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**Guide for Guides**

Ethical, Trauma-Informed

Psychedelic Support

**By Reverend Razma**

*Version: 24.8.8*

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This book is for you if you are deciding to consume mind altering substances and are seeking clear accessible information about trauma, the nervous system, interventions, and how to choose a responsible skilled Guide. You have found a treasure trove if you are curious to learn the practical details of providing psychological first aid or support as an ‘in the wild’ Good Samaritan, at festivals, in ceremonial contexts, for friends, or as a psychedelic therapist. If you are a seasoned veteran of Guiding, we are grateful for your service and welcome your contributions to future editions of this tome as a living body of work.

G4G creates a comprehensive shared foundation of knowledge by uniquely melding the cerebral analysis of transpersonal somatic therapy, ceremonial insight, and novel effective techniques created in crucibles of great challenge during emergency risk reduction ‘in the wild’. G4G delineates clear, comprehensive frameworks for generating therapeutic attunement, alignment between participants, as well as instigating ongoing personal and professional inquiry supporting continuing education. G4G empowers all explorers of consciousness in setting up containers of greater safety and consideration via relaying nuanced risk reduction and benefit enhancement wisdom. G4G seeks to serve the responsible growth of a field of great power and promise through developing new techniques and sharing best practices. G4G is a uniquely valuable reference for all working to support transformational and cathartic experiences of intensity to bring about compassionate co-evolution.

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**Table of Contents**

[Introduction](#_1k1u4xx6e3bq) - 14

[Why Write G4G?](#_b1rm718y6ng9) - 15

[Author Background](#_pws5vfz6dze8) - 17

[Book Layout](#_d8bsq1t0zxz9) - 17

[Key Terminology](#_5ysfgppa4p3a) - 18

[Environments](#_xtpfc6ko8y97) - 19

[How Does Healing Happen?](#_p1umtfva6qn7) - 23

[Journeyers](#_b89sm6kx97er) - 25

[Intentions](#_jk1r6mxekwgp) - 25

[Intention Setting](#_50ntbe31qauz) - 25

[Journeyer Pre-Journey Questionnaire](#_rcw7ygibltu7) - 26

[How to Protect Yourself as a Journeyer](#_tlcvsh1zs298) - 32

[Guide Vetting](#_3njxpm8a8bv8) - 32

[Areas of Inquiry from Journeyer to Spaceholder:](#_tdph57dn2hrx) - 33

[Screening](#_qdb8149my8eg) - 38

[References](#_f9f1l11wmpbq) - 38

[Accountability Network](#_u14m8x7w30ou) - 39

[Journeyer Post-Journey Journal Prompts](#_8xd9v7o51bkb) - 40

[Integration](#_d0jz6p8ezzlg) - 40

[Ongoing Journaling](#_qagg9xk8zzsx) - 41

[Guide Red Flags](#_eellsq62j15o) - 42

[Refusal to Refer](#_luiefr8kf9xm) - 42

[Never Saying “No”](#_xq2as1wxj5wj) - 42

[Care Vulture / Caretaking Attachment Orientation](#_1s4bgxz3357f)- 44

[Over Attached to Themself Being the Cause of Healing Success](#_xxdv5kgank0j) - 44

[If They are Over-Identified in Their Personal Narrative as a “Master Healer”](#_p7w83jbfzkai) - 46

[Cool / Social Hierarchy](#_g3cm43lomig) - 47

[Financial Need / Gain](#_ph2fjd54onw1) - 48

[They Do Not Know Their Triggers](#_snonzr2h7xqm) - 49

[When the Spaceholder’s Characteristics are a Trigger](#_zgpap212ink7) - 50

[Competitive Healing](#_cfkyokybc218) - 51

[Spiritual Narcissism](#_3adji736gqby) - 52

[Consent](#_y3e2iz4phc9s) - 54

[Basics of Consent](#_z91gv8vdhlql) - 54

[Consent is Informed](#_1qv5we5k9qwm) - 55

[Consent is Freely Given](#_4gh9h8nuktxo) - 56

[Consent is Revocable](#_b4wuucciu5bz) - 57

[Consent is Conditional](#_hx60kte09k82) - 57

[Consent is Ideally Enthusiastic](#_3uwpgu7cpt9v) - 58

[The Four-Fold Consent Model](#_mlx70qwpylui) - 58

[Advanced Consent Considerations](#_helaw4vgbsb6) -60

[What to Do in Breaches of Consent?](#_bzuo95ss6b82) - 60

[Spaceholder Basics](#_gww3geeksf6n) - 62

[Spaceholder Responsibility](#_9q0853invs52) - 62

[Roles // Titles Invoke Different Levels of Responsibility](#_7zk62m20od5e) - 63

[Common Baseline Psychedelic Spaceholding Agreements](#_84amopowewj2) - 64

[Spaceholding Philosophies](#_bddlhh8sl6x3)- 65

[Altered State Spaceholding](#_wtwcet6xil5u) - 66

[Journeyer and Spaceholder Alignment](#_lztbxfb5pf6o) - 67

[Contraindications](#_co9h06v1qgth) - 68

[Deciding on Dose](#_14hypz8iso63) - 71

[Classic Risk Reduction](#_6cs029dxn2ge) - 72

[Spaceholder Negotiation](#_knc0rl1qsjo7) - 73

[Why Choose a Guide Over a More Passive Sitter / Spaceholder?](#_30tzwv821l76) - 75

[Steering Back to Intention From Distraction](#_vknylcwmx0qk) - 76

[Menu of Spaceholding Offerings](#_70efrq456u3a) - 77

[1. Nonphysical Neutral Non-Active Presence](#_84053kwa0aem) - 78

[2. Reality Reflector / Anchor](#_4w73qo5wigih)- 80

[3. Nature Guide / Transport](#_c4tesyejlg0g) - 83

[4. Documenter / Recorder](#_snnii0x2qli6) - 84

[Active presence / More involved](#_6s3yj0dsz4xj) - 85

[5. Body Barometer](#_whpne7dncwi3) - 87

[6. Narrator](#_f5fau19ubapp) - 90

[7. Benefit Enhancement Active Presence](#_uziozid7mv4b) - 93

[8. Active Positive Presence {Maximum Benefit Enhancement}](#_5jlm21343uct) - 96

[9. Therapeutic / Trained Role](#_7kfqly6msen8) - 100

[10. Physically Supportive Presence](#_pajewzz5hiol) - 101

[11. Medium Touch](#_v3azapqg9rne) - 107

[12. High Touch / Heavy Contact / Embodiment Expertise](#_4m2u0wuzko8d)

[a. Human Weighted / Gravity Blanket](#_zbdvr5cc81rj) - 108

[b. “Laying on of Hands” / Energetic Work](#_ls6nldy7t89l) - 109

[13. Bodywork](#_42ing9xompzy) - 109

[a. Inversions](#_69lea5mb21te) - 110

[b. Light / Medium Bodywork / Massage](#_7qaajyfehuey) - 110

[c. Bodywork Surgery / Bodywork Ceremony](#_4004th4qw3d) -111

[d. Physical Trauma Release – No Touch](#_q1kpe86xx9u4) - 111

[e. Physical Trauma Release – Touch Through Cushions / Intermediate Medium](#_5l5r01hlhq8w) - 112

[f. Physical Trauma Release – Highly Direct](#_qv0crlpzjrpn) - 112

[Extreme Spaceholding](#_mqg2sv6n362b) - 113

[Spaceholding Techniques](#_vovjdxje8g82) - 116

[Challenging Trips](#_tm2p62w9yj76) - 116

[Professional Spaceholding Tips](#_snlve7j3tay3) - 119

[Increase Water Absorption](#_wazupa675gqg) - 119

[Nausea](#_elbdvie3c69i) - 120

[Muscle Cramps](#_n6vqigsdesmu) - 121

[Proper Preparation Promotes Pleasure](#_46idrayuczzs) - 121

[Somatic Techniques](#_ia54ti5usdhw) - 122

[Audible Relaxed Exhalation](#_50ma2j9by5my) - 122

[Eye Gazing](#_bbip6neos38) - 124

[Body Mirroring](#_9ep9hc1i0lwo) - 124

[Grounding Pressure](#_11pofuncgtv8) - 125

[Additional Techniques](#_p3nhbdyjft8d) - 126

[Pre-Planned Techniques](#_lewnlynyzxt8) - 126

[De-Escalation](#_byb5f4als7jh) - 126

[Asking Why?](#_i72hd5s7od1j) - 127

[Distraction](#_10v781y1tu2p) - 128

[From Spaceholder to Guide](#_hteo0yrj5hmb) - 129

[Consent Around Capability / Capacity](#_8u7jqh6gopba) - 129

[What to do in Cases of a Lack of Experience in the Journeyer’s Intention](#_i4klalkh0qy) - 132

[Screening](#_zek121yr5jz0) - 134

[Screening for Contraindications](#_gucmv3n783ls) - 134

[Informed Consent: Physical / Psyche Risk](#_t4ym6rfz5y9d) - 136

[Nocebo / Instilling Fear](#_4wptc4zhi4ky) - 136

[Reciprocity](#_15v8rpaz18r2) - 138

[Psychedelic Power Dynamics](#_2zhur6cemp4k) - 141

[A Good Guide Resonates with Your Inner Guide](#_m86vhzoug0ar) - 141

[Sketchy Shaman Warning Signs](#_dcf2uqtjj14w) - 143

[Motivation](#_g1o41rfdtlmu) - 144

[Predatory Marketing](#_lpssp5p35wpn) - 145

[Selling Training Programs Through Touting Financial Benefits / High Pressure Marketing](#_2mx08bo6go48) - 146

[Death by Lack of Support](#_9xrf931cs5f1) - 147

[Transformative / Restorative Justice for Psychedelic Abuses of Power](#_ege7otjtuown) - 148

[Emergency Situations](#_lfyj7bgnk59d) - 150

[Audible Relaxed Exhalation + Air Sipping](#_khjx1fdmrwdo) - 152

[Chemical Restraint](#_kbt5r6imltaw) - 153

[Physical Restraint](#_7tptvzjrz0d3) - 154

[Real World Scenarios](#_gop7x8rjycve) - 154

[Detailed Retelling of a Real Life Scenario](#_oekyvvna63yj)s - 154

[Guide Guidelines](#_7bvk6lgr44iv) - 160

[General Good Guideposts](#_phd4n2m92xyo) - 160

[Passive Spaceholding / Sitting Actions](#_a0l83ikrq7qa) - 161

[Active Guiding: Intention Setting, Strengthening, and Reminding](#_pjgj50i48pgy) - 164

[Therapeutic Environment Guides](#_gah4pz8p7o07) - 168

[Therapeutic Concepts](#_ct6ubt9bdl8) - 168

[Transference](#_kywdqy5csnjg) - 169

[Countertransference](#_se992le0md1g) - 169

[Transference vs. Countertransference](#_oq4z2qcmgx5t) - 169

[Supervision = Super Vision](#_gajfhzj9efge) - 171

[Cultural Competence](#_8smw7kek5y3m) - 171

[Caregiving and Consent](#_dzebtvczs5qq) - 172

[Advanced Spaceholding Ethics](#_cvnul8ar39do) - 173

[Sexuality and Psychedelics](#_dqvl6hqaqv35) - 174

[Redirecting Sexual Energy](#_i9xxk76s4x2e) - 175

[Logistical Recommendations](#_80z8vkv0stay) - 176

[Journeyer Preparatory Flow](#_xhau0x59pe25) - 177

[Journeyer Packing List](#_ju2yh4rhy290) - 178

[Guide Preparatory Flow](#_4pev5nr430zf) - 179

[Guide Packing List](#_l5mfy6nfmra3) - 180

[Guide - Upon Arrival at the Space](#_fqzo0l127wqg) - 181

[Collaborative Space Preparation](#_pum8e7qh3uph) - 182

[Psychedelic Support: “In the Wild”](#_eiwnzovwd0kb) - 182

[Integration](#_ww4jyay7mbfv) - 186

[New Narratives: Creating Ego Spaciousness](#_jj95weke59iq) - 187

[Incarnate Integration](#_25fr4h535dyb) - 191

[Guide Support During Integration](#_n5i20cleaxbw) - 193

[Guide Integration Support Actions](#_rlka08hvme57) - 194

[Challenging Integration](#_bjg78tiw0r2m) - 195

[Self-Sabotage](#_18d3ac7x5xk5) - 197

[Trauma-Informed Spaceholding Principals](#_bxk945tfxzez) - 199

[The Humanimal Nervous System, Trauma, and Effective Interventions](#_gvyr4ku9xspi) - 199

[Trauma Responses are Involuntary](#_2l5bd3nu5vz7) - 200

[Set up an Inner Sanctuary Space](#_byzvtsk65zyo) - 203

[Trauma-Informed Spaceholding](#_29silm9xxpmk) - 203

[Nervous System Basics](#_mzfq21ocjuie) - 204

[Nervous System 101](#_uq0axy78tapi) - 204

Nervous System Nourishment  - 209

[Solo Self-Regulation Techniques for Generating Oxytocin](#_emxt99vghjk9) - 210

[Bonus Partner and Group Methods:](#_tqv9ibxhfw97) - 219

[Emergency Nervous System Regulation](#_cfworxa8xxp0) - 220

[Trauma and the Nervous System](#_jyj11k15dt95) - 221

[Trauma Uninformed Pitfalls](#_6std66jo6j2e) - 225

[What is Being Trauma-Informed?](#_bzpon1ei60oz) - 225

[Toxic Positivity](#_kdftdpmwqtyh) - 227

[Children and Toxic Positivity](#_y9f1m97y3zxd) - 229

[Positivity Masking Denial / Enabling Unhealthy Inertia](#_og1a702alpo1) - 230

[Overcoming Toxic Positivity](#_n0af6e3i87ab) - 231

[Name to Tame](#_qwmpq0dj1ill) - 232

[Reframe Emotions as Information](#_g9oltywxwk4x) - 233

[Gaslighting](#_100dlqekop0z) - 233

[Gaslighting Phrases](#_upwe4a2lguyh) - 234

[Therapy Gaslighting](#_pwi4zutqxevi) - 236

[Gaslight Worker / Spiritual Narcissist](#_frkrhjq7dwzx) - 238

[Trauma-Informed Practice](#_yjtyqh7nypp9) - 241

[Discharging Emotion](#_33toz839bbh4) - 241

[Challenging Closure](#_84sm9x6q2nfm) - 241

[Anger](#_i1c7rlxdcro9) - 242

[Harvesting from Anger](#_uin82r2utpg) - 242

[How Not to Retraumatize Someone](#_4gkw8m8ows8t) - 244

[Maximize Choice](#_xfpn7gvsdnr5) - 244

[Special Consideration for Fawning](#_7g5tam9oxssa) - 245

[Referrals / Additional Training](#_t4qepu3ilw2l) - 246

[Don’t Dredge Details](#_gvme2f5m6g52) - 247

[Share Information: Actively Equalize the Knowledge / Power Imbalance](#_6hywpwbl1q8r) - 248

[Unbelievably High Tolerance](#_simw1whza7vg) - 250

[Western Trauma Literacy](#_e5ljllpcczlj) - 251

[Coherence Considerations](#_4yya2ckf0olw) - 254

[Trauma-Informed Techniques](#_7mdlri4vbqwc) - 255

[Trauma Literacy](#_h1gqj22onvd4) - 255

[Mindset: Trauma-Informed Frames](#_jalfq1n374w2) - 256

Distraction Can Help Create Breathing Room - 258

[Working Backward](#_srv7el42fgh) - 259

[Motivating Momentum](#_s9k66a5xo08) - 260

[Create Distance From the Situation](#_kcolqjng61ro) - 260

[Self-Advice // Switching Roles](#_7wfmwcuu0j10) - 261

[Practicing Challenging Conversations](#_bzbqoza5naw) - 261

[Therapeutic Techniques](#_fb64m8d7bg42) - 262

[Loving Eye Gazing](#_ptzkk8orhxla) - 262

[Roleplay - Family Constellations](#_i0qacalpnboj) - 263

[Internal Family Systems - Comedy Alchemy: Curative Clowning](#_5baiq29ml4iv) - 263

[Trauma Drama:](#_hlbk9a997luj)- 264

[Somatic Experiencing](#_6dswec1g9w4e) - 265

[Music: The Hidden Therapist](#_wetcelqu3hqc) - 267

[Psychedelic Spaceholding Ethics](#_spxoxils1y87) - 268

[1. Know Thyself:](#_ma65hfshwa6p) - 268

[Purpose / Motive Excavation:](#_s108ukjn7d7b) - 268

[Shadow Excavation](#_ntpnipwf7ryo) - 270

[Triggers](#_9ly2vn48qd7z) - 271

[Integrity](#_fj8xrmufxwoq) - 271

[Non-Judgement](#_h4ip5qufdaan) - 272

[Humility](#_1fn3l4vusaqx) - 272

[2. Accessibility Activism: No One is Fully Free Until We All Are Free](#_1fob9te) - 274

[3. Disclosure / Transparency:](#_3znysh7) - 275

[Disclosure](#_7dm5hq53v8k6) - 275

[Deconstruct “Expert” Power Dynamics](#_r6n3k86zegv5) - 276

[Dismantle Power Dynamics](#_8dqpih3aclkz) - 277

[Privilege](#_6m9haay87r9z) - 278

[Cross-Cultural Interactions](#_xvwz26anfwsw) - 278

[Transparency](#_mecy8xaxt3o6) - 280

[4. Consent: Contemplate Container + Boundaries Beforehand](#_2et92p0) - 281

[Contingencies](#_3dy6vkm) - 283

[Preemptive Consent](#_xcb1q54zk159) - 285

[Responsibility / Relationship / Role:](#_1t3h5sf) - 286

[Relationship:](#_3xvay9owvmvj) - 287

[Rapport:](#_5ad1zve3ja7x) - 291

[Session space:](#_vvvawlxcf02b) - 292

[Neighbors to the session space:](#_9rl8ym8tq56h) - 293

[Responsibility:](#_5yg5j4s5dmcl) - 294

[Intention / Intake:](#_wskond1apmsp) - 296

[Pre-care / Median Care / Aftercare:](#_wr2qbtadlyh9) - 297

[Integration:](#_dbp40lfish40) - 298

[Competency / Screening:](#_3alt439xjxgu) - 298

[Competency:](#_xslzw0rhmf8u) - 298

[Consider your capacity:](#_c24ery79tes1) - 300

[Screening:](#_vu4g3niddgv7) - 301

[Self-Aware Self-Care:](#_3r6syx3d68vu) - 302

[Cultivate Community: Consider the collective](#_ssctglv9scy7) - 305

[Ancestry](#_y4ynja59f0x) - 305

[Community](#_9h0zc017ey8k) - 305

[Accountability](#_9bjg1w4d8c5q) - 306

[Appendix](#_z18chvlxs9cj) - 308

[Glossary of Terms](#_66s39mzn4oo) - 308

[Additional Support for Mapping Intentions](#_wfczra6ld5ug) - 309

[Journeyer Yes/No/Maybe List for Spaceholder Menu of Offerings](#_7qn61u8aqaq4) - 314

[Ego Death Living Will](#_839gq9ow17gq) - 333

[Visceral Visualization: Sanctuary Space Discovery](#_qyup0yhp309t) - 337

[Sensing the Well:](#_go7g0ninhz5i) - 338

[Nervous System Nourishment and Co // Regulation](#_xne4birgwmoy) - 339

Rain Rhythm: - 340

[Festival Frontline Support Kit](#_tvnrqchp3pul) - 342

[Authors Background Extended](#_xzm16pty2us8) - 343

[Resources – 348 s](#_3w66pvbycw56)

[Acknowledgements](#_Acknowledgements) - 351

# Introduction

## Real-world scenarios to consider :

What would you do in the following real scenarios ?

1. It is your first roam off shift exploring an over 27,000-person transformational festival when 10 feet directly in front of you on a crowded dusty pathway, a tall male youth drops to the ground. You rush over instinctively and ask, “Are you ok?” as they repeat “DMT, DMT, LSD, LSD” in an unceasing increasingly loud loop, continuing to shout incoherently in response to questions such as “What is your name?” and “Do you know where you are?”. Suddenly, he shouts, “The lake, I have to go in the lake” and takes off sprinting directly in the direction of the lake.
2. You are summoned to the event Gate late at night with an immanent huge storm approaching, where there is a large nude older male fearful of any who approach -brandishing an umbrella to keep all at bay - on two doses of ‘the strongest acid I’ve ever had’. You are tasked with safely transporting him to the event Sanctuary space because no one knows what to do with him. You must find his ticket, which apparently is in his wallet, at an unknown location, for he does not have a shred of clothing on…
3. You are called out to a scene just before dawn as the last resort for a vomiting woman looping and lashing her limbs out at her campmates who are trying to support her.
4. You are relaxing off-duty in the lodge when a terrified humanimal is brought inside by two Peer to Peer support volunteers trying to bring them to the bathroom. The supported participant immediately collapses in the doorway, wide eyes darting around, fighting + biting their concerned caregivers.
5. You are resting around the campfire when a campmate says, ‘we need a green dot Ranger’ and you are informed that a stranger has locked themselves in the private composting toilet and is covering it with graffiti and making a mess.

Can you recall a scene in which you were at the edge of your experience? What principles or knowledge steered you, and those you were caring for, towards a safer state? Do you wish you had a tome of stories and techniques that have aided in similar situations in the past?

In Guide for Guides { G4G } I will share what worked in these real-world scenarios, insights from graduate studies in therapy, and what we can do as a community to proactively make situations like these significantly less likely and manageable when they do occur. Ultimately, G4G teaches a skillset refined by caring for those in extreme states of consciousness that harvests from these challenges to scaffold more graceful experiences and bring us towards a culture of greater compassion and care.

I seek to provide you with trauma-informed, therapeutic, scientifically grounded techniques that will support you in growing your Spaceholding skills. Thank you for looking out for one another and contributing to this reference text for our field to co-evolve.

## Why write G4G?

Psychedelics can be radically healing, but they also amplify trauma.

Psychedelics are unspecified amplifiers. Trauma ‘takes up a lot of space’ and is densely woven in the psyche. Thus, if you have a trauma history and use psychedelics your trauma will eventually arise.

Coupling this ultimate certainty with involuntary suppression of trauma, which you may not even be aware of, and thus unable to speak to, the trauma is hidden by subconscious survival mechanisms.

What an unforeseen shock then, to have this buried trauma erupt raw and unprocessed in an intense, unexpected upwelling during a psychedelic Journey {regardless of whether in a therapeutic, ceremonial, or recreational context}.

Thus, I hope that we as a caregiving community can recognize that any hopeful psychedelic Spaceholder has an ethical duty to be trauma-informed – at least at a basic level – so they do not inadvertently retraumatize those they are seeking to support.

Additionally, there are many tools, steps, preparation, mindful conversations and preparation that can be done to set up Journeyers, Spaceholders, Guides, everyone involved, to have a beneficial experience.

This is why I created “Guide for Guides: A Comprehensive Guide for Ethical Psychedelic Spaceholding” – to share scaffolding for proactive trauma support skill-building. I have not yet found trauma-informed tending comprehensively addressed in the trainings I have studied of psychedelic Spaceholding, so this guide was made to cover areas I did not find in other trainings.

Together we can co-create a comprehensively compassionate caregiving culture. You are invited to comment with any areas you wish were covered at [www.RAZ.MA](http://www.raz.ma), as ultimately G4G is a community resource founded with the hope that subsequent version’s wisdom will be crowdsourced.

## Author Background

Reverend Razma is a 15+ year veteran teacher of risk reduction, writing this guide from a mounting sense of responsibility– each year, due to the growing publicity of the psychedelic movement, there are more and more first-time or novice Journeyers experimenting with mind-altering substances, typically with Guides that are not trauma-informed, and often with inexperienced sitters, or no sitter at all {please at the very least find a friend and have them read this guide!}.

Reverend Razma is also a Cofounder of Earth Body Church and has been creating compassionate spaces for healing and empathetic exploration for 2 decades.

*For more about Reverend Razma’s background see* [*Appendix: Authors Background Extended*](#_xzm16pty2us8)

## Book Layout

This book is organized starting with key foundation information for everyone, then goes into greated detail by role. The book flow is laid out as follows:

* We begin with the experience of the **Journeyer**, then progress onto
* **Spaceholding Basics and Techniques,** moving onto
* Bridging to the realm of **Spaceholders and Guides**, and finally
* Outlining **Best Practices for Guides** including:
  + **Integration**
  + **Trauma-Informed Principles**
  + **Ethics**

The Appendix holds an overflow of information including: glossary of terms, exercises, questionnaires, checklists and more referential resources.

## Key Terminology

The following key terms are helpful in navigating this book:

* **Spaceholder:** a general term that may imply just having met someone and caring for them as a “Good Samaritan” but not actively involving yourself in changing the course of their trip. It is used as a wider umbrella term that includes: Peer-to-Peer, Guide, Therapist, Guardian, Angel, Trip Sitter, Sitter, or Adult.
* **Journeyer:** indicates the one being stewarded / cared for through an experience. “Journeyer” covers a wider breadth of contexts and was chosen over more restrictive clinical terms such as patient or client.
* **Guide:** a term that implies additional trust and personal responsibility in steering the Journeyer / Patient / Client. Guide is used as a wider umbrella term that includes both the clinical and spiritual community applications including: Therapist, Shaman, or Ayahuaser@
* **Therapist:** this term indicates professional study / licensure and has the most robust accountability structures currently due to certification and the potential for this to be revoked

Responsibly holding the ‘field’ and intentions required in pre-planned and professional contexts ideally involves greater preparation and additionally developed skill sets {these can come in the forms of a professional therapeutic role or peer-to-peer spaceholding}, and can also carry over into other high-responsibility formats such as a controlled ceremonial container, medicine circle, or group trip.

In specific settings in which it increases sense-making to use one of these terms to indicate another level of responsibility or type of relationship, I will call upon the term that conveys that relationship with the greatest accuracy.

I am eager to expand our vocabulary and look forward to our shared growth as a field in developing additional terminology which elucidates the specifics of roles, relationships, and techniques with greater nuance. For more definitions please see: [Appendix: Glossary of Terms](#_66s39mzn4oo)

## Environments

There are 4 main categories of environments you will find yourself in as a Spaceholder: a professional therapeutic role, peer-to-peer, co-imbibing friends, and “in the wild.”

**A professional therapeutic role** involves specific advanced training in the art of support and could involve: certification as a psychedelic therapist, and/or master’s level study in transpersonal / somatic psychology {or another psychedelic-prepatory flavor of therapy}, and/or years of study / training / inheritance of a medicine lineage. This covers clinical, spiritual, and ceremonial environments.

**A peer-to-peer role** involves pre-planning holding space for someone in a “trip sitter” context, but one in which the practitioner / Guide may not have ‘professional’ psychedelic support training.

Hopefully, at minimum, a peer-to-peer level of education would involve some amount of training in risk reduction and harm mitigation such as problematic drug interactions, recovery positions, and the knowledge of when calling in external emergency help is recommended {e.g. loss of consciousness with lack of breathing, aspiration on vomit, etc.}.

Cross-beneficial fields that can increase the competency of peer-to-peer work can include study in: midwifery / birth doulaing, death doulaing / hospice / end of life care, breathwork, psychological first aid, suicide / crisis hotline work, addiction interventions / sober support. Peer-to-peer work can also be informed by a history of personal psychedelic exploration.

**A “co-imbibing friends”** context is usually a significant step down in terms of responsibility, including less of a pre-existing plan, or role negotiation, and could be incredibly informal or spontaneous. Developing the skills from the other contexts will certainly aid in this format, but there is typically an understanding of the informal nature of the roles and power dynamics as equal in a shared trip.

This is not to say that trauma or challenge will not reveal itself within a peer-to-peer context unexpectedly, just that it is not an initially negotiated container in which this is encouraged to emerge. Within this context, you will hopefully have the familiarity of knowing those that you are partaking with – their struggles, how to comfort them, their triggers, and what is currently present / active for them in their lives.

**An “in the wild”** context is the most challenging to work with as it involves the least pre-existing knowledge and resources to aid. This wooly uncontrolled context can take the form of encountering someone in a “party” atmosphere, such as a festival, but could also look like encountering someone in public out on the street, especially if you are tasked as a community peacekeeper or first responder.

Within each of the 4 Contexts there are varying levels of how active or passive the Spaceholder role can be and the pre-existing level of rapport and knowledge between caregiver and Journeyer.

If possible, it is highly recommended for the Journeyer to preemptively communicate their preferences in detail of how they wish for their Spaceholder to be present with them {covered in the [How to Protect Yourself as a Journeyer](#_tlcvsh1zs298) section}.

If the context precludes this from happening preemptively before the encounter {e.g. chancing upon a Journeyer “in the wild”}, taking a curious, question-heavy frame as a Spaceholder can empower the Journeyer to convey this during the trip if they are verbal.

There is a reduction in responsibility as the roles move from a high-responsibility Professional, Guide, peer-to-peer, co-imbibing, and finally to least-responsibility Good Samaritan “in the wild.”

There is not necessarily a reduction in competency along this spectrum, and it is worth discussing among our psychedelic community as to the appropriate level of responsibility of a professional in a “co-imbibing with friends” context, or out “in the wild.”

In an allopathic medicine context, there are Good Samaritan laws in addition to the discipline’s customary recommendations for when it is morally responsible to apply one’s medical school training in reducing harm.

An open question in the psychedelic field is -do we wish to hold psychedelic professionals to a similar standard as we do physicians, in which they are encouraged to save life / minimize harm if they encounter someone who could be aided by their skills “in the wild?” Is there an implied minimization of expectation of training / competency being employed if not in a professional context?

Another factor to consider is that in being seen as a professional in your community, power dynamics come into play informally and to ensure safeguards are in place to not exploit this position of prestige.

Conversely, is it worth considering the contexts in which Spaceholders can have “time off” from this level of responsibility so that moral fatigue and burnout do not occur?

## How Does Healing Happen?

Do miracle psychedelic healings happen?

Yes, you can be astonishingly cured, or you can experience little outwardly noticeable change*.*

I frequently facilitate and witness “healing miracles,” especially through somatic support- but not acknowledging the preparatory work does a disservice to the effort required to set the stage upon which the highly visible apex healing moments play out upon.

You may have read of healing as a sudden solidifying of a story– observing a psyche as a beaker of liquid of super-saturated solution collecting change - added to drop by drop daily, until in ceremony or a psychedelic therapy session when a tiny solute seed crystal triggers the crystallization of the dissolved solvent – turning the liquid to a solid story that can support scaffolding new patterns.

We can often rush to attribute the whole phase state transformation to the single seed psychedelic crystal when credit is due to the daily drops that collectively summed to create the state that made the precipitation of the new perspective possible.

Additionally, the acknowledgement of the disease {dis-ease}, willingness to heal it, and surrendering oneself to the process of healing, however long it may take, are all necessary phases to arrive at the healing.

In the medical-industrial complex’s rush after pills & potions, and now capitalism’s push into psychedelics, there is a sprint towards compressed and highly visible stories of transformation – a la “20 years of traditional talk therapy in 1 psychedelic therapy session.”

While on the surface this can be true, in my lifetime of work with psychedelic risk reduction in the wild at festivals and in cleaning up the psychological messes of undertrained healers, often this massively expansive energy will cause “spun out” destabilization or be dissipated without compassionate companionship that directs your attention on: **intention setting, integration,** and **implementation support**.

There is an unbalanced misattribution of most of the healing to the passive chemical action of the compound itself – when the motivating medicine is in the open relationship between you and the plant or practitioner that aids you in reframing your relationship to parts of yourself or your past. The compound acts as a catalyst in the framework of the healing; it is not a single “silver bullet” solution.

# 

# Journeyers

## Intentions

Intentions are a critical and vital role of working with Psychedelics. It is recommended to always set and share your intentions.

Thoroughly exploring your intentions is beneficial for your own working clarity and you are not required to share your intentions with anyone - although if you feel comfortable, sharing is encouraged to allow your Spaceholder to attune and serve you more deeply.

Following the journey, it is also important to apply time and energy towards Integration, which is the synthesis and integrating of the lessons and/or healing from the Journey.

If you feel able to do so, sharing your intentions and realizations with those whom you feel safe in your wider community can aid in integration, as you will then have a wide support web to hold you to your intended changes.

### Intention Setting

When creating your intention, start with the basics:

* Why do you want to have this experience?
* What is calling you to into this experience?
* What do you want to learn?

Below is a list of pre-journey questions. Journaling on the questions that call your inspiration forth helps crystalize your intention / inquiry – feel free to choose your favorite(s) and focus on those.

You may also wish to create a vision / mood / art board for what you desire for your experience {feel free to combine mediums - collage via cutting out photographs, writing, drawing, mixed media}.

Writing out a comforting phrase to your future self while you are in the transformational experience in case of difficulty can be of support - for example:

* *This too shall pass.*
* *Remember your ancestors supporting you.*
* *You are physically safe – surrender.*

For a more thorough list of additional questions, see [Appendix: Additional Support for Mapping Intentions](#_wfczra6ld5ug)

## Journeyer Pre-Journey Questionnaire

A responsible Spaceholder, to have the Journeyer’s intention and best interests at heart, should engage in a screening process. Below is an example of an intake form focused on Journeyer safety, knowing their intensions, and what logistical support / interventions are welcomed to be used in what context.

***Answers are required for safety.***

1. What is your intention?
2. What is helpful for me to know about you in a spaceholding context?
3. Do you have any allergies to food or medication?

1. Any environmental allergies or sensitivities, such as to plants, seasonal pollens, animals?

1. What are your dietary preferences / restrictions?

1. What foods / beverages are grounding and nourishing to you, especially mid-Journey?

1. What foods / beverages do you feel would be supportive post-Journey?
2. Do you have any medical conditions {e.g. high blood pressure, epilepsy}?
3. Are you sensitive to any supplements or medications? Do you know your neurochemistry / neurotypical patterns {e.g. high/low serotonin}?
4. What medications are you taking?
5. What supplements/herbs are you taking?
6. What is your mental health history?
7. How is your current mental health?
8. What is the mental health history of your genetic line {most especially of importance is any blood relatives with schizophrenia or mood conditions}?
9. Do you have any preferences for how you are related to {e.g. Pronoun preferences, preferring phone over email when possible, able to understand self-dialogue with greater clarity via writing/speaking}?
10. If you go into a non-verbal space, how do you prefer to be supported?
11. What are ways that you enjoy becoming comforted (e.g. head/hair being pet, arm around the shoulder, heavy blanket, verbal acknowledgment that someone is present with you)?
12. What helps you feel connected (e.g. eye contact, words of affirmation)?
13. Do you have any patterns it would be useful to know (e.g. needing to feel very welcomed into things, that if you are solo for more than 30 minutes you would like to be checked in on, feeling smothered if not allowed to be silent and quiet for long periods of time)?
14. What are your triggers? How do you prefer these to be interacted with (avoided, gently questioned, leaned into, etc.)?
15. Do you have any injuries? Body traumas?
16. What is your trauma history?
17. What are your common interrelation patterns / roles (e.g. fixer, helper, mediator; avoidant / anxious / disorganized attachment)?
18. What is your experience with altered states of consciousness {e.g. birth, breath work, out-of-body experiences, near-death experiences}?
19. What is your history with transformational experiences {planned / unexpected, what aided integration, what Spaceholder actions were helpful, can you extrapolate any patterns from your experiences, what helped you through any challenging moments}?
20. What is your experience with extreme states of feeling / sensation {e.g. Bodily injury, GBH, emotional overwhelm, anxiety}?
21. What are your feelings about death?
22. If you thought you were actively dying, what would you do? How could you be reassured / find peace?
23. Do you find yourself sensitive to consciousness-altering compounds {e.g. stimulants {caffeine} or depressants {alcohol}}?
24. What helps you fall asleep or wind down?
25. What types of music, artists, songs, or sounds uplift you or make you feel at home?
26. What would your perfect playlist for a transformational journey sound like {please feel free to create this playlist}?
27. If you prefer a Guide to prepare a playlist, do you prefer music without words? What about music with words from a language you do not understand? What languages do you understand ?
28. Are there any scents, foods, clothes, or sensations that comfort and ground you {e.g. Lemon essential oil, a favorite robe, or heavy blanket}?
29. Who are your emergency contacts?

1. Under what conditions do you want them contacted?

1. Have you told them what you are doing and that you may contact them {it is recommended you inform them ahead of time if you can, but if you cannot please mention why not - e.g. they would disapprove due to their religious background, they have no experience with altered states and would be concerned for your safety...}?

1. Under what circumstances would you want emergency services contacted?
2. Do you desire ego death? {If yes, mandatory to answer ‘[Ego Death Living Will](#_839gq9ow17gq)’ in the Appendix section}

**Optional**: communication and transportation gateways: Would you want me to be in charge of your phone / keys / other essential objects? If so please let me know where they are, or we can agree on a place to put them.

**Optional**: Journeyer shares how to unlock phone / computer if this is needed to access particular soothing media / photos / music and their location on the device. Alternatively, these can be sent to the Spaceholder and tested for media compatibility before the session.

## 

## How to Protect Yourself as a Journeyer

The following are actions you can take as a Journeyer to proactively protect yourself and reduce your risk in a psychedelic therapy, Guiding, or Spaceholding setting.

Psychedelic abuses of power typically stem from the inherent power dynamic that places the Spaceholder in a position of power above you.

Here are ways to bridge that power gap:

### Guide Vetting

If you are seeking a Guide, it is imperative to determine what their motivation is in doing psychedelic healing work. Vetting your Spaceholder closely is wise when your psyche will be laid bare - the most vulnerable time of your life beyond infancy.

In taking care to choose a responsible guide, a Journeyer can support dismantling the inherent and often invisible power dynamic present between Spaceholder and Journeyer through asking informed questions and trusting their “gut instinct” / incarnate intuition {See Appendix [Glossary of Terms](#_66s39mzn4oo)}.

If something feels “off” about working with a particular practitioner, trust the wisdom of your gut / subconscious as it is speaking through your body, as your subconscious has access to a wider range of signals than that of the conscious mind {[Corporeal Consent](https://www.raz.ma/corporeal-consent/) is a book that helps cultivate and strengthen this enlightening embodied sense and is written by the same author as this Guide for Guides}.

#### Areas of inquiry from Journeyer to Spaceholder:

**Competency / Scope of Practice:**

1. Where has the spaceholder received training?
2. How long was that training?
3. What did they learn during that training?

**Trauma-Informed:**

If you as a Journeyer have a trauma background, or you desire to discharge your nervous system around a traumatic event in your life, does your Spaceholder have trauma training? *(Keep in mind that psychedelics will also frequently bring trauma to the fore that you may not have previously been aware of, so trauma training is recommended for all Spaceholders)*

**Specialization / Referrals:**

* Who does your Spaceholder specialize in working with?
* Who do they specifically not work with?
* What are their triggers?
* When does the Spaceholder refer out to other practitioners?
* Does the Spaceholder have personal experience with your presenting area of focus?
* Do you share relevant life experience / background with your Spaceholder?

**Spaceholding / Healing Philosophy / Style:**

Have a thorough conversation with your potential Spaceholder to get on the same page about expectations and desires.

This can include discussion about:

* Spaceholding style
* Philosophies
* How the Spaceholder describes their role
* Type of session
* What interventions the Spaceholder may use and in what context
* How the Spaceholder believes healing happens

**Menu of Spaceholding Offerings:**

More detail about Spaceholder role delineation with the spectrum ranging from passive body watcher to hands-on trauma release – can be found later in this book [Why Choose a Guide Over a More Passive Sitter / Spaceholder?](#_30tzwv821l76)

See [Appendix: Journeyer Yes/No/Maybe List for Spaceholder Menu of Offerings](#_7qn61u8aqaq4) for a questionnaire about what interventions you are comfortable with and in what context particular interventions can be used for the Journeyer to complete for the Spaceholder.

**Consent:**

A 4-fold consent model supports Journeyers in finding greater sovereignty who may be prone to ‘fawning’ or otherwise giving the answers that they perceive are wanted from the Spaceholder :

* Consent via questionnaire apart from Spaceholder
* Clarification of details after review of written questionnaire
* Consent verbally before the session with a discussion of the specific context of potential intervention use
* Consent immediately before the action {especially for physical touch}

**Values:**

What values does your Spaceholder hold in high regard?

Do these match your values / needs?

**Risk Reduction Awareness:**

Does the spaceholder have a screening process where they have asked you about risk factors / contraindications for entering experiences of intensity / psychedelics?

Did they inform you of the risks associated with taking psychedelics, and specifically the psychedelic / methodology you have chosen?

Have they inquired about aftercare and what community support and resources are available to you during integration?

Will the Spaceholder be consuming mind-altering substances as well? At what dose / level of alteration?

**Accountability:**

Does the Spaceholder have an accountability network you can contact?

Who are their mentors?

Do they have a process in place to handle allegations of misconduct?

**External Resources:**

Where is the Spaceholder getting their needs met outside of a session setting?

If you find the Spaceholder does not share enough of your life experience, ask them if they could refer you to someone else who shares more of your background.

Additionally, another way that you can provide yourself with a backup net of protection during the session is by video or audio recording the proceedings.

If you find the energy in the session is feeling off or that you are feeling uncomfortable with the practitioner’s actions, having an impartial witness in a camera or audio recording can bolster your confidence in speaking up for yourself.

This is another area in which you can determine compatibility with a particular Spaceholder, if they are not available to be documented and, if it is important to you, find a practitioner who is.

Finally, it is worth mentioning that if you have the resources to do so, arranging for two practitioners to be present, especially if they do not typically work together, with one acting as a witness who is only to intervene in the Journeyer’s best interest.

This dual perspective can provide one of the safest containers for deep or higher risk work. You may also decide that a structure of both practitioners working as a team, perhaps due to different areas of focus or specialization, can be a synergistically assistive container for you as a Journeyer.

Another more accessible alternative may be to enlist a trusted friend you are comfortable with serving in the role of observational sacred witness or to invite them to intervene on behalf of your safety as a Journeyer.

**Red Flags to Look Out For:**

* Never referring
* Lack of boundaries
* Egoistic / Narcissistic traits
* Insular – not connected to a community of accountability / growth

More detail about warning signs can be found in the [Guide Red Flags](#_eellsq62j15o) section below.

### Screening

Does the Guide’s screening process feel comprehensive?

One topic to ask about is if there are reasons you would not be allowed into the healing space, for example if it is a medicine ceremony and you menstruate and are bleeding, would you be allowed into the group ceremony?

### References

Ask to speak to those that have worked with the Guide before.

Here are some questions you can ask their references:

* What was their experience with the Guide?
* What went well?
* What could have gone better?
* What would they change?
* How was their interaction with the Spaceholder(s) and/or Guide(s)
* Would they recommend the Guide to family or friends?

### Accountability Network

Ask to speak to the Guide’s accountability network. Ask about the process if there is an issue or breach of consent or agreements.

## 

## Journeyer Post-Journey Journal Prompts

### Integration

1. What would it look like to live your life in greater harmony with the insights you received?
2. Are there any images, animal/ plant allies, or spirits that emerged in your experience that you can use to anchor your new patterns and insights?
3. Are there any words, mantras, memes, phrases, or encapsulated understandings that emerged to help you remember your new path?
4. Are there any objects, pieces of adornment {jewelry, face/body paint markings, pieces of clothing} , or material(s), colors, actions, movements, or activities that will help continuously remind you to deepen into your new path?
5. Did any sounds, chants, toning, or songs come through this experience you’d like to carry forward into the future?
6. What is the elevator speech of your experience {3-minute summary}?
7. What would help you with your self-care? Are there any new practices that emerged from your experience that you would like to incorporate into your routine?
8. You may wish to create a vision board, journal, write a list, or write out meditations to place you back in the state(s) that served your growth moving forward from the experience.

### Ongoing Journaling

* What is helping support my success?
* Are there patterns I am noticing that strengthen the ease of living in my new narrative?
* How am I recognizing my successes – especially in the short term if it is a long-term goal?
* How am I celebrating my successes?
* What are the patterns behind the times in which I am tempted to or slip into past habits?
* How can I increase my awareness of alternative choices before I select a past pattern?
* How can I create structures of support for my new narrative?

## Guide Red Flags

Some problematic Guide energies that may occur are:

### Refusal to Refer

A Guide should prove themselves to be trustworthy and capable of holding you in your most vulnerable state. It is likely to become deeply problematic down the line if your potential Guide is not capable of setting and upholding healthy boundaries and if they are unfamiliar with the trauma you are seeking to heal.

Additionally, it is key for your potential Guide to have strong integrity with the vulnerability that is shared during a session which can be demonstrated in confidentiality policies.

[A Good Guide](#_m86vhzoug0ar) will refer you to another Guide if they are not suited to serve you.

There are a few common reasons that saying “no” to Spaceholding can be challenging:

* *The potential Guide may feel as though you have no one else to turn to*
* *The potential Guide may feel they are the only one who can help you*
* *The potential Guide may have a ‘savior complex’ that becomes activated*
* *The potential Guide may be the Journeyer’s close friend and really care for them*
* *The potential Guide may think they know what’s best for the Journeyer {an energy that can turn paternalistic}*

It is good to acknowledge these often-disowned parts of ourselves, and as healers it is imperative to be engaging in personal shadow integration work to not allow these patterns to insidiously rule one’s behavior.

### Never Saying “No”

There are situations that exist that a Guide should say “no” to, many of which have nothing to do with the Journeyer, such as the Guide’s own emotional unavailability, tiredness, or need to take care of personal tasks.

In these situations, it is helpful when the potential Guide explains their condition and directs the Journeyer to someone else who can provide them with support, or even to a hotline if applicable.

Consider that if the potential Guide proceeded in pushing past their physical or emotional needs to recharge, they could be conveying mixed signals, for example, if they are physically exhausted and unable to be present for you, you could interpret this as being fed up or bored with you and retract when it was simply a situational need for the Guide to rest.

If the potential Guide finds themself saying “yes” and overextending themselves frequently, they may have experienced adultification, developed a fawning trauma response, or have attachment wounding to examine.

### Care Vulture / Caretaking Attachment Orientation

If the potential Guide consistently finds themself unable to say “no” {to a client, to a session, to delaying supporting someone else when they need to take care of their needs}, it may mean they have a compulsion towards caretaking, which may have evolved as a survival strategy due to the way in which they were raised and the subsequent attachment patterns that are their basic interpersonal neuronal wiring.

These behaviors may also indicate a lack of boundaries. Speaking from the lexicon of psychology, searching for additional information about [differentiation, transference, and countertransference](#_ct6ubt9bdl8) may be helpful {the skills of knowing what is yours to own and what is not yours}.

The opposite side of this enmeshment would be not taking on any responsibility for the effect that the potential Guide is having on others, which is discussed later through the concepts of [spiritual bypassing and spiritual narcissism](#_3adji736gqby).

### Over Attached to Themselves Being the Cause of Healing Success

A related issue to being a “care vulture” occurs when the potential Guide is over-attached or over-identified with their role in the healing process.

Most recently, the author has witnessed this occurring when a Journeyer / Patient has been working with someone for some time in a professional psychedelic therapy context, and then the Journeyer decided to take a pause with working with that particular practitioner. The reasons for this can vary - the Journeyer may feel they have received all they can, they are moving into exploring different modalities, or their location or resources cause working with the practitioner to be difficult. Unfortunately, in this circumstance, the Guide / practitioner reacted with shame, guilt, and reluctance to transition the relationship.

There may be several causes to the reaction of the Journeyer wishing to “take a break” personally – the experience may be bringing up the Guide’s inner critic, and the Guide may be feeling shame and guilt at the projection that they did not do enough to help their Patient.

The Guide may feel as though the change in relationship is somehow dismissive or not appreciative of all the work they put into helping their Journeyer / Patient, and the author has heard of several practitioners responding to a Patient’s desire to terminate or pause care by listing at length the breakthroughs they have made with their Patients in an effort to keep them.

The practitioner / Guide may also have become financially reliant upon that regular healing session, and they feel destabilized at the thought of a reduction in income, a danger we will discuss later in G4G in [Reciprocity](#_15v8rpaz18r2).

Regardless of the reason, this type of behavior is taking the Journeyer’s desired shift too personally, with the practitioner becoming too identified with their role in the Journeyer / Patient’s process, or even smothering the natural changes that take place within relationships over time as Patients grow with the Guide’s own internal need to feel valued and cared for.

Remember that the main work as a Guide is to create a space of safety and consideration that allows the Journeyer’s inner healer to emerge and gain strength and confidence.

The Guide is not the only one making the healing happen {can you feel the power dynamic in this mindset?}, the Guide is merely creating the container of care to support the Journeyer’s own wholeness to emerge.  For more insight into what healthy Guide energy feels like in practice, please see [how does a Good Guide Behave](#_m86vhzoug0ar).

### If They are Over-Identified in Their Personal Narrative as a “Master Healer”

If the potential Guide always thinks they know what is right for someone else, this is their ego being overly attached to a narrative / identity of themselves as a healer, and this can easily slip towards exploiting a vulnerable power dynamic via [spiritual narcissism](#_3adji736gqby).

This egotistical mindset, when carried too far promotes a paternalistic attitude and “knowing what’s best”’ for someone else can create a toxic power imbalance.

There is a caveat that the Guide can have a sense, due to experience, that something has usually been more effective in the past for most people they have encountered or worked with. The dynamic turns problematic if the Guide is not open to feedback that they may be incorrect and especially if they are unwilling to acknowledge that as a possibility.

An especially insidious manifestation of this can also move into the realm of spiritual bypassing or spiritual narcissism in which the potential Guide is not acknowledging the role that they are playing in affecting a situation through a lack of dedication to their own personal self-development work {see the following terms for additional nuance into this dynamic: [projection](#_ct6ubt9bdl8), [transference](#_kywdqy5csnjg), [countertransference](#_se992le0md1g), [gaslighting](#_100dlqekop0z), and [gaslight worker](#_frkrhjq7dwzx)}.

This self-absorbed path can also cause a guru or narcissistic type of energy to grow unchecked {see [spiritual narcissism](#_3adji736gqby) for more}.

Additionally, this type of egoic growth can lead to a runaway situation in which the potential Guide abdicates accountability structures and decides that they no longer need to be seeking mentors, they do not hold themselves responsible for their impact on others, or they do not seek feedback to improve – setting up the conditions to create a treacherous self-aggrandizing egoic echo chamber.

### Cool / Social Hierarchy

Additionally, if the potential Guide is motivated by the allure of the ‘cool’ aura around this work {especially as it becomes more mainstream and risks decrease} or are attached to being able to “handle anything” without assistance, they will be unlikely to turn anyone down, even if someone they know may be a better fit for what the Journeyer is needing.

This will also make the potential Guide less likely to “kick it sideways” or call for help even though it may be needed {such as in a medical emergency}.

As a generalized rule, the Journeyer’s needs should take precedence over a Guide’s preferences / personal view {within reason}, and when this is not the case there is an ethical snarl that is worth untangling before you bare your psyche to this potential Guide.

Additionally, over time the potential Guide will find that there are many unglamorous aspects to egoless Psychedelic Spaceholding which may include cleaning up bodily fluids, long hours of focused attention on someone else, holding a space of non-judgment and no shame, consoling people in the depths of their depression / existential dread / fear of death, and seeing people in a lot of physical or emotional pain that the potential Guide may be powerless to reduce or remove.

Additionally, it is worth the potential Guide considering the high level of responsibility a Spaceholder takes on when in service as the guardian of someone’s psyche and physical body, the unpleasant conversations called for when needing to hold others accountable for their intentions, and broader ethical responsibilities to the field - there is a lot of “invisible” caregiving that needs to be considered in this emotional endurance work of Guiding.

### Financial Need / Gain

If for the potential Guide’s survival, they need to be taking on only paying psychedelic spaceholding patients this sets up a power dynamic that encourages dependency on patients going into multiple sessions, the pursuit of more patients, and a sense of needing to take every patient.

Although many Spaceholders find it appropriate to ask for donations, or arrange energetic compensation for their time / energy / expertise / training, be observant if they are creating a situation in which they are depending on Psychedelic Spaceholding as their only source of livelihood as it can easily create a profiteering situation in which finances are prioritized over ethics due to a survival drive.

This is not to say that a vocation cannot be made of being a medicine person but to more closely observe and create more accountability safety checks if this is the case.

### They Do Not Know Their Triggers

Knowledge and examination of one’s personal triggers as a Guide are necessary to hold the deep compassionate space that is often called for in a psychedelic session.

As an academic example, while enrolled in the master’s program in transpersonal therapy at the California Institute of Integral Studies {CIIS}, the idea of self-knowledge around personal therapist triggers when sitting with a client was repeatedly impressed upon us.

Insofar as the therapist has a trigger around sexual assault, animal cruelty, pedophilia, racial violence, gender violence…etc...and the patient desires to explore these aspects of themselves as a victim {or even victimizer}, the therapist needs to be aware of their bias and potentially refer the patient elsewhere if the trigger is “hot” or active enough to interfere with their ability to be present without projection or transference.

Thus, there are likely some situations in which a particular Spaceholder may not be a good fit for that particular Journeyer such as when the Spaceholder has a trigger related to what the Journeyer wishes to work on. We will explore some of the activating details to consider in related circumstances below.

### When the Spaceholder’s Characteristics are a Trigger

Another situation in which the Spaceholder / Journeyer combination may not be the best fit is when the physical characteristics of the Spaceholder are related to the trauma of the Journeyer {e.g. potential Spaceholder is a large Caucasian male when the Journeyer has experienced sexual assault at the hands of a large Caucasian male}.

Over time as a relationship of trust develops and the material has been explored in a way that discharges some of the energy around it, the Journeyer may determine that it would be beneficial to have space held for them by someone who is reminiscent of their violator, but this needs to be carefully and clearly discussed, in so far as it greatly increases the risk of an adverse reaction as the likelihood of re-traumatization is significant.

Conversely, if both the Journeyer and Spaceholder feel capable of taking on a more advanced case, this may be an opportunity to directly address a past pattern in depth.

Please be aware that this is elevated risk and “playing with fire” in that triggers and projections will be actively brought to the fore, so it is recommended to bring in another second neutral Spaceholder in this process as the potential for the situation to become muddled is high.

A foundational part of the exploratory process in determining whether the Guide and Journeyer are a good match to work together is [Screening](#_qdb8149my8eg).

Screening is essential to risk reduction as it allows for informed reasoning if psychedelics or more generally altered states would be well tolerated or would be contraindicated for the Journeyer, such as in the case of a blood relative family history of schizophrenia.

The potential Guide’s Screening should feel comprehensive to you as a Journeyer.

### Competitive Healing

In the psychedelic healing ecosystem, there is a pernicious machismo thread that “more is better” when it comes to dosage, number of ceremonies, diversity of medicines, diversity of healing modalities, the intensity of healing modalities, etc.

This competitive / ranking hierarchy can look like taking large amounts of psychedelics, pushing oneself to take “heroic doses,” or combining medicines in one session or over a short period of time and speaking about these high-risk endeavors widely.

Examine the intention for these types of extreme or polydrug or polymedicine use – is this needed? Is this just to push the envelope? To be seen as the most extreme or “far out”? To be seen as an “expert” in the edge or high-risk realms?

From a risk reduction frame, taking the smallest dosage and using the least intensive methodology necessary to achieve the treatment or transformative effect is the safest and most sustainable, both for your psyche and for the planet in terms of resource consumption.

### Spiritual Narcissism

A particularly damaging personality type the healing field is currently inherently vulnerable to is spiritual narcissism. Religious / spiritual narcissism occurs when a person weaponizes religious or spiritual concepts and scriptures to elevate themselves to a position higher than those around them, constructing themselves to be beyond reproach.

Warning signs of spiritual narcissism include: not taking feedback and not acknowledging errors. Frames and phrases that may reveal spiritual narcissism are included in the section [Gaslight Worker / Spiritual Narcissist](#_frkrhjq7dwzx).

The field is especially vulnerable to this manifestation of manipulation in situations in which a group or practitioner is unwilling to train a critical eye on their own behavior, which is why G4G advocates for as many diverse accountability structures as possible.

The concept of spiritual narcissism is related to spiritual materialism which is a term coined by Chögyam Trungpa in his book Cutting Through Spiritual Materialism.

Other trauma-uniformed reg flags and their antidotes mentioned later in G4G include: [toxic positivity](#_kdftdpmwqtyh), [gaslighting](#_100dlqekop0z), [therapist gaslighting](#_pwi4zutqxevi), and [gaslightworking](#_frkrhjq7dwzx).

# Consent

The author has written extensively on the nuances of this crucial topic in a lengthy book called [Corporeal Consent](https://www.raz.ma/corporeal-consent/) which is recommended as a foundational text in addition to this book.

The following summary of points, especially relevant to consent in the context of Spaceholding, will be a truncated abbreviation of a topic that deserves significant consideration outside of this brief treatment.

The presence of consent is critical as it is the foundation of trust from which healing can spring forth.

**Consent is informed, freely given, revocable, conditional, and is ideally enthusiastic.**

Consent in Guiding is essential because healing work involves vulnerability and surrender to the Spaceholder.

## Basics of Consent

Unless there is the presence of a “no” there is not truly a “yes.”

Consent requires the presence of sovereign choice in the moment, while honoring that consent can be difficult to navigate when there is altered mind chemistry at play, which may be compounded by: cultural and language misunderstandings, trauma responses, and participants not being on the same page of understanding.

### Consent is Informed

Consent honors the sovereignty of the Journeyer in providing them with all of the data and detail that they need to make an informed decision.

If there are relevant facts omitted or distorted, the Journeyer will not be equipped with an accurate map of the decision-making terrain.

One area particularly relevant to psychedelic guiding occurs when there is a psychedelic virgin who has little or no experience with altered states. The question arises - what level of disclosure as to what could happen is appropriate, especially considering adverse experiences?

The Spaceholder in question would not wish to invoke a ‘nocebo’ effect in which a neutral stimulus is paired with a negative outcome, which can end up becoming a psychological self-fulfilling prophecy.

Instead, a helpful frame to take is to constructively and collaboratively solve for the decision tree of potential adverse reactions. This then becomes a method to both provide informed consent and proactively ask for consent for specific interventions from the Journeyer as to how they prefer that these situations are handled ahead of time.

For example, ask what the Journeyer would wish for the Spaceholder to do in instances of: paranoia, suicidal ideation, harm to self, harm to others, harm to objects/the space, and thought loops.

Another way to work with a lack of direct experience with psychedelics is to inquire as to the Journeyer’s experience with other altered states of consciousness such as: fasting, breath work, lucid dreaming, sleep deprivation, near death experiences, extreme pain, dissociation, birth, witnessed deaths, and/or illness.

Finally, the Journeyer’s sensitivity to common stimulants such as caffeine, over the counter pharmaceuticals, or prescription medications can help fill in the picture of their experience with how sensitive their consciousness is to being altered. Keep in mind that states of physical or emotional pain {such as depression} can increase sensitivity to psychedelics and a smaller dose is recommended.

### Consent is Freely Given

Power dynamics affect the ability of consent to be freely given.

Power dynamics exist between the Spaceholder and the Journeyer, especially when the Spaceholder is taking on a role of greater responsibility such as a Guide.

Thus, for freely given sovereign consent to be valid the power dynamics present must be systematically rebalanced between the Journeyer and the Spaceholder.

Methodologies that are helpful to accomplishing this rebalancing include having the Guide actively dismantle the power dynamics. The intricacies of dismantling psychedelic power dynamics are discussed in depth in the [Dismantling Power Dynamics](#_8dqpih3aclkz) section.

### Consent is Revocable

The Journeyer is empowered to change their mind.

One area in which it is physically impossible to change your mind is in ingesting a psychedelic, so remember to “start low and go slow” - you can always take more but you cannot take less.

### Consent is Conditional

Consent is conditional upon previous agreements and understandings.

For example, when inquiring about the Journeyer’s preferences for any specific intervention, such as handholding, asking the conditions under which that would be welcome is recommended.

For example, the Journeyer may agree to receiving a hug, but only if they ask the Spaceholder for it, and they are not wearing any chemical scents.

### Consent is Ideally Enthusiastic

Interestingly, in the context of a ceremony in which difficult topics or experiences are coming up, consent may not always be enthusiastic.

When the Journeyer is choosing a challenging growth intention, it is even more important to front-load the consent process and what philosophical and energetic frames are going to be embodied by the Spaceholder.

### The Four-Fold Consent Model

The Four-Fold Consent model helps create distance from psychological, emotional, and attachment-influenced patterns of relating that can interfere with freely given consent.

As a specific example, someone with a Fawn trauma response {in which their nervous system feels safer when they are caretaking those around them as their primary orientation} will have a deeply ingrained pattern of feeling the choice that the Spaceholder “wants” them to make and having that perception influence their choice even though it may not be in the best interest of the one doing the fawning.

The Four-Fold consent model manages to bake in as much spatial sovereignty as possible in the decision-making process.

The Four-Fold consent model :

**The first stage** utilizes a “take-home” [yes / no / maybe checklist](#_7qn61u8aqaq4) before the session, an example of which can be found in the Appendix.

To reduce the likelihood of a fawn / caretaking response by the Journeyer it is recommended that they fill the list out when not in the physical presence of the Spaceholder.

**The second stage** is a refining in-person conversation to review the written guidelines the Journeyer has put forth to align on details.

**The third stage** is asking the day of before the session how the Journeyer feels about any particular touch intervention {as their level of tenderness or vulnerability can change depending on where they are at in their hormone cycle and what they have lived through recently}.

**The fourth stage** would be to ask if touch is ok in the moments before contact during the session.

At each stage of this process, the Spaceholder should be watching for somatic cues – shifts in breathing and muscle tension can indicate a nonverbal “no.”

Even if the Journeyer has asked for or consented to touch and you notice their body is saying no, they could be following a fawn trauma response, and you should interpret a somatic no or hesitation as a no.

**Bonus Consent-Improvement via Documentation** : If the Journeyer consents, the Spaceholder may also consider videoing and voice recording the session as an “external” witness to review their actions and improve their consent skills, much as body cameras are used.

### Advanced Consent Considerations

The intricacies of consent become more complex when an altered state is at play.

There are some schools of thought that you cannot give consent when you are intoxicated.

Thus, it is recommended that you front-load as much consent for interventions and what the Journeyer prefers that the Spaceholder does in as wide an array of scenarios as possible when the Journeyer is sober or in a baseline headspace.

If the Spaceholder is also altering their state of consciousness, it is recommended that there is someone else present in the space who stays sober who is also aware of the consent plans and agreements made who can provide a non-altered perspective.

If this is not possible, and all parties are altered, it is recommended that you have a high level of rapport and do not engage in any high-risk interventions that you have not previously tried when one of the parties was sober.

When in doubt, wait it out.

## What to do in breaches of consent?

There are not currently any governing bodies to consult with that are knowledgeable in the intricacies of consent in psychedelic Spaceholding contexts, although there are some emergent spaces where the start of the foundational conversations are nascent.

Earth Body Church is putting forth a model of councils that would help mediate consent violation accusations through a transformative / restorative justice lens.

In the interim, we recommend having a robust network of mentors, elders, and community to call upon in the case of an allegation.

Each Spaceholder should also have a publicly available website page where Journeyer’s can anonymously report to that Spaceholder’s personal accountability pod / council.

# Spaceholder Basics

## Spaceholder Responsibility

Are you prepared, and do you have the capacity, as a Spaceholder, to step into the responsibility of the outcome of your session with the Journeyer?

This may involve extensive integration, helping the Journeyer find meaning in their life after an existential emergency, nursing them back to mental health if they experience a depressive dip, and/or being their primary source of support if they do not have a support network.

The less of a network of support the Journeyer has, the greater the likelihood that they will need to lean on you. As the Spaceholder you should be prepared to take on responsibility for the Journeyer’s well-being and thus screen for this level of responsibility accordingly.

If you do not feel capable of doing so, please strongly reconsider holding a psychedelic-induced container for this Journeyer.

If you are engaged in psychedelic risk reduction volunteer work {especially in a context such as a festival} there is inherently less of a sense of responsibility as you are donating your time ‘in the wild’ and not administering compounds {in so far as you are not the active agent causing and thus needing to take responsibility for the outcomes of administering}.

Even in a volunteering context, it is wise to consider that the Journeyer will bond with you, as they may be going through the most profound experience of their lives, thus preparing for the possibility that the Journeyer may desire additional contact after the initial aid they receive.

Journeyers who experience profound changes in consciousness may feel as though you are the only person who was present for their realizations and thus viscerally understands and the being whom they can connect to, so be prepared for the possibility of lifetime attachment.

For example, even after a decade of time has passed since I originally held space for a Journeyer experiencing a paranoid / suicidal existential crisis ‘in the wild’ I am still in touch with them and providing sporadic support.

Consider what level of responsibility for the Journeyer’s wellbeing you are ready and able to take on and only operate to that level of work / title as a Spaceholder.

In a Risk Reduction Peer-to-Peer context, ideally, the agreements around the level of care and follow-up are clearly shared and may be less broad depending on the organization providing care.

## Roles // Titles Invoke Different Levels of Responsibility

There is a step up in responsibility that occurs between a Risk Reduction / Peer to Peer setting, and when one enters into the role / title of a Guide.

There is an even larger step up, one that is backed by a board, licensure, rules of conduct, and certification in the designation “Therapist.”

*Not sure what your Journeyer is expecting or wants?* Ask!

I have been well served in conceptualizing Guiding as an agreement that the Journeyer wants the Spaceholder to have the option of playing a more active role in the experience.

The title of Guide and thus more active agency in the experience of the Journeyer also comes with a concurrent step up in being responsible for the outcome of the Guide’s actions.

Active agent Guiding is in contrast to what is often a more “hands-off” risk reduction Peer-to Peer or “traditional” body watching / trip sitting role.

There is an extensive yes/no/maybe list in the Appendix that can assist the Journeyer in determining what level of support / steering they are seeking in their experience with nuanced descriptions of what interventions the Spaceholder is green lit to use when.

## Common Baseline Psychedelic Spaceholding Agreements

The following are commonly used, and shared, spaceholding agreements in existing transformation and healing focused containers:

1. No harm to self
2. No harm to others
3. No harm to property
4. Not allowed to leave the space until you have returned to baseline / regained your logical faculties

## Spaceholding Philosophies

There are significant philosophical differences between the spaceholding ethos of risk reduction organizations, including: Burning Man Green Dot Rangers, Zendo, Strangers, White Bird, “Angels” / “Guardians” at smaller gatherings, DanceSafe, PLUR...etc.

As a psychedelic community, it is to our benefit to bring the multiple forms of providing support into clear consensual discussion with the Journeyer who can then decide the styles / philosophies / methodologies which are most resonant to aid in their healing process.

This is the turning point in the Psychedelic Renaissance in which we move past underground harm / risk reduction to aboveground benefit enhancement, and the way we can do so ethically and in a non-paternalistic manner is to allow the Journeyer to make a decision based on informed consent of the potential risks and benefits of any particular methodology.

In an individualized pre-arranged spaceholding setting, it is helpful to have the Journeyer go through the following [Spaceholder Negotiation](#_knc0rl1qsjo7) and [Menu of Spaceholding Offerings](#_7qn61u8aqaq4) so everyone can be on the same page around philosophies, and the Journeyer can pre-consent to specific actions.

## Altered State Spaceholding

The skills and considerations made for psychedelic Spaceholding apply to any altered state context or intense / activating situation that may run up against the boundaries of one’s comfort, knowledge, and living experience for the participant, including:

* augmented reality / virtual reality / mixed reality / extended reality
* breathwork
* immersives
* yoga
* alternative healing modalities
* meditation

The term psychedelic is also an adjective, so you can also read the title of this book to mean “Support in contexts that invoke psychedelic-type experiences,” not just “psychedelic-induced support” brought on by imbibing a particular drug, pharmaceutical, compound, brew, medicine, or plant ally.

Seeing as psychedelics can consistently provoke intense experiences, they might be thought of as the “most extreme” technology for generating a reliably altered state. Thus, if you can hold space for psychedelic experiences at the extreme end of consciousness alteration, you can apply these learnings to environments or methodologies that are less intense.

This personally correlates with a sense of relaxed acumen that I can provide care in more commonplace experiences having previously held space on the challenging “festival frontlines” where it is common for neophyte trippers to push their psyches to the edge in a reckless manner: taking large doses in harsh loud chaotic environments, with polydrug use, having not slept or eaten for days, without having a buddy, etc.

In certain contexts, such as an indigenous medicine ceremony, the Guide may also imbibe the state-altering compound. The Guide or leader of the space may consider taking a smaller dose, such as half or a quarter as much as the other participants, or even a “homeopathic” or “microdose” that has a sub-perceptual effect but opens them to the energy of the plant spirit or medicine.

It is worth noting that there are also traditions, such as in soul retrieval where the Guide imbibes more than the Journeyer, who may even remain sober.

## Journeyer and Spaceholder Alignment

Determining philosophical alignment is at the core of finding resonance between Spaceholder and Journeyer.

Asking both the Spaceholder and the Journeyer where they believe healing comes from can be the most direct way of determining if there is alignment.

If the Spaceholder believes that healing comes from liberating full expression, and the Journeyer believes it comes from safety in the therapeutic alliance, this may not be the most harmonious match, as the Spaceholder may push the Journeyer into their expressive edge which will feel unsafe and cause the Journeyer to clam up.

Ethical psychedelic Spaceholding involves an embodiment of values rather than a rigid adherence to rules. The length of a hypothetical comprehensive rulebook would be never-ending, as contexts and emerging knowledge are infinite.

Focusing on if there is alignment between you and the values of your Spaceholder, or whether your Spaceholder has the emotional flexibility to restructure their actions to align with your values structure while you work together can be helpful as a guiding light when determining whether you and a particular Guide are a good match.

## Contraindications

Although classic psychedelics are known to be generally safe, in that the lethal toxicity of these compounds is typically far higher than the active dosages, there are potential risks and contraindications for any mind-altering experience.

Psychedelics are strongly contraindicated {not recommended aka having extremely elevated risk of adverse effects} if you have blood relatives with serious destabilizing mental health conditions, especially schizophrenia or dissociative conditions.

Psychedelics are also not recommended / riskier if you or your blood relatives experience mood disorders {such as bipolar disorder}.

A specific situation that is not following best practices {in that other choices may be more effective} is using Ketamine with someone who has a history of dissociative trauma experiences.

In the case of an instance in which psychedelics are not recommended, and one still proceeds with choosing to partake of a psychedelic experience, the need for a more experienced “sitter” educated in supporting one’s condition becomes even more paramount, as is the wisdom of having medical professionals present, and an extensive “in case of mental break” plan.

Altered states of consciousness are inherently destabilizing to “base” consciousness, and are also not recommended if:

* **Your basic set and setting are not great**

{e.g. somewhere where you feel unsafe or unwelcome, somewhere where you cannot control the temperature / level of sound, a place where you do not have access to the things you know you need to take care of yourself such as a bathroom or shower}.

* **You do not have a support network** to help you integrate the experience, or somewhere you can go to recover and stabilize for at least a week.
* **You are feeling a high degree of fear** that is causing you to have a bodily reaction.

In case of the following, it is best to delay the session until there can be more time spaciousness / trust building / better set and setting:

* There is “not enough time” to do screening, preparation, or reflection on intention.
* The Journeyer has only heard scary tales about psychedelics / bad trips and is very fearful.
* The Spaceholder is unable to create a situation when risks are mediated due to physical constraints {e.g. there is not a space where someone can lay down and move around}.
* If the Journeyer needs to be driving or operating heavy machinery while still altered, or highly likely will to need to be {e.g. street sweeping early tomorrow morning, needing to travel or return home to sleep}.
* There is pressure around time {e.g. only have a certain amount of time for this experience that does not include a day of integration afterward}.
* There is pressure around work needing to be done soon {e.g. you have a lot of stressful activities the next day that you need to be fully functional for}.
* If the Journeyer is pursuing a higher dose experience or ego death but is significantly scared of surrendering and does not trust the Spaceholder fully.

The key to peaceful ego death or an easeful high-dose session is surrender - this is why trust is needed between Spaceholder and Journeyer - the Journeyer must trust that the Spaceholder has their best interests at heart and actually has the ability to protect their physical body from harm.

There are methods to build trust between Spaceholder and Journeyer over time and milder ways to unpack fear around surrender than jumping into a high-dose psychedelic experience when there is no significant rapport already present.

## Deciding on Dose

There are big differences between holding space for Journeyers on low / medium / high / heroic doses.

There are significant steps up to risk as the dosage increases, and the likelihood of having a challenging / fearful period of time within an experience increases as dosage increases.

If someone is explicitly desiring an ego-death experience, or they are working with a dosage that is likely to lead to this result {and considering the likelihood of altered state experiences to activate existential thoughts} having pre-negotiated “[Ego Death Living Will](#_839gq9ow17gq)” agreements is essential.

This type of document acts as a “Living Will” for the Ego of the Journeyer to pre-consent to what actions they desire to have taken in the event of a partial, complicated, or challenging ego death in which they may no longer be present as a “rational individual.”

An “ego-death living will” is the only way to get consent from someone’s ego for actions taken while their ego is absent.

Otherwise, any action you take towards the Journeyer may be committing a consent violation that will need to be addressed once the ego returns to the Journeyer’s body.

A general recommendation if someone is psychedelically naive is to “start low and go slow,” in that you can always take more of a compound, but you cannot take less.

Generally, it is good psychedelic risk reduction practice to test the batch of the compound you are serving through sending it to a lab and also taking it in yourself before sharing it with others.

For an organic compound, plant, or fungus that may naturally vary in strength from one part to another, grinding a large amount of the material and mixing it up and serving from the aggregate will even out any discrepancies in potency {such as between mushroom caps and stems}.

## Classic Risk Reduction

* Know your body
* Know your mind
* Know you substance
* Know your source

From [Erowid.org](https://erowid.org/) - a deep resource on all things altered states. Please utilize this incredible offering and support them as you can.

If what you are ingesting is a natural material, know the lineage of the use of that medicine and how it is traditionally used. Additionally, support those who have been tending to that lineage and the places where it grows.

Make sure you are not contributing to overharvesting through ethical sourcing {as is currently the case with the Sonoran Desert Toad being unethically harvested for 5-Meo DMT. This is also tragically occurring with peyote– unless you have been growing and consuming from your own garden, indigenous people have asked for all those who do not have a native lineage to stop their consumption of the fields in the south of the USA and Mexico because of the long timespan of growth of the cactus being outstripped by demand}.

If applicable, get a test kit {or better yet, many kits, as not all kits are equally effective} to check for the purity of what you are ingesting.

DanceSafe is a useful resource to order test kits from.

Know where you are getting your allies / compounds / alphabetamines / research chemicals from, if there is variation ask how strong this batch is.

Always try a smaller amount of a new batch with a sitter before you give it to others or take what is your typical dose. Thoroughly mix and test each batch.

## Spaceholder Negotiation

Use the Menu of Spaceholding Offerings in the Appendix as a Yes / No / Maybe rating list for the Journeyer to give knowledge of their preferences / pre-consent to any actions being taken by the Spaceholder on their behalf.

The Journeyer can write how open they are to a specific technique on a 1-10 scale, and also include detail if there are any conditional consent factors to consider {e.g. Ask me if it’s ok at the moment before you do this; if I am in a post-verbal state, narrate why you are taking a specific action even if I do not verbally respond}.

The answers to this list will reveal not only the Journeyer’s preferences, but also their expectations for the style of the session and may reveal heretofore unexamined trauma around trust, attachment, or certain types of relating {which can aid the Journeyer in their search for self-knowledge}.

This preemptive list format sent out before the session lets the Journeyer reflect on and decide in an unpressured spacious environment at their own pace what they are or are not comfortable with without the physical influence of being in the same emotional / physical field as the Spaceholder in person.

An additional bonus to the Menu format is that the Spaceholder can add specific talents that the Journeyer would not know of to this list to seed creative ideas and synergistic solutionary thinking.

Finally, through the utilization of methodologies like these, we can create agreements that shed light on all of the potential proceedings preemptively, so there are no shadows for shady predatory behaviors to cloak themselves in unscrupulous justifications {see ‘[Sketchy Shaman Warning Signs](#_dcf2uqtjj14w)’ and ‘[Guide Red Flags](#_eellsq62j15o)’ for more}.

The form that a Spaceholding role takes can also be affected by whether you are prioritizing a hands-off risk reduction approach or if your Journeyer desires a benefit enhancement / minimization of suffering experience.

For example, there are some schools of sitting in which the Journeyer is solely witnessed by the Spaceholder in a space of permission of being welcome to actively hate themselves and express this hate while the Spaceholder witnesses this stoically either without response or with “you’re allowed to hate yourself here.”

This is why a “[yes / no / maybe](#_7qn61u8aqaq4)” list helps to designate desired roles for the Spaceholder is crucial to allow the Journeyer to contemplate and discover the form of spaceholding that the Journeyer perceives they need to allow their own inner healer to emerge.

Personally, unless told otherwise, my spaceholding style gravitates toward reducing the amount of suffering in the world whenever possible, which I have been reprimanded for in a harm reduction space utilizing a more dispassionate sitting style as being “too involved in the participant’s experience.”

I personally find it challenging to witness suffering and not offer to alleviate it. Thus, I feel the most sovereign action I have come across is the recommendation of giving the decision to the Journeyer of the style of care they wish to receive.

### Why Choose a Guide Over a More Passive Sitter / Spaceholder?

A Good Guide shares your intention, thus exponentially increasing the amount of anchoring awareness to steer you back to your intended focus {this is incredibly challenging to do alone}.

Your Guide provides an external perspective that is less entangled within your presenting issues and can provide more spacious or alternative frames that may not be as easy to see when immersed in a myopic personal view.

After comparing a solo journey with guided facilitation, a Journeyer reflected “your Guiding helped me stick with the topic and know when there was more to delve into to be present to when I would have previously moved on if I was by myself”.

Having a Good Guide present allows for two points of attentional illumination, casting light on a situation from two angles to increase the depth of perception and get a more accurate sense of the shape of a psychological phenomenon.

Consider the tale of the vision-impaired people and the elephant, each person feeling a different part of the animal – the more awareness can be brought to a situation, the more resolution and clarity in the comprehensive form is revealed when the perspectives are shared.

### Steering Back to Intention from Distraction

A Spaceholder working in a proactive counselor capacity may remind the Journeyer of their intention if they seem to be going off track or distracting themselves {such as through mentioning a television or streaming series they binge-watched or speaking about not related surface-level topics such as celebrity gossip without relating this to their inner experience}.

The Spaceholder should gently, without judgment, step up to a meta-level of analysis and inquire as to why the Journeyer may be distracting themselves: do they need a break from the weight of the work? A physical release valve?

Is there a topic that was being discussed previous to the distraction that is uncomfortable to contemplate or consider? Is this a previous pattern playing itself out?

## Menu of Spaceholding Offerings

Below is the detailed version of the ‘Menu of Spaceholding Offerings’ for both Spaceholder and Journeyer to read. Following this section and in the Appendix is a [Journeyer Version](#_7qn61u8aqaq4) that can be filled out.

The gradient of support, from least-involved to most-involved, comprises :

1. **Nonphysical Neutral Non-Active Presence**
2. **Reality Reflector / Anchor**
3. **Nature Guide / Transport**
4. **Documenter / Recorder**
5. **Body Barometer**
6. **Narrator**
7. **BE {Benefit Enhancement} Pro-Active Presencing**
8. **Active Positive Presence {Maximum Benefit Enhancement}**
9. **Therapeutic / Trained Role**
10. **Physically Supportive Presence**
11. **Medium Touch**
12. **High Touch / Heavy Contact / Embodiment Expertise**
13. **Deep Somatics / Bodywork**

Additionally, it is important to understand and agree beforehand if the Guide will also be consuming substances while Guiding.

What follows is a more detailed description of each choice gradient :

### Nonphysical Neutral Non-Active Presence

Impartial Silent witness

The most passive / stripped-down Spaceholder role is simply ‘bodywatching’ the Journeyer’s physical wellbeing and could traditionally be called tripsitting {as it is akin to babysitting to keep the young / nascent consciousness and body safe from harm}.

For both safety and peace in the piece of your mind whose focus is to keep you safe, it is helpful to have someone watching your body if you are going on a deep journey.

Externalizing this role to someone you trust allows your ego {the part of your mind whose sole purpose is to be concerned with / manage your wellbeing and bodily integrity} to relax its death grip on your psyche.

When the ego knows it is in the calming presence of someone who has been assigned this task, this support can help create spaciousness between the narrative your ego holds of who you have been and that which you are becoming in the course of the Journey and throughout integration.

Having a Spaceholder present in your journey can create:

* a more easeful surrender into states where the ego is not dominant
* a reduction in paranoia / panic
* a secure attachment figure who acts as an objective perspective in case anything goes sideways
* an emergency “reality anchor” - someone in a baseline, rational, sober mind state to act as a sounding board for an action

{e.g. you would like to call an ambulance because your heart is beating loudly and you think you are in a medical emergency, but your Spaceholder listens to your pulse, determines it is within a normal range, and offers the suggestion that you are physically ok and you are hearing your heartbeat more loudly due to increased auditory sensitivity}.

Ideally, the Spaceholder will have knowledge of basic first aid and a kit for such, emergency contact information for the Journeyer, information about the Journeyer’s allergies, access to medications necessary to manage an allergic reaction {e.g. epinephrine or an Epi-pen}, Naloxone spray, a pulse reader / blood oxygen level monitor, and the knowledge of what a normal pulse level is as opposed to one that is elevated {and when to consider calling in emergency personnel}.

Fortunately, both Naloxone {brand name Narcan} and Epinephrine {brand name Epi-pen} are now much more readily available {for how to find them please see the [Resources](#_3w66pvbycw56) section in the Appendix}.

In addition to these staples, it is important for the Journeyer to disclose if they have medical conditions that are relevant to the activities of the Journey or that may come up, so that the supplies needed to potentially care for them are on hand, such as those who have a history of fainting having smelling salts available.

### Reality Reflector / Anchor

Another common, and recommended, role for the Spaceholder to take is as a gentle “consensus reality anchor.” This may involve, when asked, sharing the “clock time” and other “default reality” or baseline facts about the shared environment.

**Curious > Correct**

There is a commonly shared framing across several different schools of risk reduction that it is not worth “convincing” a Journeyer that their reality frame may not be grounded in “consensus reality.”

I would agree, in so far what is more important is not whether or not the purple dragon your Journeyer is seeing is “real” {aka convincing them to match what you are perceiving}, but that the value in their sharing that they are seeing a purple dragon lies in knowing what it represents for the Journeyer and why it is coming up at this time {having the Spaceholder ask questions about the purple dragon is a way to engage in this meaning-making}.

Navigating what your Journeyer is sharing with curiosity rather than leading with in/validation of their reality allows the meaning to emerge.

Choosing a perspective of curiosity over logistical evaluation of “objective truth” becomes even more relevant when the Journeyer is sharing something that is in their mind that you cannot externally validate, but perhaps instinctively makes you uncomfortable.

Philosophers have had some interesting dialogues on the topic of “what is truth,” and most schools of risk reduction find it helpful to adopt the perspective that “if your Journeyer thinks it is real, for all intents and purposes it is real to them,” and thus to use the energy of your attention to respond to it as though it is real {even if you have to think about it as a “role play” or theatrical enactment, and always with the caveat that behaving as though it is real would not be putting anyone in harm’s way or causing unnecessary suffering}.

It is recommended that you engage in role-plays around this nuanced perspective so that you can practice prioritizing a frame of curiosity over correction.

Additionally, as always whenever possible, ask your Journeyer ahead of time the way in which they may prefer to be interacted with regarding this frame.

It should go without saying that the Spaceholder should thoroughly research the ally / compound being ingested, keeping knowledge of the standard/average duration curve of the experience in the forefront of their tracking mind {and ideally written out in a notebook in front of them, with the clock time of intake noted, and the “math” of the different stage lengths calculated from there}.

This presearch {= pre + research} thus informs the Spaceholder to be able to accurately convey when the peak or plateau of the Journey experience is likely to occur, approximately how long until it will occur, and when it has with statistical likelihood passed {especially important to note when considering taking a booster dose}. A solid resource to consult to compile a typical dose / duration curve is [Erowid.org](https://erowid.org/).

It is important to mention that factors such as the following list come into play into altering the dose / duration curve from the “average standard” {the ‘[Deciding on Dose](#_14hypz8iso63)’ section and Erowid.org have more information on this topic}:

* *the weight of Journeyer*
* *their muscle mass*
* *fat/muscle density*
* *how hydrated the Journeyer is*
* *whether they have been fasting*
* *existing medications and substances in their bodily system*
* *if they are female-bodied / taking hormones -  what phase of their hormone / menstrual cycle they are in*
* *what time of day it is*
* *any other supplements the Journeyer is taking*
* *other factors regarding set and setting (temperature, journeyer’s emotional relationship to the space, etc.)*
* *if the Journeyer is in physical or emotional pain {such as in a depressive episode} as this will increase their sensitivity*

Additionally, even if a booster is not being considered, it is good to know the typical timeline curve of the substance being ingested. This empirically grounded information can then be provided if the Journeyer seeks assurances regarding where they are in the arc of the journey {e.g. This is intense, am I peaking, or is it going to get stronger?’}.

Thusly informed of the dosage / duration response curve for the ally / compound ingested, in the case the Journeyer has forgotten they have taken a compound, the Spaceholder can provide data-grounded assurances that the Journeyer has taken a compound {e.g. the Journeyer has not lost their mind / they are not going insane} and will return to baseline in x-hours {e.g. how-ever-many hours based on the curve}.

### Nature Guide / Transport

The Spaceholder can also act as a transporter of the Journeyer via a vehicle and then accompany a Journeyer on a hike or natural excursion which is significantly safer than hiking alone.

It bears repeating that no one should operate heavy machinery or drive under the influence of a psychedelic.

The Spaceholder can be responsible for researching the area, terrain, and timeline beforehand in addition to carrying a map and other emergency supplies.

### Documenter / Recorder

The Spaceholder can also passively participate in gathering external data points for the Journeyer through documentation.

At its least intrusive level, this could involve physically writing down notes on paper or in a notebook. At a more involved level, this could also include managing an audio or video recording device if desired by the Journeyer.

Responsibility for testing the devices and making sure they are capturing the recording should be accomplished via a “test run” to make sure the sound is audible on the recorder before the session {additionally - have enough batteries and the capacity to charge them for the duration of the session and integration portion}.

You can also include an understanding that if the Journeyer decides mid-Journey that they do not wish for the documentation they previously agreed to, they can revoke their content at any time {one of the principles of Consciousness Consent is that an agreement made sober can be changed when altered, with the exception to harm against self, others, or property}.

Especially important moments to document may include:

* noting dose
* amount{s}/time taken and any boosters
* details regarding significant somatic or energetic reactions at various time stamps {especially changes in breathing or agitation, if they occur}
* repeated phrases, statements spoken loudly, emotions, and realizations / revelations

The Journeyer is also invited to specifically ask that a particular phrase be written down at any time.

The notes taken throughout the session by the Spaceholder can then be read during the Integration portion of the experience and will allow the Journeyer to relive and repeat details, which increases the likelihood of immediately integrating the insights received.

More detail on this practice can be found in the [Integration](#_ww4jyay7mbfv) section.

#### Active presence / More involved

Another creative option, to the comfort of the Journeyer, and based on the skills of the Spaceholder, is to take photographs of the Journeyer before / during / after the Journey.

This involves a lot of attunement between the Journeyer and Spaceholder in trusting that the moment is right to unearth a camera in a sensitive state.

The benefits of a series of photographs at different moments in time may provide insight into where the Journeyer is holding patterns of tension in their body and reveal physical correlates to psychic openness.

Images can also serve as another Integration ARTifact to facilitate incorporating insights gleaned.

A picture of the Journeyer at a radiant moment of realization can then act as a somatic sigil bringing the Journeyer back to how that moment of time felt in the Journeyer’s body.

With sufficient rapport between Spaceholder and Journeyer, videography can also be employed to create an even more immersive Integration ARTifact.

Moments to consider capturing include:

* when engaged in a cathartic release
* spontaneous mudras / movement patterns
* a testimonial to yourself afterward to help with integration and keep the memory of what was learned fresh and alive and able to be replayed / encapsulated

Involving photo / video technologies without disrupting the energy of the experience is an advanced practice and delicate dance of trust that should be discussed in detail and attentively attuned to in every moment during documentation.

The focus should always be on being fully present to the Journeyer’s needs and development, and if the documentation becomes distracting or disorienting, its emphasis should be diminished or halted.

### Body Barometer

Bodies are more alike than they are different.

A beneficial perspective for Spaceholders to take is not trying to minimize or ignore their physical needs {such as by holding a full bladder or maintaining an uncomfortable physical position for an extended period of time}, but instead to use these somatic sensations as data points to help the Journeyer further settle into their body.

Additionally, it is worth repeating here that the Journeyer is in a heightened perceptual state which will cause them to pick up on your subtle signs of discomfort, whether consciously or subconsciously, which they then may inaccurately ascribe to their impact on you.

For example, if a Spaceholder is holding onto a full bladder, this produces tension patterns and tightness in the body. The Journeyer, whether consciously or not, may pick up on this tension and mis-attribute its source.

Especially if the Spaceholder’s tension pattern coincides with a vulnerable or shame-tinted disclosure the Journeyer is making, the Journeyer may inaccurately, but reasonably, assume that their share was the cause of the tension.

This can cause the Journeyer to become self-conscious or judgmental that they are personally causing the tightening reaction, when in fact the tightening in the body of the Spaceholder is due to their biological need to void their bladder.

As a fascinating aside, if you are finding that attribution errors are frequently coming up within the session, you may find it worthwhile to research internal / external loci of control and how it relates to your Journeyer’s attachment styles to further illuminate fruitful avenues for them to explore in their healing journey.

Instead of the Spaceholder attempting to minimize or disappear discomfort in their body, they can use their body as a barometer to have an experience of embodied empathy as to what the Journeyer may also be experiencing.

Much as when two stringed instruments are in close proximity and when a note is plucked on one, the other’s strings also begin to vibrate at that note, the Spaceholder’s body may be picking up a vibration in the Journeyer’s body, and thus voicing it and caring for the emergent need may be helpful to both parties.

However, it is important to note that this is not always the case, hence the need for deep knowledge in the subtleties of transference, countertransference, embodied countertransference, and projective identification. More information on this in the [Therapeutic Concepts](#_ct6ubt9bdl8) section.

**Body Barometer in practice:**

Spaceholder monitors their own body state and makes recommendations to change the setting or environment:

* *I notice I am feeling a bit chilly as the sun has set, and am going to go get my sweater, want me to get your coat for you?*
* *I am feeling thirsty and notice that you have not drunk anything in the past two hours, can I get you a glass of your beverage of choice while I get some water for myself?*
* *I am noticing that the humming of the dryer is distracting me and putting me a bit on edge, can I turn it off while we are in this room?*
* *I really need to go to the bathroom; do you need to go too?*
* *Other environmental alterations to consider via your Body Barometer:* 
  + *room temperature*
  + *sun exposure*
  + *biting insects*
  + *the brightness of light*
  + *ambient noises*
  + *stuffiness of air in the room*

When you are in tune with your body barometer the distinctions between your habits and preferences and the Journeyer’s may become more pronounced.

A common example occurs in nourishment / food / water / diet, and it is recommended, if at all possible, to bring enough of your sustenance to be able to offer what you are imbibing to the Journeyer as sharing nourishment can also help lessen the power dynamic of separation and remove a potential avenue for paranoia for poisoned or drugged food or drink {e.g. Giving the offer of sharing without pressuring – invitation without expectation}.

Be prepared for honest conversations about your consumption habits as an opportunity for Spaceholder transparency {especially if this is an area you are personally working on}.

Another related but distinct practice is called “[Body Mirroring](#_9ep9hc1i0lwo)” which is covered in the [Somatic Techniques](#_ia54ti5usdhw) section.

*The following roles are on the more “active” side of the Spaceholding spectrum:*

### Narrator

The role of the narrator comprises analyzing or calling attention to what is happening as it happens.

This immediacy is imminently valuable because feedback is best when timely, and through the trusting rapport between Spaceholder and Journeyer we can utilize present patterns as a living-learning laboratory, drawing attention to reactions in real time.

Narration works well when the Spaceholder can filter for signals particularly salient to the Journeyer’s focus for the session.

With your Journeyer, discuss:

* *In what types of scenarios would you like a more passive Spaceholding witness to break the silence?*
* *At what level do you prefer your Spaceholder to engage - merely as a mentioning or as a more involved inquiry?*

**For example:**

If the Spaceholder notices you are tense in your body {such as balling up your fists or holding yourself in a rigid manner}:

* *Do you want them to neutrally mention this physical reaction to bring it to your attention?*
* *Do you want them to wait a certain amount of time before mentioning it {e.g. 3 minutes} or to immediately verbalize what they are witnessing in the moment?*
* *Do you want your Spaceholder to ask questions about such somatic signals {a more proactive probing presence}?*
* *How often would you like this information - approximately - every 5 minutes, 15 minutes, 30 minutes, an hour, or whenever there is a prominent shift?*

Feel free to change your mind anytime during the session and express your emergent preferences, this is just a starting point to allow your Spaceholder to understand how important pointing out this data is to you and approximately how frequently you’d like the information.

Crossing into the territory of benefit enhancement and delving into the nuances of how much ‘push’ you would like the care to have :

* *Would you welcome suggestions for your comfort or physical wellbeing, for example, if you have not drunk water in many hours, do you want your Spaceholder to make a recommendation towards hydration?*
* *Would you like your Spaceholder to fetch you the water preemptively?*

On a more involved therapeutic inquiry side, would you want your Spaceholder to:

* *Ask why you might be exhibiting a certain physical behavior, in a curious questioner mode?*
* *Would you be served by your Spaceholder noticing details, pointing out patterns, or making suggestions of possible connections between aspects of your past / old patterns / current behaviors?*

On the furthest side of the interaction / involvement spectrum:

* *Would you like your Spaceholder to aid you in helping you create a new narrative or story in the moment, or co-creating a new pattern that they then subsequently encourage?*

Another lighthearted and even humorous variation could be a Spaceholding narrator that is a predominantly playful presence, a rhyming storybook narrator, or a colorful character that resonates with you from the clown / trickster archetype.

Perhaps you would like the Spaceholder to emphasize a ‘not knowing’, sans cultural assumptions, or seeing through baby-eyes beginner's mind direction, as a ‘curious child’, or that you are compassionate peers / kids exploring together.

### Benefit Enhancement Active Presence

In addition to the previously noted opportunities for specific roles to slide on the scale from a safety baseline of Risk Reduction into Benefit Enhancement, here we move another step further into active involvement beyond solely “body sitting” or “body watching.”

Benefit enhancement involves both the Spaceholder and Journeyer noticing how the Journeyer can be better supported and extending “invitations without expectations” phrased via open-ended offers.

The book “[Corporeal Consent](https://www.raz.ma/corporeal-consent/),” also written by this author, provides a plethora of recommendations on the nuances of consent, such as asking questions in a format that gives the responder a “graceful out.” In G4G the [Psychedelic Power Dynamics](#_2zhur6cemp4k) section provides additional detail on dynamics specific to psychedelic spaces.

**What is Benefit Enhancement {BE}?**

Benefit Enhancement began as a cheeky response from those of us in the longtime Risk Reduction community asking where we can grow beyond “Harm Reduction.” {Risk Reduction was originally termed “Harm Reduction”, but the author is moving away from that term as it implies there is inherent harm which thankfully is not typically the case}. Risk Reduction is the stable, safe, and grounded foundation from which Benefit Enhancement can spring.

When orienting towards the direction of Benefit Enhancement, it is strongly recommended whenever possible to inquire with the Journeyer if the intervention is an enhancement from their perspective.

Some instructions in old school “Harm Reduction” philosophy believe that everything provides learning, even difficult, uncomfortable, and challenging experiences, and instruct Spaceholders to interact as little as possible in the Journeyer’s experience.

I depart from this default “tough love” orientation, in what I think is a more consensual evolution in the field, to advise an orientation towards letting your Journeyer decide the type of support that they are seeking for a particular session.

An active presence with an eye toward reducing suffering might look like:

* changing the environment
  + turning the thermostat up if the Journeyer is shivering
  + providing blankets
* changing / turning down the music if the Journeyer is covering their ears and curling up
* asking others who are being loud within earshot to reduce their volume or move farther away
* if the Journeyer is changing positions in a way that may be indicating physical discomfort, the Spaceholder can offer to create a more comfortable nest with additional pillows / squish / fluff or
  + fetching items - blanket, coat, robe

The line between Risk Reduction and Benefit Enhancement can be blurred when considering suggestions such as hydrating or going to the bathroom.

Keeping track of how long it has been since the Journeyer has had water or has relieved themselves can help prevent the discomfort and danger of dehydration.

Sometimes offering a hydrating beverage beyond water can help inspire imbibing - such as a warm tea. Additionally, preemptively bringing a vessel with water to the Journeyer can support a Journeyer who has a pattern of ‘not wanting to be a burden’ who if asked would not want to ‘inconvenience’ the Spaceholder with an additional request or task.

The following final roles / modes of Spaceholding are the most intimate and involved and thus require the most conversation upfront.

These forms of Spaceholding move from passive to active engagement and thus are most resonant with the more hands-on directive emphasis of the term “Guiding.”

### Active Positive Presence {Maximum Benefit Enhancement}

Ideally, an Active Positive Presence {APP} Guide is well versed in the details of the Journeyer’s background, their styles of processing, coping mechanisms, and how they self-soothe or co-regulate.

An APP moves from a neutral presence minimizing risk or interrupting harm and instead steps forward into actively shaping the Journeyer’s experience in an involved manner.

For example, an APP may verbally narrate the Journeyer into self-soothing techniques that they naturally gravitate towards and want to cultivate, practicing centering presence in real-time upon the emergence of a dis-regulating stimulus.

An APP may also interrupt a Journeyer’s negative loop of thought or self-defeating dialogue to model a replacement self-respect phrase.

An APP Guide may also introduce EcoRegulation nature-based nervous system nourishment prompts {more information at RAZ.MA}, grounding pressure via pillows, or inviting the Journeyer to join them in patterned breathing techniques to shift into a resourced parasympathetic state or return to a window of tolerance.

APP Guides will be well versed in grounding or de-intensifying de-amplification techniques which may include: guided visualizations, “earthing” – placing bare feet on damp soil, lying on the ground, closing the eyes, and reducing the light or sound in the environment.

Some common visualizations of grounding can include: dropping down an energy cord from the tailbone into the earth, rooting into the core of the planet, light pouring into the crown of the head, heaviness or shadow draining into the earth.

It is worth reiterating that many “bad trips” or challenging experiences are the results of bodily discomfort – be it hunger, thirst, a full bladder, or needing to change clothing to adjust the temperature.

Thus, utilizing yourself as a “Body Barometer” as well as honing your embodied attunement skills can contribute both to the Journeyer’s sense of groundedness in their body {consider if you would want to remain in a body that is in pain from holding your bladder for a long time or if the obvious preference would be to dissociate?} and to sparing the Journeyer deeper unnecessary suffering.

This ‘bio break’ body barometer frame is covered in-depth in the “[Challenging Trips](#_tm2p62w9yj76)” section.

An APP Guide may interrupt Journeyer thought loops by introducing new stimuli, changing the environment, or using what could be called “distraction” to break the choking, coiled chain of consciousness.

Often reprieve from an all-consuming amplification of a challenging point of fixation will be enough to “break the spell” and allow new information and perspective space in the psyche.

This is considered APP because there are schools of spaceholding training that advocate for inaction in the face of suffering in favor of an emphasis on non-interference.

Because an APP is taking a more active role in the Journeyer’s experience, it is important for the Journeyer to trust and inquire about the training, background, and level of experience of this Spaceholder. Equally, it is important for the APP to recognize and make ethical choices when considering the guidance, they are giving when providing active direction to the Journeyer.

The author believes that it is best to ask the Journeyer what they desire, and if they are in a state of mind in which they cannot express a preference, to minimize the amount of suffering in any reasonable manner possible.

In this way, an APP Guide is making alterations in “set and setting” – interrupting mindsets of repeating looping suffering, attuning focus on novel surrounding stimuli, and making changes to the environment as a change of scenery.

Suggestions an APP Guide might make include:

* going outside
* turning down / changing the music / lighting
* changing the temperature
* clothing changes
* applying a weighted / warm blanket
* proposing a specific activity such as shared humming / toning
* listing potential activities there are supplies for {different music playlists, artmaking supplies}

APP Guiding comes in two additional flavors – nonphysical and physical. Upon pre-psychedelic consent and intake, parsing through any preferences and potential complications, the APP can also offer grounding touch, which is covered in more detail in the [Physically Supportive Presence](#_pajewzz5hiol) section. Specific Active Techniques can include:

* Live medicine music  
  Spaceholder sharing the medicine / folk songs of their lineage {e.g. Lithuanian folk songs, South American medicine songs, drumming, holding a beat}
* Offering sound healing: tuning forks / singing bowls / gongs

**Immediate Integration Reminders**

In a documenter role, the Spaceholder makes special notes of the behaviors and statements that tie back into the intention of the Journeyer.

A natural extension of this role that requires rapport and is a more actively therapeutic position, thus moving more into benefit enhancement from a “neutral narrator,” is in providing reframes or acting as a Guardian Angel.

In a Guardian Angel role, the Spaceholder, when moved by an understanding of the Journeyer’s intention, reminds the Journeyer of their goal, the patterns they are reprogramming, and any re-steering out of common thought loops {e.g. self-defeating language} that have been previously discussed.

Doing so with a gentle, curious, and compassionate tone is essential so that the Journeyer does not compound this gentle steering into an inner critic.

### Therapeutic / Trained Role

If you are trained as a therapist or are certified in another healing modality, you can offer the framework of your style of practice on the [Menu of Spaceholding Offerings](#_70efrq456u3a) and in spaceholding form / intervention consent conversations with the Journeyer.

These methods may take the form of:

* *energy work {such as Reiki}*
* *musical / artistic offerings {such as sharing medicine songs, guiding the Journeyer in art therapy or expressive arts therapy prompts}*
* *psychological support {such as via Hakomi, Internal Family Systems, or transpersonally oriented therapy}*

For those wishing to offer bodywork or other hands-on modalities, the intricacies of navigating physical touch will be covered in the section [Physically Supportive Presence](#_pajewzz5hiol).

Some of the common terms and considerations from the field of psychological therapy will be discussed in the techniques section, sharing from the author’s background.

It bears repeating that when you move from acting in the capacity of a peer-to-peer sitter and into a structure that involves a healing expert / patient dynamic, you take on additional responsibility for the wellbeing of your Journeyer and for navigating the increased gap in power dynamics that these titles accrue.

### Physically Supportive Presence

Light touch – extremities

Touching someone in a sensitive or heightened state of awareness can have the possibility of being misinterpreted as a sexual signal, especially in states of increased energy and blood flow.

**Having at least a three-stage and more optimal four-stage consent system is paramount whenever possible.**

**The first stage** utilizes a “take-home” [yes / no / maybe checklist](#_7qn61u8aqaq4) before the session, an example of which can be found in the Appendix.

To reduce the likelihood of a fawn / caretaking response by the Journeyer it is recommended that they fill the list out when not in the physical presence of the Spaceholder.

**The second stage** is a refining in-person conversation to review the written guidelines the Journeyer has put forth to align on details.

**The third stage** is asking the day of before the session how the Journeyer feels about any particular touch intervention {as their level of tenderness or vulnerability can change depending on where they are at in their hormone cycle and what they have lived through recently}.

**The fourth stage** would be to ask if touch is ok in the moments before contact during the session.

At each stage of this process, the Spaceholder should be watching for somatic cues – shifts in breathing and muscle tension can indicate a nonverbal “no.”

Even if the Journeyer has asked for or consented to touch and you notice their body is saying no, they could be following a fawn trauma response, and you should interpret a somatic no or hesitation as a no.

**A bonus Consent-Improvement stage** can include, if consent is given by the Journeyer, videoing or audio-recording the session as an “external” witness, much as body cameras are used.

Ultimately, as a corporeally informed community, it would be optimal for us to be educated in self-attunement – teaching ‘rightness of touch’ from childhood and developing the concurrent confidence to speak to our boundaries so all can actively participate in empowering clear conversations {this skill-building is described deeply in ‘[Corporeal Consent’](https://www.raz.ma/corporeal-consent/)}.

There is currently much debate in the psychedelic therapy community on whether touch is too risky to incorporate, but through four-stage or five-stage consent method, having two Guides, explaining the purpose of touch, and going through what a contact redirection can look like, can greatly reduce the likelihood of adverse outcomes.

If the Journeyer is sensory deprived via the use of blindfolds or earplugs consider the additional vulnerability of their circumstance and proceed with additional caution.

Touching extremities can provide an avenue to assure consistent presence in a way that is non-threatening or invasive to most people.

Hand holding or touching the feet has less potential of causing a triggered response than touching closer to the trunk of the body.

Verbally asking for permission is always the gold standard, and making sure the embodied response is a ‘yes’ matches the verbal response is the platinum standard.

When being courteous, if the Journeyer is in a post-verbal state and unable to respond verbally, the Guide may choose to touch an extremity while carefully monitoring the physical reaction – if there is a freeze, pulling away, tensing up, these are all corporeal consent / physical communication “away” signals, and the touch should be removed. If the Journeyer moves towards the touch, yawns, visibly relaxes, or encircles the touch with their hand, these can be ‘moving towards’ signals that indicate that the touch is supportive.

Incorporating a tool such that the Guide is not touching the Journeyer directly can also create safety via distance in contact, such as by using a “scalp massager” / “head spider,” car buffer, ma, etc.

Soothing sensation play may also provide novel stimuli in case of looping and can include:

* feathering {petting someone with one or several feathers, especially on the face and neck}
* petting skin with soft fabric / fur, and if in a high temperature locale spraying with a water mister {option of including essential oils after first making sure that the Journeyer does not have sensitivities or memories associated with any scents}

The sense of smell is the oldest sense to develop, and scent is one of the most direct ways to access / encode new memories, so use this tool with conscientiousness.

If the Journeyer is particularly skittish about contact, a heated blanket, sauna, shower, or hot beverage can provide the warmth of contact without involving another person.

As a final “touch at a distance” recommendation, consider how many of the massage techniques that you can offer to your Journeyer you can instead demonstrate on yourself and then empower them to be the agent of their own release, removing them from dependence on your presence. You can also share self-massage tools such as a massage cane, tennis / lacrosse ball, yoga ball, inversion table, or yoga swing.

These external tools have the added benefit of allowing the Journeyer to proceed at their own pace and build their sense of agency and sovereignty.

To add additional nuance to the conversation, the author has found that in certain areas of work, such as attachment trauma healing or attachment repatterning, depriving someone of the touch they are asking for would be re-traumatizing.

Safe loving touch, when utilized with clarifying conversation and oversight, is a healing tool that the author has found to be specifically helpful to incorporate into work with post-verbal trauma.

Benefits of having a clear container for the permissiveness of light touch include being able to measure circulation / skin temperature directly, monitoring pulse directly, monitoring muscle tone / responsiveness to physical stimuli directly, as a nervous system co-regulation method, and as a hands-on way to ground.

Specific touch grounding techniques include – putting pressure on the feet {especially to tops of feet when soles are on the ground pressing the foot into the earth}, pressing palms down to the ground, and light compression of the temples / head.

Light traces, pressure, rocking, and / or squeezing on the outer edge of the Journeyer’s body can help physically remind them where they end, and the world begins.

Handholding can convey your caring presence without being activating for most people.

Many people feel soothed when their hair is pet, combed, or brushed rhythmically, or their head is lightly stroked as you would an animal {we are still humanimals after all!}.

If touch to the head feels too invasive or intimate, asking if touching an extremity and squeezing encouragingly might be helpful while being more distant.

### Medium Touch

Common to California and the West Coast healing scene is the phenomenon of hugging.

In a hug, two hearts and chest cavities come closer into contact, which allows the electromagnetic fields of the hearts to overlap briefly.

Hugs produce oxytocin, which helps regulate the nervous system into the “tend and befriend” and “rest and digest” parasympathetic state conducive to healing. {there is much more information on oxytocin in the ‘[self-generating oxytocin](#_emxt99vghjk9)’ section}.

Beyond a hug, other passive medium contact activities can include:

* Sitting back-to-back in contact to feel breathing
* Both laying on opposite sides with backs touching to feel breathing
* Both laying on backs, side bodies touching to Journeyer’s level of comfort {could just be feet touching, all the way to both ribcages in contact or hands draped below around shoulders or behind neck}
* Journeyer’s head resting on Guides chest, listening to heartbeat {or vice versa}
* Both laying with sides touching the ground, one as big spoon, one as little spoon, curled in the fetal position

### High Touch / Heavy Contact / Embodiment Expertise

The author recommends only engaging in the following methods if you are deeply trained in the somatic arts and corporeal consent.

These are all experimental techniques that involve the highest levels of preexisting rapport and trust and are mentioned here for contexts in which those interpersonal safety nets are already in place.

#### Human Weighted / Gravity Blanket

High communication, adjusting weight as needed. Guidelines on how to develop skills to communicate corporeally in [‘Corporeal Consent’](https://www.raz.ma/corporeal-consent/) book at RAZ.MA and in the SomaSenZ RazMassage Method.

**Position options:**

* Journeyer laying on stomach, Guide partially draping chest or stomach over Journeyer sacrum.
* For more weight, Guide sitting on Journeyer’s sacrum, with emphasis on weight dragging Journeyer’s sacrum down towards Journeyer’s feet.
* For fully body compression, Journeyer lays on the stomach, sitter lays on top of them as human gravity blanket stomach down. This position might only be sustainable for a short time depending on the compression preferences of the Journeyer and relative weight ratios of the participants. Using a blanket between the participants can create more emotional distance.

*More intimate:*

* The Journeyer lays on their back, Guide lays perpendicular with their heart over Journeyer’s stomach.
* Journeyer lays on their back, blanket between, Guide lays parallel at slight diagonal or with head along the shoulder of Journeyer.

#### “Laying on of Hands” / Energetic Work

Hands laid on the surface of Journeyer’s body where Journeyer wishes energy to go or be unblocked.

### 13. Bodywork

As the experimental evolving edge of therapeutic touch, these techniques should be used only with extreme caution, a pre-existing container of trust, rapport, clear communication skills, and deep education in corporeal consent.

#### Inversions

Either from a hard point or on the back of the Spaceholder {if they are trained in contact improv / SomaSenZ bodywork} are wonderful for providing a 180-degree shift in perspective.

There are contraindications to inversions, so please do your research and consult the physical professionals in your life to make sure this is a safe choice for your embodied state.

#### Light / Medium Bodywork / Massage

Utilizing hands, elbows, and body in a manner aligning with training.

Working surface/fascia/top musculature of Journeyers body, 1-5 on an intensity scale of 1-10.

Assisted stretching / Thai-style massage may also be helpful.

If a certain part of the body is having trouble relaxing have the Journeyer inhale while flexing that part and then exhale on the release, with the Bodyworker pushing into that part at the end of the exhale.

Holding a point / limb and rotating around the axis of natural motion or shaking can also aid in steering a tense place into a relaxation response and is often used in rehabilitative physical therapy.

#### Bodywork Surgery / Bodywork Ceremony

This deeper level of work requires more rapport and familiarity with the Journeyer’s body and tension-holding patterns.

“Massage surgery” is intended as a “non-incision” restructuring and can involve old injury work and carries the heightened risks of more intensive bodywork.

Much as “natural antibiotics” such as garlic or oregano oil are still very powerful, this technique should be approached with respect and caution when other avenues have been exhausted.

For example, Trauma Release Exercises {TRE} of shaking the muscles of the body should be attempted before a more intensive experience of physical trauma release is undergone {the minimally invasive intervention to cause the curative change is a good general guideline}.

#### Physical Trauma Release – No Touch

Techniques such as Somatic Experiencing can be used to go into intense memories and discharge the frozen nervous system reaction that is causing lingering trauma symptoms.

This form will be described in more detail in the [Techniques](#_ia54ti5usdhw) section, and it is listed here as it is important to receive corporeal-based consent to do this work, as it involves setting up the space in a soft and safe manner.

#### Physical Trauma Release – Touch Through Cushions / Intermediate Medium

When acting out the memories of the trauma, some scenarios may call for the use of body weight through cushions or another medium so that the muscles can work against resistance {such as pushing away someone or pushing off someone who was pinning you down in the memory}.

#### Physical Trauma Release – Highly Direct

Although it is recommended to try the no touch or “touch through a medium” formats first in the hope that this conservative approach will result in improvement, the traumatized body may need to actively work many different somatic systems in a complex way to discharge the nervous system completely.

This involves expert training in somatic trauma therapy and safe body handling and could result in injury to the Spaceholder.

Forms of this work can include: wrestling, fighting, and in-depth re-enactments of traumatic memories but with the new repatterning of the Journeyers “successful” win of fleeing, fighting, or expressing and causing the resolution to the threat {the Spaceholder ensuring that the Journeyer “wins” to rewrite the embodied memory / discharge the frozen / unsuccessful response}.

The utmost care and consideration should be taken to minimize harm / reduce risk to all participants through exquisitely clear communication, physical padding, spotters, safewords, etc.

This is an experimental technique and could result in traumatization so should be used only if the Journeyer has a strong sense it would aid them, and all other methodologies have been attempted.

## Extreme Spaceholding

So, you want to experience Ego Death?

Ego death is a spectrum that ranges from the commonplace mild experience of losing yourself in a daydream, such as a gentle forgetting when you are engrossed in a book / movie, all the way to an experience of losing all sense of boundaries and having a visceral experience of becoming the whole universe.

The author has experienced both ***reuniting*** and ***isolating*** Ego Death experiences.

***Reuniting*** experiences felt as though their body was made up of a cloud of gas being heated and their molecules were gently diffusing apart to reveal that in between what felt like the solid substance of their body was an all-subsuming everywhere/everywhen baseline, foundational, ground of consciousness, zero-point energy field of welcoming, soft, warm, loving white light.

The author has also had ***isolating*** experiences in which they curled so deeply into themselves as to become a black hole / void / abyss, in between the light of stars in space, floating aimlessly in the timeless eternal loneliness of being All One, alone, in that you comprise everything that exists and thus there is nothing but you.

There are also ***ego-softening*** experiences that can occur that polish, smooth, or melt the edges of feeling that you are a distinct individual, blurring the borders without the ego being ripped away suddenly.

If as a Journeyer you want to experience Ego Death, it is recommended that you seek out a practitioner who has experience in extreme spaceholding.

The “[Ego Death Living Will](#_839gq9ow17gq)” in the Appendix will aid the Journeyer in expressing their wishes for how their physical and psychic body is cared for during the potential absence of their ego.

This “[Ego Death Living Will](#_839gq9ow17gq)” will also take the guesswork out for the Spaceholder seeking to support someone in the intensely intimate and vulnerable state of consciousness that is ego death.

Remember to front-load consent in the possible {or sought} event of an absence of a Journeyer’s ego to be present and verbally able to consent during an ego-dissolution experience.

The following questions cover the far-out reaches at the extremes of what you may encounter. “Prepare for everything, expect nothing” is an oft-repeated Burning Man Ranger risk reduction phrase to remember in this context.

Often you will discover that simply the process of preparation and consideration prevents the need for such information to be acted upon.

Hopefully, and likely, you will never need to utilize this information, but it is worth the brief preparation to consider how you would appreciate being treated so your preferences can be honored just in case.

Some of the more extreme circumstances, such as the questions about restraint, are being asked because the author has been in circumstances where these methods were used in the wild by risk reduction support without the Journeyer’s previous consent, and it is always preferred to know how someone wishes to be treated preemptively whenever possible rather than trying to guess in the moment, which is preferred even to trying to act in a manner that would be commonly agreed to be in the Journeyer’s best interest.

# Spaceholding Techniques

## Challenging Trips

*An unexpected origin of challenging trips.*

Body discomfort creates signals of distress that are then often diffusely, or “incorrectly,” attributed to a dangerous environment {paranoia}, as the body is a painful place to be {prompting dissociation}, or as a general lack of safety.

For example, if your body is physically cold there is the possibility of attributing / extrapolating / expanding this internal feeling to perceive the emotional / environment as “cold” – uncaring, distant, or harsh. If you were to wrap up in a blanket and warm up, you may find that your disposition will rise with your body temperature.

Taking your own temperament temperature as a “Body Barometer” and encouraging your Journeyer to check in with themselves corporeally can often steer the ship of a “bad trip” into more physically peaceful waters.

***A so-common, as to be comical tale in risk reduction circles, often follows this pattern:***

A Journeyer is brought into a risk reduction sanctuary space, their eyes wide, pupils dilated, fidgeting, and they just can’t seem to get comfortable or settled in their body.

When you ask them how they are feeling they say “uncomfortable, the world is a hard, harsh place, constricted, tense, tight.”

When you inquire as to if something challenging just happened to them and other lines of questioning to try to seek a source of this sensation, they don’t have anything specific to say.

This is a great opportunity to use a body barometer technique and say, “I need to pee, do you? Want me to show you where the bathroom is? It is close by.”

The Journeyer will typically follow and use the restroom, and upon emerging, the world will be completely transformed into a much kinder place.

***What happened?***

The author’s hypothesis is that the monitoring messages that your subconscious and soma are attempting to send to you that your body is holding a full // bursting bladder can get lost in the sea of sensations when there is so much stimulation and the metering gateways to what is brought to conscious awareness are flung open {as is often the case with psychedelics or other intense experiences}.

The “full bladder” sensation is not as new or novel as many other somatic stimuli might be in an expanded state, and they can get drowned out in the clamoring of unusual stimuli to be evaluated by conscious awareness as to their potential effects on survival.

Common interoceptive somatic signals have their dials turned down in favor of prioritizing unique stimuli which may have an outsize effect on survival.

*Interoception* is the sense of feeling and understanding what is going on in your body and can involve: hunger / fullness, thirst / satiation, temperature awareness of hot / cold, and if one needs to void their bowls aka use the restroom.

Another cascade may also be occurring, for when being present with the body’s sensations becomes uncomfortable, the instinctual and psychologically protective response is to dissociate from the painfully present awareness of these sensations.

Unfortunately, even though the sensation of an uncomfortably full bladder may not be entering conscious awareness, there are still signals of unpleasantness that the body as a self-protective impulse creates a story around this sensation to keep you safe and alive as it scans for danger or harm.

Thus, even as you are blind to the full bladder, your flooded consciousness will try to come up with a reason for your discomfort that it often displaces onto environmental danger, or paranoia.

Beyond a full bladder, when the basic needs of the body are not attended to {as can be the case in extreme environments and states} these escalating physical requests can be misinterpreted into diffuse sources of fear that can get projected onto people or the environment.

Helpful Interoceptive questions to ask your Journeyer {or yourself if you are feeling odd or out of sorts} include:

* What / when did you last eat?
* What / when did you last drink?
* When did you last use the restroom?
* Have you been doing a lot of physical activity?
* Have you changed your routine in any way?
* Are you taking / not taking any medication, vitamins, supplements, or drugs that you would / not typically?
* How is your body temperature – are you feeling cold / hot?
* When / for how long did you last sleep?
* How have you been sleeping {e.g. Light sleep, unmoving, waking up tired}?
* Have you been touched in a safe supportive way recently {e.g. A hug, had your hand held – have you co-regulated with someone you trust}?
* How is your emotional world? Have you been receiving emotional support / do you feel alone?

## Professional Spaceholding Tips

### Increase Water Absorption

Putting a pinch of salt in drinking water aids in remineralizing it {especially if the water has been through reverse osmosis or distillation process} and creates the conditions for more ready uptake of hydration in the body.

If there are no electrolytes present in the water such as mineral salts and potassium, the water passes through the body as more of a flush than being absorbed and taken up by the tissues. More specifically, water in food or juice is more hydrating to the body due to the minerals present.

Proper hydration helps the body to self-regulate, muscles to unclench, halts headaches, and supports all systems of the soma.

### Nausea

Ginger tea an hour before the journey can preemptively remove the possibility of nausea or stomach upset. This particularly useful for mushrooms which can frequently cause digestive discomfort when can then translate into paranoia as explained in ‘[Challenging Trips](#_tm2p62w9yj76)’.

Occasionally hunger can come across as nausea if the Journeyer has been fasting, it has been a long time since they have eaten, or they are exerting themselves strenuously.

Low blood sugar can cause: fatigue, feeling shaky or weak, lightheadedness / dizziness, anxiety, irritability, headaches, and sweating. Some of these symptoms can also be caused due to dehydration or a lack of balance of salts, potassium, and magnesium in the body {drinking water with a comprehensive electrolyte balance is strongly recommended especially for MDMA}.

Emergency medical care is needed if you witness blurred vision, slurred speech, or unconsciousness, as your Journeyer may be diabetic.

Some quick ways to restore yourself if you are otherwise in good health are : fruits, fruit juices, sugary snacks {such as dates}. To stabilize your blood sugar levels until your next meal, ingest a carbohydrate with protein {such as eating some fruit with nut butter}.

If you find yourself feeling fuzzy or sleepy along with the Journeyer, it may be that there is not enough oxygen in the room {some spaces, especially when they are small, are so airtight that there may not be enough circulation or air exchange}.

In these cases, opening a window, taking an outdoor break, or turning on / off the heating / cooling system may create more airflow {a wood fired stove will burn oxygen for example}.

### Muscle Cramps

If you find your Journeyer is experiencing muscle cramps {such as Charlie horses in the calves} or generally tense muscles, a Magnesium elixir {such as CALM} can help the muscles fully relax.

Magnesium’s moniker is “the relaxation mineral” as it is essential for proper muscle function, necessary for keeping muscles loose and flexible. Be careful with the internal dosage, as too much magnesium can cause diarrhea.

An effective alternative method for absorbing magnesium is topically through the skin via a spray, soaking in an Epsom salt tub, or if there is not a full tub available, a smaller foot bath.

Epsom salts have a high magnesium content, and magnesium is most readily absorbed through the skin.

### Proper Preparation Promotes Pleasure

Pre-planning of nourishment **before, during, and after** a journey can go a long way toward preventing an uncomfortable or ungrounded experience.

Having foods / beverages that you know are soothing to the Journeyer to offer can provide an experience of receiving safe, supportive nourishment and care.

Additionally, as a Guide, monitoring your own blood glucose level is essential for sustained attention, positive affect, and attunement.

Having a bowl of sprouted nuts and fruit available nearby for either Journeyer or Guide to nibble on without interrupting the flow of the session can make the difference between a centered and focused session and a spacey incoherent experience.

Often if partaking of medicine, but even in sober sessions in which awe is enhanced, the appetite of the Journeyer will likely be diminished, so light and easily digestible fare such as fruits or sprouted nuts and seeds can be helpful for restoring or balancing energy.

## Somatic Techniques

### Audible Relaxed Exhalation

There is one unique technique that I initially developed by accident {have never read of it specifically in any risk reduction or therapy literature} that is “Somatic Magic” that I currently teach widely.

If you remember just one thing from this book or my workshops, have it be this technique, called **Audible Relaxed Exhalation**.

Audible Relaxed Exhalation can be used as a de-escalation technique and has no downsides the author has been able to identify.

If the participant is agitated to a degree of active or potential harm to self or others and other techniques are not working it is often not constructive to “command” or direct them to “breathe slowly and deeply” which they may either not be able to understand {if in a post-verbal state}, or take as a kind of threat/power play and create paranoia about control.

Instead, you can mention that you are feeling tense and that you are going to engage in a breathing exercise to calm yourself and that they are welcome to join you if they would like.

Then, to engage in Audible Relaxed Exhalation, breathe deeply and audibly into the bottom of your belly / diaphragm {perhaps with your hand on your stomach to assist in not simply raising your shoulders}, taking punctuated “sips” of air as you breathe in or at the top of the breath, finally making a relaxed sigh upon exhalation {such as if you have had a full day and you are now relaxing with your feet up by the fire with a mug of tea}. Repeat this for at least 3 breaths and continue as long as needed {I have done this for 10 minutes at a time for significantly agitated post-verbal Journeyers ‘in the wild’}.

This form of content at peace sigh communicates directly to the nervous system of the Journeyer that there is a peaceful, relaxed, unhurried, and deeply breathing body next to them that is not scared, thus nonverbally conveying that their body is safe and can relax too {all without uttering a single word!}.

If they ask what you are doing or why, that is welcome, and you can invite them in again by saying “I noticed I was feeling anxious, and this is what I do to relax; you are welcome to join me any time if you’d like.”

Since writing about the Audible Relaxed Exhalation technique, I have discovered a variation written about in the scientific literature called the ‘Physiological Sigh’.

### Eye Gazing

Eye gazing is another simple, powerful tool that can help generate oxytocin and co-regulate the nervous system of both the Journeyer and Guide when done in an attuned manner.

Eye gazing is also very culturally varied, and can be felt as aggressive, cause paranoia, or be challenging for neurodiverse people, so pay particular attention to reading the Journeyer’s energy around eye contact of any kind.

### Body Mirroring

If your Journeyer is experiencing a challenge in connecting with their body, the Guide can try mirroring their position and narrate what they are noticing in their own body to prime the pump of perception.

This technique also pairs well with the Guide acting as a Body Barometer, as the Journeyer’s numbness could be the result of attempting to tune out uncomfortable but easily solved body signals, such as cold, hunger, or the need to use the restroom.

Thus, a permission slip through self-disclosure of the needs of the Guide followed by an invitation for the Journeyer to join them can spur a proactive physical action that creates the conditions for ease in both bodies.

### Grounding Pressure

Providing pressure through an external source such as a gravity blanket, cushions, or heavy coat regulates the nervous system and puts the Journeyer in a parasympathetic state.

The “swaddling” possible with blankets and clothing, while typically soothing and reminiscent of womb time or the care of infancy, might, depending on the association, be alarmingly constricting / claustrophobic.

Ask your Journeyer for their preferences, or if they are in a non-verbal state, track the reaction of your Journeyer to a small looser draping before you consider fully swaddling them.

As mentioned previously grounding pressure on the extremities such as on the Journeyer’s feet with your feet or compressing the Journeyer’s hands into the ground with your hands or feet can help reconnect the Journeyer with an innate sense of stability provided by gravity. If the Journeyer agrees, it can be a lifeline to simply hold someone’s hand in the middle of a maelstrom.

## Additional Techniques

### Pre-Planned Techniques

One pre-planned technique that can be enacted from the [Intake questionnaire](#_rcw7ygibltu7) is reading aloud from books of importance for the Journeyer.

Similarly, playing music that the Journeyer mentioned as calming from the questionnaire, or conversely, of salience that brings to the top of mind the memory or time period that you are working on together can be useful sensory tools when used in the appropriate context.

Guided meditations or visceral visualizations such as “[Sanctuary Space](#_qyup0yhp309t)” {found later in this tome} can be useful to send out to the Journeyer before the session so that they will have some pre-journey strengthening repetitions in place before they are needed to be called upon in an experience of more acute requirement.

### De-Escalation

Certain philosophies of spaceholding such as peer-to-peer sitting, or the “you can hate yourself here” frame, will not emphasize de-escalation methods, instead interpreting any experience as valid to endure even if painful or challenging.

Personally, the author finds it uncompassionate to be in the presence of a Journeyer’s suffering when they feel that the Spaceholder can offer a technique to alleviate it.

Additionally, it is not trauma-informed to be passively present with someone in the throes of self-hate without expressing doubt about the validity of the self-reproach as this silence implicitly condones the statements as accurate and can create additional shame, re-traumatize, or create new social sharing trauma on top of the original event.

Thus, de-escalation often will fall more under the active agent / benefit enhancement side of the spectrum of how involved the spaceholder is in the Journeyer’s experience.

De-escalation methods can range from dissipating body load tension, reducing agitation, and run all the way to actively dampening actions or tendencies that may lead to a concern for harm to self or others {e.g. pointing out an unconscious self-harm stimulation / self-regulation habitual action and instead directing it toward a neutral or beneficial action such as a fidget toy or dissipating the body load through healthy movement}.

***De-escalation techniques include:***

#### Asking Why?

As we typically share a relative baseline of consensus reality, we can often feel that we understand motivations for particular behaviors.

Within an altered state context, meaning-making and causal relationships are much less linear – the mind under the influence of a psychedelic will be making novel connections – some of which we may be tempted to say are “inaccurate” from baseline consensus reality {extreme paranoia of personal surveillance is one example of this}.

Asking your Journeyer why they are doing something can help you understand their inner state, and you can help create a container in which the need which is at the root of their concern is the focus instead of attempting to convince them of “the truth.”

As noted previously, there is a difference between understanding why someone is seeing something that does not match consensus reality and arguing with them that it is not true.

For example, if someone is seeing purple dragons, it may not be the best use of energy to convince them the dragons are not real, but instead ask what significance the dragons hold for the Journeyer, what feelings they bring up, what they remind them of, etc.

### Distraction

As mentioned earlier, distraction can be a valid strategy to consider if someone is looping to introduce new information and break the loop. Distraction or diversion can also be utilized to loosen fixation or obsession on an area of anxiety.

# From Spaceholder to Guide

Within the terminological framework of this book, the usage of “Guide” indicates taking on a higher level of responsibility for the Journeyer’s experience not only during the session but also before and after the journey.

A Guide can work in a clinical or ceremonial context and the training may dramatically vary from Guide to Guide, and lineage to lineage.

## Consent Around Capability / Capacity

*Working within your Scope of Competence*

When asked to hold space in a controlled ceremonial container / pre-planned way, best practice recommends meeting in person, or at the very least having several phone or video calls a month before the session {ideally several months in advance so that the material can be worked on in therapy, dreams, and other technologies of the subconscious prior to the journey}.

In the initial conversation, the Guide should seek to determine if they are a good fit to work together with the Journeyer, in that the Guide feels capable of supporting the Journeyer’s specific inquiry/inquiries via being informed, compassionate, and comfortable in the main areas of exploration {e.g. someone who is of a pro-life political orientation Guiding for a Journeyer who seeks to find compassion for their choice to have an abortion would not be a good fit}.

Even with the alignment of the Journeyer’s primary intention and the Guide’s skill set, there are also two possibilities that may diverge the team from the pre-planned path of focus:

1. There may be another topic that emerges to the fore as unexpectedly salient for the Journeyer within the session
2. There may be an eruption of a buried issue to the surface that the Journeyer may not have even been consciously aware of {such as childhood abuse that was suppressed}

For example, I had a Journeyer who wanted to work on their self-confidence and self-sabotaging behaviors which we discussed extensively ahead of the session, but once we got into a session space, they ended up sharing details of abuse and trauma from their childhood that they had never shared with anyone else and many of which they had not conceived of as painful previously.

Fortunately, I was trauma-informed, and I also had knowledge about how to work with attachment wounds that I called upon to navigate what was a more advanced situation than initially discussed.

Thus, as a Guide, it is ideal to have an in-depth screening and rapport-building period with your Journeyer, so you can get a sense of what may come up {even if ‘unlikely’ or not the chosen focus of the session}.

This allows you to both gain knowledge about the Journeyer and also develops the interpersonal trust to dig deeper when appropriate, such as by observing patterns across various facets of the Journeyer’s life and sharing these perspectives if the Journeyer wishes for that type of Spaceholding.

Unanticipated deep traumas can certainly surface without anyone expecting them, and therefore as an ethical imperative for the psychedelic field, it is essential for all Spaceholders to be wise in the ways of recognizing trauma reactions and supporting those who may be in the throes of a PTSD flashback {PTSD is an abbreviation for Post Traumatic Stress Disorder}.

There is additional information on how to support those reliving trauma states in the [Trauma-Informed Support](#_29silm9xxpmk) section.

These skills are useful for all to cultivate, as excavation of buried trauma material also occurs with surprising frequency during psychedelic journey support “In the Wild,” as people in a party context find themselves suddenly contending with unacknowledged or repressed material brought to the fore by the “unspecified amplification” and subconscious floodgates opening on psychedelics.

Finally, even without ingesting psychedelics, if the pressure cooker conditions of our world continue to increase, many sensitive people may experience breakdowns in public or private as their capacity to handle the current or increasing state of polycrisis is overwhelmed. The skills of supporting people in psychedelic crises apply to supporting states of intensity, even if the precipitating cause is not a psychedelic.

***How much overlap / shared life experience between the Guide and Journeyer is necessary?***

It can speed understanding and rapport-building to find a Guide that has significant shared life experience overlap as you are more likely to be intimately aware of the nuanced details about what they lived through, and you may have a shared vocabulary or lexicon.

It can be a disheartening challenge to source a Guide that you feel understands you when you have an intersectional, marginalized, or complex identity and history.

Thus, an immense driving force for the author in writing this tome is to increase accessibility to these intersectional healing spaces via teaching Spaceholding skills such that peers will be more equipped to support peers of unique backgrounds.

There are only so many psychedelic therapists, and barriers to entry into this specified field remain high, in addition to the expensive financial cost of this form of professional support. Well-trained and attuned Guides or Spaceholders can close this gap and make transformational healing work more accessible to people of all backgrounds.

### What to do in Cases of a Lack of Experience in the Journeyer’s Intention

Do not let lack of shared experience in your Journeyer’s intention be the only reason to automatically cause you to refer your Journeyer to another Guide, especially if you already have a long-standing intimate rapport with your Journeyer {such as growing up with them in childhood}.

Explore educating yourself in the life experiences of your Journeyer and how to support them via books, lectures, courses, and films in the subject material relevant to this history of the Journeyer. Ask your Journeyer what materials they specifically recommend you take in as a potential Guide.

Contrary to expectation, there may be profound reconciliation to be found for the Journeyer in feeling the supportive presence of someone who is on “the other side of the equation” {such as a cishet female-bodied Journeyer who has a close cis het male-bodied friend she feels safe with Spaceholding for her while she unwinds the patterns of patriarchy}.

It is important to note that a less mutual / harmoniously resonant match may result in an “activating pairing” which is more likely to go sideways {e.g. go in an unexpected and thus more challenging direction}, so two Guides would be recommended, when possible, in these instances.

A related point when it comes to Journeyer backgrounds, which include trauma, is that ideally the Guide is only holding space to their level of training.

For example, if the Journeyer has a trauma history that includes intergenerational incest and the Spaceholder has no experience in how to provide support to someone who has experienced this pervasive, ongoing level of embodied and emotional abuse, the Spaceholder should refer the Journeyer to someone who has training in how to support the recovery of incest survivors.

If obtaining training or referring out to someone who has experience is not possible, at the very least, the Spaceholder should deeply educate themselves in the literature available on the topic as a proxy for more extensive training.

Specifically, this gap between providers of care and Journeyers may occur due to the lack of access to psychedelic therapists of diverse backgrounds at this time, which may require reaching out to friends with similar backgrounds to engage in more of a peer-to-peer spaceholding context.

Proceed with caution, humility, respect, and seek professional support when advanced levels of trauma, complex trauma, or multiple compounding traumas are present.

### Screening

Screening is a foundational ethical matter for several reasons including the need for: due diligence, informed consent of risks, conscientiousness in working within your scope of practice {making sure the Guide can provide the level of support that the Journeyer needs}, and openness to referrals or finding a better Spaceholder fit for the needs of the Journeyer.

#### Screening for Contraindications

Screening is essential to:

* *Ensure the safety of the participant(s)*
* *Verify there are no contraindications to the specific ally / medicine / compound / travel companion chosen*
* *Ensure that there are no interactions with other medications / supplements {for example increasing the risk of serotonin syndrome}*
* *Uncover latent or active psychological conditions that may be exacerbated or emerge based on family history*

**Psychedelics are not for everyone** and are specifically contraindicated for people who are already psychologically destabilized {e.g. experiencing unmanaged overwhelming mood swings, suicidal ideation, actively manic...}.

Intense psychological experiences can also activate latent destabilization factors, for example, Journeyers with schizophrenia in their bloodline are contraindicated for any type of technology that may trigger a psychotic episode, such as psychedelics, or even breathwork![[1]](#footnote-1)

Even something as seemingly benign as meditation is contraindicated for those who have significant embodied trauma. [[2]](#footnote-2)

Fortunately, trauma-informed meditation is shifting awareness in the field.

Ideally, with a rigorous screening process, the Spaceholder can preemptively steer the prospective Journeyer away from psychedelic scenarios with high potential to be negatively life-impacting with long-term consequences.

Thanks to the safety net of screening, the Spaceholder can direct a vulnerable Journeyer’s search for healing into another methodology that is of a lesser risk profile, such as expressive arts therapy, internal family systems, or forest bathing.

Initial screening for contraindications can be done via requiring a Spaceholder Questionnaire {a good place to start is the [Journeyer Pre-Journey Questionnaire](#_rcw7ygibltu7)}, with the findings corroborated through subsequent meetings in person or via phone calls.

For more information on the intricacies of supporting a Journeyer with a trauma history, please see the [Trauma-Informed Spaceholding](#_29silm9xxpmk) section.

#### Informed Consent: Physical / Psyche Risk

A foundational part of screening is determining how experienced your Journeyer is with altered states of consciousness and their level of self-knowledge and self-development.

If your Journeyer is psychedelic-naïve it is essential to educate them on the potential risks and benefits of psychedelics openly and to receive preemptive consent in case of extreme reactions, as they have less of a data set from which to draw on to inform them of their likely reactions to a radically altered mindset.

Although the stereotype is for the first-time or neophyte Journeyers, who have not yet swum into the deep end to have unexpected experiences in this new realm, it is also true that seasoned psychonauts {meaning experienced, wide-roaming explorers of the mind} can also be taken for unexpected rides, so it is always wise to discuss preferred courses of action ahead of time in case of challenges arising unexpectedly regardless of the previous historical experience level.

#### Nocebo / Instilling Fear

Each Spaceholder must find the personal balance within their practice between informed consent for presenting the risks of psychedelics, while not excessively invoking a “nocebo” effect.

A “nocebo” effect is “a harmless substance or treatment that when taken by or administered to a patient is associated with harmful side effects or worsening of symptoms due to negative expectations or the psychological condition of the patient.” [[3]](#footnote-3)

A helpful direction to orient when it comes to disclosure is a movement away from brash blustery overconfidence in a psychedelic panacea and towards a reasoned conversation about how to mitigate risk, and what to do in case of emergency.

One way to cover the topic of the potential for extreme situations in a constructive way is to ask your Journeyer what they would want you to do for them in case they need extra care.

One example of a form this can take is in the “[Ego Death Living Will](#_839gq9ow17gq)” section later in this tome.

Relatedly, administering such a thorough risk reduction conversation can bring up possibilities that the Journeyer can find intense.

“*I never thought I would need to be restrained*” is a response I often receive when teaching workshops on the scope of a thorough intake.

This personally thorough level of preparedness is forged in the deep trenches of the psychedelic renaissance, in which I have encountered people in states that were ‘no longer human’ {in that their prefrontal cortex was completely shut down due to fear and they had no access to the higher reasoning powers that make us “human” rather than animal} and they were operating from their brainstem in an instinctual post-verbal reptilian survival fighting/biting terror mode.

In these moments of extreme caregiving, I desperately wished that I would have known their preferences in how to handle their psyche and body as they most prefer in these chaotic circumstances and compensated to the best of my knowledge by putting myself in their shoes, keeping them from harming themselves and others as I would have wanted personally.

Coming from these extreme edge cases, as a matter of principle I recommend being over-prepared in that it is better to front-load the labor of consent and discovering preferences than wishing you had details in a situation in which you are unable to obtain them from your Journeyer due to the depth of intensity of their experience.

More information on spiritual emergencies and journeys on the more intense side of the spectrum are covered in the section [Emergency Situations](#_lfyj7bgnk59d).

## Reciprocity

The following is quoted from “[What is Sacred Reciprocity?” by Rebecca Martinez](https://psychedelicstoday.com/2021/05/19/what-is-sacred-reciprocity/) – I highly recommend reading the original in full form.

“Sacred reciprocity is the heartfelt exchange, gratitude, and acknowledgment for everyone and everything that sustains us.

In psychedelics, it is a call for those who consume plant medicines to give back meaningfully to the communities and lineages who have preserved these medicines for generations.

Indigenous communities bear the impact of the expansion, along with, in many cases, oppression from local governments.

The concept of sacred reciprocity comes from the Quechua word, ayni. Quechua is the Indigenous language of the ancestral peoples of the Andes, specifically Peru.

Ayni is a principle of receptivity and gratitude, marked by a lifestyle of giving back in an inhale-exhale type relationship with the natural world.”[[4]](#footnote-4)

Reciprocity is actionable – here are recommendations for engaging in sacred reciprocity from Rebecca Martinez:

* “**Commit to learning** and honoring the lineage and preservation of medicines you consume (studying and sharing this article is a solid start).
* **Financially support Indigenous-led organizations** The Indigenous Reciprocity Initiative, hosted by Chacruna Institute, offers a directory of community-determined projects which you can support directly.
* **Use medicines sparingly**. These substances are powerful, limited and rapidly declining. Consider ways to spread out your journey work and make the most of each experience through self-responsibility, preparation, and integration.
* **Grow your own medicine**s and choose medicines that can be sustainably grown or produced.
* **Dig into your own Indigenous history**. Get into relationship with your ancestry through family, food, research, community, and focused journey work. Solidarity reaches deeper when it hits close to home.
* **Advocate for drug policy reform** and work to understand systems of oppression in your community.

No money? Use what you have.

* **Volunteer time**. Many organizations and projects could use help with web-based marketing, fundraising, and awareness efforts.
* **Talk with loved ones** about sacred reciprocity.
* **Cultivate practices that are good for the Earth** and its ecosystems in your diet, travel, and consumption habits.
* **Do journey work specifically focused in prayer for Indigenous protection and thriving**.
* **Commit to the path of interconnectedness**. Embrace systems thinking over simplistic solutions.”[[5]](#footnote-5)

## Psychedelic Power Dynamics

*How does a Good Guide behave?*

A Good Guide gets themselves out of the way by listening intently to the Guide inside the Journeyer and working to strengthen the Journeyer’s relationship with their own inner knowing.

### A Good Guide Resonates with Your Inner Guide

At heart, a psychedelic Guide is an external force attuning to and amplifying your personal internal Guide, working to strengthen your relationship to your own inner knowing.

A Good Guide is a hollow reed – an instrument waiting to be played by the winds of your wisdom emerging.

Thus, a Good Guide is eager to encourage your expression, and once attuned, a Guide can resound as a tuning fork for your new truth.

This interpersonal intimacy provides an impetus for integration, as the Guide can then serve as an accountabilibuddy {= accountability + buddy} for your new understandings.

When it comes to repatterning, a Guide is indispensable for compassionate witnessing to provide a second, patient perspective to help survey when you may be falling into the rut of an older groove, due to the inertia of the past.

A Good Guide can then gently and empathetically steer you back towards a more beneficial pattern you have committed to.

Although immediate integration of insights is a goal to strive for, a Guide aids you in being kind in forgiving yourself when you end up following the older canyons of habit and thought, as old patterns have carved crevasses for many years in comparison to fresh new rivulets of repatterning.

A Guide helps act as an accountabilibuddy of realizations, steadily sustained throughout time for ingraining integration, to support a lifelong practice in pattern-remaking, which involves steering yourself in new directions consistently through implementing your intentions.

Over time, as water wears paths in stone, you will find that your new natural inertia moves you towards the effortless embodiment of your evolutionary insights.

Until then, lean upon your Guide and social support to hold yourself accountable for your new path.

A Good Guide will be transparent about their triggers, experience, and areas of challenge they are still working on and will acknowledge and repair transgressions, ideally within a community of accountability.

#### Sketchy Shaman Warning Signs

*INFORMATION ASYMMETRY is a sketchy shaman manipulation tool.*

One of the major tools a sketchy ‘Guide’ exploits to maintain or widen a power differential between a relatively naïve Journeyer and themselves is information asymmetry.

Information asymmetry occurs when someone postures as an expert in a subject and actively withholds information by not educating / explaining / sharing their knowledge for the purposes of placing themselves in a position of power due to the cultivated perception of access to privileged information relative to the person with less knowledge.

A more pedestrian example of exploiting information asymmetries occurs in sketchy mechanics who prey upon those who have not been taught how to tend to the complexities of vehicles, thus prescribing expensive systemic replacements that may be unnecessary or could be accomplished by replacing a less expensive part that is causing the operational dysfunction.

Information asymmetry is a consent violation as it does not empower informed consent for the Journeyer and maintains / expands power differentials, elevating a sketchy Guide onto a privileged experience pedestal above the Journeyer as a gap not to be bridged.

Information asymmetry is artificially forcing a situation of blind trust on the Journeyer that the sketchy Guide “always knows best” and “knows what is right for you,” which promotes patronizing behavior and creates a knowledge gap conducive to abuses of power.

**An ethical psychedelic Spaceholder / Good Guide will always cultivate the strength of your own inner Guide as a Journeyer through patiently explaining why they are utilizing a specific technique, the lineage of how the knowledge was developed, answering any questions you might have, and giving you as much choice as possible.**

### Motivation

With the changing cultural climate around psychedelics due to many years of steadfast work on policy and research, as well as popular mainstream books and video series such as Michael Pollen’s “How to Change Your Mind”, there are many novices entering the psychedelic field, both desiring to experience healing, or perhaps inspired to be of support in another’s healing path.

***Psychedelics are a powerful tool and can be used to either cure or control.***

Much as politics can attract those who seek raw power, some seek out psychedelic spaceholding due to the natural power imbalance created in the Guide / Journeyer dynamic, and the Guide role can attract narcissists, sociopaths, or simply people who seek influence and status.

Let us prevent the role of psychedelic Spaceholder from going the way of the guru – with all the potential pitfalls of that path – money, sexual manipulation, and unchecked power.

With capitalism’s creep into psychedelic healing, we need to honor the community-appointed roots of being a healer, remembering that it is a calling and sacred responsibility to hold someone in their most vulnerable states, and take the physician’s oath to “first do no harm.”

We cannot allow an extractive profit-motive mindset to be what moves us in this honorable space, instead, we must prioritize what is of the Journeyer’s greatest well-being – scaffolding social and cultural guardrails to reduce the risks for patients / Journeyers and knowing when the powerful technology of psychedelics is contraindicated.

Much as you would only let a child play with a rubber hammer and not power tools, the power of the tool / modality is proportional to the depth of the responsibility - be it psychedelics, breathwork, or AR / VR / XR.

### Predatory Marketing

*Upselling under the influence.*

The author has now heard of several psychedelic practitioners who, while their Journeyer is under the influence of a psychedelic, sell to the Journeyer in an altered state on a “healing package,” or additional services.

This could be compared to getting someone intoxicated and then getting them to sign a contract – it is unsavory, unethical, and legally irresponsible to say the least.

When someone is under the influence of a psychedelic, they are more impressionable, and it is a breach of ***informed sober consent*** to upsell someone who is in such a permeable state.

When these practitioners were made aware of how this may be an ethical breach they responded with “that’s just marketing” and “this is what marketing is.”

While it may be true that upselling under pressure is a marketing tactic in business, pushing this type of behavior on someone in a psychedelic state is unequivocally unethical.

This type of nuanced violation is one of the very reasons the author chose to begin offering the community resource of G4G – due to the novelty and expansion of the psychedelic spaceholding field, there is a lack of awareness from those new to the community / field that this behavior is in breach of a higher ethical standard that we should all hold ourselves accountable to.

### Selling Training Programs Through Touting Financial Benefits / High Pressure Marketing

I am witnessing marketing copy to sell psychedelic spaceholding and integration programs reiterating at multiple places on the landing page that “*You can earn $50 to $200 dollars an hour*” doing this work after engaging in a brief training course.

While it can be appropriate to be compensated for one’s labor {see [Reciprocity](#_15v8rpaz18r2)}, if one’s primary motivation in entering the field is profit, this should be closely examined, as it can easily lead to situations in which the prospective ‘Guide’ sacrifices the ethics, values, or the well-being of the Journeyer for money.

Additionally, there a trend that, while less damaging, is not trauma-informed, which preys upon a scarcity mentality by using high-pressure sales techniques that may include phrases such as: “I will likely never offer this course again” {especially when the course is evergreen content meaning that it is actually available anytime}.

Ultimately if you are using these traditional marketing techniques only you know if these statements are true or these techniques are being utilized in a compassionate manner, so tune in your values to sense if using these methods is in alignment with the wellness of the whole.

Pushy or guilt-inducing marketing phrases along the lines of “*you have the money you are just not prioritizing this*” or “*invest in yourself, this program will 10x your earning potential*” are also problematic in that they invoke shame to push you into a choice that may create stressful financial pressure that then causes the ‘Guide’ to justify sacrificing their ethics to pay back the debts of being in the program.

### Death by Lack of Support

Psychedelic spaceholding is deep psychological work, and those who enter this field need to have extremely high ethics commensurate with the privileged relationship of trust that is a Journeyer vulnerably laying their psyche bare in front of you.

There are some jobs in which, if you mess up, “no one dies,” but the truth is that you could cause someone to want to end their life if you do not hold the deeply vulnerable work of Guiding well.

The author has received reputable and painful stories of instances in which a guru/coach who was giving their followers/clients psychedelics did not provide the emotional support needed for that exposed context and ended up greatly contributing to {those involved used the word ‘causing’} the suicide of someone who consumed the coach’s spiritual gaslighting message that “they were responsible for their suffering.”

More about this topic can be found in the section [Guide Red Flags](#_eellsq62j15o).

## Transformative / Restorative Justice for Psychedelic Abuses of Power

Earth Body Church, the publisher of this guide, aims to develop a well-reasoned plan for how to address allegations of misconduct or violation in psychedelic spaces.

Here is what we aim to implement when approached to mediate psychedelic sexual assault violations.

1. Support the survivor{s} in feeling safe – share trauma-informed resources {such as [Corporeal Consent](https://www.raz.ma/corporeal-consent/)}
2. Create an anonymous form to receive information about potentially related allegations – such as a website.
3. Form a neutral exploratory information gathering group trained in transformative justice practices {ideally a council of elders} to take in information
4. This council creates a plan for restorative justice if needed for survivors, creates or opens a transformative justice circle to create a plan for how the community can preemptively evolve or put safeguards or standards in place to prevent similar occurrences from happening.

There is currently a litigious culture of fear of misspeaking whether “not siding with the survivor” or “not wanting to have the perpetrator sue for slander” which is suppressing honest dialogue.

Best practice is to give everyone the benefit of the doubt, and instead of canceling a perpetrator without involving a Council, calling the alleged perpetrator in to repair and reform can help us all collectively rise.

Ideally, we have a compassionate psychedelic community in which everyone feels comfortable coming together to discuss challenges openly.

One simple and accessible way to set up a safety net as a psychedelic practitioner is to ask upstanding colleagues to act as your accountability pod and provide their emails on your website in case someone needs to make an anonymous allegation of harm.

This community of justice can then bring this feedback to you and hold you accountable for the emergent council and repair process. An anonymous comment blog page system can also work to provide shorter feedback.

## Emergency Situations

Although it is the author’s earnest hope that you never have to call upon this knowledge, the following life-saving situations have occurred in my time in the trenches on the festival frontlines of extreme psychedelic risk reduction.

I have witnessed and cared for people who take high doses of psychedelics and go into terrified humanimal trauma responses.

When a Journeyer is in a ‘humanimal trauma response’ the logical reasoning skills of the prefrontal cortex / frontal lobes {the part of the brain that makes people ‘human’ in their ability to plan, use words, etc.} is no longer accessible to them as it has been bypassed by the limbic system believing that the organism is in a life-threatening situation {also called amygdala hijacking}.

In general, the nervous system and brain initially attempt to co-regulate via social methods, turning toward others who may be near in an attempt to receive aid or care. It is crucial to keep in mind that what the nervous system perceives takes precedence over ‘objective’ reality. If the nervous system has a learned pattern that perceives that no one is coming to aid, or that ‘people are not safe or trustworthy’ \, the defense cascade will progress into the next evolutionary level ‘down’ in a reverse-evolution through the layers of the nervous system. This can comprise responses such as fight / flight / freeze. There is another response called tonic immobility also known as ‘playing dead’ that will be covered more thoroughly in the [Nervous System 101](#_Nervous_System_101) section.

I recommend relating to humanimals in this state as though they are a fearful feral animal, as that is the mode that their brain is in.

In this state, it is best to communicate to them on a body-based nervous system level.

**A few general tips for creating calm are:**

* Moving slowly
* Narrating what you are doing and why in a soft higher-pitched voice {in ‘motherese’, or how you might speak to a child or animal}
* Removing hats / sunglasses / anything that makes you seem bigger than you are
* Take a more submissive energetic stance,
  + Crouch
  + Get low
  + Match yourself to their height level

If possible, try to reduce the sensory stimulation in the space as this is what may have brought about the overwhelm in the first place. **Dim the lights**, keep them steady instead of flashing, and **turn down any sound**.

You can try to encourage them to follow you to a quieter place if you know of one nearby {e.g. away from the sound system}.

Ideally, there is someone nearby that the person you are caring for has a pre-existing relationship with aiding you and validating that you are trying to help them, but if not, make non-pressured suggestions including explanations {e.g. it’s loud and crowded here right next to the subwoofer stack, want to go somewhere more open and quieter?}.

If they are entirely non-responsive to verbal input – not reacting as if they understand anything- you can use the following non-verbal nervous system regulation and rapport-building techniques to communicate directly to their brainstem that they are safe.

### Audible Relaxed Exhalation + Air Sipping

This simple yet effective technique allowed me to transform a lashing out looping Journeyer who was hitting and hurting themselves and their well-intentioned campmates from agitated disorganized disconnection to sleeping and soothed.

Audible Relaxed Exhalations are a goof-proof method is the only one that has no potential for harm that I have found – unlike well-meaning, but potentially misinterpreted, touch.

**First** - maintain a distance that shows that you are available if needed but not too close to be smothering – when in doubt leave more space.

You can then invite the Journeyer to join you by offering an open-ended invitation without expectation such as “I would like to breathe to make myself calmer, you can join me if you’d like.”

**Then, take a deep breath into the bottom of your belly** {emphasizing expanding your diaphragm more than raising your shoulders in a shallow breath} “sipping” or “sniffing” the air in a punctuated rhythm as you breathe in.

**On the longer out-breath– let a relaxed sound fall out of your mouth**. This may be a sigh, a tone, or a hum.

**Repeat this as long as necessary** {for the lashing out looper I did this for at least 10 minutes while I was witnessing results}.

This visceral communication conveys several things without words – that the Journeyer’s humanimal body is near another body that is corporeally communicating somatic safety – due to the Spaceholder breathing in a calm and unafraid way, and thus that the Spaceholder does not need to be on alert, fight, or flee.

Somatically the Journeyer’s nervous system is registering that there is another body nearby that is safe to the Journeyer, and thus the Journeyer’s body – in being close to the relaxed Spaceholder’s body - is also safe.

A regulated nervous system has been scientifically shown to regulate other nervous systems around it, so do what you need to do to regulate yourself knowing that you are supporting the Journeyer in doing so.

### Chemical Restraint

There may be medical personnel who can provide chemical restraints in the form of Xanax, benzodiazepines, or anti-anxiety medications.

If you have that level of training, consider having a conversation with your Journeyer as to if they would wish for that type of intervention and in what context.

There are schools of thought that “interrupting” a “challenging trip” through the addition of anti-anxiety medication removes the possibility of learning or harvesting from what was a necessary experience.

The author thinks that each Journeyer should decide for themselves how they desire to be treated and in what context with a clear understanding of the potential risks and rewards.

### Physical Restraint

It is an absolute last resort to restrain someone, and many would not recommend it.

Some schools / risk reduction crews “do not restrain and do not chase.”

If someone is an extreme danger to themselves, such as in a scenario below where the Journeyer has stated they will enter water, you may make a choice, as I did, to do what I thought was needed to save lives and keep other first responders from the potential harm of being drowned as they attempted a water rescue.

## Real World Scenario

### Salty Biter

At a large 20,000+ person music and art festival, you are traversing a crowded dusty bottleneck strip of land where two bridges meet each other across deep canyons.

You are not “on duty” as a Ranger, but as a “Ranger Outpost” you carry an Event Radio to call in for support in case of emergency.

Suddenly about 20 feet in front of you in a clearing in the teeming crowd, a Caucasian male-bodied person in their late teens / early twenties who was walking collapses to the ground – you make a few steps forward briskly and crouch down while asking if they are ok.

Your off-duty Ranger partner, who was walking next to you, observes from a short distance.

The person on the ground is mumbling something illegible towards the ground, and you repeat “Are you ok?”

On the third ask, they turn their head slightly up towards you and repeat “DMT, DMT, LSD, LSD,” in an endless loop, with their eyes rolling to the sides and back, unable to steadily fixate on you.

You ask them what their name is, and they continue repeating their verbal “DMT, DMT, LSD, LSD,” loop.

You ask them if they need help, with no response.

Then you ask, “Can we help you get somewhere quieter?”

To which their head snaps up “THE LAKE, I have to go in the lake!” and they take off sprinting full bore directly in the direction of the lake.

***At this point you are faced with making a split-second decision – what would you do?***

What I decided - knowing that water rescues can often lead to the drowning of the person trying to rescue someone due to the panic of the one who is drowning – is to immediately take off running after them, as I did not want this person to drown themselves or anyone who would try to rescue them.

I dropped my bag, my large not aerodynamic hand-knit costume hat, and other things I was carrying / wearing that would impede my speed and followed them in breakneck pursuit.

I intercepted the Journeyer at the edge of one of the 3 main large, covered stages.

I intuitively leaned upon over a decade of embodied training as a contact improvisation teacher and safely and gently brought them to the ground and pinned them down carefully with my weight, listening to the effect my pressure was having as I poured my weight into the points of contact to lightly restrain them.

Soon, a security guard for the event joined me, as did my off-duty Ranger partner, who called in for additional medical support on my radio while the Journeyer was screaming and roaring and others were trying to ask them what they needed.

In the commotion of people encircling the scene, I was distracted and looked up, and the Journeyer – scared humanimal that they were in that state, without their prefrontal cortex online – craned their neck up and took a strong mouthful of my bicep, teeth clamping down as hard as they could.

Time slowed down as I carefully but rapidly tried to pull my arm away with all my skin and muscle intact – there was a razor’s edge I was riding as I could feel their sharp teeth biting my viscera, pinching, and scraping my skin as though a dog had clamped down and locked their jaw into my arm.

I managed to gingerly pull away, but they got another clamping bite in before others began helping hold down different parts of the Journeyer’s body, so everyone was out of the way of their mouth.

There was no time in the moment to examine the injuries I had sustained, but I changed my position to behind the Journeyer’s head, holding it to make sure that they did not bite anyone else.

Meanwhile, the Journeyer was very hot and red, so we tried to give them some water, but they were not interested in swallowing, so we poured it on the top of their head and chest which seemed to calm them slightly.

I tried to meet the Journeyer with eye contact and asking what their name was, and what they needed, but I did not receive answers to my questions.

Eventually, after what seemed like an eternity, the advanced medical team arrived and strapped the Journeyer to a gurney and drove them off to a more resourced care space.

After some of the adrenaline cleared my system, the pain in my arm directed my attention to the damage I had sustained – there were clear surface abrasions, slight blood seeping, and the deep bruising had already begun.

I had poured all my attention into trying to aid this Journeyer and engage in a triage “soul retrieval” to bring them back to their body and I was deeply exhausted.

I let my Ranger partner know that I needed them to help me take care of myself, get grounded, and get back to camp.

I was scheduled to have a shift a few hours later but I was so shaken and ungrounded that I radioed into Ranger HQ to reschedule, which was encouraged and understood.

Later I learned that the nature of this Journeyer as a bite risk had not been conveyed to those downstream in the line of care, and that they ended up biting another Spaceholder in the care space, which is why I now hold a position for advocating for a strong knowledge transfer and offering methods for continued connection.

***What had I wished I had known in this scenario?***

I would have been grateful to have the knowledge of how to restrain someone such that they cannot bite or harm you – namely one position that I learned afterward was to sit on their pelvis, and to pin their arms to their chest in an x by the wrists far enough away from their mouth that you cannot be bitten.

I also realized the importance of information handoffs – even in a rushed emergency – between members of the care team.

Had the medical team been informed that this Journeyer was a bite risk, the other members of the care team would have engaged in additional safety caution, and they might have been spared being bitten.

I wished there would have been a system for follow-up to provide not just closure but relevant medical confirmation – this also helps secondary people taking care of the person and could help the community share techniques both for the acute case and to compile knowledge culturally {such as in G4G}.

Additionally – I ended up needing to get additional health tests to make sure that I had not contracted a disease from the bite – if there had been a method of follow-up with the Journeyer that would have helped me receive information about what I may have been exposed to when my skin barrier had been punctured by a human mouth, this would have saved me a lot of anxiety, concern, and the energy / expense of testing.

It also would have been helpful to the risk reduction community overall to debrief with the Journeyer as to what were some of the factors that led to their experience, their internal interpretation of the situation {e.g. why did they bite me – what was going through their mind?}, what could have helped them feel calmer, and then conveyed that wisdom in future trainings so that we can collectively improve in our caregiving skills.

Also, emotionally, it would have helped in my own meaning-making process to receive closure after this highly impactful experience in which I was physically attacked {almost certainly not consciously} and did not have the full use of my arm for quite some time due to the depth of pain and bruising.

# Guide Guidelines

*When in doubt: Treat your Journeyer as if they are a baby or child.*

When in doubt as to what to do, ask yourself - what would you do if your Journeyer was a baby or child?

Consider that the Journeyer is in a state where they cannot consent but may still need you to look out for their safety or bodily wellbeing.

Consider what is appropriate behavior towards an infant and how you may be responsible for them.

This frame not only makes matters of sexual energy crystal clear {to not shame them, while also not making the energy about you} but it also emphasizes the importance of a comprehensive questionnaire or checklist about interventions to use and in what context the Journeyer wishes them.

## General Good Guideposts

* Get your needs met outside of the spaceholding container.
* Be clear on what your triggers are and who is not a good match for you to work with.
* Return the Journeyer’s energy back into themselves, especially if sexual energy arises.
* Empower the Journeyer to not be reliant on you.
* Engage in psychoeducation whenever possible.
* Explain what you are doing and why.
* Give maximum choice.
* Follow the 4 stages of consent model:
  + (1) Asking in a written spacious questionnaire when Journeyer is not in your energy field,
  + (2) Asking for specifics of context when to use an intervention after review of the written questionnaire,
  + (3) Asking before the Journey verbally about what interventions they feel comfortable with that day,
  + (4) Asking in the moment before the intervention

## Passive Spaceholding / Sitting Actions

If your Journeyer wishes for you to be passive and let them go through their process without assistance, the following techniques may be called upon.

Many of these actions are associated with preparing the space, and it is worth noting that it is impossible to be impartial in this, as everything present in the space will affect the journey – even the absence of comfortable homey objects in a white sterile room carries a specific corporeal communication {of medicalization}!

Thus, if the Spaceholder is attempting to be as neutral as possible through non-active spaceholding, the key lies with asking for the Journeyer’s preferences as to how the room is decorated and set up.

Due to certain circumstances, such as limited resources or more than one Journeyer or Spaceholder, every preference may not be able to be accommodated.

Additionally in certain lineages, the setting can involve ritualistic actions, some of which are outlined below, so that the Journeyer can ask for accommodation ahead of time in case they have a trigger for fire, scent, or religious / spiritual trauma for example. Of additional consideration is that certain subtypes of autism, ADHD, or AuDHD, such as those with a PDA profile {in the DSM V as ‘Pathological Demand Avoidance’, often renamed by those who are diagnosed with the condition or identify with it as ‘Pervasive Drive for Autonomy’} experience dysregulation when demands are placed upon them, so an authoritarian or top-down form of healing may not be the most regulating choice.

Especially in a shamanic / curander@ {curandera / curandero} / ayahuqascer@ {ayahuascero / ayahuascero} red road / roadman lineage, the following actions may occur:

Holding ritual / sacred space with different rules, such as:

* no shoes
* traveling around the altar clockwise
* facing the altar to pray
* only entering / exiting the circle from a certain doorway
* never getting in between someone praying and the altar
* not drinking or eating inside the circle or for the duration of the ceremony
* not smoking anything for the duration of the ceremony {or of a certain time before / after}
* clearing all objects and people that enter the circle with smudging {cleansing or bathing the objects with sacred smoke}

Other common occurrences in ritual spaces include:

* calling upon guides, allies, and ancestors
* giving gratitude for presence on the land
* honoring the peoples who have stewarded the environment before your presence there

A group Spaceholder role may be as Firekeeper tending sacred smoke – if appropriate and safe for the setting {always have safety precautions and plans in place, at a minimum - a bucket of water and fire extinguisher nearby} tending a sacred fire, caregiving a coal cauldron upon which resins or woods are burned {typically frankincense, palo santo, sage}, candle or essential oil diffuser {could be a candle / flame diffuser or water}.

Remember to inquire about scents that may be tied to memories for the Journeyer in the intake questionnaire.

Additionally, some healing lineages have different rules for menstruating bodies according to where they are in their cycle, {for example if they are bleeding}.

## Active Guiding: Intention Setting, Strengthening, and Reminding

If your Journeyer wishes you to be a more active presence via Guiding and “taking the wheel” to steer the trip back to their original intention, the following actions may be useful to consider:

* Have the Journeyer repeat their intention aloud several times, including:
  + during Intake sessions
  + immediately before the Journey Session
  + throughout the Journey

Brevity for ease of reference and repetition is recommended {e.g. self-acceptance or authenticity instead of “letting go of the trauma of not being allowed to be my authentic self and needing to perform”}. Phrasing intentions in a proactive positive voice assists in creating a more easeful pattern to follow, for example instead of saying ‘I will not smoke or self-harm’, reframing towards what you want more of - ‘being healthy and treating my body with respect.’

* If the Journeyer states that they “need direction” the Guide can steer them back to their Intention and suggest that they ask their current inner process to inform this stated purpose.

How much steering occurs should be calibrated between the Guide and the Journeyer beforehand, and there should be an openness to down- or up-shifting the amount of redirection during the Journey at the preference of the Journeyer.

In an ideal co-evolutionary setting, after a moment of steering, or if the Guide has a sense that steering may be useful to the Journeyer’s intention, the Guide can also ask for meta-feedback on if the amount of steering could be adjusted.

This can provide encouragement for the Guide to self-course correct and recalibrate the structure of the session so that all the responsibility is not on the Journeyer to always need to self-assertively speak to needing attunement.

* The Guide should take special notes to document or remember in detail the moments in which anything related to the intention is mentioned for review post-Journey.

This can include body movements and what came immediately before and after the moment, which can act as a “somatic signal,” a physical portal to return to the sensation / realization.

* Encoding realizations in sensation is a recommended Integration practice as multisensory cues are more memorable.
* Creating an altar before the session and having the Journeyer:
  + explain the significance of each item can be helpful
  + if photos are included, observing the salient ones during the Journey can provide a strong memory catalyst {such as looking at a picture of oneself from childhood if working on the inner child or parts work from that time period}

*More ritualistic actions if permission has been sought by the Journeyer, can include:*

* **Water rituals:** Imbuing water with intention, water anointment, pouring water into the open mouth of the Journeyer and stating blessings, natural water pool / stream / ocean cleansing, steam bath cleansing, shower cleansing, taking a bath.
* **Fire ritual:** burning letters and other objects that wish to be released {in a mindful safe way}
* **Earth ritual:** putting bare feet on earth to ground, burying objects that wish to be released, sprouting a seed, potting a plant, and putting an intention into the soil.
* If the Guide has received permission, energy work can be a spacious way to support the Journeyer without physical contact.
* The Guide can also prepare the space for art therapy work or artmaking. Even working on a simple craft or putting together a snack or meal together can help reveal patterns in vivo that the Journeyer has asked for aid in changing {such as self-judgment or harsh self-criticism}.

These patterns of thought made visible in action can then be attended to with compassion by the Guide’s reflection / reframe or a reparative experience.

* Consider outdoor activities - a change of setting or environment is often helpful, and can include nature artmaking, forest bathing, or having a “movement meeting” to allow more creative ideas to emerge. [[6]](#footnote-6)
* If the Journeyer has a spiritual / magical lineage, casting a circle of protection / bubble, engaging in a clearing/banishing ritual {such as the lesser banishing ritual of the pentagram}, smudging, or sharing other protective actions can help set the energetic safety of the space.
* Divination tools such as archetypical card decks or other systems such as I Ching, tarot, or runework may also be supportive depending on the Journeyer’s background.
* Making talismans / amulets / pouches or other physical representations of protection or representing the insights received can be excellent Integration ARTifacts or reminders.

## Therapeutic Environment Guiding

A professional therapeutic context is the highest responsibility setting of psychedelic support, in which there is an opportunity to pre-arrange details and agreements for the session.

Therapeutic environments include both clinical and ceremonial containers.

This type of pre-planned situation lies at the antipode of {contrasts most starkly} with Spaceholding “In the Wild,” in which you may not know anything about the person you are safekeeping at all, having come across them in a state of acute need.

Ethical Spaceholding begins significantly before a psychedelic session, with the cultivation of the Guide’s self-knowledge and skill set as well as a thorough survey into their triggers, level of training, and challenges so that they can provide sound counsel on whether they are a good match for the needs of a particular Journeyer.

Ideally, the Guide has also invested time and energy into developing a baseline of non-altered rapport with, and knowledge of, the Journeyer that can withstand any psychological warping that may occur in a psychedelic state.

## Therapeutic Concepts

While I attended graduate school for therapy, I encountered helpful frames and terminology that are useful to understand in a Guiding or peer-to-peer context. The following I found to be the most essential :

### Transference

“Transference is a phenomenon in which one seems to direct feelings or desires related to an important figure in one’s life—such as a parent—toward someone who is not that person.

In the context of psychoanalysis and related forms of therapy, a patient is thought to demonstrate transference when expressing feelings toward the therapist that appear to be based on the patient’s past feelings about someone else.” [[7]](#footnote-7)

### Countertransference

“In psychoanalytic theory, countertransference occurs when the therapist projects their own unresolved conflicts onto the client.

This could be in response to something the client has unearthed.

Although many now believe it to be inevitable, countertransference can be damaging if not appropriately managed.

With proper monitoring, however, some research shows that countertransference can play a productive role in the therapeutic relationship.

### Transference vs. Countertransference

The American Psychological Association (APA) defines countertransference as a reaction to the client or client's transference, which is when the client projects their own conflicts onto the therapist.

Transference is a normal part of psychodynamic therapy. However, it's the therapist’s job to recognize countertransference and do what's necessary to remain neutral.

There are four manifestations of countertransference. Three of these can potentially harm the therapeutic relationship.

**Subjective Countertransference**: The therapist's own unresolved issues are the cause. This can be harmful if not detected.

**Objective Countertransference**: The therapist's reaction to their client's maladaptive behaviors is the cause. This can benefit the therapeutic process.

**Positive Countertransference**: The therapist is over-supportive, trying too hard to befriend their client, and disclosing too much. This can damage the therapeutic relationship.

**Negative Countertransference**: The therapist acts out against uncomfortable feelings in a negative way, including being overly critical and punishing or rejecting the client.

Countertransference is especially common in novice therapists, so supervisors pay close attention and help them become more self-aware.

The mental health community supports seasoned clinicians by urging them to seek peer review and supervisory guidance as needed. Rather than eliminate countertransference altogether, the goal is to use those feelings productively.”[[8]](#footnote-8)

### Supervision = Super Vision

The practice of supervision gives an accountability structure to those developing their skills in Therapy or therapeutic Spaceholding.

It is common in ceremonial lineages that those learning are in an apprenticeship role and learn by sitting in ceremonies with teachers of the lineage, who provide supervision until the Spaceholder is ready to be a Guide within the lineage.

Supervision creates a framework for compassionate observation drawn from experience and an ongoing relationship that makes vulnerable conversations able to land.

The wider and less regulated ecosystem of Spaceholding would do well to strengthen its mentorship models as this would provide another point of accountability for observing if a Spaceholder is exhibiting problematic behaviors or a lack of skills early on before they impact additional Journeyers more deeply.

### Cultural Competence

Knowing how the beliefs and value structures of your Journeyer may affect their sense of agency, what they perceive as normal, and how empowered they are to express themselves will affect the course of the therapy.

**Cultural effects in relational ethics should be taken into account** – certain cultures listen more to those in power, and certain populations such as those acculturated as female are encouraged to be more subservient.

How might these factors influence the power gradient?

How can you counteract these inherent tendencies and proclivities to promote more sovereignty for the Journeyer?

### Caregiving and Consent

*Who is it for?*

Betty White has an enlightening concept called the Wheel of Consent that is worth delving into in depth.

The most relevant point for our discussion is to know who the action or intervention is for. {Hint: In the context of spaceholding, interventions should always be for the Journeyer unless the Spaceholder is physically threatened, needs to prevent harm, or has been explicitly asked for such}.

**Ask yourself – *where is the impulse to use an intervention coming from? Who is this for?***

*Is it due to your discomfort with the emotion the Journeyer is expressing?*

*Is this touch to make yourself feel better or more connected?*

If you are considering using a higher-risk intervention such as touch, experiment with letting the impulse fade and see if the Journeyer brings it up themselves.

## Advanced Spaceholding Ethics

If you know you will be working with someone with a trauma history, are you trauma-informed?

Are you trained in holding someone in the nuanced depths of their type or flavor of trauma?

If not, consider that you could unintentionally deeply damage their attachment, trust, and relating structures or re-traumatize them through an unsupportive response.

Although a different set of Good Samaritan standards exist for “in the wild” risk reduction situations, if you are Guiding someone under the influence of psychedelics, you should consider the gravity of the responsibility you are taking on for the ongoing well-being of your Journeyer.

If you as the Guide are under the influence of psychedelics while holding space, this creates an extremely high level of complexity around ethically navigating consent and risk reduction.

A thought experiment to flesh out the nuance of this for yourself is to ask:

* *What is the level of responsibility for a Good Samaritan?*
* *How does a Good Samaritan differ from a controlled Spaceholding / ceremonial context?*
* *What are the responsibilities of a Guide?*

Guiding is closer to a calling or vocation than a job. Guiding is deep psychological work, forged in an existential fire, and you may have to nurture your Journeyer back from an existential crisis.

Psychedelics and other transformative state technologies are high-risk, high reward. The power of these tools is commensurate with the responsibility that they need to be held with.

Psychedelic work is psychic surgery, not playing doctor.

Guiding is not the level to jump into just to get your feet wet and practice your spaceholding skills – start with trainings, research, and more low-stakes scenarios with high levels of supervision.

## Sexuality and Psychedelics

Experimentation at the intersection of psychedelics and sexuality has been occurring for millennia and continues to this day.

Abstinence-only does not match the realities of experimentation, so the author is advocating for a risk reduction frame.

With that said, it is encouraged to only explore sexuality with psychedelics on a platform of respect and mutuality: mutually seasoned, well-informed, consenting adults on an equal level of power and communication.

In general, not combining too many new, unfamiliar, or untested variables is recommended, as psychedelics introduce a pandora’s box of variability all on their own.

When introducing combinations or new variables, having as much as possible be familiar is recommended.

The following actions can lower your risk:

* Partaking in a substance all participants are familiar with
  + from a batch you have tried extensively
  + at a dose you feel confident in being able to express yourself
* Having all parties be experienced in their psychedelic use
* Knowing what they may need for support and conveying this ahead of time
* Engaging with someone you have already known for some time
  + across different contexts {especially novel or challenging settings}
  + playing at a level of intensity that you have previously negotiated well many times
  + not going past, or even too close to pre-negotiated boundaries

### Redirecting Sexual Energy

If you find that your Journeyer is expressing sexual energy towards you, do not shame this expression, as that can retraumatize someone, especially considering the dominant culture / religion’s lack of structured healthy support for this energy.

If the Journeyer is directing sexual energy towards you, redirect this erotic expression back inside them to their memories of similarly resonant experiences, or parts of themselves, or general themes / archetypes of polarity / attraction or the nourishing feminine / masculine - **do not make it about you**.

Redirect from the interpersonal to intra or transpersonal.

“[A Qualitative Exploration of Relational Ethical Challenges and Practices in Psychedelic Healing](https://journals.sagepub.com/doi/10.1177/00221678211045265)” provides a useful example of this:

“Another ethical practice that participants used was that of redirecting a client’s attention away from a problematic practitioner-client dynamic toward the possible ways in which this dynamic may inform their healing.

Most often, this involved encouraging the client to take sexual feelings toward the practitioner and (1) attend to them in a more curious and less action-oriented way during the psychedelic session, and (2) use them as a springboard for self-insight during follow-up sessions.

P2 (F): So, my work was, “Okay, so what is the circulation of that energy in your body? What is it about me as a woman that is, for you, the kind of attractedness that you really have for feminine space within yourself?” [ . . . ] And then later saying, “Okay, so now let’s imagine this woman in you, in your being, the anima, being that feminine part of you.” And slowly, he was able to actually introject that feminine aspect of himself.“ [[9]](#footnote-9)

## Logistical Recommendations

The following are logistical recommendations for preparation.

### Journeyer Preparatory Flow

1. Answer “mission critical” spaceholding safety questions {See [Journeyer Pre-Journey Questionnaire](#_rcw7ygibltu7)}
2. Fill out [Spaceholding Menu preferences](#_7qn61u8aqaq4) for each item on a scale from 1-10, with specifics if there are conditional consent aspects
3. Gather materials to pack {see [Journeyer Packing List](#_ju2yh4rhy290) below}
4. Keep a dream/journey journal for a month before the session, ideally as soon as you know there is something you want to explore/work on in a Spaceholding session, paying attention to your body, intuitions, cultivating abilities to note subtle sensations, noticing any guides/spirit animals that come into your life during this time of preparation
5. Preparing the playlists {ideally both Journeyer and Guide create several: one that is uplifting {classical, world music, sacred sounds from the lineages that the Journeyer or Spaceholder has studied are good for this}, one that is ambient / wordless, and one that is related to any memories / experiences the Journeyer wants to examine {for example if letting go of an old relationship, songs that remind you of that connection, or songs of shedding}
6. Cultivate energy – take care of yourself physically, emotionally, and spiritually by exercising daily (even if just going out for a walk), eating well, engaging in contemplative practice, getting deep regular sleep, and taking your vitamins/supplements
7. A week before (at bare minimum 3 days) halting the use of other intoxicants, including alcohol and ideally also caffeine.

#### Journeyer Packing List

Wear loose-fitting clothing, ideally of natural fibers for breathability, and pack layers that can be easily put on and removed.

In conceptualizing what to pack, bring items as if you are going on an overnight trip to a place with a wide-ranging climate.

Items to consider packing:

* warm blanket or comforter
* comfort objects {childhood stuffed animal, blankie}
* books you might like to be read from {children’s books you loved when you were young are recommended}
* anything uplifting and inspiring such as artwork or prints
* robe and/or warm coat
* hat
* scarf/fabric
* blindfold
* earplugs
* any medications you may need
* any supplements you might need {ginger tincture is good for nausea}
* towel
* change of clothes
* photos of family / mentors / loved ones / guides / spirit animals
* any objects to create an altar with
* hygiene products (toothbrush, toothpaste, items for a shower if available)
* essential oils / incense you really like
* objects / activities / media that help ground you

### Guide Preparatory Flow

1. Based on the “Mission Critical” Spaceholding questions. Spaceholder researches:
   1. any contraindications between medical conditions and the altered state technique
   2. potential supplement reactions
   3. body mass / dose recommendations of supplement based on intentions
   4. a refresher on the standard duration of the journey for the compound
   5. access to accurate scale, previous knowledge of strength of this particular batch of medicine / compound
2. Additional reading on the specifics of the type of development or trauma the Journey is wanting to work on {e.g. emotional incest, menopause, end-of-life anxiety}.

*Does the Journeyer recommend any specific media resources to help the Spaceholder educate themselves on how to best support the Journeyer?*

1. Confirming which interventions are to be used when, according to the Journeyer’s preferences
2. Spaceholder meta-preparation backend: recording your dreams, getting clear in nature, tending to yourself in self-care so you are at peak energy and presence.

#### Guide Packing List

* First Aid / earlier Sourcing:
  + EpiPen
  + Narcan / Naloxone spray {to reverse an opioid overdose}
  + A pulse reader / blood oxygen level monitor {including the knowledge of what a normal pulse level is as opposed to one that is elevated and when to consider calling in emergency personnel}.
* Fresh ginger
* tea brewing supplies {knife, cutting board, kettle, hot plate, mug}
* ginger tincture and/or ginger capsules
* any specific supplements that are neuroprotective or can help restore the Journeyer {especially important for MDMA}
* melatonin / sleep aids
* earplugs
* eyeshades
* warm blanket
* warm coat (size to fit Journeyer, oversize is good)
* any nourishment or self-care objects you need to be sitting for the expected length of the session plus at least 4 hours
* timekeeping device
* music playlists
* speaker
* squish/fluff/bedding
* any specific healing implements you use
* journal
* art supplies
* recorder
* video/camera if desired by Journeyer
* humane restraints & hardpoints in the case of extreme Ego death sessions {restraint is controversial and hopefully not needed}.

## Guide - Upon Arrival at the Space

If the space is new to you, inquire with the host as to:

* lights
* how to change the temperature
* if cooking is ok
* where the restroom is
* any rules of the space
* idiosyncrasies about anything that might be used such as the sound system
* how they prefer the space is reset when the session is complete

Specifically ask:

* where you are welcome to roam
* how loud you can be and where
* locations where nudity is welcome

Inquire as to if there are ever outside stimuli that might intrude on the space {e.g. neighbor’s child often comes home at 5 pm and practices drums, neighbors water the lawn / take out the garbage every Saturday, etc.}.

### Collaborative Space Preparation

Prepare the altar space together with the Journeyer.

**Optional**: communication and transportation gateways: do you want the Spaceholder to be in charge of your phone / keys / other essential objects?

If so please inform them of where they are, or better yet agree on a place to put them in the space.

## Psychedelic Support: “In the Wild”

“In the Wild,” always keep your senses open. “In the wild” contexts include festivals, being a first responder, or anywhere where there have not been previous agreements for psychedelic use or agreements around roles and responsibilities.

The first step in supporting a Journeyer is knowing that they need support.

Ask yourself: Is there anyone whose actions or demeanor do not match what would be expected in the context {e.g. laying down in the middle of the dance floor}?

Check-in with the person visually, trying to catch their eye and giving a smile and a wave, and then approach and ask, “are you ok?” verbally if they are unresponsive or seem out of sorts.

It is worth the energy to check in with someone and get a verbal ok rather than assume they are fine.

From the reverse perspective, I, as the strange stretchy somatic bird I am, often behave in “unconventional” ways {such as by hanging upside-down for extended periods of time} and thus have been on the receiving end of many of these good-intentioned check-ins.

I always am grateful to be asked, as I sense the community caregiving that prompts these questions and looking out for each other is an essential part of the social safety net, so don’t be afraid to check in!

If the person you are checking in on seems out of it, see if you can look around and find their friends. Often, if they are good friends, they will approach you themselves if they see you approaching their friend. If friends do not arrive, ask your charge what their name is and if they know where they are.

If your charge is unable to answer coherently, you may need to summon additional support.

Do not be afraid to ask those around you for aid. We are a compassionate community of care!

Determine if your charge is in a safe place and how to create more safety through moving them or changing the environment – are they on the ground amid a large crowd where they may get trampled? Are they near the edge of a cliff? Are they high up in the air? Near sharp art / stakes in the ground? Near moving traffic?

If you can reduce the amount of stimulus around your charge, try to do so. This may involve moving away from speakers, turning strobing / blinking lights off, or moving them away from a crowd.

Are there environmental factors that may be affecting your charge’s wellbeing? If it is hot and sunny see if you can take them to the shade. If it is cold and windy at night, see if there is a burn barrel or campfire you can take them to or a blanket or jacket you can loan them.

If your charge’s breath and blood pressure seem stable, try to tune into what they may need - is it hot? cold {are they shivering}? late at night? could they be over / underheated? do they look dehydrated {dry chapped lips}? Could their blood pressure be low? are they getting enough oxygen {are their lips blue}?

Does their breath smell fruity {could be a diabetic with low blood sugar, ketones create acetone – which smells fruity or like nail polish remover}?

**After a basic physical wellness assessment, you may choose to find someone with an event radio or take your charge to the medical or the sanctuary space.**

If there is not such a space and you wish to proceed with offering care as a Good Samaritan, the following may prove useful to ask:

* *What is your name?*
* *Where are you camping?*
* *Where is your home base {where are you returning to after this event}?*
* *How are you?*
* *Is there anything you need?*

Additionally, jotting down a description of them, including clothing and other identifying characteristics such as age, can be helpful in case they run off.

**Consider your attire**

*Is your attire threatening, scary, or off-putting?*

*Are you wearing sharp jewelry that could poke someone in case you need to restrain them?*

*Are you wearing sunglasses?*

*Are you wearing something that could be interpreted as a uniform?*

# Integration

Integration is the most important part of the Journey, as it gives the experience lasting purpose through supported change, sustained over time.

Integration is moving from a place that is always acknowledging, through referencing via resonance, the embodied ephemeral education received in visionary states through action.

What this means is grounding revelatory insights into day-to-day existence through attuning into your values and acting in accordance with them.

Integration is a lifetime practice; in that, you can continue to deepen into greater integrity with the insights of one experience for the rest of your life.

In general, it is recommended that you integrate an experience as completely as possible before pursuing another altered-state experience so that you are not avoiding what is emerging to be addressed, nor “chasing the dragon” of the elevated state in enlightenment escapism.

Practical tips for integration include:

* *Reviewing your intention*
* *Creating and re-reading personal notes*
* *Reviewing Guide notes, recordings, and media made by the Guide from your session*

Keeping a success / challenge journal based on the area that you are working on can help you reveal patterns {such as finding certain environments more tempting to slipping back into old habits}. Synergistically, the practice of noticing and noting your actions and the results activates a witness consciousness within you which can increase the awareness between the moment of temptation and the option to choose another path.

Habit change is also reinforced by not wishing to “break a streak” of accomplishment, so you might choose to create a calendar in which you demarcate each day that you engage with your intention in a meaningful way {e.g. for an intention to be healthier – making with an x on the calendar each day you exercise}. Additionally, celebrating your progress daily helps restore motivation.

Having an accountabilibuddy, which could be the Guide, who you report to on a regular basis {each day, several times a week, once a month, etc.}, or whom you create a schedule of check-ins, can also create external responsibility structures that help with habit change.

Finally, changing your narrative of who you are also radically assists with habit change – instead of saying “I can’t eat junk food,” altering your identity to “I am someone who prioritizes my health” has been shown to improve dedication to sticking to a resolution.

## New Narratives: Creating Ego Spaciousness

*How change happens.*

As a visceral visualization, the mind can be thought of as a Grand Canyon – in which your attention is the water, which is most likely to follow gravity along the deepest grooved path of habit {the lowest of the canyons}.

Thus, when we wish to change a deeply ingrained or carved pattern, it is helpful to reinforce the new rivulet through repetition {as the new path is but a small stream compared to an old groove laid down in childhood that has had a lifetime of attention which has carved it}.

The entheogenic state can soften the soil for carving change by increasing the neuroplasticity of the mind by turning off the default-mode network. Another nature-based metaphor is that psychedelics act like a thick snowfall on top of a mountain, creating a fresh surface for new paths.

More scientifically speaking, technologies such as psychedelics which create distance and non-attachment from a previous narrative / identifying ego structure create the space necessary to dis-identify with the old narrative as “no longer me,” and rewrite a more current story that suits one better now.

Narrative therapy journaling can be helpful in this process, in which you write about your emergent values and the actions that you wish to encourage that are in alignment with your new sense of identity.

Research shows that habit change is more effective when aligned with narrative change – for example, if you are trying to quit smoking, re-identifying yourself as a healthy person helped the change to stick much more readily, for it would be counter to your new values as a healthy person to return to smoking.

This in conjunction with the supportive set and setting of a Good Guide, in an excavating entheogenic state, can help you understand the layers of sediment, or calcification you are working with, and gives you an earth-moving, embodied experience of a new path, which you did not know was possible.

You can divert the water of your attention through the directive coagulatory catchment of previously diffuse drops via a values-aligned narrative.

Your new repetition rivulet can thus be fed and supported by upstream diversion of distracting distributed pitter-patter patterns now directed into deepening the desired for, dedicated path.

Thus, small, sustained, and wide-ranging replacements of thoughts and actions, like raindrops in a storm, can be collected and coalesced under regenerative rainwater catchment of a coherent narrative to contribute to feeding what downstream becomes a roaring river.

The damming of the old paths can be accomplished by linking your new desired actions to new values so that the former path is no longer resonant with the story of who you are and wish to be.

Seeking experienced support is recommended, as re-routing a well-carved path is a large-scale coordinated engineering feat! This is also why habit change can be challenging, and why an accountabilibuddy, or several, can help, in that they will set up daily “shoveling” structures and schedules as well as act as external reminders of the desired change – providing external dam-making assistants and sharper / more effective tools for consciousness construction.

They can also help you “whistle while you work” and uplift what can have the tendency to be lonely toil. This is also to say that there are many ways to make change easier – you can sharpen your tools, soften the soil, increase the flow of the water of your attention, or ask experts for recommendations, just to name a few of the diverse ways to engage change.

Consider New Year's Resolutions, or other impetus for shifts: what has helped you with transformation in the past? What made it more challenging?

Studies show that being accountable to an external source helps you stick to your goals.

Consider the multi-person formats of book clubs and recovery support such as AA or NA with group gatherings and sponsors.

This is also the same success psychology behind hiring a personal trainer – certainly, you could do the same motions yourself, but would you actually honor your commitment to do so, or would you reschedule if you were not paying someone to be present with you?

Additionally, without a personal trainer with expert understanding would you know how hard to push yourself before injuring yourself or experiencing burnout?

An accountabilibuddy or group acts as compassionate support to keep you on track and speak to yourself kindly throughout the challenging process of change.

As with all adjustments, “neurons that fire together wire together” so linking your desired habit change with as many physical real-world anchors and reminders will accelerate alterations. ‘Chaining’ or linking existing habits to new ones also reduces the friction in starting a new habit – such as by putting out your vitamins on the nightstand next to the glass of water you already have a habit of drinking right when you get up.

In the author’s personal pet frame of Incarnate Integration, we emphasize linking your insights into physical characteristics.

## Incarnate Integration

In my transformational Spaceholding practice, I focus on actionable, anchored Integration work as my primary orientation after the foundation of attunement with the Journeyer.

Integration work begins far before the Journey, during [Intention Setting](#_50ntbe31qauz).

Through a repeated review of the detailed intake of the Journeyer’s Intention, you can track insights and avenues for aiding the Journeyer in steering towards their desires.

I focus on a body- and sense-based Integration form because I find the more external physical reminders that you can tie Integration insights into, the increased the implementation of what can often be solely ephemeral concepts into embodied reality.

I often use clothing, jewelry, and other adornments for Integration work.

In my own life, I have created garments that regulate my nervous system – trauma healing threads.

Our attire can be a soothing second skin that helps us nourish our nervous system via: warmth, compression, weight, texture, bilateral motion, modulating sensory stimulation, space for deep belly breaths, breathability for skin, & supporting a sense of safety.

While capitalism encourages us to procure items designed for nervous system regulation such as weighted vests // blankets + compression clothing, to be eco-responsible we can also create the same effects by layering or altering the items we already own {e.g. adding a heavy liner to a favorite jacket, developing complementary removable layers}.

We can sew textured pockets + patches onto beloved garb to create a diverse sensory diet & we can even fill our new pouches with ancient fidget toys such as worry stones or gifts. In the case of anxiousness these additions can aid to have something to physically engage with.

For example, wearing a garment you have altered can provide an invitation for someone else to approach you in conversation around it, thus lubricating social interactions and reducing social anxiety.

Alterations can also create safety, for example in my SA trauma healing process, I created hidden interior pockets to hold my phone & practiced dialing 911 unseen from within my clothing by touch.

We can provide ourselves with avenues for titrating // reducing sensory input through hoods, scarves, or hats, modulating the level of stimulation based on our surroundings.

Scent can be a direct integration tool, as it is the oldest sense and the only one that is fully developed in utero.

“Odors take a direct route to the limbic system, including the amygdala and the hippocampus, the regions related to emotion and memory”, causing “smell and emotion to be stored as one memory.”[[10]](#footnote-10)

Have your Journeyer choose a scent that they wish to associate with their journey and anoint them beforehand, and if possible, during or directly after peak moments of realization.

This will allow them to use the scent as a direct portal to that frame of mind in the future.

## Guide Support During Integration

The strength of having a Guide comes through notably during the Integration process, especially if you have asked for your Guide to act in the role of Documentarian.

As a Documentarian, your Guide will have recorded your spoken realizations, physical motions, and other details of note during the Journey.

Together, you can then both review these notes or recordings together play-by-play, pausing to flesh out the story, with your Guide taking additional rounds of notes as the recapitulation will “jog your memory” and cause recollection of more details that would have otherwise been lost without an attentive witness.

Together with a Guide with advanced training acting in a more ‘Therapeutic’ role, you can also lean upon their professional expertise in listening and attuning to you and noticing common threads in your life through their ability to suggest potential patterns they witnessed in you across time.

Thus, you can work with a therapeutically trained Guide to come to a deeper shared meaning-making, which can frequently encapsulate an experience or narrative in an easy-to-reference format of a single seed phrase, which is a helpful digestible touchstone when working on habit or personality change.

### Guide Integration Support Actions

A Good Guide will get on the same page as the Journeyer before the session using a Spaceholder Styles // Philosophies attunement conversation so everyone is clear on the energy with which the space will be held and actions that are to take place in the container.

In general, the author highly recommends that if there is a Guide present, they are given permission to act as a Documenter, taking written notes, or with previous permission, audio / photo / video recordings of spoken insights and movements of the Journeyer(s).

If there are multiple Journeyers in the same space, it is important to get the consent of all Journeyers to create photo / video recordings.

These notes can then be reviewed at the close of the Journey as an integration bookend to the experience, with additional notes taken in another color pen with remembered inner experience details the Journeyer wishes to add, as their memory with be activated upon the re-reading of the notes.

Beyond this acute integration, the Guide may end up being an integration symbol or representation in the Journeyer’s life, in that they will appear as a helpful force or character to remind the Journeyer of insights and commitments they have made to themselves.

For example, I aided many members of a small close-knit community that have wanted to quit smoking, and now if I come upon them and they are smoking they often apologize to me, as I am holding the memory of the promise that they made to themselves to stop smoking.

I always tell those I care for that I am not personally judging their actions, so there is no need for an apology, and that what has happened is that I have been internalized in a guardian role in their psyche as an agent reminding them to keep their promises to themselves.

This can be viewed as a form of internalized transference. Transference is a therapeutic term for when a patient projects feelings or beliefs onto the therapist.

## Challenging Integration

Substances that are notoriously challenging to integrate include: Nitrous Oxide, N,N-DMT, and 5-MeO-DMT.

I have now counseled many people who experience challenges attempting to integrate their 5-MeO-DMT experiences.

My hypothesis is that the more rapid the state change and the higher the peak, the greater the potential for a challenging integration experience in that the distance between the baseline and the altered state is so severe and rapid.

Contrast a 20-minute, 5-MeO-DMT journey, where you are “shot out of a cannon,” with a psilocybin or LSD journey with a radically longer duration and timeline of onset – upon ingestion, there is a steady deepening of the psychedelic experience over 4-6 or 8-12 hours respectively.

With longer-acting psychedelics, the extended time span of psychedelic effects ranges from the barely perceptible sparkle through to undeniable sensory alterations.

Usually, this diffusion also happens in reverse, so there is much more time for the brain and body to bring content back as altitude is shed gradually. With 5-MeO-DMT this launching into the stratosphere process is so rapid as to often not be remembered, making integration extremely difficult.

The physical impact of a 5-MeO-DMT journey is also worth noting, in that it produces an out-of-body experience from which you eventually descend.

In general, these types of dissociative experiences are not anchored in physical cues, and as such are significantly more challenging to recall.

In terms of such truncated experience, making the comparison to dream recall can be helpful, in that when your dream memory is anchored in a physical activity you encounter the next day, it connects the dream to a pre-existing pathway in the brain, and you are more likely to remember the details.

In a 5-MeO-DMT experience, one is rocketed into a reality very different from earthly life, which has very few natural anchors in the baseline world, which then makes it much more challenging to “bring anything back” besides a memory of something ineffable.

It bears cautioning that I have worked with a significant number of Journeyers who had their trauma memories rekindled through 5-MeO-DMT due to the abrupt sense of suddenly leaving your body, so I highly recommend having a thorough intake and trauma-informed practitioner present.

Unfortunately, what I am often seeing is that less experienced facilitators gravitate towards a shorter duration experience because they assume that the responsibility level is similarly reduced, but the length of duration does not mean it is a safer compound to choose or has an “easier” Spaceholding workload.

## Self-Sabotage

Self-sabotaging behaviors occur when someone knows the actions that they want and need to take for their thriving and health, but they derail their attempts.

This can often stem from unresolved trauma of a protective part {which could be also seen as a ‘character’ or role within you}.

More specifically, from an Internal Family Systems lens, there are parts of the Journeyer that are sabotaging change, because there is a part which created those behaviors as survival mechanisms, and so perceives the loss of them as a potentially existential threat, or exposure to threat, due to past historical conditions.

If this is occurring, more detailed integration and psychological support is needed to understand the parts that are being activated and what roles their actions are attempting to serve.

# 

# Trauma-Informed Spaceholding Principals

A trauma-informed frame is essential when working with emotionally charged material and can help make the difference between creating a new pattern of support or unintentionally deepening shame // retraumatizing the one you are caring for.

## The Humanimal Nervous System, Trauma, and Effective Interventions

“Unlike animals, which generally are able to restore their standard mode of functioning once the danger is past, humans often are not, and they may find themselves locked into the same, recurring pattern of response tied in with the original danger or trauma.

Understanding the signature patterns of these innate responses—the particular components that combine to yield the given pattern of defense—is important for developing treatment interventions.

Effective interventions aim to activate or deactivate one or more components of the signature neural pattern, thereby producing a shift in the neural pattern and, with it, in the mind-body state.

The process of shifting the neural pattern is the necessary first step in unlocking the patient’s trauma response, in breaking the cycle of suffering, and in helping the patient to adapt to, and overcome past trauma.” [[11]](#footnote-11)

Many therapists and mental wellness professionals spend a lifetime becoming experts in supporting their patients through trauma and into thriving.

Due to the nature of psychedelics and altered states to frequently reveal what may have been previously buried trauma, the author believes it is an ethical imperative for those holding space for such transformative states to be aware of what trauma responses can look and feel like.

The author holds these aspects to be true –

1. that trauma can come up unexpectedly
2. it is preferable that we know how to support such surprises emerging
3. that there is a need to be deeply careful and compassionate in how we work with these states, especially if there is an intention to bring them to the fore on purpose

Remember, only work to your level of competency / training.

## Trauma Responses are Involuntary

Reframing involuntary trauma responses as automatic and evolutionarily adaptive can take the survivor’s self-blame out of the equation.

This is especially important for victims of rape / sexual assault who often experience secondary trauma in the form of first responders, medical practitioners, police, or other intended sources of comfort who are attempting to support, questioning “why did you not fight back?”

The trauma-informed biological answer, one that would behoove all those in the helping and legal profession to know, is often “my body went into an involuntary response because it perceived an inescapable threat.” {The author is feeling forward to the day when all first responders are trauma-informed and this question is relegated to an embarrassing footnote conveying how little we used to know about trauma, that we would re-traumatize survivors by asking this question}.

Unfortunately, the legal system in the United States is woefully under-educated in this involuntary nervous system reaction known in the psychological research literature as “tonic immobility” {involuntary paralysis as self-preservation} as a deep trauma response. This lack of knowledge results in many jurisdictions requiring proof of “fighting back” from an assaulter when that is often physically impossible due to an involuntary dissociation trauma response.

Trauma responses have been evolutionarily preserved because they allowed the organisms with the genes that carry them to survive and propagate.

This reality can coexist with the knowledge that although the responses have persisted evolutionarily, our ancient and slowly evolving wetware systems have not kept pace with new forms of stress or challenges that differ from the extreme reactions needed to preserve the life of an organism throughout our evolutionary history.

A mismatch between our ancient and modern survival considerations and contexts often occurs because modern stress stimuli are chronic and ongoing and thus, we are unable to find a space of pause to safely discharge.

In the ancient world, when the reactive systems mobilized to preserve life when encountering an apex predator such as a saber-toothed tiger, they were subsequently able to be discharged when the tiger was out of range.

In the modern world, these same survival systems are activated, but with the boss or instability of work as the “tiger.” These persistent “low grade” or continuous stress scenarios, such as in demanding work environments with ongoing and emerging deadlines, do not grant a space for reset.

Our “alert” system is no longer given time to rest within a capitalistic frame of scarcity and the achievement treadmill, and thus we exhaust biological systems meant for short bursts of life-preserving energy, such as our adrenals, in ongoing long-term activation.

This adrenal fatigue compounds when we strive to chemically maintain vigilance and alertness through self-medication with smart drugs such as Adderall, or the high amounts of caffeine present in coffee.

This stress is placed on top of the constant low-grade alertness required of members of historically oppressed or marginalized groups experiencing countless daily “microaggressions,” or the internalized -isms of our mainstream culture – which are certainly adding insult to injury to the well-being of those that comprise these populations.

We can allow our systems recovery time through consciously practicing techniques that activate the parasympathetic branch of the nervous system.

One invaluable resourcing exercise is creating a detailed sanctuary space within your imagination and then incorporating as many pieces of this as possible into daily life.

## Set up an Inner Sanctuary Space

Somatic experiencing and other trauma-healing modalities should prioritize creating a sanctuary space that the patient receiving treatment can go to at any time to resource themselves if any immersive activity becomes overwhelming or takes them out of the “window of tolerance” within which they are able to be present to the experience.

In the frame of Somatic Experiencing, the need for a safe space comes from “pendulation” in which the practitioner pendulates, or oscillates, the patient from an experience that brings them to the edge of their window of tolerance {level of intensity they can remain present to} and then takes them back into a more regulated zone through visiting their sanctuary space.

Your sanctuary space can be discovered through a [Visceral Visualization Exercise](#_qyup0yhp309t) provided in the Appendix.

## Trauma-Informed Spaceholding

To be trauma-informed means that you are up to date on:

* The current theories on what trauma is
* Models for how trauma may form
* How trauma acutely affects the nervous system
* What a ‘triggered’ trauma reaction can look like {e.g. PTSD}
* How to teach someone to self-soothe or co-regulate their nervous system
* How not to retraumatize someone
* Helpful clinical knowledge of how to dispel the shame and self-blame that can occur if your Journeyer is not educated in the involuntary nature of trauma

The following information is not exhaustive but is meant to provide some basics that will be useful throughout life. Trauma-informed care is, fortunately, experiencing a blooming, and it is of service to educate yourself on the latest developments and understandings in the field.

### Nervous System Basics

In healing work teaching wellness empowerment and self-agency, I have found that educating on the function of the nervous system is a foundational skill.

Although this is a simplification, having a basic outline is helpful to be able to identify trauma responses and support your Journeyer in becoming more resourced and regulated.

#### Nervous System 101

In basic terms, “the nervous system is made up of all the nerve cells in your body. It takes in information through our senses, processes the information, and triggers reactions, such as making your muscles move or causing you to feel pain.” [[12]](#footnote-12)

The autonomic nervous system {ANS} is a branch of the nervous system that automatically controls, without conscious processing, essential life functions such as heartbeat, breathing, and digestion.

The ANS keeps us in a healthy “window of tolerance” within which you can be present, centered, balanced, relaxed, calm, alert, and engaged.

Nervous system regulation is a state within which we can “perceive-process-respond to life events with a kind of wise equanimity. We can cope. We can be resilient.” [[13]](#footnote-13)

When a stimulus that is “new, challenging, [or] alarming comes up, the sympathetic branch of the autonomic nervous system (SNS) is automatically activated” and “we unconsciously mobilize to meet whatever the new situation, challenge or threat is.

When we are regulated by the social engagement system of our pre-frontal cortex, we turn to people near us to help, for regulation, or we turn to memories of people where we have felt loved, understood, [and] supported, to keep us in the sense of everything is OK, everything is going to be OK.” [[14]](#footnote-14)

When we are well-supported through being safely connected with others, in the current moment or within our memory, we are more resilient to staying in our window of tolerance and “we mobilize quickly, act skillfully, take care of business and return to normal” thus, it is “the conscious regulation of the pre-frontal cortex”, which controls the ANS “through our social engagement system that keeps us in our window of tolerance – mobilized without fear.” [[15]](#footnote-15)

Conversely, when we feel under-resourced and we are “startled or frightened by circumstances, more than our conscious social engagement system can handle, or, from deficits of attachment and bonding, there isn’t an internalized social engagement system to handle it, the SNS” {sympathetic branch of the nervous system that tends towards activities such as rest + digest and tend + befriend} “is activated to mobilize us but without enough regulation. We rev up out of the window of tolerance into alarm, agitation, anxiety, and panic rather than wise resilient action.

We need to consciously down-regulate the fear and agitation, we need to re-connect with a safe other(s); we need to activate the calming parasympathetic nervous system (PNS) to come back down into the window of tolerance where we can think calmly and respond skillfully. Where we can be resilient.” [[16]](#footnote-16)

However, there can also be an overactivation of the PNS when it is not balanced by enough activation of the SNS, “if there is not enough conscious social engagement to help us feel connected and safe and there is fear, we can withdraw into an unconscious immobilization of lethargy, numbness, depression, dissociation.”

This can also be explained as “too much PNS without enough connection and engagement. We need the prefrontal cortex to consciously mobilize the system a bit, reconnect the social engagement system, and have a little more gas of the SNS rather than so many brakes of the PNS. So we can engage and respond to the challenge of the moment with resilient coping, not a numbed-out withdrawal.”[[17]](#footnote-17)

We may be especially prone to collapse, dissociate, and tonic immobility // death feigning states, if we have “previously learned patterns of coping through passivity, submission, confusion, withdrawal, or isolation, the body can drop precipitously into collapse-freeze, shutting down and immobilizing the system to be safe.” [[18]](#footnote-18)

When we are dysregulated out of equilibrium in either direction – too much SNS or PNS, we are unable to constructively address challenges that come up, can easily get overwhelmed, and generally feel out of sorts.

Oxytocin, the naturally occurring “love + bonding” hormone, helps us regulate into states of well-being.

Oxytocin creates a “safe and social” state of trust and is released when we feel safe, warm, loved, or cherished {and even when we remember feeling these states from the past}.

Oxytocin is the brain’s direct and immediate antidote to cortisol.

Oxytocin down-regulates the flood of cortisol through our system immediately and oxytocin is the hormone of calm and connection that antidotes fight-flight-freeze.

Have you seen a child or a friend in the throes of an upset, and with a gentle hug and a “there, there” the child or person calms down and re-groups almost instantaneously?

That is the regulating effect of oxytocin, which allows us to come back into the window of tolerance where life can be coped with again because our higher-thinking brain can stay online, and we can choose how to respond.

Reaching out with a hug, a hand on the back, and a hand on the heart can release oxytocin which re-activates the social engagement system of the pre-frontal cortex.

Oxytocin creates a felt sense in the body of safety and trust, connection and belonging, and calms us down in re-engaging with a safe other, the “neurochemical foundation of resilience”. [[19]](#footnote-19)

Oxytocin has been linked to well-being and reduced stress levels and stimulates mechanisms related to restoration and healing, thus contributing long-term to better health profiles and longevity.

Oxytocin reaches several important areas in the central nervous system {CNS} and is involved in the regulation of social interactive behaviors, fear, aggression, perception of pain, calm, well-being, and stress reactions (by modulating the activity of the HPA-axis and the sympathetic and parasympathetic nervous system).

The half-life of oxytocin in the circulation of humans is 30 min (De Groot et al., 19). Low oxytocin has been implicated in attachment disorders, compulsive behaviors such as overeating, addictions to gambling/sex, and substance abuse as a type of “self-medication to restore oxytocin function.”

Low levels of oxytocin have been demonstrated in individuals with borderline personality conditions, certain types of depression, and schizophrenia (for a review, see Kim et al., 2013).

Also, some pain syndromes such as fibromyalgia and recurrent abdominal pain in children are associated with low levels of oxytocin (Alfven et al., 1994; Anderberg and Uvnäs-Moberg, 2000).

In addition, previous experience of traumatic events is associated with an increased incidence of low oxytocin levels or stress-related reduction of oxytocin levels (Pierrehumbert et al., 2010). [[20]](#footnote-20)

### Nervous System Nourishment

If you are working with someone who prefers to self-regulate, or if you need regulation as the Spaceholder, the “Solo Self-Soothing Nervous System Regulation through Generating Oxytocin” activities can help you self-generate a sense of well-being.

#### Solo Self-Regulation Techniques for Generating Oxytocin

The psychological clinical literature has demonstrated the following as oxytocin-generating behaviors {the bonus is that most can be done solo!}:

1. **Pleasant Mental Experiences**

An invitation to daydream, feed your fantasies, and pursue small pleasures.

“Oxytocin is released in response to pleasant mental experiences. Such a release of oxytocin may, e.g., be induced by seeing, hearing, smelling, or thinking of well-known and loved persons, but also by other pleasant situations (Uvnäs-Moberg, 1998; Uvnäs-Moberg et al., 2005).”

A bonus idea, especially for young ones, is to make a dedicated quiet space at home or a “down kit” when out.

These sensory intervention spaces can be as simple as a sheet to reduce visual stimulation, bringing earplugs, or having noise-reducing headphones and a favorite soundtrack accessible via a media player or phone.

Additional ideas include: a fan / white noise machine {or ocean / rain recordings}.

1. **Activation of the Somatosensory Nerves**

Get moving: Shaking, dance, movement meditations, physical activity, being in nature, deep breathing.

“Oxytocin is also released in response to activation of somatosensory nerves, which mediate non-painful and pleasant (non-noxious) information, e.g., induced by touch, stroking, warmth, and light pressure of the skin (Uvnäs-Moberg and Petersson, 2010).”[[21]](#footnote-21)

Vestibular movement can help regulate the nervous system; activities that activate this positional and balance-related sense include:

* rocking
* swaying
* gentle swinging
* hanging upside down
* spinning
* jumping
* running in obstacle courses
* balancing

Rocking chairs, trampolines, and exercise / therapy balls are helpful assists for vestibular activities.

Calming proprioceptive input includes:

* heavy work {moving the body against heavy resistance which provides stimulation to the muscles and joints that can be calming and organizing[[22]](#footnote-22)}
* squeezing stress balls / play dough
* resistance band pulling
* pushing / moving / carrying heavy objects
* climbing
* chewing against resistance e.g. chewlery {covered more in-depth in the later section ‘oral stimulation’}

1. **Touch**

Give yourself a massage, dry skin brush, and/or apply lotion or oils to your whole body (especially after taking a bath or shower).

Also, breast / chest massage specifically has been shown to significantly release oxytocin.

Areas of the body with more receptors for stimulation include the feet, hands, lips, tongue, and face. {You can search online for a body map ‘cortical homunculus’ for a visual representation of the density of nerve endings in various parts of the body conveyed through expanding the size of the areas that are the most innervated. The places that are “inflated” as larger on the homunculus have more nerve endings and it is thus more useful to focus on those areas}.

Thus, high oxytocin-releasing activities can include: walking barefoot on the ground, manipulating textured objects with the hands, making physical art (pottery, natural/ found sculpture, drawing, painting), building intricately detailed objects, and puzzles.

Deep pressure on the body or compression can be especially soothing, which can be provided by asking for hugs {getting specific in what you are seeking}, heavy blankets, or weighted stuffed animals.

You might also consider creating a tactile bin with sand, dry rice / beans, marbles, or small river stones. This can double as an aesthetically additive Zen Garden or sand tray.

1. **Warmth**

Warmth can be created with a heavy coat, cozy sweater, blanket, warm bath, sauna, steam bath, hot tub, turning up the temperature, or making a fire.

“Warm temperature stimulates oxytocin release in rats (Stock and Uvnäs-Moberg, 1988; Uvnäs-Moberg et al., 1993a; Lund et al., 2002)”[[23]](#footnote-23)

“As Otto Fenichel has said: ‘to get affection’ means ‘to get warmth’. They are ‘frozen’ personalities who ‘thaw’ in a ‘warm’ atmosphere, who can sit for hours in a warm bath or on a radiator.” [[24]](#footnote-24)

1. **Meditation**

Gratitude meditations and contemplations in which you think of loved ones are particularly effective.

Calming visual meditations can include:

* fire
* ocean waves
* rain on water
* fish in a fish tank
* lava lamps
* snow globes
* making sensory bottles or calm-down jars {filled with water, oil, and other objects}

Movement meditations such as walking meditations, and breathing meditations can be helpful variations for those that are more kinesthetically inclined.

Yoga, an ancient movement mediation system, helps to activate the vestibular, proprioceptive, and tactile systems of the body.

1. **Thinking about Beloveds**

“Oxytocin may even be released by seeing, hearing or by merely thinking of the other beloved person (Carter and Keverne, 2002; Grewen et al., 2005; Light et al., 2005; Holt-Lunstad et al., 2008).” [[25]](#footnote-25)

1. **Food Intake & Digestion**

Eating food that is very textually stimulating or requires a lot of chewing produces greater amounts of oxytocin.

Foods that involve a lot of manipulation, such as shelling pistachios, or picking up portions item by item (such as berries) thus involving your hands, doubles the pleasure via the oxytocin released by the numerous nerve endings in the well-innervated fingers.

Eating proteins and fat can be a more health-conscious way to boost oxytocin, over the impacts of eating sugar or carbohydrates.

“Food intake is also associated with oxytocin release and several mechanisms are involved in the oxytocin release induced by ingested food.

When food touches the oral mucosa oxytocin is released following activation of touch receptors in the oral cavity and when the ingested food reaches the gastrointestinal tract, the gut hormone cholecystokinin (CCK) is released from the duodenum in particular in response to proteins and fat.

Sensory fibers of the vagal nerves are then activated by CCK. The sensory vagal nerve fibers relay in the NTS wherefrom neurons project to the PVN, where oxytocin is released both into the circulation and into the brain (for references, see Uvnäs-Moberg and Prime, 2013).

Oxytocin can also be released following activation of other sensory nerves originating from, e.g., the oral mucosa (Lupoli et al., 2001), and the gastrointestinal tract (vagal nerves; Stock and Uvnäs-Moberg, 1988)” [[26]](#footnote-26)

1. **Suckling / Oral Stimulation / Oral fixations**

If you don’t have access to an enthusiastic nipple, or the ancient co-regulatory experience of suckling a teat, some replacements are:

* sucking against resistance / drinking from a straw {especially thick substances like smoothies or tapioca bubble tea}
* blowing air {bubbles, feathers}
* pursing & putting your lips on bottles
* pacifiers
* drinking warm liquids
* bubbly beverages
* sucking on hard candies/lollypops
* eating chewy foods

Other adaptive / neutral activities related to this pathway include:

* chewing gum {especially sugarless gum – which increases saliva, which helps remineralize teeth}
* applying lip balm / lipstick

“Suckling is also linked to oxytocin release as the act of suckling per se induces oxytocin release by activation of touch receptors in the oral cavity (Lupoli et al., 2001).

Oxytocinergic mechanisms may be involved in the calming, anti-stress, and growth-promoting effects of the suckling in breastfeeding infants, but also in response to [the] sucking of a pacifier (Uvnäs-Moberg et al., 1987).

It is even possible that the dependency on other types of suckling-related behaviors, e.g., smoking cigarettes and even drinking alcohol (Uvnäs-Moberg et al., 1993b), may involve an oxytocin-linked component triggered by the suckling itself and not only by the pharmacological effects of nicotine and alcohol.”[[27]](#footnote-27)

1. **Interacting with Pets**

“Oxytocin levels peak significantly in both dog owners and dogs when they interact and in particular when the owner strokes and caresses her dog (Odendaal and Meintjes, 2003; Miller et al., 2009; Handlin et al., 2011).

Oxytocin is however also released when the dogs see and want to approach the owner. Pet ownership is associated with lower blood pressure, serum triglycerides, and cholesterol levels (Allen et al., 2002).”

If you have severe attachment problems and are too afraid of humans in order to receive any support from them, studies show that you can receive the same oxytocin benefits from interacting with a friendly dog or having a pet.[[28]](#footnote-28)

1. **Seeing Friends or Pets Approach**

When interacting with other humans or animals, there are two oxytocin spikes that occur. The first oxytocin peak is induced when seeing and hearing “the other individual” (dog or the human) and is linked to an active approach. The second peak occurs in physical contact (petting, shaking hands, giving a massage).”[[29]](#footnote-29)

1. **Self-Pleasuring**

Not only does self-pleasuring release oxytocin (with a big release occurring at the moment of orgasm), but self-pleasuring also boosts the immune system!

A small 11-person study from Germany found that masturbation “confirmed transient increases in adrenaline and prolactin plasma concentrations” and that “sexual arousal and orgasm increased the absolute number of leukocytes, in particular natural killer cells (CD3-CD16+CD56+), in the peripheral blood.”

The study concluded that “these findings demonstrate that components of the innate immune system are activated by sexual arousal and orgasm.” [[30]](#footnote-30)

1. **Electrical Play**

Exploring if you enjoy the stimulation of a TENS unit or a violet wand can also boost oxytocin. A TENS unit produces a current across electrodes you attach to your body, which activates the muscle fibers that lay between the sticky electrodes. A violet wand converts household electrical outlet power into a current that can be applied to the human body. Please seek professional medical supervision before electrical play.

“Low-intensity electrical stimulation releases oxytocin in rats (Stock and Uvnäs-Moberg, 1988; Uvnäs-Moberg et al., 1993a; Lund et al., 2002)”[[31]](#footnote-31)

1. **Eustress**

Eustress is non-paralyzing “adaptive” stress. Low levels of “beneficial” stress that are not overwhelming, but motivate active coping behaviors, fall under this category of constructive inspiration (rather than collapsing into a lethargic / defeated, inactive depression, or overwhelm).

For example, completing a “life purpose project” that you had previously put off, but were able to finish, can activate encouraging eustress.

“In addition, oxytocin may also be released by mental and sensory stimuli that are perceived as stressful. In this case, oxytocin is activated in parallel with the stress system and the role of oxytocin in these situations may be to dampen stress responses and facilitate coping behaviors (Neumann, 2002).”[[32]](#footnote-32)

#### Bonus Partner and Group Methods:

If you have the luxury of not being solo, you can also enjoy the following interpersonal interactions that release oxytocin.

If you feel you would like more people around you, you might consider a move to co-habitation, via a cooperative, community house, or intentional community.

Many studies demonstrate that the health profile of people who live in good relationships is better than for those who live alone.

They, for example, have lower blood pressure and a decreased risk for cardiovascular disease. They have [fewer] infections and the risk for some types of cancer is reduced.

People who live in good relationships may even look younger and live longer than those, who live alone.”[[33]](#footnote-33)

1. **Platonic Touch (Cuddling)**

“Oxytocin may be released when individuals of both sexes and all ages touch each other, given that the relationship is perceived as positive.”[[34]](#footnote-34)

Asking for a longer {one minute} hug is another way to get deep-pressure contact.

1. **Massage**

“Treatment with massage is linked to oxytocin release – pulses of oxytocin can be observed both in the individual receiving massage and in the masseur (gathered by repeated blood samples from Uvnäs-Moberg, 2004).

Several positive effects occur during a massage session: levels of anxiety are decreased, the perception of well-being is increased, and that of pain is decreased, and both blood pressure and cortisol levels are lowered.

Repeated massage treatments are associated with the long-term expression of all these effects (Field, 2002, 2014).

Massage also helps in personal relationships – increasing the ability for friendly interaction, and may even be used to resolve marital conflicts (Ditzen et al., 2007)”[[35]](#footnote-35)

#### Emergency Nervous System Regulation

If your nervous system is too “hot” - in that you are in the throes of a runaway sympathetic response, or you are approaching a panic attack, splash cold water on your face, or better yet submerge your face in cold water, as this reflexively activates a “cooling” / calming parasympathetic nervous system state.

### Trauma and the Nervous Systems

There are whole disciplines of study and books regarding how the nervous system operates, and a brief overview is essential as the foundation of trauma-informed, altered state spaceholding.

When working with trauma or understanding threat responses, polyvagal theory is a helpful frame.

Throughout evolutionary history, our ancestors employed different methods of survival which were preserved in our instinctual responses.

This is also the reason we can absolve ourselves of guilt for these involuntary reactions – not only do we not have control over them, but their life-saving qualities have enabled the chain of life to reach our current form.

We “devolve” through leaning on the most current coping circuits {evolutionarily speaking} and then moving back through time to the more primitive reactions if our nervous system perceives the threat is still active.

“Evolution has endowed all humans with a continuum of innate, hard-wired, automatically activated defense behaviors, termed the defense cascade. Arousal is the first step in activating the defense cascade; flight or fight is an active defense response for dealing with threat; freezing is a flight-or-fight response put on hold; tonic immobility and collapsed immobility are responses of last resort to inescapable threat, when active defense responses have failed.”[[36]](#footnote-36)

Our most evolutionarily recent autonomic nervous system response to threat involves social engagement, unique to mammals. This response can only occur within a context of social safety and involves our face, voice, and language.

Commonly identified forms of social engagement as a response to threat include the ”‘attachment cry” / crying for help, fawning / please and appease {getting on the good side of the source of the threat}, and an over-reliance on “tend and befriend” {caregiving at the expense of oneself}.

Before mammals developed the social engagement system, our ancestors relied on the sympathetic nervous system response - a release of hormones such as cortisol, adrenaline, and epinephrine to mobilize them against threats via a “fight / flight” reaction.

Finally, an even deeper parasympathetic “dorsal vagus shutdown” immobilization response is the most ancient method, stretching all the way back from our reptilian ancestors, and involves physical collapse / shut down, known in the psychological literature as tonic immobility, “playing dead,” “death feigning,” or “thanatosis.”

This state can involve:

* *decreased heart rate*
* *decreased blood pressure*
* *loss of sexual drive*
* *feeling of derealization / depersonalization / being ‘cut off’ from reality*
* *feeling ‘zoned out’ / dissociated*
* *feelings of hopelessness and helplessness*
* *numbing*
* *reduced rate of breathing*
* *feelings of shame*
* *impaired ability to access emotions*
* *reduced rate of metabolism in the brain impairing ability to think clearly / ‘foggy’ / adversely affecting autobiographical memory*
* *impaired articulacy*
* *defensive/defeated body language*
* *feelings of numbness*
* *complete collapse*
* *inability to move certain parts of the body*
* *reduced sensitivity to physical pain*
* *feelings of constriction in the throat*
* *feelings of being ‘trapped’*
* *restricted breathing*
* *reduction in facial expression [[37]](#footnote-37)*

It is important to note that this dorsal shutdown can range all the way from light dissociation to fainting and a loss of consciousness.

It is thought that the dorsal response was evolutionarily conserved because predators only continue to attack prey if the prey animal is moving, so an involuntary state of feigning death was conserved throughout time.

For example, consider a gazelle caught by a lioness entering an involuntary limp dorsal state – the lion would cease attacking and might leave the gazelle to go and fetch her cubs, at which point the gazelle might be able to rouse itself and bound off, to live and reproduce another day.

Animals are able to “shake it off” and reset / discharge their nervous systems because they do not suppress their instinctual urges as “civilized” humans do. What humans do when they suppress the instinctual urge is interrupt the flow of the natural nervous system states.

In humans, “once the nervous system discovers that a particular response works, neurological connections are strengthened, and the response is more likely to be repeated.

Not only that, but when a client experiences trauma, their nervous system becomes primed to detect threats – making it all the more likely that their defense response will be activated.”[[38]](#footnote-38)

There are two main branches of the nervous system – the **sympathetic** and the **parasympathetic**.

The **sympathetic** nervous system is associated with “fight / flight” activation in response to a stimulus perceived as a potential threat.

Physiological characteristics of “flight / fight” arousal can include:

* blood flowing to large muscle groups towards the trunk of the body to help you run away, and also if you sustain damage to reduce blood loss
* flush of adrenaline / cortisol other hormones conveying the need to be alert
* scanning for danger

The **parasympathetic** branch of the nervous system is associated with “rest and digest,” “tend and befriend,” “mate and relate,” “feed and breed,” and “stay and play” urges.

A parasympathetic state is a prerequisite for the body’s restoration, healing, proper digestion, and higher-level activities such as social bonding, creativity, and flow.

## Trauma Uninformed Pitfalls

Trauma perpetuating / deepening frames

### What is Being Trauma-Informed?

The following is provided from [@MsPeteyAutLib](https://twitter.com/MsPeteyAutLib/status/1583888351790125056):

“"Trauma Informed" does NOT mean "I have trauma, so I can relate."

"Trauma Informed" does NOT mean "I'll be 'extra nice' because people have trauma."

**"Trauma Informed" indicates:** I am EDUCATED and aware of physiological, social and psychological effects of trauma \*in general\*; and, I am interested and intentional about understanding and accommodating your specific needs as they relate to \*your personal\* trauma.

I will tell only the truth, with compassion.

I will believe you and give you the benefit of the doubt.

I will recognize that you are not "other" to my own humanity. (Race, gender, sex, orientation, or any socio-economic construct).

I will avoid "wishing" upon you \*my\* perception of "healing" and will listen to and accommodate to the best of my ability your needs around safety and support.

I recognize that you cannot safely be authentic and vulnerable unless I am. (Which includes healthy boundaries).

I will welcome and respect your personal boundaries, and I will take responsibility for communicating mine in a safe, constructive manner.

I will always err on the side of NOT violating anyone's privacy.

I will not presume any entitlement to information about you that is outside the appropriate level of intimacy of our relationship.

I will never shame you for your painful emotions or suggest that your suffering is a problem that would be solved by altering your perception. (Gaslighting)

I will never prescribe "faith" as a substitute for resourced solutions to practical problems. (Gaslighting)

I will not presume to understand the intricacies of relationships that are not mine.

I will not assume that what makes me feel safe will make you feel safe.

I will NEVER play the "two to tango" card. (Victim blaming)

I will not assume that emotional "instability" suggests emotional "inaccuracy."

I will never suggest that you have any duty of "reconciliation" with an abuser from whom you have worked so hard to extract yourself physically, emotionally and socially...NO MATTER WHO IT IS.

I will avoid platitudes, obscure metaphors and inspirational dogma that have nothing to do with the practical details of your experience.

I will not make your experience with me about my own self-worth.

I will own my ego and emotional triggers and take responsibility for addressing them appropriately when (not if) I feel unsafe or make you feel unsafe with them.

I will respect the decisions you make about your own healing journey.

I will do my best to refer or recommend other resources rather than venture out of the scope of my own supportive capacity.

### I will accept the responsibility of removing myself from a therapeutic relationship if our needs and boundaries are incompatible.” [[39]](#footnote-39)

### Toxic positivity

Toxic positivity is the excessive and ineffective overgeneralizing of an optimistic, happy state across all situations.

Toxic positivity is an avoidance mechanism that comes from discomfort with negative emotions and involves responding to distress with dismissal and false reassurances rather than empathy.

This discomfort is typically due to the person’s own trauma and inability to address or acknowledge their own experience. In not allowing themself to experience an emotion or response, they extend that lack of permission to those around them.

Although positive statements can be well-intentioned - if they are not rooted in “feeling with” someone they can cause disconnection, and self-judgment in the recipient if they are unable to share their authentic experience, due to guilt or self-blame driving censorship.

Toxic positivity creates shame in the sharer because it deems certain emotions unacceptable, when what the person experiencing the challenge is looking for is to relieve their suffering by an acknowledgment that their emotions are valid.

Toxic positivity causes guilt in the speaker if they are unable to “snap out of it” or immediately drop challenging emotions – implying that if they are not finding a way to be positive, they are failing.

Toxic positivity often happens in situations in which we want to try to alleviate pain or help but are not sure of what to say - masking the discomfort with shallow statements can silence the speaker and seem fake.

The difference between supportive positivity and toxic positivity is in whether the emotions shared are being dismissed out of discomfort, or if they are being acknowledged and affirmed.

#### Children and Toxic positivity

Toxic positivity can affect our relationships with children {or inner children, or young parts in an IFS framework}, when “our impulse may be to tell them, ‘You’re OK’ or ‘It’s not a big deal’ or ‘Stop crying, everything is fine,” according to Tabitha Kirkland, a psychologist and associate teaching professor at the University of Washington’s Department of Psychology.

“This teaches young ones that their negative feelings aren’t OK and can be influential on how they develop and process their concepts about emotion, and how they learn to express or not express their own emotions,” Kirkland explains.

Kirkland also notes that emotion is gendered:” Boys aren’t encouraged to express emotions except those that reflect power, such as anger, whereas girls are encouraged to express their emotions but only ones that are seen as less powerful, such as agreeableness.”

“These gendered differences in emotion socialization can lead men to suppress their emotions and can lead women to feel pressured to show positive feelings that may be inauthentic.” [[40]](#footnote-40)

Depending on the context, the following phrases could be examples of toxic positivity:

* *Good vibes only*
* *Think positive*
* *Just stay positive*
* *Look on the bright side*
* *Happiness is a choice*
* *It could be worse*
* *Other people have it worse than you*
* *No bad days*
* *Everything will work out*
* *Everything happens for a reason*
* *This was meant to be*
* *Don’t attract / manifest negativity*
* *It is what it is*
* *The grass is always greener on the other side*
* *At least you’re \_\_\_\_*
* *It will be fine*
* *God has a plan*

Depending on the context the following may be indications of an internalized environment of toxic positivity:

* Feeling guilty about or suppressing certain emotions such as anger, disappointment, or sadness.
* Hiding or disguising how you truly feel, such as by using feel-good phrases that seem more socially acceptable
* Minimizing or brushing off problems rather than facing them head-on
* Attempting to be stoic, muscle through, or “get over” painful emotions

#### Positivity Masking Denial / Enabling Unhealthy Inertia

“Taken to an extreme, positivity becomes toxic and deprives us of the motivation to make healthy changes that the awareness of a negative, uncomfortable reality would otherwise stimulate us to make.

For example, a person with toxic positivity might return repeatedly to an abusive relationship "because I want to just focus on his positive aspects and hold hope that he will change!" Or they might run up huge credit card bills on frivolous things because they’re "staying positive" about future earnings.” [[41]](#footnote-41)

This form of toxic positivity can be revealed through questions such as “Are you afraid of conflict?” or “Do you believe that certain emotions like anger are bad {rather than healthy indicators that someone is violating our boundaries}?”

### Overcoming toxic positivity

Practice giving yourself time and spacious mediums to process your feelings {such as through stream-of-consciousness writing or speaking out loud to a recorder}.

Practice sitting in compassion with grief, anger, and sadness. Consider Metta or loving-kindness meditations.

Don’t deny your negative emotions – honor and manage them - through cathartic physical activity, narrative journaling, or speaking to your therapist.

Consider the frame of giving advice to yourself as though you were your best friend:

* *What emotions would be typical or realistic in this situation?*
* *How can your inner dialogue focus on self-kindness?*
* *Do you have different expectations for yourself than you would for someone else?*

State your intentions for any conversation.

Listeners may make an incorrect assumption about how you want them to respond - such as by giving advice - when you share your emotions with them.

Clarify what you are needing from the listener – such as “I am just hoping for someone to listen,” or “I am looking for practical stories of other ways people have solved this problem.”

Have this elucidation go both ways - ask others for specific types of listening, and also inquire as to what they are seeking from you as a listener if they share feelings with you {e.g. I only want a listening ear, I am seeking empathy, I am specifically looking for advice, I am seeking direct actionable suggestions…}.

#### Name to Tame

If meditation feels safe for you, sit in observation of your thoughts, labeling any negative emotions and noticing them without reactivity.

Acknowledge the negative feelings but do not become mired in or judgmental of having negative thoughts.

Practice noticing and labeling feelings {“name it to tame it”} when you are calm so that you will have access to this skill in times of greater challenge.

#### Reframe Emotions as Information

Shift your perspective away from how emotions make you feel and towards feelings as information.

For example, anger tells us that we perceive a situation as unjust and can provide the energy to “right the wrong” via righteous anger {such as in the movement for civil rights}.

Fear can alert us to threats.

Feeling lonely can foster a reaching out for connection.

Seeing emotions as data points can help you escape from guilt about having an emotion, a process that is involuntary.

You do not have complete control over the contents of your mind and what emerges {consider dreams}, but you do have control over how you react to any thoughts or emotions, what context you surround yourself with, and what you feed your system {e.g. violent media and reading inspiring autobiographies will foster different mindsets}.

### Gaslighting

Gaslighting is a subtle and insidious form of emotional manipulation and psychological control in which you are systematically fed false information that leads you to doubt what you know, your memory, or even your perception of reality {you may even end up questioning your own sanity}.

In this abusive tactic “the gaslighter tries (consciously or not) to induce in someone the sense that her reactions, perceptions, memories, and beliefs are not just mistaken, but utterly without grounds—paradigmatically, so unfounded as to qualify as crazy”. [[42]](#footnote-42)

The terms “gaslighting,” “trigger,” and “trauma” have all experienced “watering down” semantic shifts due to the application of these terms to situations that do not match the high degree of impact that these terms originally connoted.

For example, the use of “traumatized” in the context of an accidentally inaccurate coffee order, or “gaslit,” when a more accurate description would be lied to, blur and minimize the power of these terms. In this vein, consider the use of ‘upset’ instead of ‘triggered’ – as ‘triggered’ is actually intended to convey an involuntary trauma response.

The following may be indications of gaslighting, depending on the context, and if they comprise a larger pattern of behavior.

#### Gaslighting phrases

* I was only kidding, can’t you take a joke?
* Lighten up
* You’re too sensitive
* You need help, you’re nuts / crazy
* I’m sorry you made me do that. It’s your fault I responded that way.
* I never said that, maybe someone else did!
* I didn’t do that, I would never do things like that
* You maybe dreamed of that
* I don’t know what you’re talking about
* I didn’t say it like that, you are not remembering correctly, your memory is not good
* You argue with everyone, everyone thinks you’re crazy
* If you were a good person, you would have friends.
* You’re so lucky to be with me, no one else would want you, you’d be lost without me
* Stop lecturing me
* I wish you were smarter
* You’re the crazy one - you’re the one with anxiety / on medication. You’re going to end up in a psychiatric unit
* You’re just like your mother/father.
* Even your mom/dad dislikes you
* You know nothing about me
* You’re overreacting. That was a joke
* It’s all in your head. You’re imagining things
* You’re just insecure. You’re just jealous
* You’ll see
* People don’t want to be around you
* You always jump to the wrong conclusions
* Stop feeling sorry for yourself
* You always make it a big deal. Calm down you’re sounding so crazy. You’re getting upset over nothing
* You’re so defensive all the time
* Your friends are all idiots
* If you really loved me, you wouldn’t do that
* You don’t respect me
* You need help
* Everyone always agrees with me
* You never do what I say
* You are always so stubborn
* You always take things personally
* You argue with everyone
* You never listen
* Stop being so emotional
* I didn’t mean it that way
* Stop being paranoid
* Your memory is terrible
* Why do you want to hurt my feelings like that?

#### Therapy Gaslighting

Therapy gaslighting utilizes therapeutic terminology and processes to place the blame for the lack of success of therapy solely on the patient.

Due to the expert role that the therapist is in, there is insipid psychological pressure for the patient to accept the therapist’s interpretation and suggestions.

Under the guise of self-exploration, an unethical therapist will manipulate this process to shift blame for lack of progress onto the patient instead of the therapist taking some responsibility for their contribution to the therapeutic relationship.

Thus, insidiously, any therapy impasses can be blamed on the patient’s “projection,” “transference,” or lack of honesty with themselves.

Unfortunately, some therapists go into the healing field with a guru complex, to grow their ego, seeking status, or wishing to have power over others.

Patients seeking therapy who have a harsh inner critic can be particularly vulnerable to a therapist gaslighting them, as are people with attachment wounds wanting to find a substitute parental figure.

If this describes you, please revisit the section on [Guide Red Flags](#_eellsq62j15o) for additional signs indicating you would be wise to avoid such a predatory ‘healing’ practitioner.

Depending on the context the following phrases may be therapeutic gaslighting:

* + *I can’t talk to you if you’re aggressive or angry*
  + *I won’t speak to you if you are arguing*
  + *I’m trying to help you*
  + *Why are you blocking yourself from receiving my help?*
  + *Get out of the victim mindset*
  + *You’re mishearing or misinterpreting what I am saying*
  + *“This is not my therapy, this is your therapy”*
  + *“You’re projecting”*
  + *This is transference*
  + *You’re not being honest with yourself*
  + *This is one of your patterns*
  + *You seem really ungrounded*
  + *Can you speak from a calmer place?*
  + *What about your behavior is motivating someone to respond in that way?*
  + *You need to compromise*
* Therapy Gaslighting Red Flags:
  + *Superiority complex*
  + *Reminding you of their credentials*
  + *Expert status*
  + *Imbalance of power dynamic –not explaining concepts or techniques to you*
  + *Makes you feel selfish and lazy*
  + *Always thinking ‘I should look at what I was doing to motivate them to say those things.’*
  + *Dismissing your dreams*
  + *Offering something and then making you feel guilty for accepting*

**The following can help prevent therapeutic gaslighting:**

Making agreements as to the help question, purpose of therapy, and potential treatment plans in writing.

Taking thorough notes or recording the sessions.

Noticing how you feel after a session – do you feel good about yourself?

Not putting your therapist / guide on a pedestal.

Thorough vetting of your therapist, asking for references, asking about their accountability process.

### Gaslight Worker / Spiritual Narcissist

A portmanteau of “gaslight” and “light worker” – gaslightworkers employ toxic positivity as a profession, often through spiritual life coaching.

A gaslightworker, narcissist gurus, or cult can also weaponize having boundaries and spiritual language.

For example, Graham, one survivor of Bentinho Massaro’s cult, states that even after leaving she still struggles with the aftermath of Bentinho’s teachings. “He claims to be a mirror,” she says.

“Everything that you feel about him, you’re trained to think is actually something about you. So whatever ugliness you see in him is ugliness about you. So even after, I kept thinking, “Oh, my God, if I’m feeling these horrible things about him, what must that mean about me? And am I an evil entity? My brain was so f\*cked for a while.”[[43]](#footnote-43)

Depending on context and especially if part of a larger pattern of behavior, the following may be phrases indicating a Gaslightworker:

* ‘You manifested this’
* ‘Your external world is just a mirror for your internal experience’
* ‘This is coming up so you can clear it’
* ‘I am just a mirror for you’
* ‘This must be from a past life karmic tie’
* ‘You are past life twin flames / soul mates’ {when justifying domestic abuse}
* ‘I am sorry you feel that way. I am sorry you had that reaction.’
* ‘Your wounds / trauma patterns are bringing this out in me’ {when you pointed out harm they caused}

In general, gaslightworkers will place themselves above you either explicitly or implicitly, and they will not take steps to dismantle or bridge any power dynamics present.

Gaslightworkers will tell you what is wrong with you, telling you what to do, often hiding behind advanced wisdom they claim to have access to.

GLWs will claim that they are receiving messages from ‘your higher self’, ‘your ancestors’, ‘angels’, ‘the Akashic records’, ‘past lives’, and ‘higher powers’ which ‘speak through them’ or that only they can read. GLWs will not teach you how to access this knowledge for yourself. Essentially, akin to exploitative religious leaders, GLWs will try to come between or supersede your direct connection to parts of yourself / your subconscious / spirit / God.

GLWs do not honor your sovereignty of perception and do not educate you on how to tune into wisdom from your own internal sources, instead fostering dependence on them for access to ‘truth’ or ‘things you are hiding from yourself’. GLWs claim to know you well or be able to sense aspects of you that you are unaware of.

GLWs distort or control the narrative to the exclusion of other perspectives or nuanced complexity.

GLWs do not give genuine apologies, acknowledge harm, or make offers of repair.

GLWs disregard or push past your boundaries, and then minimize what happened.

GLWs claim unkindness or hardship they are putting you through is for your growth, or that you are the one that needs to change.

GLWs will weaponize vulnerable things you have shared, by making you feel shame or using this knowledge to manipulate you.

## Trauma-Informed Practice

### Discharging Emotion

Being witnessed // grief // resolution // closure

Resolving trauma can feel unfinished when the individual who has caused harm is deceased, unknown, unwilling to communicate, unremorseful, unsafe to contact, or otherwise unavailable.

Unfortunately, it is also possible that in the process of trying to communicate that harm has been caused, that the person who caused harm becomes defensive and attacks the harmed party, adding secondary harm, or repeating, and thus deepening, the original harming pattern or causing traumatization.

In this and other cases when contact is impossible, or unwise, “Challenging Closure” exercises can help create resolution at a distance.

### Challenging Closure

**Letter**: The harmed person writes a letter communicating the impact the harm caused them that they were unable to previously communicate. This letter is written by the harmed person to the person who harmed them.

**In the chair**: An empty chair can be set up and the harmed person can imagine the harming party sitting there and speak directly to them. The harmed person may also choose if they want to be witnessed in person by the Spaceholder or voice record the experience.

### Anger

In alignment with the classic “[Common Agreements for Psychedelic Spaceholding](#_84amopowewj2)” in which all agree to do no harm to self, others, or property, there may be a need to channel the expression of anger into welcome or constructive directions.

Ideally the following actions are taken with proper form and gear in mind to prevent injury.

Some safer methods of physically discharging anger include:

* punching a pillow
* running
* jumping
* stomping feet
* pounding the ground with hands and feet on belly {tantrum style on foam mats or mattress}
* cracking / breaking sticks
* yelling / screaming / expressing {in a place where no one will worry about the sound}

#### Harvesting from Anger

The presence of anger is often a reaction to a perceived sense of injustice and gives us the activating energy to right the situation.

*What is the underlying sense of imbalance? How can the need that is not being met be addressed proactively?*

Typically, from a young age, we are socialized to contain or displace our anger as the majority of examples we see of anger are either turning it inward into implosion {the emotional sepsis of depression} or having it explode outwards as emotional shrapnel that indiscriminately hits all casualties unfortunate enough to be in its path.

In our earliest patterning, with regards to frustration towards parents/caregivers, anger is typically unable to be expressed because doing so would put a child’s ability to survive in peril as they are completely dependent on their caregivers to meet their basic survival needs.

This anger is then bottled up and suppressed but can emerge “sideways” in unexpected forms and likely towards people who are not the root cause of the issue.

Consider that we often feel safest exposing the most unkind parts of ourselves to people who we know will not leave us, or to whom we do not have to deal with the consequences due to anonymity - such as on the internet - or because we have power over them {this may be one reason there are displaced bureaucratic power games such as the DMV}.

One patient I was working with received a very stern, overachieving upbringing with no expressions of pride from their parents, and in their adulthood would constantly be criticized for their lack of accomplishing certain life tasks that other family friends had engaged in {such as marriage}.

When this patient would be questioned by their parents “When are you going to get married?” We crafted a response that would guide their parents towards what they needed by countering, “I wish instead of asking me that, you would ask how I am doing.”

This shift communicated to their parents that they needed support and curiosity instead of judgment and comparison and resulted in more harmonious relations.

In the case of more complicated systemic injustices, such as disability justice, sexism, racism, etc., it may be helpful for the patient to be acknowledged for all that they have overcome and encouraged to constructively participate in the broader cultural movement for change in a way that is nourishing and meaningful to them.

### How Not to Retraumatize Someone

#### Maximize Choice

Trauma is a lack of choice.

Extending options can help your Journeyer feel agency, build trust, and begin to heal the rift caused during the original consent breach.

You can also model consideration and healthy care in the therapeutic relationship, healing through respectful rapport.

If your Journeyer is disconnected from their needs or in a confused altered state, you can try providing a choice between two suggestions based on the answers in their questionnaire of the interventions and types of support they appreciate and what contexts to use them in.

**Make a special note to ask several times for consent for touch:** confirming the details of your Journeyer’s preferences before the session through reading what they have written in the “[Menu of Spaceholding offerings](#_7qn61u8aqaq4),” verbally before the session and any alteration of consciousness begins, and then immediately preceding the touch at the moment.

#### Special Consideration for Fawning

There are some Journeyers who, due to their upbringing, will be oriented towards a caregiving response.

This can manifest as wanting to make sure they are “a good patient,” “not a burden,” “giving more than they take,” and caretaking the emotions of the Spaceholder.

Often these Journeyers have attempted to get their needs met by meeting the needs of others and hoping that they will either receive what they give or experience a reciprocal trickle-down effect from their attentive care.

These Journeyers will often need to be assured that the balance of giving and receiving is clear, as they may have been given ‘gifts’ with strings attached in the past and been pressured into uninformed and nonconsensual debts that were painful to “repay” when someone “came to collect.”

One pedestrian example of this may be in someone offering a massage to someone else but not being clear that they expect a massage or touch in return or using the “debt” to escalate into sexual contact as “repayment.”

More subtly, sociologically this manifests as those who are catcalling / complimenting someone becoming angry or verbally threatening when they are ignored or not given attention in “exchange” for their compliment.

Making clear the exchange between the Spaceholder and Journeyer and what is expected in both roles can help allay these concerns, but fawning Journeyers often will need to be proactively repeatedly reassured that the Spaceholder is there in service to them.

To overcome a Journeyer’s tendency to fawn, give as much space / time possible for the Journeyer to be in their own sovereign energy before they commit to anything – including additional treatment.

Encouraging the Journeyer to journal and record thoughts not in the presence of the Spaceholder aids in developing a sovereign sense of self.

In general, making decisions when not in anyone else’s presence can help the chronic fawner find their core truth without being swayed by caretaking someone else or the impact of their expression on the other person.

If someone who has a fawning tendency is needing to express the harm that has been done to them, a technique such as letter writing, voice recording, or having an ally / in-person witness present at the time of disclosure to the harming party can create an environment in which fawning is less likely to take place.

An ethical violation that would deeply affect someone with a fawning tendency would be upselling additional services while they are still coming down from a tender trusting Journey space, and doubly so if they are still experiencing the effects of any medicine.

### Referrals / Additional Training

As covered in the section on referrals – part of being trauma-informed is knowing what your triggers are and what populations you may not best be suited to work with.

Modalities that you can study that will increase your trauma-informed capacity include: Somatic Experiencing, Polyvagal Theory, Somatic Therapy, and Trauma Release Exercises {TRE}.

### Don’t Dredge Details

Let the Journeyer choose the level of detail {if any} they wish to describe their traumatic experiences.

It is not essential for a Journeyer to dredge up the details of every aspect of a trauma memory for healing to occur – it is enough to hold the feeling tone and the salient details within the Journeyer’s window of tolerance.

It is also enough to simply know that “the body keeps the score” and not purposefully bring to mind any specific experiences at all, as the embodied system is wise to the Journeyer’s capacity or lack thereof of addressing anything head on.

There are countless experiences the author has held space for, and personally experienced, in which there is a somatic discharge {often shaking} without a story attached to what is being released that still provides immense benefit.

Consider that the body does not experience a linear narrative the same way the mind does, and that somatic releases have value even if they are not neatly woven into a logical parable or takeaway as to their cause.

As a word of warning, a Spaceholder’s interrogative or detail-focused mindset can cause the recall of the experience to become overwhelming and retraumatizing.

Research demonstrated that exposure or de-briefing therapies can worsen PTSD symptoms by forcing a re-living of the traumatic event.

Let your Journeyer steer the ship of what is in service to their healing – whether that is disclosing every detail while you listen compassionately, having a phrase that serves as a placeholder for the experience, or not mentioning, or knowing the cause at all.

If you notice that your Journeyer is starting to dissociate in their recalling of the experience, try to create distance from the immersive details of the memory by:

* encouraging them to slow it down
* reverse / flow the sequence backward in time
* zoom out to look at it from a birds-eye / third person view
* change the scene from color to black and white
* have them open their eyes and ground themselves by listing three bodily sensations they are experiencing in the room
* have them go to their sanctuary space

### Share Information: Actively Equalize the Knowledge / Power Imbalance

If you are in a context in which you are Guiding or have the possibility of providing preemptive information, share as many details as you can, especially about who else might be in the room during the session.

This upfront disclosure is essential not only for informed empowered consent, but also allows the Journeyer to consider what they need and accommodations they could ask for to feel safer or more comfortable, with plenty of time to graciously arrange adjustments.

If you are in a risk reduction context, do your best to have different types of people in the care space, or at least a pair / partner that is different from you in as many ways as possible.

To illustrate what can happen when the Journeyer is not “safe ported” {safe porting means explaining the context and possibilities that may occur to create preparation and emotional safety} around who will be present in a vulnerable psychedelic space, the following example explains how a Journeyer was retraumatized by an unexpected presence in an intimate care space.

I had a Journeyer referred to me by a 5-MeO-DMT practitioner who shared that someone they served with the toad had a trauma reaction that was persistent and that they did not feel trained in addressing.

When I spoke to the Journeyer, they shared that they had signed up to be administered 5-MeO-DMT by a female practitioner, which as a female-bodied person they specifically sought out.

When they showed up at the practitioner’s space, there was unexpectedly a male assistant to the female practitioner, which caused the patient’s body to freeze up in fear {due to a sexual assault that had been perpetrated on the patient in a medicine space}.

The patient decided to try to proceed with the 5-MeO-DMT administration but their body and psyche were fighting the loss of control {which they attributed to the presence of the male-bodied assistant} and in that alert and watchful consciousness, unable to surrender due to lack of feeling safe and wrestling with the effects of the medicine, had a more uncomfortable experience than they had in the past working with 5-MeO-DMT.

The patient said that they were unable to fully “launch” into the psychedelic experience due to their body being on guard in the presence of the male-bodied assistant and this discomfort kept them from surrendering to what had previously been beautiful journeys with 5-MeO-DMT.

This clamping down of the psyche on the possibility of surrender that psychedelics often provide is a common phenomenon with those who have trauma backgrounds – as control is one of the methods the nervous system uses to try to create safety.

### Unbelievably High Tolerance

Relatedly, I have worked with many people who have trauma backgrounds who describe themselves as “control freaks” who also exhibit a shockingly high tolerance for large doses of psychedelics. For example, they will take 20 grams of psilocybin mushrooms and communicate coherently, etc.

I have encountered so many people who fall under this category that I am convinced that the power of “mind over matter” has no end.

Fascinatingly enough, I was told a tale by a patient of their Guided 17-gram psilocybin journey within which they had a visualization of their inner mental workings actively dismantling the neurochemicals, due to their extreme need for control, and that they were at their baseline faculties while they were with their Guide.

Intriguingly, that night laying in bed in a hypnagogic state going to sleep, the effects of the psychedelic were able to bleed through their conscious control, and they experienced a traditional full-blown trip with visuals and psychological realizations.

They concluded that it was only when their mind felt safe to relax its grip that the psychedelic experience occurred.

### Western Trauma Literacy

I receive many referrals from Westerners who have traveled to Central America, South America, or otherwise sat with ayahuasca in a traditional ceremonial context with an ayhuascer@ shaman only to find that they had trauma emerge that the traditional spaceholders did not know how to work with, or even actively dismissed or judged.

This is not meant to minimize the healing that can happen in traditional healing contexts, nor to state this is the case with every practitioner, but just to note that psychedelics are not a panacea for everyone and may be contraindicated for certain types of trauma.

There are different ecosystems of trauma as well as different ways of working with each matrix and each individual’s receptivity to a certain style of healing will also be affected by the imprints of the culture they grew up in.

For example, an allopathic western medicine physician may believe only in the curative power of the “tradition” in which they were raised and not respond to another frame of healing as readily as the one that they were steeped in growing up.

This may lead them to pursue and be cured by chemotherapy if they have received a cancer diagnosis.

Conversely, someone who believes in the curative power of “alternative or natural medicine” may pursue acupuncture, juice fasting and cleansing protocols, change their environment to have less of a toxic load, or seek to understand adverse experiences and unexpressed feelings that may have contributed to their state of unwellness.

There is fascinating research emerging that much of the power of healing may be attributed to the placebo effect and a combination of the practitioner’s and patient’s belief in the curative effect of any intervention or technique.[[44]](#footnote-44)

I believe this principle is also at play in another form via the research that shows that in choosing a therapist, it is not the type of therapy that correlates most strongly with success rate, but the therapeutic alliance or strength of rapport in relating.[[45]](#footnote-45)

I also personally make a distinction between cultural nexuses of trauma in that the types of trauma one is likely to be exposed to in diverse cultural contexts are often very different.

For example, growing up in a more individual society {such as the ”West” or USA} may impart the stress of achievement and self-judgment that comes from low self-worth as based on economic output, and those in a more collective society {such as the “East” and Japan or China} may more predominantly carry the stress of shaming the family and being “different.”

I have seen this disconnect most distinctly when people from the Global North engage in psychedelic tourism to South America and do not feel supported metabolizing the trauma that has arisen in ceremony or through a comprehensive integration process.

In a traditional Amazonian village context in which the shaman or medicine person is embedded in your community or one adjacent to you, you can have an in-person ongoing connection with them in your daily life and they have a shared understanding of your lifeways and common ailments.

Additionally, your integration comes from the reinforcement of your new patterns by those you sat alongside who witnessed you in your transformation – members of your community with whom you have frequent contact.

If instead, you travel to South America from elsewhere, you may not know anyone in your ceremony group or have an ongoing connection after your time there.

On a cultural level, both your life experience and pre-existing frames for healing are likely to be very different from the practitioners.

If you have an experience of trauma from your history arise, the spaceholders in a group ceremony may not have the one-on-one techniques you have come to expect for supporting the processing of Western trauma i.e. therapy.

At worst you may be told, or feel through this lack of western trauma familiarity, that it is your burden to bear the trauma processing alone, when what you actually need may be the nearby physical support of a grounded nervous system to work through the trauma.

Unfortunately, this is a common trope I have received in painful stories from several patients.

The misalignment of support in these situations is also typically compounded by the language barrier / lack of fluency in the practitioner’s tongue that exists for many medicine tourists.

Supplanted from their original contexts, extracting only certain parts of medicine cultures {i.e. ceremony cut out of cultural context without inherent community integration} can cause these displaced healing modalities to be under-supportive in working with Western trauma.

This process is eerily similar to the extraction of certain compounds in well-known medicinal plants to form pharmaceuticals that also cause side effects, as you are removing the entourage effect of the concurrent compound / ecosystem of healing.

### Coherence Considerations

Ideally, you as a Spaceholder have a shared life history // training in the nuances of holding space for the specific traumas of your Journeyer.

If this is not possible, consider referring the Journeyer to someone who does, or having the two of you involved in the spaceholding concurrently.

If sourcing a resonant practitioner is not possible, research the background of your journeyer to be informed on how to hold space for their trauma type.

## Trauma-Informed Techniques

### Trauma Literacy

The first step in trauma literacy is awareness that trauma can be pervasive, and for many is, or was inescapable, especially if present in their childhood or due to socioeconomic status. Additionally, access to healing techniques and resources is not evenly distributed.

Trauma is never anyone’s fault.

Trauma is intersectional, intergenerational, can be passed epigenetically, and can have long-term impacts.

The Adverse Childhood Experiences {ACE} study demonstrated that “Persons who had experienced four or more categories of childhood exposure, compared to those who had experienced none, had 4- to 12-fold increased health risks for alcoholism, drug abuse, depression, and suicide attempt; a 2- to 4-fold increase in smoking, poor self-rated health, ≥50 sexual intercourse partners, and sexually transmitted disease; and a 1.4- to 1.6-fold increase in physical inactivity and severe obesity.

The number of categories of adverse childhood exposures showed a graded relationship to the presence of adult diseases including ischemic heart disease, cancer, chronic lung disease, skeletal fractures, and liver disease.

The seven categories of adverse childhood experiences were strongly interrelated and persons with multiple categories of childhood exposure were likely to have multiple health risk factors later in life.”

In summary, the ACEs study “found a strong graded relationship between the breadth of exposure to abuse or household dysfunction during childhood and multiple risk factors for several of the leading causes of death in adults.”[[46]](#footnote-46)

Trauma is a vastly under-recognized public health issue.

Everyone is affected by trauma differently. What is deeply traumatic to someone may not be anything of note to someone else – what matters is how the traumatic experience is affecting someone’s functioning.

Creating trauma hierarchies or comparisons does a disservice to trauma survivors – impact varies widely and can be mitigated with strong social safety nets.

Modulating or mitigating factors that can increase resilience include friends, family, trauma-informed first responders, prompt therapy, previous practice in nervous system regulation, discharge rituals, validation, spiritual practices, and support from beloved community.

### Mindset: Trauma-Informed Frames

Demonstrate compassion and care.

“Communicating compassion, caring, and a desire to be sensitive to what the client has endured is a therapeutic necessity when working with trauma survivors.”[[47]](#footnote-47)

**Trauma-Informed Practices:**

* Being steady in keeping your promises, meetings, and explaining rescheduling is not the Journeyer’s fault.
* Engaging in your own self-care / system maintenance {if you don’t schedule system maintenance your machinery will do it for you}.
* Disclosing your capacity, especially when you are approaching your limits {stating limits or that you are nearing your capacity as early as you can}.
* Being a settled nervous system for the Journeyer to co-regulate with.
* Not taking things personally, as the Journeyer’s healing is not about you, and healing can be messy.
* Remaining a steady stable presence, making it known that you are available whenever your Journeyer is ready to lean on you.
* Asking before giving safe supportive touch, knowing your Journeyer’s preferences around this practice and what contexts to use this intervention in.
* Listening deeply, considering why you are speaking before opening your mouth – does your Journeyer want you to respond? {if you are not sure asking – ‘do you want me to just listen or do you want to brainstorm solutions together’?}
* Using a calming voice / motherese {as one speaks to a baby or animal}.
* Compassionately acknowledge and validate your Journeyer’s experience and emotions {e.g.’ no one deserves to be treated this way’, ‘that sounds challenging’}.
* Sharing vetted information about what is helpful after trauma from research / experts.
* Being transparent when you don’t know or are not sure – trauma-informed care is an emerging field, and no one has all the answers as we are improving in our capacity to provide support, but when we share best practices, we can rise together.
* Believing survivors.
* Learning what is triggering to the Journeyer and limiting exposure to those reminders.
* People cope in different ways – get curious about your Journeyer’s coping mechanisms and try to steer away from self-harm and towards investments in future benefit {e.g. away from overeating or Dermatilomania / Trichotillomania and towards walking, physical exercise, or fidget toys}.

#### Distraction Can Help Create Breathing Room

Knowing the signs of dysregulation, naming them, and co-regulating when your Journeyer is dysregulated.

Helping your Journeyer weave a safety net – brainstorming together what resources they can call upon – personal, professional, community-wide, and then reminding them when they are under-resourced or could use extra support.

Encouraging them to schedule check-ins with their safety net and scheduling pleasurable shared activities ahead of time to look forward to.

Scheduling self-care / system maintenance - “If you don’t schedule time for maintenance, your equipment will schedule it for you.”

Share a sanctuary space visualization.

#### Working Backward

Working backward from the visions the Journeyer received, or how they wish to feel, can help create an actionable roadmap for integration, especially when you have a limited time frame in which to stabilize mood or encourage positive changes.

Rather than dwelling on problems, construct solutions.

Have the Journeyer describe what their life will be like when the issues that brought them into treatment are resolved and then work backward to discover, call upon, or create the necessary resources and routines to accomplish this goal within the active context of the Journeyer’s life experiences.

#### Motivating Momentum

Acknowledging small wins and changes can help provide daily dopamine boosts to keep the momentum of motivation fueled up.

Making a checklist for simple daily self-care habits and crossing it off as each item is completed also provides a dopamine boost.

Gold stars on a calendar seen by others for each day of healthy sustainable exercise can also be helpful for those who respond well to praise or “not breaking the streak.”

If your Journeyer misses a day, it is important to impress upon them to re-engage the following day so that “not doing the new habit” does not become a pattern.

Compare the motivation gained from accomplishing accessible daily goals with the energy needed to roll a very heavy boulder up a very tall hill – the discouragement equation is weighed against you continuing such a challenging task without the boosts to fill your motivation tank.

Keep motivation momentum through smaller easily accomplished tasks and recognize and reward yourself for achieving them.

#### Create Distance from the Situation

Ask what coping mechanisms have been helpful in the past.

Ask what advice they would give a friend or a loved one in the same situation.

For those with a strong external locus of motivation, tie motivation into care for loved ones.

“Many survivors report that they are motivated to overcome the effects of PTSD primarily in order to be available to their loved ones; they find it helpful to focus on the people who are most important to them.

Others report that praying, mindfulness meditation, and focusing on simple present-centered activities help them endure and ultimately shift their focus away from anxiety, flashbacks, nightmares, and depression that often characterizes PTSD.”  [[48]](#footnote-48)

#### Self-Advice // Switching Roles

Flip your roles - Spaceholder playing the role of Journeyer in the sticky situation, Journeyer taking on the role of Spaceholding and aiding the “Journeyer” to find empathy and compassion for their situation, and perhaps provide some creative solutionary thinking.

#### Practicing Challenging Conversations

If the Journeyer has a pattern of fawning or nervousness in speaking their needs or truth to someone in their life, the Spaceholder can hold the place of the difficult person and the Journeyer can practice expressing what may be challenging for them.

The mind does not distinguish strongly between “play acting,” rehearsing, or visualization and the “actual” event.

Thus, this low stakes “rehearsal” can break through the Journeyer’s avoidance or frozen fear of a particular situation. They can use this type of low charge experiential exposure therapy as a softening practice to compassionately thaw a freeze response and gain confidence in communication.

Make sure that your Journeyer is well within their window of tolerance and resourced in returning to their sanctuary space if they need to.

#### Therapeutic Techniques

##### Loving Eye Gazing

Eye gazing can be a profound practice and is a lower risk intervention than touch.

However, it is worth mentioning that in certain cultures and neurotypes {such as those who are autistic} eye contact can feel overwhelming or communicate aggression.

If you do choose to hold eye contact, gaze with a relaxed loving diffuse focus rather than a penetrative evaluative eye.

Imagine that you are looking at a newborn and you are wishing them well, awakening adoration.

***Advanced therapeutic techniques***

The following techniques, introduced in a cursory way, are best used by professionals trained in these modalities but are shared here to give a sense of the healing landscape that exists for those who wish to find out more about a new frame that may feel resonant.

##### Roleplay- Family Constellations

In this group container, one Journeyer is at the center of the constellation with friends / group members role-playing family members and describing how they feel in situations that reveal underlying emotions and hidden dynamics.

This modality can be helpful for surfacing intergenerational patterns and how they are transmitted.

##### Internal family systems - Comedy Alchemy: Curative Clowning

In the jester’s path to peace, those around you are invited to join in the belly laughs of a humorous harvest from previously heavy harm – Comedy Alchemy.

In aiding Journeyers in integrating inner harmony, health, and values alignment, I often utilize an internal family systems // parts work frame to bring out the characters that are “driving the bus” of your life.

If you find that your bus driver is steering you somewhere suspect, try to turn them into a vivid character, find out the wisdom they are trying to convey {often something they are protecting you from, or a misguided attempt to get a need met}, and find a more prosocial way to give them the support or acknowledgment they crave.

Here is a technique I invented employing this frame that has helped many Journeyers understand who is driving their bus and regain control of the wheel in a fun way:

##### Trauma drama:

What if your parts // character{s} were in a Broadway production // reality TV show // soap opera?

On stage, you must amplify all aspects of your expression – so the audience in the back can see + sense your character.

How can you turn up the dial to 11 – ridiculously out of proportion?

Act as if you are on a reality TV show and the producers are pushing for higher drama for ratings. Caricature your character – leaning into lampooning.

This expansion allows the nuances of the issue to inflate, and this increase in size allows the details of your character and context to be fully seen, felt, and expressed.

When the previously entangled energy is egregiously expanded, you gain the neutrality of spacious distance through not personally over-identifying with this overblown character.

**Describe this part**:

* What is their name?
* What are they wearing?
* What are their catchphrases {to know when it is their voice speaking to you}?
* How can you tell when they are driving your bus?

##### Somatic Experiencing

Somatic Experiencing, drawn from Peter Levine’s body of work, involves procedurally successfully discharging the “frozen” flight / flight response from a past trauma response that was “locked down” due to a lack of resources at the moment.

For a traumatized body to be able to physiologically feel safe enough to access the trauma to the depth needed to successfully discharge it, they need the presence of a supportive nervous system that they trust.

We can only go so deep alone.

This need for a supportive nervous system nearby was evolutionarily preserved due to the vulnerability of re-entering trauma memories, for example, those nervous systems that were able to go into trauma processing solo that lost awareness of their external surroundings as they did so, may have been vulnerable to being consumed by lions or other apex predators while they were in that inwardly attuned state.

Animals are excellent models to observe in order to witness nervous system discharge techniques in vivo. Notice what a pet dog or cat does when it is reprimanded – they will shake.

Peter Levine’s work often references watching the behavior of deer after they were chased by a wolf, for when the herd reaches safety {perhaps with one of their slower or sick friends ending up in the wolf’s jaws} they would shake and tremor for a few minutes, discharging the trauma of the experience they survived.

Peter Levine noted that through this instinctual discharge behavior, animals do not experience the trauma- and stress- based diseases of humanimals who are not taught these discharge techniques or taught to suppress them {e.g. sit still and stop rocking, stop sucking your thumb, toughen up, stop crying, etc.}.

Guiding your Journeyer in re-experiencing and re-writing a tale of trauma through what had previously been an unsuccessful “fight or flight” into a successful physical path requires high skills in trauma-informed care and a well-appointed setting where the potentially explosive movements can find a soft landing.

You should never force someone into reliving a trauma response, and ideally it is organically brought up by the Journeyer’s body.

I mention this technique and frame here because I have had many experiences of the Journeyer naturally finding themselves involuntarily shaking without knowing why, often having it be slightly frightening or embarrassing, and being able to explain and encourage this motion has aided them in release and creating spaciousness.

Logistically, it is also worth checking their body temperature in that they may be simply cold, and their body is trying to warm itself.

In situations in which there is a likelihood that hands-on trauma release work may occur, it is ideally done with a somatic therapist and/ or someone trained in somatic experiencing.

##### Music: The Hidden Therapist

Music has been described as the “hidden therapist,” or in contact improv as another “dance partner,” and can powerfully influence a psychedelic journey.

Specifically, music with words can shift someone’s mind towards more mentation over sensation.

Sound is a very primal sense and specific songs, or music can evoke a particular time period or trigger trauma memories.

***Inquire with your Journeyer as to their preferences around:***

* Music without words?
* Music without words in English?
* Music with high-pitched or low-pitched singers {bass, tenor, alto, soprano}?
* Music from a certain region of the world?
* Any specific genres or songs to avoid that are charged {e.g. Reminds you of a past partner}?

# Psychedelic Spaceholding Ethics Principals

## Know Thyself:

As within, so without. Consider the following questions and review them with peers, teachers, and mentors to gain more thorough understandings:

*How can you cultivate a safe + supportive clear channel helping the Journeyer realize they are the source of their healing?*

*What are you in service to?*

*Why are you doing this work?*

### Purpose / Motive Excavation:

* *Is there no one else available for this work {e.g. are you a Good Samaritan}?*
* *What is your relationship with the Journeyer?*
* *Who do you tend to spacehold for {e.g. friends, family members, people you are attracted to?}*
* *Do you have an interest in this area of study? Curiosity?*
* *Is doing this work part of your identity?*
* *Your personal narrative?*
* *A role you identify with?*
* *Titles you call yourself?*
* *A calling?*
* *What parts of you are drawn towards this work?*
* *How is this work personally beneficial {practicing your skills, helping someone in need}?*
* *How is this work self-serving for you {finances, social standing, money, power}?*
* *How is this work symbiotic and reciprocal?*
* *Under what conditions would you not / do this work {e.g. if it was free, if it was for someone you were not attracted to, if you did not want an ongoing relationship to the Journeyer, if there was a high probability of getting caught with legal implications}?*
* *Do you feel called to assist others along spiritual paths?*
* *What roles / relationships do you commonly find yourself in (e.g. helper, fixer, savior, martyr}?*
* *What centering, grounding, focusing, meditation practices do you have?*
* *What self-development work have you done?*
* *What practices adjacent/relevant to Spaceholding are you experienced in?*
* *Do you facilitate additional spiritual practices for others?*
* *Are you familiar with the terrain likely to be explored?*
* *What is your psychedelic history?*
* *How often do you journey?*
* *Why do you journey?*
* *What patterns do you find in your journeying?*
* *Are you familiar with the ally / medicine?*
* *Have you experienced ego death?*
* *How do you integrate your experiences?*
* *How do you work with challenging experiences?*

### Shadow Excavation

* *What parts of yourself do you have trouble accepting?*
* *What are your shadows?*
* *What blind spots have been brought up to you before {if none come to mind, ask several people who know you closely}?*
* *What is your trauma history?*
* *How do you know you have trauma?*

### Triggers

* *What are your triggers, however slight {if you say none, this is a clear call for self-knowledge work}?*
* *What causes strong emotion in you?*
* *When do you lose your center?*
* *Where are your growth edges?*
* *What blocks are you still working through {e.g. I am a perfectionist and never feel like I have done enough for the Journeyer}?*
* *What is your attachment style?*
* *How do you regulate yourself?*

### Integrity

* *How do your belief systems, values, needs, and limitations affect your work?*
* *How will you maintain impeccable ethics when your Journeyer is especially open to suggestion, manipulation, and exploitation?*
* *How will you protect the Journeyer and their vulnerability?*
* *How do you know, respect, and empower your Journeyer’s values?*

### Non-Judgement

* *How can you let go of expectations about what should or should not be happening?*
* *How can you let go of concerns and judgements?*
* *How can you let go of wanting to direct / control the experience in a particular way?*
* *How can you release judgment of the Journeyer’s experience?*
* *How can you cultivate tolerance, non-judgement, compassion, unconditional love, and positive regard?*

### Humility

The Journeyer is your teacher, be humble in not knowing.

The healing of the Journey comes from the spaceholding and integration. It is best to cultivate gratitude in the privilege of being merely a sacred witness, shining the light of your awareness on the veils obstructing the radiance of the Journeyer’s own natural healing process to unfold.

* *How can you become an empty vessel for innate healing power to come through?*
* *How can you surrender your ego?*
* *Who can you call on if you do not know what to do?*
* *Who are your mentors, and why?*
* *How do you honor what got you to this point?*
* *How are you ending historical / ancestral cycles of unexamined trauma?*
* *Who do you mentor, and why?*
* *Are you actively promoting your Spaceholding services?*
* *How and why? {the Counsel on Spiritual Practices advises that it is best to grow through attraction rather than active promotion}*
* *Do you transparently share the areas of growth you are still working on?*
* *Do you share your weaknesses?*
* *Who do you not work with?*
* *Who do you refer others to?*
* *What other sources of knowledge do you refer Journeyers to?*
* *How can you show up having examined yourself?*
* *What are your ego-checking practices?*

The journey of self-discovery has no destination beyond deepening. Enjoy the journey. Find pleasure in the process.

* *How are you continuing to educate yourself?*
* *How are you cultivating your skills?*

## Accessibility Activism: No One is Fully Free Until We All Are Free

Pay it forward: How can you contribute to compassionate culture?

Have energy exchange options outside of capitalism: offer your work by donation, sliding scale, NOTAFLOF {no one turned away for lack of funds}, payment plans, work trade, or with scholarship spaces.

Accommodate all when possible, especially those from marginalized & oppressed groups {reach out to these groups proactively with free spaces and opportunities}.

Translate your craft into globally available training to expand access to skill development.

* *Do you charge for your work?*
* *With what mindset {extractive, profit motive, generative, reinvesting in your own skill development}?*
* *Is your requested compensation not for profit {only covering the resources you have spent for training}?*
* *Are your rates based on what others charge?*
* *Are your rates in proportion to your experience?*
* *Can everyone who could benefit from your work access it?*
* *Can you have aspects of your work be free, especially those that are needed for the healthy success of the movement?*

## Disclosure / Transparency:

Uncloak unconsciousness: unpack power dynamics, privilege, fantasy, & fear.

### Disclosure

Be honest and educate the Journeyer regarding both the risks and rewards of this work.

Offer a variety of risk profiles for the Journeyer to find their comfort level {e.g. risks based on a variety of dosages}.

This de facto requires the Spaceholder to be thoroughly aware of the risks as well as how to be proactive in minimizing them {e.g. via thorough screening to identify adverse reactions with other medications / supplements, etc.}.

There is a balance here between seeding a ‘Nocebo’ effect {implanting, and thus potentiating possibilities that would not have existed, or lending them strength} and doing due diligence / creating a situation for informed consent {not just focusing on the positives to the exclusion of the negatives, ala “psychedelics as panacea”}.

One method to not inflate the risks while also covering necessary pre-emptive consent & safety conversations is to discuss what the Journeyer wants you to do in case of an adverse reactions {such as violence, erratic dangerous behavior, etc., – questions to plan for this are covered more thoroughly under the “[Boundaries](#_2et92p0)” section}.

### Deconstruct “Expert” Power Dynamics

Are you Spaceholding for a psychedelically naïve Journeyer?

Willingly deconstruct the “expert” power dynamic present, disperse your aura of unquestionable authority by stepping down from the pedestal and explaining what you may do in the session and why.

Encourage the Journeyer to ask questions and answer with patience.

Explain:

* why you are using each specific technique
* its purpose
* the legacy / tradition it comes from {e.g. cognitive behavioral therapy, Siberian mushroom shamanism}
* what outcome you desire from it
* your experiences with it
* how it is informed by theory or other ways of knowing

As a Spaceholder, acknowledge that you are human – at every possible opportunity be vulnerable and admit you are not a guru or saint, and invite your Journeyer to point out your human flaws, places for potential power abuse or harm, or times when you are being hypocritical or not following your own moral code.

Invite your Journeyer to share the story they are telling in their mind about you and correct any misinterpretations in the moment {before they become momentous mountains of mounting misconceptions}.

### Dismantle Power Dynamics

How can you step into greater responsibility?

What rules, safeguards, or oversight can you put in place to render abuse impossible or unlikely?

Examine the shadow motivations you may hold regarding gratifying personal sexual and power interests.

Explicitly share and analyze the power dynamics / ulterior motives present between Journeyer and Spaceholder.

Name potential ulterior motives and how they will be countered.

Hypothetically unpack all the following possibilities: sexual attraction, desire for deeper / extended relationship, desire to be a part of the other’s social set.

**Some potential solutions include:** following the principles of therapy and not engaging in a sexual relationship for at least two years after the conclusion of the therapeutic container.

If this feels unrealistic to your situation, it is recommended to wait at least a month, and during that time consult the broader community to ensure that authentic consent {separate from the distortions of power dynamics} is present and that such involvement would be of the best interest for both parties.

### Privilege

Are you engaged in personal self-awareness work around your privilege {hint: if you can’t name any privileges you hold, that is a sign to educate yourself}?

What power dynamics are at play between you and the Journeyer?

Ask your Journeyer what you should study to support them better {e.g. identity intersectionality, trauma legacy of institutionalized racism, childhood abuse, anxious/avoidant attachment style, LGBTQ+ discrimination, invisible disabilities, passing, neurodiversity…}

### Cross-Cultural Interactions

Consider the cultural backgrounds of Journeyer and Spaceholder and how they may interact.

Inquire into:

* traditional gender relational norms
* stereotypes
* assumptions around touch
* differences between local / global moral codes
* cross-cultural interactions
* healer-patient / leader-follower role assumptions
* misconceptions of the ‘other’
* exalted perceptions of healers
* sexual availability
* details of physical exercises / contact
* claims of possessing healing powers {especially around sexual trauma}
* consent where there are power imbalances
* cultural differences
* local behavioral norms
* culturally appropriate behavior / common misunderstandings
* misogynistic tendencies {such as viewing women as passive}
* gestures that can be misconstrued as sexual interest
* being aware of potential misinterpretations of cultural codes
* anything that may result in cultural misunderstanding

### Transparency

Never lie to the Journeyer, as this can irretrievably erode trust and rapport {even “white lies” create a disingenuous energy}.

If the Journeyer is hallucinating and referencing things that are not present in objective reality {e.g. flying blue elephants}, instead of claiming that you see them and corroborating in the reality distortion, instead, try asking about what the vision is doing, what it feels like to watch it, what meanings seeing this may hold for the Journeyer, any memories it is connected to, etc.

In this way you can be interested in the why behind the experience without making any declarations as to its objective “existence” or not.

What really matters is not the “objective truth” of the existence of the vision but rather what it means to the Journeyer and why such visualizations are coming up.

This dynamic skill reveals the delicate balance between being a curious and supportive presence while also being a reliable reality anchor. The dynamic of a guardian playing imaginative games with a child can be a helpful frame.

As a Spaceholder, it is good to take a mindset of exploring the Journeyer’s mind as if it were a foreign country and asking questions in compassionate curiosity.

## Consent: Contemplate Container + Boundaries Beforehand

If the container is loose, ambiguity can create space for misunderstanding + abuse.

Be worthy of trust. Do no harm.

Act as though you are babysitting the Journeyer’s inner child.

Agree upon limits to the behavior of Journeyers and Spaceholders beforehand.

Often used basics include:

* the Journeyer agreeing not to act violently
* or sexual urges on the Spaceholder’s person or property
* that if the Spaceholder says ‘Stop’ that the Journeyer will immediately obey

A few recommended rules in depth:

1. **No sexuality in the session** {if the Journeyer knows that they want to specifically work on their sexuality in a hands-on manner, seek a high-consent professional with extensive training}: without shaming, gracefully defer any sexual advances made by the Journeyer towards the Spaceholder back into a focus on the Journeyer’s self-discovery and identifying those parts / characteristics of themselves that they find attractive in the Spaceholder.
2. **No violence towards self or others** {create a plan for if the Journeyer becomes violent: at what point will they be restrained? In what circumstances will emergency services be called?}
3. **No damage to property**, use of designated facilities when needing to use the restroom
4. **If the Spaceholder says “Stop” – the Journeyer is to immediately stop** what they are doing and listen for instructions from the Spaceholder that are essential to keeping them safe {a sort of psychedelic safeword to stop the scene immediately}.
5. **Confidentiality**: unless agreed upon otherwise, names and identifying characteristics are not to be shared in conversations between those not originally present. { Get clear on what the Journeyer is open to having shared after the experience has concluded and integration has begun. Many Journeyers understand the value of having the Spaceholder being able to share the general learnings from the session with the community if they can ensure the Journeyer cannot specifically be identified.}

Write out the following before the session:

* *What are the Spaceholder’s boundaries for this session?*
* *What are the Journeyer’s boundaries?*
* *Where are the edges of the Spaceholder’s container {e.g. I will not tolerate violence being done against me or others}?*

Distinguish between boundaries and preferences.

Have the Journeyer write out their preferences as well:

* *How would they like to be related to?*
* *How do they feel about touch?*
* *What kinds of touch feel supportive to them?*

{if you encounter someone “In the Wild” and cannot set up this information ahead of time, be a Psychedelic Good Samaritan, check in and see if they need help. Treat them like a lost pet or child, help them try to find their pack / friends who know their history and how to care for them best}.

*How can you act from unconditional love and acceptance without being permissive of boundary breaking?*

### Contingencies

Preemptive preparation dissipates unplanned for / panic-caused problems:

Discuss the following with the Journeyer:

* *If the Journeyer seems to be having a hard time, what comforts them?*
* *What if the Journeyer states they want to harm themselves?*
* *What if the Journeyer actively begins to harm themselves?*
* *Will the Spaceholder restrain them?*
* *How will the Spaceholder restrain them {what tools will be used, perhaps doing a dry run of how the Spaceholder would pin the Journeyer down without hurting the Journeyer and making sure the Spaceholder is also safe, e.g. cannot be bit. Restraining someone is a complex topic, and should only be done as a last resort and discussed extensively beforehand}?*

Have an agreement in place that if the Spaceholder says “Stop” that the Journeyer will immediately halt action and listen for further instruction because the Spaceholder is concerned for their safety.

* *If the Journeyer makes sexual advances what will the Spaceholder do {how will this be dealt with in a way that does not shame the Journeyer but also deescalates the physicality}?*
* *What if the Journeyer’s advances become aggressive?*
* *Who are the Journeyer’s emergency contacts?*
* *Have these emergency contacts been notified that they may be called, when they may be called, and the circumstances of that call {this may not be feasible, but whenever possible is recommended}?*
* *Who are the Spaceholder’s emergency contacts?*
* *Are there physically close neighbors to the session space that can be called in if restraint needs to occur?*
* *Under what circumstances will Emergency Services {medics} be called?*
* *Under what conditions {if any} will the police be called?*
* *Where is the nearest hospital?*

In case of emergency, it is recommended to have an easy to read “flowchart” with detailed parameters around which actions are taken when. {additional related considerations such as Journeyer allergies covered in the “[Screening](#_zek121yr5jz0)” section}

### Preemptive Consent

Get preemptive consent for the techniques you are likely to use in the session, specifically for touch or escalations of intimacy, such as eye gazing, which can affect the power dynamics present.

This can dovetail well with asking extensively about preferences.

An in-depth guide to help with this process can be found in “[Spaceholding Offerings Menu](#_70efrq456u3a).”

When in doubt, evaluate what is happening from a witness perspective who wishes the best for the Journeyer with the minimum amount of interference.

#### Responsibility / Relationship / Role:

Delineate desired roles, align expectations & capabilities.

What type of Spaceholding style is requested by the Journeyer?

What roles & responsibilities does your Journeyer want you to step into?

Discuss openly and candidly which of the following flavor{s} of Spaceholding match the desires of the Journeyer:

* **passive body watcher** {only there for reassurance if Journeyer becomes fearful of their physical death / wellbeing, or if Spaceholder needs to intervene to prevent Journeyer from doing harm to themselves}
* **reality anchor/ timekeeper** {holds consensus reality, is available for questions such as what the time is, how long has it been since the experience began, about how much longer will it last, etc.}
* **documenter** {takes notes on verbalized insights with timestamps, monitors recording devices such as audio/video if/when used}
* **tripsitter / babysitter** {range of levels of interactions, but presence mostly simply to keep Journeyer safe and out of harm’s way}
* **guide** {more hands on, anywhere from gently reminding the Journeyer of their intentions/what they wanted to explore, all the way to steering Journeyer specifically into a particular experience, such as ego death}
* **shaman** {title used when working in a particular medicine tradition, can involve soul retrieval or intense spiritual processes}

Decide the types of actions and level of interactivity that may facilitate the experience that the Journeyer is seeking, and when the level of interaction can be escalated by the Spaceholder in their best judgment.

For example, if the Journeyer is beginning to go into a depressive state and they are wishing for a “benefit enhancement” Guide, the Spaceholder would consider offering an intervention. This is covered more extensively in the [Spaceholding Offerings Menu](#_Menu_of_Spaceholding).

#### Relationship:

If the Spaceholder has a pre-existing relationship with the Journeyer, have the Journeyer decide if they would like the Spaceholder to take on a different type of relating style other than the pre-existing “friend,” “colleague,” “workmate,” etc.

Which of the following does the Journeyer gravitate towards :

* fellow Inner child {reminding Journeyer of the playful lighthearted perspective of life}
* Adult/Parental {treating the Journeyer as though they are a child the Spaceholder is caring for, and guiding along the development of}
* Grandparent {a more distanced perspective then a Parent, with the Spaceholder’s best interests in mind, but from a wiser un-enmeshed perspective}
* guardian angel
* ‘psychedelic state expert’
* clown/jokester, trickster, etc.

Remind the Journeyer that they can ask for the Spaceholder to shift from being in one relating style to another, and vice versa {e.g. the Journeyer could ask “can I ask you this question as my grandparent?”; the Spaceholder can ask “could I answer this question from a guardian angel’s perspective?”}.

It is recommended to narrate your role changes or {even better} change an article of clothing or aspect of your presentation to make the role distinctions clear.

A physical adjustment {such as changing the posture or voice} can demarcate switching out of “Spaceholder” mode into playful/friend mode, as well as serving as a somatic sigil or to pull upon the wisdom of that role after the journey such that the Journeyer can take on that character.

It can be helpful to have objects that can be worn to indicate that a personality or role is being taken on {e.g. When I have this hat on, I represent your mother; when I have this feather in my hair, I represent your guardian angel}. These can then serve as Incarnate Integration ARTifacts for the Journeyer to enter the perspective of that role.

Thus, these indicator objects allow for clear differentiation between roles as well as serving a secondary role as post-processing materials aiding in integration.

This role / character format can dovetail well with Internal Family Systems or “parts” work.

If the Journeyer knows that they want to explore their relationship with another person, the Spaceholder can be asked to “role play” the other person.

Pre-planning this is helpful, so the Spaceholder can do research into the interpersonal dynamic, or otherwise ‘get into character’.

This type of “role play” can help the Journeyer defuse tense situations or create catharsis in being witnessed in expressing silenced truths {either due to fear of reaction, retaliation, complex relationship dynamics, or perhaps the passing of the individual with whom there is tension}.

Additionally, this “role play” can branch out and involve archetypes, mythological figures, sacred beings, elements, mentors, or personality dimensions that have been under-explored {e.g. such as confidence, humor, bravery}.

Remember that the Journeyer can also step into these roles when helpful to gain perspective, strength, or find forgiveness.

As a concrete example, if you were in the “grandparent” role, and the Journeyer was seeking to explore their childhood patterns, imagine yourself taking care of your grandchild and think about having the same boundaries and level of responsibility.

Consider that you are in charge of: feeding them, keeping them clean, not letting them hurt themselves, asking them if they are thirsty/otherwise taking care of their body, tuning into their non-verbal communication, having a food plan / bedtime plan, not acting sexually towards them, and redirecting their sexual energy {to name a few common responsibilities}.

Consider that there may be more adult discussions and inquiries that come up that may be better suited for putting on the hat of another role, creating a blended role, or having a secondary role that can be “switched into”.

Specifically discuss how “hands on” the Journeyer wants the Spaceholder to be.

For example, the Journeyer may desire a “[benefit enhancement](#_uziozid7mv4b)” experience in which the Spaceholder is encouraged to actively participate in creating a better experience for the Journeyer {e.g. “calling out” any negative voices of the Journeyer beating themselves up with a harsh inner critic}.

A benefit enhancement role can also involve sharing “trip toys / treats,” such as LED toys, when the sun sets {and when shadowy thoughts or doubts may creep in}, or offering surprise delicious food at a moment when the Journeyer is in a negative thought loop, to introduce a new stimulus, and allow them to become embodied, to exit their negative loop.

This type of “benefit enhancement” is distinct from the more widespread “hands off” models of risk reduction or the neutrality of “sitting not guiding,” so get clear on if this is the type of experience and interaction style the Journeyer desires.

You may choose to consider an adaptive option in which the default for the Spaceholder is simply sitting, but that if the Spaceholder senses that the Journeyer is having a hard time the Spaceholder can intervene with proactive offerings to prevent unnecessary suffering via active “benefit maximization” invitations / suggestions {for example by encouraging a broader perspective, framing the situation from a wider lens, or offering a centering embodiment practice}.

If you collectively decide on a more passive/hands off approach {for example, in which the Spaceholder is in a neighboring room}, decide how frequently the Spaceholder will do routine wellness checks, peeking their head into the room to monitor breathing and agitation levels.

Additionally, it is important to discuss the conditions under which the Spaceholder will go into the Journeyer’s room “off schedule,” for example if they hear anguished cries or thrashing about.

#### Rapport:

It is recommended to have significant trust-building interactions and conversations between Journeyer and Spaceholder prior to the altered state experience, ideally in the same location that the session will take place.

This time is invaluable for understanding the history of the Journeyer, how they express emotion, the content that is likely to come up during the altered state, their common coping mechanisms, and how they prefer to be interacted with {among many other idiosyncrasies}.

In altered states, a common challenge is paranoia, which can stem from the seed of a lack of trust between Journeyer and Spaceholder.

Anything that can be done to externally express the positive intentions of the Spaceholder towards the Journeyer beforehand is recommended to dispel this fear via demonstrated action, and often the simple matter of spending time together in a therapeutic supportive context builds rapport naturally and symbiotically to this end.

#### Session space:

Spending time in the session space before the altered state experience occurs allows all participants to acclimate and adjust their plans to locational factors.

Presence in the space at baseline allows all to track:

* the way that light and heat move through the space,
* how much sound travels {being considerate of neighbors},
* any ambient sound {being able to expect what is going on around the space at certain times of the day},
* what amenities are available,
* as well as noting what materials may need to be brought in to supplement the space {e.g. hot water thermos if there is no access to a kettle, stovetop, hot plate, or outlet to boil water on site for tea}.

There are many possible considerations for creating an ideal “setting,” but ultimately it is a place that the Journeyer feels safe and supported, and in which the Spaceholder feels well equipped to deal with any possibilities that may occur.

Basics include:

* warmth/cooling {such as ample blankets}
* a cushioned space to lie down and roll around
* a space to sleep
* a bathroom
* a kitchen
* a way to play music

For supplemental reading on this topic please see the [Guide Preparatory Flow](#_4pev5nr430zf) section and [Festival Frontline Support Kit.](#_tvnrqchp3pul)

#### Neighbors to the session space:

If you have neighbors to the space, it is a great idea to do a collaborative sound check beforehand with your neighbors so you know approximately how loud you can be without disturbing anyone {this is excellent information to have for a variety of reasons beyond just the session, and gives you a great opportunity to build bridges with your neighbors in a way that demonstrates your conscientiousness of your impact on them and your shared spaces!}.

If at all possible, it is a big bonus to have a fully transparent relationship to your neighbors {or as close to transparent as you think they would be able to receive} so that you can call upon them in case of emergency or restraint needs to occur {e.g. if Journeyer is a danger to self or others} that they can be rallied to help {and ideally trained beforehand!}. Although this is not always possible, consider the value of making inroads towards this goal over time.

As a baseline, it is good to inform your sonic neighbors of what will be going on, even if it is in a form filtered / translated into a frame of reference they can grok.

For example :

“We are going to be doing some deep therapeutic processing work on Saturday, so if you hear any strange noises, don’t worry, my therapeutic ally / friend [Spaceholder name] who is well trained in [healing modalities] will be supporting me.

If the sound is making it challenging for you to do your work here is [Spaceholder’s] phone number, which you can send a text to, and we will reduce the volume.

Could I also give [Spaceholder] your number in case they need to check in about whether you can hear us?”.

#### Responsibility:

Beyond the responsibilities already mentioned above, the Spaceholder is ultimately the “adult” responsible for the Journeyer’s wellbeing both in the session and afterwards.

This means that the Spaceholder has extensive duties to:

* fully evaluate the set/setting/dose
* to deflect external intrusion during the session
* to support the integration process afterward

Spaceholding is a high responsibility activity, commensurate with the deep trusting vulnerability of the Journeyer exposing their unfiltered psyche to the Spaceholder.

Spaceholders, hold yourself to an extremely high standard of self-examination and sensitivity towards the Journeyer, as you do not want to accidentally commit an ethical violation.

Acknowledge the deep influence that you as a Spaceholder have on the Journeyer, etched deep into their subconscious, and the responsibility corresponding with this profound influence.

Neither participant may be aware of it at the time, but the Spaceholder’s compassionate presence could be interrupting a cycle of trauma or rewriting long seated relational or attachment patterns in the Journeyer.

The Spaceholder has a sacred opportunity to provide an experiential model that breaks any chains of trauma for the Journeyer and everyone they subsequently interact with.

Spaceholders, consider taking trainings that help you be more trauma-informed, as the depths of trauma tend to come up in altered states to be brought to light and cleared of their charge {without basic knowledge in this area you may unintentionally do damage to the Journeyer’s psychic trust structures}.

Additionally, the altered state experience may catalyze C/PTSD resurfacing in the Journeyer, and it is worth explicitly noting that as a Spaceholder you are responsible for leading the movement to return the Journeyer into functionality.

Part of screening process is making sure that the Journeyer has a community to help them “rehabilitate” and integrate the insights of the experience.

As the Spaceholder it is your duty to collect this contact information ahead of time from the Journeyer’s support webs to take the helm in leading this integration, especially in cases of latent activated trauma.

**Impact, not just intention, matters.**

Intention + Integration: Sustaining Support

The care before and after the experience is where the life changing work takes root via integrating insights.

#### Intention / Intake:

Encourage excavation of why the Journeyer is pursuing an altered state experience.

*What do they hope to learn? What are they seeking insight around?*

**Intention setting** also serves as an opportunity to ask for boundaries through positive statements, such as “I am seeking an uplifting, joyful experience about how to tune into my unique life’s purpose” {e.g. if you are certain that you do not want a dark gut-wrenching drag through the underworld of your psyche, specificity in asking the ally / medicine / compound what you are seeking and the emotions that you would prefer to go along with it is a recommended practice – of course ultimately it is not up to you, but intentions setting helps create guiding guardrails}.

Initial intention setting as a part of screening allows for an in-depth intake process in which the presence of a good match between the intents/desires of the Journeyer and the capabilities of the Spaceholder can be determined.

For example, if the Journeyer knows that they want to focus on releasing the somatic “collapse” pattern of their traumatic sexual assault, and the Spaceholder does not have training or experience in this, it is best that the Journeyer is referred out to a Spaceholder with the knowledge in the requisite modalities to support such an intention / experience well.

{an [extensive list of questions](#_wfczra6ld5ug) to help guide the [Intention setting](#_50ntbe31qauz) can be found in the Appendix}.

#### Pre-care / Median Care / Aftercare:

If intention setting is pre-care, and integration is aftercare, there is also median care, which is checking in throughout the altered state experience itself.

#### Integration:

Make sure that Spaceholder and Journeyer are on the same page about the types and extent of relating the Spaceholder will be available for afterwards.

Is this a mind-blowing psychological one-night stand or an ongoing integration relationship?

Best practices in the field do encourage that the Spaceholder makes themselves available for the Journeyer’s integration process by scheduling several follow up meetings / calls after the altered state experience.

Check-ins the day after, 3 days after, a week after, and 1 month after for at least an half hour is a good minimum amount of integration support {more support directly after the experience, such as an hour long call in the days immediately subsequent to the experience, is an endorsed high-benefit energy and time investment}.

Integration is a lifelong process, see section on [Integration](#_ww4jyay7mbfv).

#### Competency / Screening:

##### Competency:

Practice only to your level of skill, knowledge, education / training, and personal experience with the ally / medicine / compound of choice.

Refer the Journeyer to other Spaceholders if the expertise needed is above your training level {e.g. If there is significant trauma present in the Journeyer’s history and you are not trauma informed; if the Journeyer is seeking a high dose ego death experience and you have not had this personal experience}.

Referring the Journeyer to another practitioner does not reflect poorly on you as a Spaceholder – to the contrary – this conscientious behavior reflects that you have the wellness of the Journeyer at the forefront.

Referring your Journeyer to a more experienced practitioner, with the appropriate skillset for the Journeyer’s intentions, reflects that you are most interested in finding someone who can provide the deepest and most aligned level of care for the Journeyer above any personal interests or gains.

Journeyers that may be more highly impacted {and thus need additional levels of care / training in the Spaceholder} include those with a history of: CPTSD, sexual assault, emotional incest {emotional incest can also be called covert incest or adultification and occurs when an adult or caregiver relies on a child for emotional needs that another adult would typically provide}, trauma, intersectional identities, a history of debilitating depression, and abusive childhoods {to name but a very slight few of the many}.

It is also possible that the Journeyer may not even know that they have a history of trauma {especially if the experiences occurred in childhood, they may have been successfully suppressed completely from conscious awareness} so becoming trauma-informed is strongly recommended even if you do not intend to focus on working with heavy trauma.

##### Consider your capacity:

Spaceholder, if you are feeling burned out, refer the Journeyer to another Spaceholder you trust.

Familiarize yourself with altered states so that you intimately know what you are going to ask of someone else {your Journeyer}.

Ideally, the Spaceholder has familiarity with the specific “batch” of medicine / compound to be used, at the dose proposed.

It is recommended for both the Journeyer and Spaceholder to study / have familiarity with:

* first aid {especially how to check vital signs such as taking a pulse}
* human psychology
* archetypes
* altered states of consciousness
* traditional talk therapy skills
* risk reduction skills

Consider your strengths and specialties of study and how this knowledge can be applied to altered state experiences.

A particularly useful form to study for spaceholding skill cultivation is counseling psychology / therapeutic techniques – especially focusing on common interpersonal factors that emerge in therapeutic relationship settings such as transference and counter transference.

To the Journeyer: underground spaceholding is not therapy. Therapy has certification and accountability regulatory bodies in place for rigorous boundaries, ethics, quality control, and oversight {meaning, authorities to report issues to, with consequences of having one’s therapeutic license and ability to practice revoked if proven negligent}.

Without these regulatory bodies there is room for abuse.

Having an impeccably detailed container and boundaries beforehand helps to mitigate risk, but until there is a trusted counsel to ensure integrity, vet your Spaceholder thoroughly.

Ask the Spaceholder lots of questions, ask for references, and note their levels of self-awareness, training, expertise, and if they have accountability structures such as mentors in place.

##### Screening:

***Psychedelics are not for everyone all the time.***

It is the job of the Spaceholder to make sure there is a perfect match between set, setting, dose, and the experience levels of the Journeyer and themselves.

The most essential Screening questions to ask are:

* Does the Journeyer have a personal or family history of neuro-atypical conditions, especially personality / mood disorders {e.g. schizophrenia, bipolar disorder, borderline personality disorder, etc.}?
* How does the Journeyer feel about their life at this time {e.g. are they depressed, hopeless, neutral, optimistic}? If they are in a rough spot psychologically it is encouraged that they postpone their journey until they feel as though they could cope with the emotions, or they should be referred to work with someone experienced or educated in those states, as these mindsets increase the risk / likelihood of an adverse reaction / challenging experience.
* Is the Journeyer taking any mediations or supplements {extensively research any contraindications for the allies / medicines / compounds you are considering, e.g. especially MAOI inhibitors + ayahuasca as the combination could cause Serotonin Syndrome}?
* Does the Journeyer have social support structures / community who can help with the integration process?
* Is the Journeyer allergic to anything?
* What are the Journeyer’s triggers?
* What is the trauma background of the Journeyer {and are they seeking to work on that material in this session}?

For an extensive intake/screening questionnaire dossier, please reference the [Screening](#_zek121yr5jz0) section.

#### Self-Aware Self-Care:

Model self-monitoring via self-care & intuitively inviting others into tenderly tending to their needs.

Provide a living blueprint of adaptive stable self-knowledge.

Embody a calm nervous system from which your Journeyer can co-regulate, a secure attachment base of support that they can rely on to ensure the ongoing integrity + safety of their physical body.

Use your moments of self-care as opportunities to invite your Journeyer into similar levels of self-monitoring.

Use your body as a litmus test for the care your Journeyer’s body may need.

{For example, “I am feeling very thirsty, and I have noticed that you have not drank any water in the past hour, I am going to go refill my vessel, would you like me to refill yours as well?”}

Take care of your needs immediately {Journeyers can be exquisitely sensitive in noticing your discomfort and in a moment of paranoia they may mis-attribute themselves as the cause for your body tension, which was the result of a full bladder}.

Be transparent and express visceral vulnerability and emotions if/when they arise {e.g. “When you threaten violence towards me it is scary, please stop doing that”}.

Consider narrating the “why” behind your actions. {e.g. “I have been sitting for a while without moving, and I am feeling a bit stiff. I know that it helps me to get new perspectives on my thoughts when I stretch, would you like to join me in a few stretches?”}.

Invite your Journeyer into your grounding activities, nervous system self-calming techniques, meditations, and dedicated awareness practices. Teach via demonstrating impeccable self-care.

In crisis, you are the consensus reality check anchor / grounded lightning rod.

If your Journeyer is agitated & distressed invite them into matching your calm rate of breath via **Breathing Exhalations** – also known as Audible Relaxed Exhalations, adding a relaxing luxurious sigh on each outbreath, as if you have finally sat down by the fire after a long day of rewarding work that tuckered you out.

If your Journeyer is postverbal, these Audible Relaxed Exhalations are a way to communicate directly to their nervous system that there is another being next to them who is calm and relaxed, relaying that they are safe at a limbic system level without words {additional verbal statements can add to the confusion if the Journeyer is unable to process speech}.

Additionally, Audible Relaxed Exhalations can calm you and anyone on the care team down as well.

*Deep roots, most high.* Give from your abundance, offering from an overflowing well, rather than depleting yourself to fill another and then needing to be filled in turn.

Be fueled up on everything you need {physically, emotionally, spiritually} so you can pour from a full vessel.

#### Cultivate Community: Consider the collective

Give gratitude to generative generations past: honor lineage via living liberatory legacy.

#### Ancestry

How can you honor what came before?

Learn lessons via integrating insights framed by foundational knowledge.

Study what came before you so that hard-won lessons do not need to be repeated or the “wheel reinvented.”

Propagate what works best and remember the lessons of history.

Cite + support those whose dedication to their discipline makes your way easier.

How do you embody your gratitude at the gifts you have been given?

Who are your philosophical ancestors?

Contribute to collective evolution, build upon strong foundations, use what works and let the rest rest {while still allowing unchosen paths to intelligently inform your decisions}.

#### Community

To cultivate community and live in respectful reciprocity to those that came before, openly share knowledge, such as best practices, and discuss candidly what works and does not work well.

Whenever possible, share learnings, tools, resources, and assets in the public domain in service of advancing the field at large.

Nourish what has nourished you.

#### Accountability

Collectively as a community, we can hold ourselves accountable to living our values.

We are human, and thus we make mistakes.

The author is strongly calling for our community to create impartial accountability structures to ensure that restorative justice principles are put into action to repair after incidents occur.

Until such a body/organization/counsel/community subset is formed, the following is recommended:

**Spaceholders** – create webs of accountability via your mentors, and mentor others in turn. When you are spaceholding with a Journeyer, share who your mentors are, and mention that you are open to engaging in a restorative justice process should any accidents arise with the Journeyer through an impartial counsel that they can access anonymously via your website.

If possible, find mutual friends that can be called upon to begin a mediation process if necessary, or seek out professional mediators who have a familiarity with altered states & spaceholding.

**Journeyers** – vet your Spaceholder thoroughly. If possible, speak to past Journeyers who have sat with your Spaceholder.

**Spaceholders** – not every Journeyer is a good match for every Spaceholder – it does not reflect poorly on anyone to refer the Journeyer to a better match for their intentions!

**Spaceholders** – invest in improving your skills, continue to educate yourself, take trainings, read books. Have other Spaceholders hold space for you!

Share your self-examination practices, have a community of accountability that can provide critical feedback that points out your blind spots, and work through potentially problematic patterns early on in low stakes scenarios.

We as a psychedelic community need to create a set of guidelines for restorative justice that any Spaceholder / Journeyer coming up against a need for mediation can follow.

We also need to create an investigative body to not only to hold us to our values via mediating incidents, but also to pre-emptively produce content about ethical best practices to educate the psychedelic community and thus reduce or eliminate the unintentional ethical issues/misunderstandings from occurring in the first place.

I hope that you will join me in creating a peer reviewed counsel of guides to ensure the wholesomeness of our field, and to offer counsel to others in turn.

# Appendix

## Glossary of Terms

* **Guide**:implying additional trust and personal responsibility in steering the Journeyer / Patient. Guide is used as a wider umbrella term that includes both the clinical and spiritual community applications including: Therapist, Shaman, or Ayahuaser@.
* **Humanimal trauma response**: This means that the logical reasoning skills of the prefrontal cortex / frontal lobes {the part of the brain that makes people “human” in their ability to plan, communicate, etc.} is no longer accessible to the Journeyer as it has been bypassed by the limbic system believing that the organism is in a life-threatening situation {amygdala hijacking}.
* **Interoception**: is the ability to sense and accurately interpret what is going on inside your body. This can involve: hunger / fullness, thirst / satiation, temperature awareness of hot / cold, and if one needs to void their bowls aka use the restroom.
* **Nocebo**: “a harmless substance or treatment that when taken by or administered to a patient is associated with harmful side effects or worsening of symptoms due to negative expectations or the psychological condition of the patient”. [[49]](#footnote-49)
* **Journeyer**: the one being stewarded / cared for through an experience. Covers a wide breath which includes patient, client, peer, or stranger.
* **Spaceholder**: a general term that may imply just having met someone and caring for them as a ‘Good Samaritan’ but not actively involving yourself in changing the course of their trip. This wider umbrella term can include : Peer to Peer support, Guiding, working as a Therapist, Guardian, Angel, Trip Sitter, Sitter, or Adult.
* **Therapist**:involves professional study / licensure and has the most robust accountability structures currently due to certification and the potential for this to be revoked.
* **Toxic positivity**: an avoidance mechanism that comes from discomfort with negative emotions and involves responding to distress with dismissal and false reassurances rather than empathy.

## Additional Support for Mapping Intentions

Create an altar. If you were to make an altar, what would you put on it?  {e.g. natural objects of significance to you, stones, healing tools, art, photographs of loved ones, candles, feathers, flowers, adornments}. You are encouraged to make this altar and spend time with it regularly.

*PAST RELEASING GUIDANCE*

Who are your guardians, allies, ancestors, supportive spirits?

What patterns are you seeking to let go of?

How have these patterns helped you survive in the past?

What does the new pattern feel like in your body?

How will you embody the new pattern, what helps you remember the new form?

What roles do you enjoy playing? What roles do you wish you could play more?

What do you wish you could tell your past self?

How does your shadow express itself, what forms does it take, and what are its character traits? When it shows up how do you acknowledge & integrate it?

Do your shadow aspects have names?

What would it look and feel like to embody the drama of the stories you are letting go of / stepping into through performance?

How can you turn up the dial on emotion to “fully feel to free” them?

What would turning your trauma into drama look like?

Are there any wounds you are protecting that are binding your energy? How can you let them go?

What keeps you from vulnerability, intimacy, play?

What stories are you telling about yourself?

What is your new story?

*PRESENT FOCUSED GUIDANCE*

What are you seeking to explore?

What parts of yourself do you want to know better?

What are you asking for help with?

What mantras / phrases help you feel supported?

What actions from others, objects, people, and activities make you feel supported?

Who are your current prominent allies (animal, plant, mentors, teachers)?

What grounds you (food, touch, words, questions, affirmations)?

What creates a safe sanctuary space for you?

How does immediate integration of insights manifest in your body and actions {what does it feel and look like}?

How do you need to be seen?

What wants to be seen in a relationship?

How can you give yourself the love that you seek from others?

What would it look like if you gave yourself more permission?

What outcome would make this experience a success in your eyes?

What creates a safe or sacred space for you?

What movements / action patterns / activities help your energy move?

*FUTURE FOCUSED GUIDANCE*

What archetypes do you wish to embody?

If everything could be as you wish, what would occur - what would this look and feel like (multisensory)?

What reminders will help you embody the realizations of the new way you are exploring (visual, movement, sound)?

What would your future self say to you?

In what signs & sigils does your future self communicate to you?

What is your new story? What is the title of the old chapter of your life? What is the title of the new chapter?

*TRANSPERSONAL FOCUSED GUIDANCE*

What is your life’s purpose?

How does your wisest self speak to you?

What would heaven on earth look and feel like to you?

What would a ‘dreams coming true’ field look and feel like to you?

What would you see and feel if you took the perspective of God / spirit / the underlying field?

How would it be to see as medicine sees?

How is your relationship to God / spirit / the organizing principle of the universe?

How is your relationship with yourself?

How is your relationship with: friends, family, lover{s} , community, and world?

How can you embody innocence?

What is life’s plan for you?

What are your birthrights?

What did you do as a child {what could captivate you}?

How can you find greater grace?

How can you be the vibration of your choice?

What are the desires of your heart?

 How will you know you are in alignment with your life's purpose?

How will the reminders come across to get in closer alignment with your life’s purpose or personal truth in the moment {where will this knowledge emerge in your body; how will it feel}?

How do you relate to your dreams?

## Journeyer Yes / No / Maybe List for Spaceholder Menu of Offerings

Simplified version of [Menu of Spaceholding Offerings](#_70efrq456u3a) as a Yes / No / Maybe List for the Journeyer to fill out:

1. In general, how much personal space do you prefer?
2. Might this change in this context as we get to know each other?
3. What are your hard boundaries {e.g. no sexual contact, no stimulation of genitals}?

Circle the role{s} you would like the Spaceholder to take on in the list below, denoting any that are primary by underlining them.

Cross out, X, or write “No” on any roles or interventions you are sure you do not want the Spaceholder to engage.

Write down your interest in any role or intervention on a 1-10 scale, including the context in which they would appreciate that technique or frame being used {e.g. if I am becoming frightened, if I start to enter a negative thought loop, etc.}, and if the action is conditional {e.g. only hold my hand if I extend it outward and ask you to}.

Any intervention that is neutral feel free to mark as “Maybe.”

If you do not know all of the specific contexts you would prefer an intervention be used, you can choose to write “trust” to indicate placing faith in the Spaceholder to determine a reasonable and appropriate context to use the intervention.

**Spaceholder Style // Roles // Form:**

*Nonphysical Neutral Passive Presence*

1. **Impartial Silent witness**

Focus: ‘bodywatching’ the Journeyer’s physical wellbeing, trip sitting, babysitting, passive presence.

Emergency reality anchor who can act as a sounding board if you fear for your wellbeing {e.g. you would like to call an ambulance because your heart is beating loudly and you think you are in a medical emergency, but your Spaceholder listens to your pulse and determines it is within a normal range}.

Information to provide:

* emergency contact information
* allergies
* location of medications necessary to manage an allergic reaction {e.g. epinephrine or an Epi-pen}
* relevant medical conditions and personal / biological family psychological history

**Areas of Inquiry:**

In what contexts would you want the Spaceholder to “break” neutrality and intervene?

* Potential medical emergency {depressed breathing, heart rate, other troublesome physical signs}
* Physical agitation / distress
* Risk reduction {if you are shivering, they would recommend putting on more clothes…if you are sweating profusely and have not been drinking water, they would recommend hydrating}

If you seem concerned about your wellbeing {e.g. my heart is going to explode} would you want your Spaceholder to:

* Take your blood pressure?
* Give you electrolytes?

In what situations would you want your Spaceholder to reach out to your emergency contacts by phone and connect you to them {e.g. extreme fear, existential dread, feeling unlovable, etc.}?

Who, and in what instance?

1. **Reality reflector / anchor**

Focus: consensus reality anchor. When asked: sharing the “clock time” and other “default reality” or baseline facts about the shared environment.

**Areas of Inquiry:**

How strongly do you want to be oriented toward the “objective” perspective?

Would you rather your Spaceholder be curious about why something is important to you {e.g. what does the purple dragon you are seeing symbolize or evoke in you?} or be pragmatically oriented towards “consensus” reality {e.g. I am not seeing a purple dragon}?

1. **Researcher**

Focus: researching the ally / compound being ingested, making recommendations as to wise fit depending on the intention, writing out knowledge of the standard/average dose/duration curve of the experience, sharing if the Journeyer is at peak, advice on re-dosing.

Information needed:

* Weight of Journeyer
* Journeyer muscle mass / fat / muscle density
* How hydrated the Journeyer is
* Whether they have been fasting
* If they are female-bodied / taking hormones -
  + What phase of their hormone / menstrual cycle they are in
* What time of day it is
* Any other supplements the Journeyer is taking

**Area of Inquiry:**

Are you interested in the potential for re-dosing?

Do you want to be informed if a specific experience you are having is likely due to the substance you ingested {e.g. visuals, euphoria}?

Do you wish to be reminded of approximately where you might be in the arc of the experience?

1. **Nature Guide / Transport**

Focus: Researching natural places nearby, knowing how to walk to them or operate the vehicle to get there, and orienteering skills such as using a compass or a map to ensure ease of returning to an indoor home base.

**Areas of Inquiry:**

What type of bioregions resonate with you?

Are there any natural settings that may be challenging you would like to avoid?

Approximately how long are you likely to want to be in nature {e.g. a multi-hour hike or a short walk}?

How physically active are you interested in being {e.g. strenuous uphill hike requiring hiking boots, leisurely swinging in a hammock, exploring a riverbank slowly}?

1. **Documenter / Recorder**

Focus: gathering data points, taking handwritten notes, utilizing a voice recorder or video recorder if requested.

**Areas of Inquiry:**

Do you want notes to be taken at the will of the Spaceholder or do you only want them taken if you specifically request them?

Would you prefer being more on the scale of passively gathering external data points or asking follow-up questions if there is a connection to your stated intentions?

Do you want your session audio or video recorded in its entirety?

Do you want particularly salient moments to be potentially audio or video recorded {e.g. when a clarifying breakthrough moment is happening, during a physical catharsis}?

Would you like before / after photos taken?

Would you like catharsis photos taken?

1. **Body Barometer**

Focus: Spaceholder announcing their needs and inviting the Journeyer to join them in relieving them.

**Areas of inquiry:**

Do you want your Spaceholder to offer solutions to embodied needs, such as:

* food
* water
* a change in clothing
* opening a window
* going outside
* turning up/down the music
* room temperature
* sun exposure
* biting insects
* the brightness of light
* ambient noises
* stuffiness of air in the room

For example, would delf-disclosures and asks such as the following from the Spaceholder be welcome:

*I notice I am feeling a bit chilly as the sun has set, and am going to go get my sweater, want me to get your coat for you?*

*I am feeling thirsty and notice that you have not drunk anything in the past two hours. Can I get you a glass of your beverage of choice while I get some water for myself?*

*I am noticing that the humming of the dryer is distracting me and putting me a bit on edge. Can I turn it off while we are in this room?*

*I really need to go to the bathroom; do you need to go too?*

The following roles are on the more active side of the spectrum:

1. **Narrator**

Focus: analyzing / calling attention to what is happening as it happens

**Areas of inquiry:**

In what types of scenarios would you like a more passive Spaceholding witness to break the silence?

At what level do you prefer your Spaceholder to engage - merely as a mentioning or as a more involved inquiry with follow up questions?

*For example:*

If the Spaceholder notices you are tense in your body {such as balling up your fists or holding yourself in a rigid manner}, do you want them to neutrally mention this physical reaction to bring it to your attention?

Do you want them to wait a certain amount of time before mentioning it {e.g. 3 minutes} or to immediately verbalize what they are witnessing in the moment?

Do you want your Spaceholder to ask questions about such somatic signals {a more proactive probing presence}?

How often would you like this information - approximately - every 5 minutes, 15 minutes, 30 minutes, an hour, or whenever there is a prominent shift? {Feel free to change your mind anytime during the session and express your emergent preferences, this is just a starting point to allow your Spaceholder to understand how important pointing out this data is to you.}

Crossing into the territory of benefit enhancement: Would you welcome suggestions for your comfort or physical wellbeing, for example, if you have not drunk water for many hours, do you want your Spaceholder to make a recommendation towards hydration?

Would you like your Spaceholder to fetch you the water?

On a more involved therapeutic inquiry side, would you want your Spaceholder to ask why you might be exhibiting a certain physical behavior, in curious questions mode?

Would you be served by your Spaceholder noticing details, pointing out patterns, or making suggestions of possible connections between aspects of your past / old patterns / current behaviors?

On the furthest side of the interaction / involvement spectrum, would you like your Spaceholder to aid you in helping you create a new narrative or story in the moment, or co-creating a new pattern that they then subsequently encourage?

1. **BE {Benefit Enhancement} Pro-Active Presencing**

Focus: reducing suffering, reading the energy of the Journeyer, and intervening when the Spaceholder senses the Journeyer’s discomfort in the situation could be minimized or ameliorated by the Spaceholder making an offer.

**Areas of inquiry:**

Would you appreciate your Spaceholder:

* changing the environment:
  + turning the thermostat up if the Journeyer is shivering
  + providing blankets
  + changing / turning down the music if the Journeyer is covering their ears and curling up
  + asking others who are being loud within earshot to reduce their volume or move farther away
* fetching items - blanket, coat, robe
* If the Journeyer is changing positions in a way that may be indicating physical discomfort, the Spaceholder can offer to create a more comfortable nest with additional pillows / squish / fluff.
* Offering a beverage or warm tea if it has been a while since the Journeyer drank or relieved themselves.

1. **Guiding: Active Positive Presence {Maximum Benefit Enhancement}**

Focus: actively shaping the Journeyer’s experience in an involved manner, especially when in alignment with the Journeyer’s stated intention.

**Areas of Inquiry:**

Do you want your Spaceholder to:

* Draw parallels between your history / past patterns and what is occurring currently
* Interrupt a negative thought loop
* Interrupt self-criticism
* Model a replacement self-respect phrase
* Offer active narration into self-soothing techniques
* Offer grounding pressure or techniques
* Offer guided visualizations
* ‘Earthing’– placing bare feet on damp soil
* Making proactive suggestions such as: going outside, turning down / changing the music / lighting, changing the temperature, clothing changes, applying a weighted / warm blanket, proposing a specific activity such as shared humming, and listing potential activities there are supplies for {different music playlists, artmaking supplies}.
* Specific Active Techniques can include:
  + Live medicine music {Spaceholder shares the medicine / folk songs of their lineage, e.g. Lithuanian folk songs, South American medicine songs, drumming, holding a beat}.
  + Offering sound healing: tuning forks / singing bowls / gongs
* Do you want your Spaceholder to steer you back to your intention from distraction {e.g. you are speaking about celebrity gossip or a TV show in a way that is disconnected from your intention or previous processes}?
* Do you want your Spaceholder to offer immediate integration reminders, such as making special notes of the behaviors and statements that tie back into the intention?

1. **Therapeutic / Trained Role**

Focus: offering the framework of your style of practice, healing modality, or therapeutic training.

These methods may take the form of:

* Energy work {such as Reiki}
* Musical / artistic offerings {such as sharing medicine songs, guiding the Journeyer in art therapy or expressive arts therapy}
* Psychological support {such as via Hakomi, Internal Family Systems, or transpersonally oriented therapy}

**Areas of Inquiry:**

As the milieu of techniques is large and will be unique to every Spaceholder / practitioner, they can be listed manually below:

**Consent for Touch + Supportive Contact:**

Touching someone in a sensitive or heightened state of awareness can have the possibility of being misinterpreted as a sexual signal, especially in states of increased energy and blood flow.

Do you want your Spaceholder to use the following consent steps:

1. The first stage utilizes a “take-home” yes / no / maybe checklist before the session {which you are reading currently}. To reduce the likelihood of a fawn / caretaking response by the Journeyer it is recommended that they fill the list out when not in the physical presence of the Spaceholder.
2. The second stage is a refining in-person conversation between Spaceholder and Journeyer to review the written guidelines the Journeyer has put forth to align on details.
3. The third stage is asking the day of, before the session, how the Journeyer feels about any particular touch intervention {as their level of tenderness or vulnerability can change depending on where they are at in their hormone cycle and what they have lived through recently}.
4. The fourth stage would be to ask if touch is ok in the moments before contact during the session.

At each stage of this process, the Spaceholder should be watching for somatic cues – shifts in breathing and muscle tension can indicate a nonverbal “no.”

Even if the Journeyer has asked for or consented to touch and you notice their body is saying “no,” they could be following a fawn trauma response, and you should interpret a somatic no, or hesitation, as a “no.”

Other ways to create a more supportive consent container include:

* Education in self-attunement, the rightness of touch, and practice knowing and asserting boundaries and preferences {more detail in the book ‘Corporeal Consent’}
* Videoing the session as an ‘external’ witness.
* Having a second Spaceholder or working in a group context.

1. **Physically Supportive Presence**

Focus: light direct or indirect touch to the extremities

**Areas of Inquiry:**

Would you like any indirect touch?

If so which of the following: “scalp massager” / “head spider,” car buffer, massage gun

Soothing sensation play may also provide novel stimuli in case of looping and can include:

* feathering {petting someone with one or several feathers, especially on the face and neck}
* petting skin with soft fabric / fur
* if in a high temperature locale spraying with a water mister {option of including essential oils after first making sure that the Journeyer does not have sensitivities or memories associated with any particular scents}.

Would you like any direct touch?

If so, which of the following {feel free to add more specifics}:

* hand holding
* touching the feet
* holding the head
* petting, combing, brushing hair or scalp

Would you like distance, or hands-on demonstrations of massage or physical self-soothing techniques?

Suggestions: sharing a self-massage tool such as a massage cane, tennis / lacrosse ball, yoga ball, inversion table, or yoga swing.

1. **Medium Touch**

Focus: direct touch to all body parts, excluding genital or sexual stimulation.

**Areas of Inquiry:**

* Hand on the belly
* Hand on the heart
* Hug
* Sitting back-to-back in contact to feel breathing
* Both laying on opposite sides backs touching to feel breathing
* Both laying on backs, side bodies touching to Journeyer’s level of comfort {could just be feet touching, all the way to both ribcages in contact or hands draped below around shoulders or behind neck}
* Journeyer’s head resting on Guides chest, listening to heartbeat {or vice versa}
* Both laying with sides touching the ground, one as big spoon, one as little spoon, curled in the fetal position

*High Touch / Heavy Contact / Embodiment Expertise*

1. **Bodywork**

Focus: experimental evolving edge of therapeutic touch. These techniques should be used only with extreme caution, a pre-existing container of trust, rapport, clear communication skills, and deep education in corporeal consent.

1. **Inversions**

Either from a hard point or on the back of the Spaceholder {if they are trained in contact improv / SomaSenZ bodywork} are wonderful for providing a 180-degree shift in perspective.

There are contraindications to inversions, so please do your research and consult the physical professionals in your life to make sure this is a safe choice for your embodied state.

1. **Light / medium Bodywork / massage**

Utilizing hands, elbows, and body in a manner aligning with training.

Working surface/fascia/top musculature of Journeyers body, 1-5 on an intensity scale of 1-10.

Assisted stretching / Thai-style massage may also be helpful.

If a certain part of the body is having trouble relaxing have the Journeyer inhale while flexing that part and then exhale on the release, with the Bodyworker pushing into that part at the end of the exhale.

Holding a point / limb and rotating around the axis of natural motion or shaking can also aid in steering a tense place into a relaxation response.

1. **Bodywork surgery / bodywork ceremony**

This deeper level of work requires more rapport and familiarity with the Journeyer’s body and tension-holding patterns.

“Massage surgery” is intended as a ‘non-incision’ restructuring and can involve old injury work and carries the heightened risks of more intensive bodywork.

Much as “natural antibiotics” such as garlic or oregano oil are still very powerful, this technique should be approached with respect and caution when other avenues have been exhausted.

1. **Physical trauma release – no touch**

Techniques such as Somatic Experiencing can go into intense memories and discharge the frozen nervous system reaction that is causing lingering trauma symptoms.

This form will be described in more detail in the [Somatic Techniques](#_ia54ti5usdhw) section, and it is listed here as it is important to receive corporeal-based consent to do this work, as it involves setting up the space in a soft and safe manner.

1. **Physical trauma release – touch through cushions / intermediate medium**

When acting out the memories of the trauma, some scenarios may call for the use of body weight through cushions or another medium so that the muscles can work against resistance {such as pushing away someone or pushing off someone who was pinning you down in the memory}.

1. **Physical trauma release – highly direct**

Although it is recommended to try the no touch or “touch through a medium” formats first in the hope that this conservative approach will result in improvement, the traumatized body may need to actively work many different somatic systems in a complex way to discharge the nervous system completely.

This involves expert training in somatic trauma therapy and safe body handling and could result in injury to the Spaceholder.

Forms of this work can include: wrestling, fighting, and in-depth re-enactments of traumatic memories but with the new repatterning of the Journeyers “successful” win of fleeing, fighting, or expressing and causing the resolution to the threat {the Spaceholder ensuring that they “win”}.

The utmost care and consideration should be taken to minimize harm / reduce risk to all participants through exquisitely clear communication, physical padding, spotters, safewords, etc.

This is an experimental technique and could result in traumatization so should be used only if the Journeyer has a strong sense that it would aid them, and all other methodologies have been attempted.

## 

## Ego Death Living Will

1. Why do you desire to experience ego death?
2. What do you predict ego death would look and feel like for you?

1. What is your experience with death?

1. Have you ever had a near-death, out-of-body, or grave bodily harm experience?

1. What helped you in that extreme experience?

1. If you have not had an experience like this, what was the most fearful experience of your life?
2. What helped you handle it?

1. What would you do if your existential frameworks / sense of meaning disappeared?

1. What provides you with motivation and meaning in your life? How can you re/build and strengthen this knowing if it was stripped from you ?

1. What support systems do you have in place in case you are needing additional support after an ego-death experience?

1. What type of resources do you have in case you need to take a sabbatical to recenter {e.g. Work flexibility, vacation time, emotional support, community, loved ones}?

1. What integration resources do you have?

1. If you are in a form where you are in a passive post-verbal state {such as catatonia}, in that you cannot communicate / do not respond to questions, what do you want your Spaceholder to do?

1. If you are in an agitated post-verbal state, what do you want your Spaceholder to do?

1. If you are in an actively violent state {either dangerous to yourself or others}, what do you want your Spaceholder to do?

1. Do you wish to be restrained in any circumstances {e.g. dangerous to self or others} ? If so, what type of restraints {e.g. having someone sit on you and hold your arms to your chest, humane restraints}?
2. How would the restraint ideally be accomplished {e.g. initially giving you an option to voluntarily enter restraints, explaining why this is being done, using as little force as necessary, starting with more basic restraints and then ramping up, getting you in the restraints loosely before it is desperately needed if it seems like the situation is escalating}?

1. Do you have an active living will? If so, what are the directives on it?

If not, it is strongly recommended you create one, either officially or unofficially, as it can provide a sense of peace around those who care for you knowing how to act without a doubt in accordance with your wishes.

If you are unfamiliar with this type of document or pressed for time, the main questions to consider are the situations in which you would like life-saving measures taken, which ones, and how long these would continue in the case of a situation such as unresponsiveness or a coma.

**Internal // External Emergency Services**

1. Who are your Emergency Contacts, their relationship with you, and how they can be contacted {two methods of contact preferred if possible}?
2. Do they know you are going into this experience? Is there any way you can tell them?

1. Under what circumstances do you want your Emergency Contacts contacted? {be as specific as possible, and indicate in which different situations you would like different people contacted}

1. Under what circumstances would you want emergency services to be contacted?
2. Who would you want to be contacted from your emergency contact list if you were brought to the emergency room?
3. Who would you want to stay with you in the emergency room / hospital?
4. Who would you want to be contacted or to be with you if you were brought to a psychiatric ward?

## 

## Visceral Visualization: Sanctuary Space Discovery

Imagine yourself cloaked in wispy mist.

You allow your heart to pull you in a certain direction. You feel the tendrils of your psyche reaching out to solidify a space where you feel the safest.

Perhaps this is a place in nature: what land and water features are nearby?

What plants or animals are present? Are there people? Pets? Are there any structures?

What position does your body want to take in this space? Find yourself taking that position now. Is it reclining?

What body sensations do you feel here as you tilt your head back to feel the sun, wind, rain, or weather on your face?

How does your body want to interact with the space? Are there places to climb? Nests to nestle within? Cozy caves to hibernate in?

What colors are present? What are you hearing?

What smells waft through the air? What is there to taste? What nourishment is nearby?

This is your sanctuary space.

If you need a place to be resourced, you can always return here at any time.

### Sensing the well:

While you are in your sanctuary space you hear water moving.

You approach the wet sounds, and the music of water running grows, echoing off the sound of stones.

This is your wellness well. The place you draw wellness from. A steady underground stream.

There are two ways to access the water, via a spiraling staircase down to the bottom, or through a bucket on a crank. And yes, this is also a wishing well that you can throw coins into, or whisper wishes into your water.

What helps you access your well?

What lengthens your cord to get the deepest coldest freshest water on an overheated day? What landmarks help you find your way to your well even in the deepest fog?

Descend the spiral staircase or drop down your bucket into your well now, cupping the water close to your face.

Look into the water, what do you see in the reflection? Whisper your wishes to the water. Drink deep of your dreams.

What does your water taste like? What infusion do you feel diffusing throughout your body, carried to the crescendo of every capillary?

This is your wellness well, please go here at any time to resource yourself.

### Nervous system nourishment and co / regulation

Alongside reading the signs of your body to know when it may be of service to encourage you to return to resourcing yourself in your sanctuary space, a trauma-informed practitioner will know the basics of how an activated or dysregulated nervous system will present.

Overactive sympathetic arousal can manifest as fight // flight, a rapid heartbeat, sweating, and rapid breathing.

An overactive parasympathetic state will look like dorsal collapse, non-responsiveness, being spacey, and potential ‘tonic immobility’ or involuntary playing dead // paralysis.

There are a diversity of techniques including rocking, tapping, and sounding that can take someone into a more regulated state, many of which are described in the body of work entitled ‘EcoRegulation’ available at RAZ.MA.

Here is one EcoRegulation prompt to guide someone into a more parasympathetic and creative state:

#### Rain Rhythm:

Eyes closing, choose a question & release answering to storm wisdom.

Imagine you see clouds heavy with rain gathering on the horizon ~ a storm is brewing.

You feel the wind pick up, big breezes blowing the hairs all over your body, gaining strength with each gust & gale. {blow on your limbs, with a longer out-breath than in-breath, emptying your lungs to the bottom of your diaphragm}.

A drizzly mist rolls in, moisture merging with your dewy skin {lightly trace the outline of your skinosphere}

A thick drop PLOP lands on your head {with one tip of your finger tap your head, making a drop sound}.

Rain!

Another drop SLOP spots your shoulder {with one tip of your finger tap your shoulder, making a drop sound}.

The downpour steadily increases in intensity & frequency, gently speckling you with a fountain of freckles all over your body {with the tips of your fingers tickle tap in dalmatian spot patterns all over yourself, making drop sounds}.

The rain is picking up now ~ a shower drumming your skin {starting with one flat finger, start increasing the pressure of tapping at your own pace; adding a finger at a time to increase impact, until you are tapping with a fully open hand / palm as you prefer, making precipitation sounds}.

You see a flash of lightning, and for a split second, an answer to your question is illuminated.

Then thunder rolls, belly laughing across the sky {shake yourself & belly laugh}.

You are excited to ride this storm out as long as it takes {take all the time you need in this discharging stormy shaking space}

Eventually, you feel the rain easing up {lightening your patting, tapping pressure}.

The wind tousles & caresses gently, & you lean face & body into the breeze, quickly finding yourself dry & right as rain {blow on yourself, with a longer out-breath than in-breath, emptying your lungs to the bottom of your diaphragm}.

If you find you have any droplets left clinging, shake them off like a wet puppy dog.

## 

## Festival Frontline Support Kit

Even when you are not on shift as a roaming Ranger // working Risk Reduction {required to carry the following}, you are highly encouraged to have the following nearby:

* Easily digestible nourishment to help with dropped blood sugar, such as a trail bar
* Earplugs
* Extra water
* Tissues / toilet paper
* Plastic gloves / a plastic bag
* Lip balm / moisturizer
* A way to keep time and make notes {primary method could be your phone but there are also moments you will want to leave a physical note somewhere or in case your battery dies}

## 

## Authors Background Extended

In my extensive, often exhausting, work with those pushing the envelope on exploring the outer reaches of consciousness, I have come to understand that it is a non-negotiable imperative that psychedelic Spaceholders become trauma informed.

This is due to the nature of psychedelics as ‘unspecified amplifiers’ – eventually the odds are in favor of latent trauma emerging, and it is our duty as caregivers tending to those made vulnerable by the raw psychedelic state to know, at minimum, enough to not re-traumatize those we are striving to aid.

I have triaged and been referred many cases of Journeyers who had trauma, buried and consciously unknown to them, emerge in a psychedelic Journey space, who were then freshly doubly impacted by an additional secondary trauma due to the Spaceholder’s lack of knowledge in how to care forhold someone during a trauma activation.

I believe that we as psychedelic Spaceholders wish to not only ‘do no harm’ and reduce risk, but also to create a safe space and interpersonal milieu for healing - and a foundational step to this intention is to cultivate proficiency in holding trauma compassionately so that we do not retraumatize or entrench the shame often surrounding trauma further.

The essential nature of being trauma-informed applies across all contexts of Spaceholding, from professional to peer-to-peer, for with enough time, if there is latent unprocessed trauma the opening of the floodgates to the subconscious that psychedelics can cause will surface these memories.

Compassionate trauma-handling skill is even more essential considering the number of trauma-awakenings which occur even in recreational contexts in which such deep work may have not been a specified intention of healing - catching all involved off guard as there has been no planning for such a contingency and then environment may not have been set up to incorporate a sanctuary space.

Through real-world vignettes, G4G seeks to illustrate trauma-informed principles within the diversity of all potential contexts and to provide actionable pre-emptive frameworks to fill in the current gaps in forethought to create an ethical psychedelic Spaceholding ecosystem.

In addition to the ethical imperative to “do not harm” as a Spaceholder through being trauma-informed, there are also more pedestrian benefits to employing the skills of a professional Guide or peer counselor.

Having a trained sitter drastically decreases the likelihood of negative outcomes {e.g. not risking your life unnecessarily because you have a body guardian and reality anchor you can check in with about ‘consensus reality’} and can reduce fear and paranoia significantly {via knowing someone is there specifically watching out for your wellbeing}.

In G4G I distill years of schooling from both graduate education in transpersonal somatic psychology, a lifetime of psychedelic risk reduction work, and taking any training aligned and available that I could afford.

Additionally, I share new methods I developed where I found gaps in the educational material available. I seek to share the skills necessary for ethical psychedelic Spaceholding to increase access to safe and supportive sitters and thus reduce risk and alleviate unnecessary suffering.

I have been working in psychedelic risk reduction at increasingly complex levels of organization / production for over half my life now and want to share what we have learned collectively over this time to expedite our evolution as a field.

In G4G I generate a meta-perspective on expert-level Spaceholding - having taken every training I could find in risk reduction and blending it with controlled container “ceremony” skills and a graduate-level background in transpersonal somatic psychology.

This well-balanced foundation is also enriched by new tools I have developed from my “in the wild” work at gatherings of all stripes and sizes on the “festival frontlines” of entheogenic exploration.

I have been called a Navy SEAL / Green Beret / Special Ops of Psychedelic Spaceholding and I want to share my hard-won wisdom to make the healing that is possible with psychedelics safer and more accessible to all.

Additionally, I am known in the field as someone who has a special capacity to work with those in “post-verbal” spaces, and I will share my innovative insights on how to communicate directly to another person’s humanimal nervous system to convey to them that they are safe, even if they are past the point of being able to understand or participate in verbal communication.

My earnest hope is that most of the time Journeyers and those who care for them will have an easier time than the scenarios that spawned the techniques developed in the trenches from the trying tales in this tome.

However, I believe that anyone who is purporting to be able to hold space needs to, at the very least, be aware of what has happened in the past, and thus could happen again, and to be prepared to the best of their ability to deal with the potential for extreme situations.

As we say as Burning Man Rangers “expect nothing, prepare for everything” – then the worst case is that everyone will have overprepared. The best case is that the lines of inquiry in this tome will lead to clearer and more harmonious interpersonal relating and we can co-evolve as a compassionate caregiving culture together.

Risk reduction calls for us to be aware of the potential for harm, try as best we can to steer away from unnecessary hazards, prepare for the worst, do what we can to encourage the best, and make informed decisions. As a Spaceholder, you are responsible for the well-being of those that are putting their trust in you to hold them in the most vulnerable psychic state of their lives.

Finally, this guidebook is for Journeyers, and goes beyond assuming a Spaceholder’s positive intent / “mindreading” and instead actively aims to equip you with the tools necessary to have clarifying conversations, shares questions that encourage ethical behavior, and elucidates frameworks to assist in evaluating your spaceholder.

Although I have chosen to focus specifically on the container of psychedelic Spaceholding, these principles can be applied to any situation in which people are holding space of intensity or creating transformational experiences {e.g. VR / AR / XR experiences, installation art, immersive experience design, breathwork, hypnosis, regression, attachment work, coaching, etc.}.

I am grateful that you are investing time in caring for your fellow humanimals compassionately and hope this tome helps make healing more accessible.

## 

## Resources

**Books**

Waking the Tiger by Peter Levine

The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma by Bessel van der Kolk M.D.

The Body Bears the Burden: Trauma, Dissociation, and Disease by Robert Scaer

The Polyvagal Theory: Neurophysiological Foundations of Emotions, Attachment, Communication, and Self-regulation by Stephen W. Porges

Complex PTSD: From Surviving to Thriving: A Guide and Map for Recovering from Childhood Trauma by Pete Walker

Somatic Internal Family Systems Therapy: Awareness, Breath, Resonance, Movement, and Touch in Practice by Susan McConnell

Don't Try This Alone: The Silent Epidemic of Attachment Disorder by Kathy Brous

My Grandmother’s Hands by Resmaa Menakem

When the Body Says No by Gabor Maté

In the Realm of Hungry Ghosts by Gabor Maté

The Psychedelic Explorer's Guide: Safe, Therapeutic, and Sacred Journeys by James Fadiman

LSD : My Problem Child by Albert Hoffman

TIKAL + PIKAL by Shasha and Anne Shulgin

Living Your Dying Paperback by Stanley Keleman

Holotropic Breathwork by Stanislav Grof

**Websites**

Erowid.org

**Articles**

Psychedelic Therapy Abuses of Power

<https://www.madinamerica.com/2021/09/ending-silence-psychedelic-therapy-abuse/>

Psychedelic Ethics

<https://drive.google.com/file/d/1ney6hs4VAOcXgtUaVZppXV4py1CUiZbI/view>

The New Psychotherapy: MDMA and the Shadow by Ann Shulgin

[file:///C:/Users/x/Downloads/Shulgin\_Eleusis3\_3\_1995.pdf](about:blank)

**Organizations + Trainings**

Burning Man Green Dot Rangers

MAPS

Zendo

DanceSafe

Guild of Guides

**Videos**

Underground Healing, Erotic Transference, & Psychedelic Ethics <https://www.youtube.com/watch?v=yJms3EbjyRU>

**Narcan // Naloxone Sourcing**

In the USA :

<https://www.cdc.gov/stopoverdose/naloxone/index.html>

**Inspirations / Lineages:**

*Teafærie Ground Control,*

*CSP: Code of Ethics for Spiritual Guides*

*Zendo 2017 Sitter Manual*

*Zendo Project Psychedelic Harm Reduction – Volunteer Training 2014, 2015, 2016,*

*Erowid Psychedelic Crisis FAQ*

*Mount Tam Integration for compiling a list of guides*

## Acknowledgements

Gratitude to all of those who believed in the importance of this work being created and supported my continued existence throughout the process.

My biofam Asta, Antanas, and Andrew for laying down the foundational nature + nurturing to make me who I am - I hope you are proud of me.

The Ellsberg family for adopting and housing me within my dream culture.

Erika Frost for the detailed artistic cover rendering and digitization of my lettering and sketches.

Joshua Kahn Russell for mockup of initial cover illustration.

Rebecca Fabrizio for support on the physical print cover layout and author photo.

Jessica for a round of edits on book layout.

Everyone who has contributed to this movement for increasing access to healing in right relationship - ancestors, earth tenders, and wellness workers of all kinds.

May we co-create compassionate corporeal culture and empathetic embodied co-evolution.

To support the mission of Earth Body Church to create somatic spiritual community by making a tax deductible donation please Venmo <https://venmo.com/u/EarthBodyTemple>



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1. <https://www.acesconnection.com/blog/meditation-may-aggravate-trauma-mindful-action-is-a-better-alternative> [↑](#footnote-ref-1)
2. <https://www.goodtherapy.org/blog/mindfulness-meditation-and-trauma-proceed-with-caution-1021154>

   [↑](#footnote-ref-2)
3. <https://www.merriam-webster.com/dictionary/nocebo>

   [↑](#footnote-ref-3)
4. https://psychedelicstoday.com/2021/05/19/what-is-sacred-reciprocity/

   [↑](#footnote-ref-4)
5. https://psychedelicstoday.com/2021/05/19/what-is-sacred-reciprocity/

   [↑](#footnote-ref-5)
6. https://www.apa.org/pubs/journals/releases/xlm-a0036577.pdf [↑](#footnote-ref-6)
7. *https://www.psychologytoday.com/us/basics/transference*

   [↑](#footnote-ref-7)
8. https://www.verywellmind.com/counter-transference-2671577

   [↑](#footnote-ref-8)
9. <https://drive.google.com/file/d/1ney6hs4VAOcXgtUaVZppXV4py1CUiZbI/view> [↑](#footnote-ref-9)
10. https://news.harvard.edu/gazette/story/2020/02/how-scent-emotion-and-memory-are-intertwined-and-exploited/

    [↑](#footnote-ref-10)
11. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4495877/>

    [↑](#footnote-ref-11)
12. <https://www.ncbi.nlm.nih.gov/books/NBK279390/>

    [↑](#footnote-ref-12)
13. <https://loveandlifetoolbox.com/the-neuroscience-of-resilience-nervous-system-regulation/>

    [↑](#footnote-ref-13)
14. <https://loveandlifetoolbox.com/the-neuroscience-of-resilience-nervous-system-regulation/>

    [↑](#footnote-ref-14)
15. <https://loveandlifetoolbox.com/the-neuroscience-of-resilience-nervous-system-regulation/>

    [↑](#footnote-ref-15)
16. <https://loveandlifetoolbox.com/the-neuroscience-of-resilience-nervous-system-regulation/>

    [↑](#footnote-ref-16)
17. <https://loveandlifetoolbox.com/the-neuroscience-of-resilience-nervous-system-regulation/>

    [↑](#footnote-ref-17)
18. <https://loveandlifetoolbox.com/the-neuroscience-of-resilience-nervous-system-regulation/>

    [↑](#footnote-ref-18)
19. <https://loveandlifetoolbox.com/the-neuroscience-of-resilience-nervous-system-regulation/>

    [↑](#footnote-ref-19)
20. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/> [↑](#footnote-ref-20)
21. [*https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/*](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/)

    [↑](#footnote-ref-21)
22. <https://theinspiredtreehouse.com/10-calming-sensory-strategies-for-school/>

    [↑](#footnote-ref-22)
23. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/>

    [↑](#footnote-ref-23)
24. Touching: The Human Significance of Skin, Ashley Montagu, 1986, Harper Collins Publishers, pg.102-3

    [↑](#footnote-ref-24)
25. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/>

    [↑](#footnote-ref-25)
26. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/>

    [↑](#footnote-ref-26)
27. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/> [↑](#footnote-ref-27)
28. [*https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/*](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/) [↑](#footnote-ref-28)
29. [*https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/*](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/) [↑](#footnote-ref-29)
30. [*https://www.ncbi.nlm.nih.gov/pubmed/15316239*](https://www.ncbi.nlm.nih.gov/pubmed/15316239)

    [↑](#footnote-ref-30)
31. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/> [↑](#footnote-ref-31)
32. [*https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/*](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/) [↑](#footnote-ref-32)
33. [*https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/*](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/) [↑](#footnote-ref-33)
34. [*https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/*](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/) [↑](#footnote-ref-34)
35. [*https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/*](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4290532/) [↑](#footnote-ref-35)
36. *https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4495877/* [↑](#footnote-ref-36)
37. *https://childhoodtraumarecovery.com/all-articles/the-freeze-response-to-trauma-and-polyvagal-theory/* [↑](#footnote-ref-37)
38. *https://www.nicabm.com/topic/trauma-responses/*

    [↑](#footnote-ref-38)
39. <https://twitter.com/MsPeteyAutLib/status/1583888351790125056> [↑](#footnote-ref-39)
40. *https://rightasrain.uwmedicine.org/mind/well-being/toxic-positivity* [↑](#footnote-ref-40)
41. [*https://www.psychologytoday.com/us/blog/the-high-functioning-hotspot/202107/what-is-toxic-positivity*](https://www.psychologytoday.com/us/blog/the-high-functioning-hotspot/202107/what-is-toxic-positivity)

    [↑](#footnote-ref-41)
42. TURNING UP THE LIGHTS ON GASLIGHTING, Kate Abramson, Philosophical Perspectives, 22 December 2014.

    [↑](#footnote-ref-42)
43. https://www.rollingstone.com/culture/culture-features/instagram-guru-bentinho-massaro-polyamory-cult-sex-1300039/

    [↑](#footnote-ref-43)
44. You are the Placebo by Dr. Joe Dispenza

    [↑](#footnote-ref-44)
45. Therapeutic Alliance and Outcome of Psychotherapy: Historical Excursus, Measurements, and Prospects for Research. Rita B. Ardito and Daniela Rabellino. Front Psychol. 2011; 2: 270. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3198542/

    [↑](#footnote-ref-45)
46. https://www.ajpmonline.org/article/S0749-3797(98)00017-8/fulltext

    [↑](#footnote-ref-46)
47. https://solutionfocused.net/wp-content/uploads/2019/10/SF-Treatment-of-Trauma-revised.pdf

    [↑](#footnote-ref-47)
48. <https://solutionfocused.net/wp-content/uploads/2019/10/SF-Treatment-of-Trauma-revised.pdf>

    [↑](#footnote-ref-48)
49. [https://95). A similar half-life has been demonstrated in the cerebrospinal fluid, but might be even longer in different parts of the brain (Jones and Robinson, 1982).#](https://www.merriam-webster.com/dictionary/nocebo)

    [www.merriam-webster.com/dictionary/nocebo](https://www.merriam-webster.com/dictionary/nocebo) [↑](#footnote-ref-49)