PARTICIPANTS QUESTIONNAIRE

1. Do you believe you had a Spiritual Awakening experience in the past?
2. How long ago was your Spiritual Awakening?
3. What did it mean to you?
4. Was there any change in you as a result of having this experience?
5. Did it change the way you think about life?
6. What was your mental health like before and after the experience?
7. Do you believe there was or is a link between your Spiritual Awakening experience and your mental health?
8. Would you define it as a positive or negative experience?
9. How have you integrated the experience into your life?
10. Have you a more positive or negative outlook on life as a result of your experience



Checklist

Indicate that each of the following steps have been/will be taken by placing a tick in the adjoining box.	
	✓
This project was approved by my supervisor	✓
Informed consent of participants was obtained	✓
For studies involving children or other individuals unable to give informed consent, the consent of a responsible adult was obtained (e.g., parent or teacher)*	✓
Participants were informed that they could withdraw from the procedure at any time	✓
Confidentiality was maintained at all times	✓
Participants were properly debriefed	✓
Participants were protected from harm	✓
This project was conducted in accordance with the conditions specified by the University Ethics Committee (applies to those projects requiring the approval of the Committee)	✓

* For children over the age of 8 **both** the child and responsible adult should give consent. Even where adults have given consent, children of any age should be free to decline to participate.

NB. Additional steps to obtain clearance for working with children will be required, and you must seek advice from your supervisor.

