



AKADÉMIAI KIADÓ

View, meditation, action: A Tibetan framework to inform psychedelic-assisted therapy

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ABSTRACT

Whether occasioned through careful, consistent meditative practice or through quicker means like the ritual ingestion of psilocybin or ayahuasca, global contemplative practices have established effective systems of implementing, directing, and integrating the very kinds of non-ordinary experiences central to psychedelic use. However, contemplative traditions are largely absent from the present discourse on psychedelic therapy. This paper addresses this gap and offers a novel analysis of psychedelic-assisted therapy through the lens of the Tibetan Buddhist contemplative tradition. It first establishes a baseline for comparing the non-ordinary experience occasioned by Tibetan Buddhist meditation and the psychedelic experience by referencing the phenomenological literature of both. It then articulates the Tibetan contemplative framework of *view, meditation, action* (Tib. *lta sgom spyod gsum*) as the way Tibetan Buddhism directs its non-ordinary meditative experience towards its desired ends and suggests how this framework may be applied to psychedelic-assisted therapy. Finally, this paper uses this Tibetan Buddhist lens of analysis to compare and assess two protocols for psychedelic-assisted therapy and to make recommendations for future clinical protocols. Given the phenomenological similarity of Tibetan Buddhist meditative experience and the psychedelic experience, this article suggests that a more intensive preparatory session where maladaptive conceptual narratives are worked through and beneficial ones are introduced, repeated dosing sessions, and a more directed psychedelic experience may increase the efficacy of psychedelic-assisted therapy. It thus argues that the insights of the Tibetan framework of *view, meditation, action* can improve future protocols and allow for psychedelic-assisted therapy to be of even greater benefit.

KEYWORDS

contemplative practice, Tibetan Buddhism, psychedelic therapy, mystical experiences, meditation, Buddhism

INTRODUCTION

With the resurgence of interest in psychedelics,¹ a number of protocols have emerged for studying these potential medicines and investigating their efficacy for treating a number of mental health conditions. While varied, these protocols typically follow the same formula: preparation, dosage, integration. The vast majority of these trials involve psilocybin as the active substance but differ in the way they prepare participants prior to their psychedelic experience and the way they integrate these experiences into the lives of the participants. This current lack of standardization can lead to varied outcomes in the actual psychedelic experience itself, making theorizing on these protocols an important exercise for improving the potential efficacy of psychedelic substances in therapeutic settings.

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¹This paper will use the term “psychedelics” to refer to a class of medicines which occasion similar phenomenological experiences and is inclusive of both indigenous plant medicines like psilocybin mushrooms, ayahuasca, peyote, and iboga, as well as lab-created chemicals like LSD-25 and NN-DMT. While the term psychedelic is perhaps an inappropriate term for both linguistic and neocolonial reasons, I will nonetheless reluctantly use the term in this paper to be consistent with the current literature on the subject.

To do so, we may benefit from looking outside of the hard sciences to the humanities. Of course, the use of psychedelics and the non-ordinary² experiences they occasion have been central parts of global religious traditions who, over millennia, have devised their own frameworks for managing risk and hedging positive outcomes in their contemplative practices. Whether occasioned through careful, consistent meditative practice or through quicker means like the ritual ingestion of psilocybin or ayahuasca, global contemplative practices have established effective systems of implementing, directing, and integrating the very kinds of non-ordinary experiences central to psychedelic use. Therefore, it would be of benefit to those studying psychedelics and investigating their therapeutic usage to engage with these contemplative traditions to help them think through their approaches to the use of these substances.

This paper will offer one such reflection by engaging the Tibetan Buddhist contemplative tradition. It will first establish a baseline for comparing the non-ordinary experience occasioned by Tibetan Buddhist meditation and the psychedelic experience by referencing the phenomenological literature of both. Then, it will articulate the Tibetan contemplative framework of *view, meditation, action* (Tib. *lta sgom spyod gsum*) as the way Tibetan Buddhism directs its non-ordinary meditative experience towards its desired ends. The nuances of this framework will be parsed and its implications will be applied to the use of psychedelic-occasioned mystical experiences in therapeutic settings. Finally, this paper will use this Tibetan Buddhist lens of analysis to compare and assess two protocols for psychedelic-assisted therapy and make recommendations for future clinical protocols.

CONCEPTUAL MEDIATION IN MEDITATIVE AND PSYCHEDELIC EXPERIENCE

To begin, we must establish a baseline for making the comparison between Tibetan approaches to non-ordinary experience and the psychedelic experiences occasioned in these therapeutic trials. In short, both Tibetan contemplative practice and psychedelic compounds engage with the neurophysiology of the brain to elicit mystical experiences of a similar phenomenological character. The mystical character of these two contemplative modalities is well attested and recent scholars like Papanicolaou (2021) have made explicit the parallel mystical experiences of those practicing

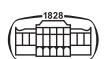
meditation and ingesting psychedelics (pp. 81–86). This allows us to productively dialogue the two traditions and creatively theorize about the ways one mystical modality can inform the other.

That said, this comparison on the basis of their mutual involvement with mystical experiences should be nuanced. The first point that must be made clear is that these experiences are *conceptually mediated*. In the last century, there has been a large debate between scholars of mysticism as to whether spiritual, religious, and/or mystical experiences reveal some primordial essence to a universal human or divine experience or if these experiences are conceptually mediated. In other words, are these experiences universal or are they purely constructions of the cultural information individuals have access to? Different scholars have articulated defenses of both of these positions and forged a divide in the study of mysticism between those who ascribe a universal nature to these experiences (essentialists) and those who see them as conceptual constructions (constructivists).

The essentialist position can be traced in part back to the writing of Aldous Huxley (1945) and his book *The Perennialist Philosophy* which compiled a variety of materials from across the world religions to claim that they all point to the same esoteric reality. This position, though a minority in the field, later becomes a central theme in the writing of Huston Smith (1987) and his efforts to find a “primordial tradition” and a “perennial philosophy.” However, the efforts of these scholars to trace a perennial *philosophy* is distinct from those who argue for the universality of mystical *experience* (Jones, 2020). Though related, scholars of this latter position (who we may call essentialists) argue that there is a common core to all mystical experience regardless of the cultural context, spiritual technologies, or religious practices that brings these experiences about. Though William James (1902, pp. 380–382) is often credited as the first to ascribe certain universal characteristics to mystical experience (ineffability, passivity, transiency, and a noetic quality), Walter Stace is often credited as the scholar who made the claim for a common core explicit in his 1961 work *Mysticism and Philosophy*. He delineates to types of mystical experiences, extrovertive and introvertive, about which he claims, “there is no doubt that in essence they are the same all over the world in all cultures, religions, places, and ages” (p. 85). According to Stace, mystical experience manifests outwardly as a “unifying vision” that can be described by the phrase “All is One” (p. 79), and inwardly as a “state of pure consciousness” which “has no content except itself” (p. 86). This view of mystical experience found a resurgence in the work of Robert K.C. Forman (1990) and his notion of the Pure Consciousness Event, and the common core thesis has recently been revisited by neuroscientists like Ralph W. Hood (2001), Eugene D’Aquili and Andrew Newberg (1999), and humanities scholars Kenneth Rose (2016) and Steve Taylor (2017).

The opposing stance on mystical experience is that of constructivism. As Francis X. Clooney (2004) rightly notes, constructivism has been the “mainstream consensus” since

²The terms non-ordinary experience, mystical experience, religious experience, and spiritual experience will be used more-or-less interchangeably. The wealth of literature on these experiences is typically found in religious studies scholarship which uses the latter three terms, but these experiences are certainly not relegated to religious individuals or traditions. Given the interdisciplinary nature of this paper and its place of publication, I will primarily use the term “non-ordinary experience” to delineate these exceptional mental states from those found in our ordinary, daily life, but I will also use the religious, mystical, and spiritual when referring to the extant literature on these experiences.



the publication of Steven T. Katz's essays "Language, Epistemology, and Mysticism," and "The 'Conservative' Character of Mystical Experience" in 1978 and 1983 respectively (pp. 211–212). In the former essay, Katz (1978) writes:

There are NO pure (i.e. unmediated) experiences. Neither mystical experience nor more ordinary forms of experience give any indication, or any grounds for believing, that they are unmediated. That is to say, *all* experience is processed through, organized by, and makes itself available to us in extremely complex epistemological ways... A proper evaluation of this fact leads to the recognition that in order to understand mysticism it is *not* just a question of studying the reports of the mystic after the experiential event but of acknowledging that the experience itself as well as the form in which it is reported is shaped by concepts which the mystic brings to, and which shape, his experience. (p. 26, emphasis in original)

Thus, not only are the reports of mystical experience organized around the conceptual parameters of a specific socio-religious context (what is often termed a "soft constructivism"), but the specifics of the experience itself. He expands on this point in the latter essay, writing:

Mystical experience(s) are the *result* of traversing the mystical way(s), whatever specific *way* one happens to follow, e.g. the Jewish, Sufi, or Buddhist. What one reads, learns, knows, intends, and experiences along the path creates to some degree (let us leave this somewhat vaguely stated as yet) the *anticipated* experience made manifest. That is to say, there is an intimate even necessary connection between the mystical and religious texts studied and assimilated, the mystical experience had, and the mystical experience reported. (1983, p. 6, emphasis in original)

Thus, constructivists assert that there is an intimate connection between the religious or philosophical view, the particular practice which occasions the mystical experience, and the experiential outcome.

It is entirely possible that both a content-less universal Pure Consciousness Event exists while maintaining the position that, outside of these PCEs, all experience, mystical and otherwise, is conceptually mediated. Weighing the particulars of the essentialist-constructivist debate and the possibility of their coexistent is beyond the scope of the present paper. What is important to note is that these two experiential extremes, Pure Consciousness Events and conceptually mediated mystical experiences, occupy two ends of the mystical spectrum (Fischer, 1971). Further, as Hammersholt (2013) makes clear in his analysis of Katz's philosophy, Katz "writes only of the *contextual conditioned mind* and the *object*" and makes no claim as to the "transcendent reality" experienced by those who undergo mystical experiences (p. 479). This sets out a solid basis for comparing Buddhist meditative experience and the psychedelic experience and provides a bridge for engaging the framework of the former with the latter. Both Buddhist meditative experience and psychedelic experiences are products of a conditioned mind and are (largely) conceptually mediated and context specific. Thus, it stands that the

relatedness of these two experiences offer avenues for the two to be put into productive and beneficial dialogue.

To briefly substantiate this constructivist interpretation, we can find meditative practices in the Buddhist tradition that work to occasion both kinds of mystical experience. There are two principal kinds of meditative practices in every Buddhist tradition: *śamatha* (Tib. *zhi gnas*) and *vipāśyanā* (Tib. *lhag mthong*). The former aims to develop calm (lit. calm-abiding) and concentration and, if practiced to its end, results in the practitioner experiencing the formless absorptions of infinite space, infinite consciousness, nothingness, and neither-perception-nor-non-perception. These could reasonably be seen as approximating (or actually being) the Pure Consciousness Event articulated by Forman. On the other hand, *vipāśyanā* meditation involves directing this calm and concentrated mind to particular conceptual objects in order to experientially acclimate oneself to them. It is therefore necessarily produces *content-full* meditative experiences which are constructed from the particular views one is meditating on. It is interesting to note that *vipāśyanā* meditation and the experiences it occasions are the only soteriologically efficient³ meditations in the Buddhist tradition. A calm mind (or PCE) alone is not enough to overcome the *duḥkha* (Tib. *sdug bsngal*, lit. unease, stress, dissatisfaction) at the center of the Buddhist soteriological project. Instead, one must come to experientially recognize the cause of *duḥkha*, *tr̥ṣṇā* (Tib. *sred pa*, lit. clinging, craving, thirsting), and use meditative practice to replace the dysfunctional views and mental states that lead to clinging (typically construed as greed, anger, and ignorance) with views, conative states, and a perceptual mode that replace *duḥkha* with *sukha* (Tib., *bde ba*, lit. easefulness, happiness).⁴ As we will see, this is done through a series of frameworks which were designed to occasion these soteriologically-efficient experiences in a directed, controlled manner.

Likewise, psychedelic experiences are mediated by the conditioned, conceptual mind. As Millière, Carhart-Harris, Roseman, Trautwein, and Berkovich-Ohana (2018) have surmised, there is a clear distinction between Pure Consciousness Events occasioned by *śamatha* practice and the

³Soteriology is the study of salvation or liberation in religious traditions. In the case of Buddhism, that which is soteriologically efficient is that which leads to the end goal of Buddhist practice: the eradication of *duḥkha* and the achievement of *nirvana*.

⁴This is an extremely cursory presentation of the Buddhist liberative project, but one that will suffice for the purposes of this comparative discussion. Ultimately, the Buddhist goal is to go beyond mere *sukha* (a good state) and overcome conditioned states altogether. This is because *sukha* is subject to impermanence like any other mental state and can itself be a source of clinging and, therefore, *duḥkha*. Nonetheless, *sukha* is a common provisional goal of Buddhist practice and provides a better basis for comparison with those taking psychedelics therapeutically than the goal of overcoming all clinging altogether and achieving *nirvana*.



kinds of experience occasioned by other meditation practices and psychedelics alike.⁵ These psychedelic experiences are instead associated with a variety of mystical-type characteristics of varying degrees. Barrett and Griffiths (2018) have shown how classic hallucinogens like psilocybin (being the one used in most psychedelic-assisted therapy trials) reliably occasion content-full mystical experiences which they studied using a 30-point mystical experience questionnaire based on Stace's theory of mysticism we saw earlier. This follows earlier work by Griffiths which shows the phenomenological similarities between classical, constructivist mystical experience and the experiences occasioned by psilocybin (2006, 2008, 2011). What is also quite interesting and especially pertinent to this discussion is how the purported therapeutic effects of these psychedelic experiences are mediated along conceptual lines. In other words, the feelings of interconnectedness, the dissolution of the sense of self, an experience of the holy, ecstasy, and timelessness create lasting positive effects in the personality, affect, quality of life, and spirituality of participants. This has been demonstrated in several studies by Griffiths on different cohorts with results showing:

High-dose psilocybin produced large decreases in clinician- and self-rated measures of depressed mood and anxiety, along with increases in quality of life, life meaning, and optimism, and decreases in death anxiety. (2016)

It is entirely possible posit a pharmacological cause for a decrease in depressed mood or anxiety, but an increase in participants' life meaning is a purely conceptual outcome that must have a conceptual basis. A similar review by Kałużna, Schlosser, Craste, Stroud, and Cooke (2022) found that the specific experiences of ego-dissolution and connectedness "were found to potentiate the therapeutic effects of psychedelic experience by promoting improvement in psychological wellbeing across several mental health conditions, particularly depression, anxiety, and substance use disorders." This too gestures to the conceptual mediation at the heart of the psychedelic experience and its subsequent therapeutic effects.

Thus, if we understand both Buddhist meditative experiences and psychedelic experiences as constructed mystical

⁵Millière, Carhart-Harris, et al. incorrectly call this "Samadhi practice," but nonetheless recognize the *śamatha* practice and the *jhanas* as leading towards a Pure Consciousness Event – an outcome distinct from other meditative practices and psychedelics. Their interpretation of this PCE, however, is quite confused. They claim that "Samadhi" meditation could provide "evidence for the existence of witness-consciousness" which "has its own intrinsic phenomenal character, which explains why purely conscious states in Samadhi are not devoid of phenomenal content." However, this is an entirely different experience which they recognize elsewhere in their paper as "non-dual awareness." They fairly claim that this Non-Dual Awareness Meditation can be found in the Dzogchen and Mahamudra traditions of Tibet, but fail to recognize that the "witness-consciousness" they ascribe to the *jhanas* is in fact more close to the experiential outcomes of Dzogchen or Mahamudra practice. John Dunne (2011), who they cite, rightly notes how the non-dual awareness at the culmination of Dzogchen and Mahamudra practice is necessarily distinct from the experience of *śamatha*.

experiences mediated by prior conceptual conditioning (the mental set) and individual's immediate environment (setting) then we can begin to dialogue the two towards productive ends. Both Buddhist meditative practice and psychedelic compounds occasion mystical experiences conditioned by the kinds of views or concepts which are brought into and accessed during the altered state of mind. It therefore follows that if we wish to use psychedelics in a directed way in therapeutic contexts, we must pay close attention to the views participants bring into their psychedelic experience.

VIEW, MEDITATION, ACTION IN TIBETAN BUDDHIST MEDITATIVE CONTEXTS

This is precisely the reason why the Tibetan Buddhist tradition contains many frameworks for engaging in meditative practice. Buddhist practitioners do not simply sit in meditation and wait for something to happen, but go into their meditative practice having first developed a strong intention for that session. This could range from developing the qualities of *śamatha* to penetrating the idea of impermanence, interdependence, or buddha-nature. Regardless of the particular meditation, Tibetan Buddhism employs a framework of *view, meditation, action* or *lta sgom spyod gsum* in order to direct its contemplative practice towards desired experiential goals, be they soteriological, ethical, or simply phenomenological. Given the similarity of meditative and psychedelic experiences and their constructed, conditioned nature, I claim that this framework can have a life outside of the Buddhist tradition and be of great use to those administering and undergoing psychedelic therapy. Rather than simply taking a psychedelic compound and seeing if it has a therapeutic effect, we can input the psychedelic experience into *view, meditation, action* to more effectively direct these experiences towards positive results.

First, therefore, we must understand how this framework is employed in the Tibetan contemplative tradition. Elsewhere, I have provided a comprehensive overview of *lta sgom spyod gsum* and its relation to Buddhist ethics (2022, 2023), but a basic understanding of the framework will suffice for this discussion. *View, meditation, action* has been used in two major ways in Tibetan literature. First, its has been used descriptively to unpack the experience of the ultimate soteriological goal of Tibetan Buddhist traditions. This can be seen in Rendawa's⁶ *Vajra Song of View, Meditation, Action, and Result*⁷ where he writes:

Blissful is the view that dispels eternalism and nihilism.

Blissful is the action that is without cessation or production.

Blissful is the meditation that is effortless and without striving.

⁶Tib. *red mda' ba*, b. 1349–1412.

⁷Tib. *lta sgom spyod 'bras rdo je'i glu*.



Blissful is the fruition that is without hope and fear.

That view that dispels eternalism and nihilism

Is an awareness of the true essentials of dependent origination.

That action that is without cessation or production

Is an awareness of the true essentials of what is to be adopted and what is to be discarded.

That meditation that is effortless and without striving

Is an awareness of the true essentials of the remedies to eliminate the undesirable.

That fruition that is without hope and fear

Is an awareness of the true essentials of saṃsāra and nirvāṇa.⁸

In this instance, *lta sgom spyod gsum* are not used to introduce the reader to a particular structured practice but instead to organize the author's thoughts on the qualities of the enlightened experience.

Second, and perhaps more pertinent to the present discussion, it has been used in a didactic sense to instruct readers in their meditative practice. This use of *view, meditation, action* can best be seen in Dudjom Rinpoche's⁹ *Light of Primordial Wisdom*¹⁰ where *view, meditation, action* is used to build a framework for analytical *vipāśyanā* meditation. He writes:

Four points on generating the wisdom of special insight:

1. Deciding through the view;
2. Adopting it as one's experience through meditation;
3. To experience continuously through action, and;
4. Bringing the fruition to realization.¹¹

This Dzogchen (Tib. *rdzogs chen*) presentation of *lta sgom spyod gsum* is characteristically pithy and might require some explanation, but ultimately the framework is quite simple. As Dilgo Khyentse Rinpoche,¹² a former tutor of the Dalai Lama, writes:

The first step in establishing the view is to acquire a proper understanding of the teachings about it. Then, to incorporate the view into our inner experience, we put it into practice over and over again; this is the meditation. Maintaining our

experience of the view at all times and under all circumstances is the action. Through the constant combination of these three – view, meditation, action – the fruit of the practice of Dharma will fully ripen. (1992, p. 9)

Thus, one first establishes an intellectual understanding of a particular view, then one meditates on that view to occasion a conditioned meditative experience of the chosen concept, and finally one goes about acting effortlessly in accordance with that particular experience. This is how Tibetan Buddhism approaches not only contemplative practice but its entire project of ethical and soteriological transformation as well.

There are a number of important points in this framework that are a given in their native Tibetan Buddhist context but must require some unpacking in this comparative discussion. The first is that one can indeed maintain an experience of the view at all times and that direct meditative experience of the view is the mechanism by which this happens. Just as meditative experience is conditioned, so too is ordinary experience. In the Buddhist tradition, our default perceptual mode is one that leads to *duḥkha* by clinging to phenomena as permanent and thereby generating afflictive states of desire, anger, and delusion. Thus, the goal of Buddhist practice is to reorient our default perceptual mode¹³ from one which takes the permanent, independent status of phenomena as a given to one that sees phenomena as impermanent, empty of independent existence, and interdependent. This reorientation occurs through penetrative insight or *vipāśyanā* which is a meditative experience of a particular view. Through a direct perceptual experience of a view like interdependence, one goes beyond mere intellectual understanding and begins to actually go about life seeing phenomena not as independent essences but as dependently originated. As Dilgo Khyentse states, the meditation is designed to allow a person to put the view into practice again and again until it becomes the way one naturally perceives the world. One the terms used in Buddhist texts to describe meditative practice is *nyams su len pa* which literally translates to “to bring into one's experience.” In other words, Buddhist meditators are using striving to occasion a conditioned meditative state to in turn condition their default perceptual mode and alter how they naturally comport themselves in their day-to-day lives. Thus, the conditioned meditative experience is considered the mechanism of action for transforming a deluded or maladjusted default perceptual mode to one that reflects the Buddhist understanding of reality and leads to positive action.

Second, the Tibetan tradition makes clear that of the three aspects of the framework the view is the most

⁸Tib. *rtag chad spangs pa'i lta ba bde / dgag sgrub med pa'i spyod pa bde / 'bad rtol med pa'i bsgom pa bde / re dogs med pa'i 'bras bu bde / lta bar tag chad spangs pa de / rten 'bral rang mtshang rig pa yin / dgag sgrub med pa'i spyod pa de / blang dor rang mthang rig pa yin / 'bad rtol med pa'i bsgom pa de / spang gnyen rang mtshan rig pa yin / 'bras bu re dogs med pa de / rten 'brel rang mtshan rig pa yin. Sourced from: red mda' ba gzhon nu blo gros, 1999, p. 92.*

⁹Tib. *bdud 'joms 'jigs bral ye shes rdo rje*, b. 1904–1987.

¹⁰Tib. *bdud 'dul dbang drug rdo rje gro lod kyi rdzogs rim ka dag gi khrid yig ye shes snang ba*.

¹¹Tib. *lhag mthong gi ye shes bskyed pa la bzhi / lta bas thag gcod pa / sgom pas nyams su blang ba / spyod pas rgyun skyong ba / bras bu mngon du byed pa'o*. Sourced from: *bdud 'joms rin po che*, 1975–1979, p. 427.

¹²Tib. *dil mgo mkhyen brtse rin po che*, b. 1910–1991.

¹³A term I use to refer to the lens through which we see the world and involves both our bare sense experience and, more importantly, the way we label and process that sense data through our acquired conceptual frameworks. It is the way in which we experience the world as it happens, in the present, without reflection. And while it certainly involves concepts, these concepts and their associated affective states are instantly applied as indivisible from the sensory experience itself. See: Simonds (2022, pp. 69–70).



important in its implementation. Contemporary Buddhist philosopher Sonam Thakchoe (2007) has stated that “the Buddha himself considers the right view as the forerunner of all spiritual practices” (p. 79), and this is especially the case in *view, meditation, action*. As Yangthang Rinpoche¹⁴ writes in his text titled *A Brief Presentation of View, Meditation, and Action*:¹⁵

Among the view, meditation, and action, view is most important.

It is extremely important that one realizes the view without any mistakes.

If the view is not realized, then meditation will be without any basis whatsoever. So, after one directly realizes the view without any mistakes,

Then, when one brings it into one’s personal experience through meditation,

Residing in that state of the view which one has recognized and

Extending the amount of time in that state through effort is the meditation.

Therefore, apart from this, there is not a single other object of meditation.¹⁶

There is a good reason for this emphasis on view: whatever one meditates on will be reified through the direct meditative experience of the meditative object. Thus, if one comes to a direct meditative experience of an incorrect view, then their subsequent perception of the world and action therein will be skewed. Khensur Jampa Tegchok (2017) makes this clear in his commentary on Nāgārjuna’s *Ratnāvalī* where he writes:

When those who lack proper study and a correct understanding meditate on emptiness, there is danger that they meditate incorrectly and come to the wrong conclusion. Falling to the extreme of nihilism and thinking that karma and its effects do not exist, their behavior becomes reckless, and their destructive actions lead them to ruin. This is similar to a person who grasps a poisonous snake improperly – instead of being able to extract the medicine from the snake, he will be bitten by it. (p. 98)

Thus, the Tibetan Buddhist tradition emphasizes the proper establishment of view as the most important aspect to the implementation of *view, meditation, action* due to the intimate relationship between the particular view experientially realized in meditation and the resultant conduct of the individual. This is done through a sub-framework of

listening, contemplating, meditating wherein an individual first encounters a view through listening, ascertains its validity by analyzing all of its facets intellectually, and finally meditating on said view to not only understand it intellectually but experientially.

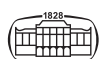
Finally, *view, meditation, action* is necessarily practiced in an ordered way. First, one establishes the view philosophically, then one meditates on that view to install it as one’s default perceptual mode, and finally one goes about their life acting in accordance with that acquired perceptual and conative set. In the vast majority of uses of this framework in Tibetan contemplative settings this is the case, but there are indeed exceptions. For example, Gelugpa meditation master Chöden Rinpoche¹⁷ (2020) instructs that “There are two kinds of people: (1) those who first gain certainty about the view, realize the view, and from within the view, actualize calm abiding, and (2) those who first actualize calm abiding, and having actualized calm abiding, gain certainty about the view” (p.98). However, if we recall the two major kinds of Buddhist meditation then this exception can easily be reconciled with the normative movement from view to meditation to action. *Śamatha* and *vipāśyanā* meditation function in two distinct ways: the former is used to develop calm and concentration while the latter is used to develop direct insight into particular philosophical points and occasion conditioned meditative experiences. In the framework of *view, meditation, action*, meditation universally refers to the latter *vipāśyanā* style of meditation rather than a calming concentration meditation and this makes sense given how one cannot simply meditate on the breath to experientially realize a particular view. Rather than occasion a conceptually conditioned mystical experience, this *śamatha* meditation would at best lead to a PCE which would have little bearing on an individual’s day-to-day life outside of the experience. However, for one to occasion an experiential realization of the view with quick success, it is helpful to have a basis in *śamatha* meditation so one can remain -single-pointedly on the object of meditation. Chöden Rinpoche (2020) states this quite clearly when he writes: “With such strong concentration, one can much more easily develop deep insight into these topics and can eventually develop direct perception of them, thereby gaining an antidote that cuts ignorance at the root” (p. 13). Thus, while *vipāśyanā* meditation must always come after a thorough intellectual grasp of a given view, *śamatha* meditation can be done at any point to increase the efficacy of *vipāśyanā*. We can therefore conclude that the standard order of operations for this contemplative framework are to: 1) establish the view philosophically/intellectually; 2) practice analytical meditation on that view in order to familiarize oneself with it and install it as one’s default perceptual mode, and; 3) act in a way that is informed by and naturally emergent from that view.

¹⁴Tib. *mdo mang g.yang thang rin po che*, b. 1930–2016.

¹⁵Tib. *lta sgom spyod gsum mdor bsdus*.

¹⁶Tib. *lta sgom spyod gsum nang nas lta ba gtso / 'khul med lta bar togs pa shin tu gal / lta ba ma rtogs sgom gzhi gang yang med / 'khrul med lta ba dngos sur togs pa'i rjes / de nas bsgom pas nyams su len pa'i skabs / rang ngo 'phrod pa'i lta ba'I ngang de la / bzhugs yun bsting nas 'bad pas bsgom pa yin / de bas sgom rgyu gzhan zhig logs na med*. Sourced from: [yang thang rin po che](#), 2021.

¹⁷Tib. *skyabs rje chos ldan rin po che*, b. 1930–2015.



APPLYING VIEW, MEDITATION, ACTION TO PSYCHEDELIC SETTINGS

Given the phenomenological similarity of direct meditative experience and psychedelic experience, I argue that these two conditioned mystical states might serve the same role in transforming the default perceptual mode of an individual according to a given view. The Buddhist tradition makes clear that there is a relationship between view and meditative experience which produces a change in an individual's overall comportment, and the recent literature on the long-term effects of psychedelic experience suggest that the benefits of these sessions is (at least in part) conceptually mediated. This being the case, approaching psychedelic experience through the framework of *view, meditation, action* can allow both those administering and undergoing psychedelic therapy to better direct these experiences towards desired outcomes.

In this psychedelic-therapeutic setting, there are clear steps to applying the framework of *view, meditation, action*. First, one must identify the desired outcome of the psychedelic therapy session. In most trials today, participants are qualified by particular mental health conditions that the psychedelic-therapy seeks to ameliorate, most common of which are end-of-life anxiety, depression, and substance use disorders. While I make no claims as to whether these conditions are physiologically or conceptually mediated themselves, they display in ways that involve a great degree of conceptual mediation. For instance, rumination is a common factor in end-of-life anxiety (Galfin, Watkins, & Harlow, 2010), self-esteem is a strong factor in young male depression (Nguyen, Wright, Dedding, Pham, & Bunders, 2019; Park & Yang, 2017), and physical and emotional triggers are a subjective or mental mechanism in substance abuse disorders (Asensio, Hernández-Rabaza, & Semper, 2020). Of course, there are both neurological (i.e. physical) and conceptual (i.e. mental) correlates to each of these subjective components of mental health conditions, and the former are often addressed through pharmaceutical intervention like SSRIs and so forth. Nonetheless, there is a role for psychedelics to play in addressing the conceptual aspects of these mental health disorders. Thus, the first step in applying *view, meditation, action* to psychedelic-therapeutic settings is to identify the views responsible for negative affective states or which display as the principle conceptual factor of the underlying mental health condition.

Having identified this maladaptive view, one should then identify its antidote. The Buddhist tradition has a long tradition of this philosophical remedying where those suffering with greed would be told to practice generosity or meditate on impermanence, those succumbing to anger would be told to practice patience and meditate on loving-kindness, and so forth. These correctives went beyond these affective registers as well. The belief in an eternal, separate self is considered to be a root cause of maladaptive behaviour and thus was remedied by having practitioners study and meditate on *anatman* or non-self. Similarly, the belief in

the independent, intrinsic existence of external phenomena was countered by studying and meditating on interdependence. I make no claim as to what these particular views would be in a psychedelic-assisted therapeutic setting – in fact, they would likely vary from person to person in consultation with their therapist. Simply plugging in one of these overarching meta-views like *śūnyatā* or interdependence to a clinical setting would of course be problematic. Beyond the obvious issue of inserting a religious truth claim into an ostensibly secular therapeutic setting, the problem that Buddhism and psychedelic-assisted therapy set out to solve are distinct. While both may deal with stress, coming to an experiential realization of interdependence may do little to address the underlying roots of an individual's depression, addiction, traumatic stress, and so forth. Thus, in clinical settings for psychedelic therapy, the means for identifying and applying an antidote to the conceptual problem would likely involve a variety of therapeutic modalities including Cognitive Behavioural Therapy, Acceptance and Commitment Therapy, or Motivation Interviewing. These preliminary therapies would allow the participant to arrive at an intellectual understanding of the views which cause them stress and the antidotal, more realistic views that would lead them to better mental health outcomes with a therapist prior to the psychedelic experience.

If the assumptions of the Buddhist meditative tradition hold true for psychedelic-assisted therapy, then this should be considered the most important part of the entire process and should be given the most attention by those administering and participating in psychedelic-assisted therapy. It may be beneficial to hear someone else point out a maladaptive view and articulate its remedy, but what is required in this setting is for those undergoing a psychedelic experience to fully understand the nuances of the antidotal view. Thus, the participant should go beyond merely hearing the therapeutic view and, with the help of a therapist, come to understand all of the complexities and nuances of this view until it is firmly established as intellectually valid. This allows the participant to enter into the psychedelic experience confident in the antidotal view and with the ability to recollect its various facets to more easily come to a direct experiential recognition of its validity in the psychedelic experience.

Thus, having established the view intellectually, one would enter the next phase of the process and enter the psychedelic experience. Just as meditation and meditative experience functions to experientially acclimate an individual to a given view in the Buddhist tradition, so too would psychedelic substances and the psychedelic experience be used to have a participant come to an experiential realization of the view which was earlier established. Given how the psychedelic experience is conceptually mediated, one would direct their attention during this altered state of mind towards the view in order to turn one's intellectual understanding of the view into a perceptual, embodied, affective understanding of the view. Given how meditative and psychedelic experiences are phenomenologically similar, this



would the mechanism by which a conceptual understanding of the antidotal view would become incorporated into one's default perceptual mode and create a lasting positive change in the participant. Thus, psychedelics would be used in place of meditation to come to a deep experiential understanding of a particular view that has been recognized to lead to positive outcomes.

One nuance worth unpacking is how the view is actually brought into the psychedelic experience. In Buddhist meditative practice, mindfulness (Tib. *dran pa*) fulfills this function. Contrary to its contemporary connotations of bare awareness and being present with the various facets of daily life, mindfulness traditionally involves an ability to recollect and remember the particular meditative instructions or views while engaged in meditative practice. Given the quiescent nature of meditative practice and how it is often done independently, mindfulness was required to ensure that the meditation was properly directed and that the meditative experience was of the correct view. In the extant literature on psychedelic therapy, mindfulness is either used in a way dissonant with traditional understandings (Radakovic, Radakovic, Peryer, & Geere, 2022) or as a method of bringing the insights of the psychedelic experience into daily life (Payne, Chambers, & Likhaitzky, 2021). This latter use of mindfulness as a means for recalling the insights of the psychedelic experience after the session is of interest, particularly if the view is not fully experientially realized and thus not integrated into the default perceptual mode during the psychedelic experience. Nonetheless, I would instead argue that mindfulness's role in psychedelic therapy would be *during* the experience itself as a method for recalling the beneficial view and to remain undistracted. That said, given how contemporary protocols for clinical psychedelic-assisted therapy involve two sitters, it is entirely possible that the therapists sitting with the participant can fulfil this function just as easily. Rather than place the onus on the participant to remain undistracted in their experience, the sitters can actively remind the participant of the antidotal view to occasion its experiential realization with greater ease.

Finally, if the view is established properly and is experientially realized in the psychedelic experience such that it becomes incorporated into one's default perceptual mode, then it follows that there will be a commensurate change in the conduct of the individual. However, the degree of this change may vary according to the depth of the psychedelic experience. In Buddhist contexts, meditative experiences are occasioned again and again in order to progressively deepen the experiential understanding of a given view. Thus, in psychedelic therapeutic contexts, it might also be of benefit to include multiple dosing sessions in the overall protocol. This would both allow participants to deepen their experiential understanding of the view through repeated engagement and allow a greater opportunity for participants to experientially realize the view in the first place. In either case, these repeated sessions provide a better opportunity for the participants' default perceptual modes to attune to the given view and therefore give them a better opportunity to effect lasting change in their basic disposition towards their life moving forward.

ASSESSING PSILOCYBIN PROTOCOLS

Thus far, this paper has made a comparison between meditative experience and psychedelic experience and has proposed a framework derived from the Tibetan Buddhist tradition as a way to similarly direct the latter towards desired therapeutic ends. That said, there are of course existing protocols for psychedelic-assisted therapy already in place which have been designed around concerns of both safety and efficacy. I do not intend to propose a completely novel protocol based on *view, meditation, action*, but I nonetheless see value in assessing these existing protocols in light of the insights of *view, meditation, action* to suggest possible ways for increasing efficacy. To this end, it is worth comparing and critiquing two psychedelic-assisted therapy protocols designed for treating major depressive disorder (MDD) and anorexia nervosa (AN).

Regarding the first protocol by Rucker et al. (2021), it begins with a patient screening, involves up to eight weeks of preparation, continues to the dosing itself, and concludes with six weeks of follow-up meetings. The protocol also outlines the specific role of the psychological therapist in the preparation, dosing, and follow-phases. In the preparation, participants are required to spend at least three hours with the psychological therapist to build mutual trust and establish processes of practical and interpersonal support for the dosing session, practice a range of established techniques for the management of difficult emotional material, and to educate the participant on the drug experience. During the dosing session, the psychological therapist's role is to provide practical support, breathing and relaxation techniques, and guidance on cultivating an "open curiosity around experiences as they arise." Finally, the sessions of psychological therapy after the dosing session are intended to normalize the emotional content and experiences of the psychedelic experience, to unpack the emotional and experiential material relevant to depression, and to implement insights into daily life. Thus, psychological therapy is used as a way to support the psychedelic experience which is otherwise left undirected.

The second protocol by Spriggs et al. (2021) is slightly more involved. It begins with screening, a preparation day where the participant meets two guides, dosing a day later, and integration a day after that. Following this, there is a week of remote integration, a week of remote preparation, a dosing session, and an in-person integration session the day after dosing. This repeats with a week of remote integration, a week of remote preparation, a third dosing session, and an in-person integration session. Finally, the protocol concludes with a week of remote integration and a final day of in-person integration. The specifics of the preparation, integration, and the role of the therapist/psychiatrist in the dosing session is vague in their written protocol, but it does mention an awareness humanistic and psycho-analytic approaches to psychedelic-assisted therapy as well as evidence-based therapies such as Cognitive behavioural Therapy, Emotion-Focused Family Therapy, and so forth.



Reading these two protocols through the lens of *view, meditation, action* and the Buddhist understanding of non-ordinary experiences, these two studies each have their strengths and their weaknesses. For instance, the first protocol for MDD frames the role of the psychological therapist in a useful way. During the psychedelic experience, the therapist is meant to cultivate a curiosity around experiences as they arise, and after the experience they unpack the experiential material from the dosing session relevant to the participant's life in order to bring those insights into their day-to-day existence. Both of these roles are important, but what is absent from the point of view of *view, meditation, action* is preparatory work that goes beyond the mere building of trust and education about the drug experience. If we are approaching psychedelic therapy with the insights of *view, meditation, action* in mind, then a prolonged preparatory phase where the therapist and participant work through problematic narratives and come to intellectually understand the views that will ameliorate them is of great benefit. The second study seems to gesture to this possibility when they talk about incorporating CBT into their protocol, but they nonetheless only have a single day of preparation before the initial dose and are otherwise quite vague as to what preparation involves. Thus, using the psychological therapist to establish a productive therapeutic conceptual narrative and to remind the participant of that view during the psychedelic experience may direct.

Another notable aspect of these two protocols is the frequency of their dosing. The protocol for MDD includes one dosing sessions whereas the protocol for AN involves three. If indeed the depth of the long-term change is commensurate with the depth of the experiential realization of the view in the psychedelic experience, then it follows that the frequency of the AN protocol may be more effective than the MDD protocol. The single dosing session of the MDD protocol may be insufficient to produce the kind of realization necessary for a change in one's action and thus limits the overall efficacy of the intervention. The AN protocol's use of three doses separated by a week of integration and a week of preparation allow for participants to progressively deepen their realization of the view by being able to reflect and redirect their subsequent psychedelic experiences and by becoming more familiar with that state itself. This approach is commendable when viewed through the lens of *view, meditation, action* and should be prioritized over the single dosing session of the MDD protocol.

Finally, both protocols seem to operate under the "compass and vehicle" method outlined by Payne et al. (2021) in their article "Combining Psychedelic and Mindfulness Interventions: Synergies to Inform Clinical Practice." In other words, the dosing sessions are used a way to initiate, motivate and steer the participant's therapeutic trajectory while the integration (and, in the case of their article, mindfulness practice as well) is the regarded as the means to deepen, generalize, integrate, and maintain the insights from the psychedelic experience. Both the protocols

above and this article by Payne Chambers, and Liknaitzky assume that the psychedelic experience alone is of therapeutic benefit. They all operate under the notion that there is something intrinsically therapeutic to the experience and that there is a phenomenological similarity between the psychedelic experiences of a diverse cohort of individuals. There is indeed some evidence to support this position such as Kałużna et al.'s (2022) recent study on the role of ego-dissolution and connectedness in the therapeutic effects of psychedelic experience. However, even if these experiences are consistent such that they are therapeutically reliable, the broader psychedelic experience can nonetheless still be directed through concepts and narrative. Instead of relying upon the psychedelic experience to direct subsequent reflection, the framework of *view, meditation, action* suggests that therapeutic direction should come *prior* to the psychedelic experience. Unlike other pharmacological interventions, the lasting therapeutic effects of psychedelics come from a combination of the conceptual, affective, conative, and neurological effects of the drug (Smausz, Neill, & Gigg, 2022). Thus, the insights of *view, meditation, action* suggest that directing these various facets through intensive pre-dosing preparatory work towards desired ends can be of greater benefit than simply letting the phenomenological experience of the psychedelics run their course.

CONCLUSION

This article began by comparing the phenomenology of meditative and psychedelic experience by referencing the literature on the study of mysticism, outlined how the framework of *view, meditation, action* functions in Tibetan Buddhist meditative contexts, and suggested how this framework may be applied to psychedelic-assisted therapy. However, if there is one main takeaway from this critical comparison it would be how current protocols may adapt to the insights of other mystical traditions. Given the phenomenological similarity of Tibetan Buddhist meditative experience and the psychedelic experience, I suggest that a more intensive preparatory session where maladaptive conceptual narratives are worked through and beneficial ones are introduced, repeated dosing sessions, and a more directed psychedelic experience may increase the efficacy of psychedelic-assisted therapy. Of course, the specifics of future protocols must be composed with more than just the framework of *view, meditation, action* in mind, but I nonetheless argue that these insights can improve future protocols and allow for psychedelic-assisted therapy to be of even greater benefit.

The field of psychedelic studies and the actual use of psychedelic-assisted therapy is still young, and there is still much to learn about the specific mechanisms of psychedelics' therapeutic effects. Nonetheless, there is a clear affinity between the psychedelic experience and the experiences occasioned by global contemplative traditions,



and these historical traditions can certainly help to direct our inquiry. This article explored one specific contemplative framework and made an argument for its utility in psychedelic contexts, but it should not be taken as a definitive approach to all contemplative practice. Instead, humanities scholars working on other contemplative modalities or mystical traditions should also offer insight into non-ordinary states to afford the emerging field of psychedelic studies with a deeper pool of intellectual resources from which to draw. It is my hope that this article contributes to such a project and will inspire others to make such connections in the future to continue to unpack and understand the therapeutic potential of these substances.

Finally, while this paper dealt specifically with the phenomenological congruencies between psychedelics and Tibetan contemplative practice, it is worth noting how the question of ethics was largely set aside in this analysis. Many Tibetan contemplative practices were only given after months or years of moral cultivation and scholastic discipline to ensure that practitioners could engage and integrate their resultant experiences in a skillful, compassionate manner. Similarly, indigenous use of plant medicine was governed by a number of culturally significant processes including reciprocal relationships with the more-than-human world (of which the plant medicine was a part), an emphasis on communal and individual healing, and so forth. The contemporary use of psychedelics in therapeutic contexts are certainly governed by ethics, but these ethics are restricted to questions of medical access and best therapeutic practices. In both this therapeutic context and in neoliberal recreational/spiritual contexts, questions of moral cultivation, community responsibility, environmental reciprocity, and, in the case of plant medicines, indigenous justice are often ignored by those who facilitate and engage in these psychedelic experiences. Thankfully, these ethical concerns are beginning to be raised by prominent scholars and indigenous voices and we have frameworks emerging to guide the use of plant medicines. This can be seen in Yuria [Celidwen et al.'s \(2023\)](#) excellent recent work which highlights the necessary roles of reverence, respect, responsibility, relevance, regulation, reparation, restoration, and reconciliation in the global use of indigenous plant medicines. Thus, alongside a greater dialogue between contemplative traditions to unpack some of the phenomenological nuances of these experiences, scholars should also pay attention to global indigenous contemplative traditions for establishing the ethical grounds on which we can continue to use these medicines for healing and wellness in an equitable manner.

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