

Recapture the Rapture

Rethinking God, Sex, and Death
in a World That's Lost Its Mind

Jamie Wheal



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Glossary

Adiam: A mystical name for Anthropos, or perfected Man. *Adi* is an honorific meaning “first” or “preeminent” in India and “jewel” in Hebrew. “I AM” is a statement of pure being first invoked by Yahweh. Adam is First Man. Ad-I-Am is Adam with the highest I at its center. A decent avatar for the future of humanity.

Agnosticism: The view that the existence of God, or the divine or supernatural, is unknown or unknowable. Robert Anton Wilson said that anyone who faces the burning bush of ultimate truth returns either insane or agnostic.

Alchemy: Commonly known as the effort to turn lead or other base metals into gold. In the esoteric traditions, sometimes thought to refer to the process of transforming human consciousness into higher forms of awareness.

Alpha: First. The beginning of time. Especially in Judeo-Christian eschatology. Also, in primate studies, the pack leader or dominant specimen in a group of animals.

Anamnesis: Literally, the opposite of amnesia. The “forgetting of the forgetting,” a.k.a. deep remembering. It is the idea that humans possess innate knowledge (perhaps acquired before birth) and that learning consists of rediscovering that knowledge within us.

Apocalypse: The unveiling or revealing at the End of Time.

Arcana Americana: A neologism combining *arcana*—a secret scripture or esoteric text and *Americana*—the deeply American folk tradition. Distinguished by its syncretic combination of African, European, Jewish, and indigenous folkways and references to a consistent death/rebirth narrative combining suffering with redemption.

Armageddon: The ultimate showdown between Good and Evil before the final Days of Judgment.

***Anthropos*:** The Greek word for “human.” Mystical sense of perfected, integrated, balanced human. See also: Adiam, HomeGrown Humans, Vitruvian Man.

Big Five: Respiration, embodiment, sexuality, substances, and music—the strongest widely available evolutionary drivers to promote peak states, healing, and relational connect.

Blissfuck Crucifiction: The initiatory death/rebirth experience of becoming *anthropos* by deliberately harnessing deep pleasure and ecstatic consciousness to simultaneously hold the profound grief of the human experience. The convergence point between Kairos and Chronos. The spelling of cruci-*fiction* is deliberate—as an indicator of its metaphorical nature.

Catharsis: A deep sense of healing, usually with respect to trauma. Often energetically released.

Chronos: Clock time. Linear progression of past, present, and future.

Communitas: A deep sense of connection with others. Victor Turner’s term for a profound gathering of people. See: Group Flow and the Quaker term “gathered meeting.”

Culture Architecture: The discipline of bringing design thinking to solve social challenges—specifically by reinvigorating or innovating new forms of cultural practices based on anthropological understandings of human behavior. See also: Neuroanthropology.

Deep Now: See Kairos.

Ecstasis: Literally, “to step outside oneself.” A deep sense of inspiration, or positive non-ordinary state/peak experience, often involving some form of ego death or dissolution.

Embodied cognition: The field of study based on the insight that bodies affect brains and brains affect bodies. Moving our physiology informs our neurology, and with it our psychology.

Epistemology: The study of the nature of knowledge, justification, and the rationality of belief.

Eschatology: The study of the Eschaton, or the End of Time.

Ethics: As opposed to morals, which are typically rendered in binary good and bad, thou shalt/shalt not terms. In ethics, it's not the act but one's relationship to the act that matters and determines its merit. Less common in traditional social structures, due to the requirement that an individual can practice personal discernment and accountability. Essential in higher levels of post-conventional explorations, where rigid categories give way to paradox, contradiction, and provisional certainty.

Finite games: Any form of social exchange with a one up/one down outcome, from commerce to military conflict to sexuality. See also: Infinite game.

Flow: An optimal state of consciousness resulting in peak mental and physical performance.

Garden (of Eden): A place of timeless perfection, outside of normal causation, not subject to sin, separation (or the Second Law of Thermodynamics). See also: Kairos, Deep Now.

Gnosis: A direct experience of the Suchness of Reality, or Source. Un-Englishable. Profound. Confounding (disambiguation: also a dissenting sect of early Christians who held a particular philosophy that this world is a prison of illusion created by a false god, the demiurge).

Gnosticism: Ancient religious ideas and systems that originated in the first century AD among early Christian and Jewish sects. These various groups, labeled "gnostics" by their opponents, emphasized personal spiritual knowledge (gnosis) over orthodox teachings, traditions, and ecclesiastical authority. Sometimes referring to a deeper worldview that holds this reality as false, and created by a false god (à la *The Matrix*).

Hedonic Calendaring: The practice of planning out the entire year around skillful access to peak states, ranging from supportive daily practices to weekly "sabbath" practices to monthly, seasonal, and annual events of increasing depth and duration. Intended to promote healthy alchemy and prevent addiction or insanity while avoiding the binge/purge dynamic common to most hedonistic exploration.

Hedonic Engineering: The practice of harnessing peak states in service of facilitating healing and integration, up to, and including, the reformatting of self-identity.

Hedonism: The pursuit of pleasure, often to excess.

Hierogamy: *Hieros gamos* (Greek). The sacred union between the archetypal man and the archetypal woman.

HomeGrown Humans: People who have completed their initiatory process and surrendered to their part. Fully alive. Deeply committed. Fearless. Joyful. Courageous. Kind. Steeped in the deep knowing of who they are and what is theirs to do. See also: *Anthropos*.

***Homo Ludens*:** Johan Huizinga's term for "the playful ape." In this instance, people dedicated to playing the Infinite Game. See also: Anthropos, Home-grown Humans

Infinite game: James Carse's conceptualization of infinite games—where the point of the game is to keep on playing, as opposed to a finite game, where the point is to win. In the infinite game, one plays with the rules rather than playing within the rules.

Kairos: Sacred time. A location in time-space containing past, present, and future in one location. See also: Garden.

Liminal space: The "adjacent possible"—the transitional spaces between realms of reality. Tidal pools and edges of forests are liminal spaces, as are waking/dreaming states.

Logos: In the Western mystery traditions and mystical Christianity, it is "the word made flesh." A deep, mystical, and even invocatory truth. The most famous example kicks off the book of John, "In the beginning was the Word." Other examples are #truthbombs and the Rastafarian concept of Word Sound Power.

Magick: Distinct from rabbits in hats, magick is the art of bending reality to one's will. Practiced around the world, the Western tradition stems mostly from Greek, Egyptian, Persian, and Jewish lineages. Aleister Crowley added the "k" to distinguish it from lesser versions.

Meaning 1.0: Organized religion. Those who believed were saved. Those who didn't weren't.

Meaning 2.0: Global liberalism. The idea that markets, democracy, and civil rights would bring us into a world where everyone, not just the elect, were entitled to a fair shot at the good life.

Meaning 3.0: A combination of Meaning 1.0 and 2.0. Fulfilling the pro-social functions of traditional faith—inspiration, healing, and connection—

while fulfilling the inclusive promise of modernism—open source, scalable, and anti-fragile.

Metaphysics: The branch of philosophy that examines the fundamental nature of reality, including the relationship between mind and matter, between substance and attribute, and between potentiality and actuality.

Morals: Pre-defined “right” and “wrong” as established by a given authority. Thou shalt / Thou shalt not. See also: Ethics.

Mystery school: A community dedicated to direct experience of non-ordinary states and the truths contained therein. See also: Gnosticism, Platonism.

Neuroanthropology: An emergent discipline combining historical analysis with the findings of neuroscience and psychology to better understand human culture, ritual, and behavior, and to uncover the functional mechanisms of action underneath social forms.

Neuro-kinesthetic programming: Integrating the nervous system and physiology in service of overall heightened perception, cognition, and performance. See also: Embodied cognition.

Omega: The End. The final end point of history, as in “the Alpha and Omega.” The End of Time. Teilhard de Chardin called the Omega Point the “body of Christ,” where all awake humans would join together via the process of Christogenesis.

Ontology: The philosophical study of being. More broadly, it studies concepts that directly relate to being, in particular becoming, existence, reality, as well as the basic categories of being and their relations. Considering the base nature of reality.

Platonism: The philosophy of Plato that affirms the existence of abstract objects, which are asserted to exist in a third realm distinct from both the sensible external world and from the internal world of consciousness. Especially relevant for those experiencing the information richness of peak states.

Pythagoras: Ancient Greek philosopher who influenced Socrates and Plato. Founded a mystery school dedicated to embodied communal living. Articulated idealized theories of music and mathematics. Figured out some cool stuff about triangles, too.

Rapture: A story of impending cataclysm for the many, and the joyful redemption of the few. Or a sense of bliss or extreme, mind-eclipsing pleasure.

Rational mysticism: A worldview of philosophy that acknowledges non-ordinary states of consciousness and experience, but insists on bringing logic, evidence, and reason to their interpretation. See also: transcendental existentialism.

Redemption Songs: See also: Arcana Americana, and Bob Marley's tune of the same name.

Sexual Yoga of Becoming: One expression of Hedonic Engineering, combining erotic stimulation with breath work, soft-tissue massage, tremor release, trauma work, music, dance, psychodynamic work, music, and psychedelics. See also: Tantra.

Soul force: A form of courageous civil resistance coined by Howard Thurman and popularized by Martin Luther King Jr. (originally known as *satyagraha*, a concept of nonviolence first propounded by Mahatma Gandhi).

Spiritual bypassing: The pursuit of experiences encountered in non-ordinary states as a means to avoid the important work needed to be done in real life.

Tantra: The embrace of all that arises as source material for awakening and growth. Often associated with sexuality, but includes the dissolution of ego boundaries and working with all positive and negative aspects of intersubjective co-created reality.

Transcendental existentialism: The two-part notion that life is inherently unknowable, random, or meaningless (the existentialism) *and at the same time* filled with profound grace and beauty (the transcendentalism). See also: Agnosticism, Gnosticism, Rational mysticism.

Vitruvian Man: Leonardo's famous painting of a multi-limbed human inscribed with perfect proportion between squares, triangles, and circles. In our case, a visual representation of *Anthropos*—balancing head and heart, left and right, masculine and feminine, heaven and hell. See Amanda Sage's recent update of Vitruvian Human for a contemporary take on the classic.

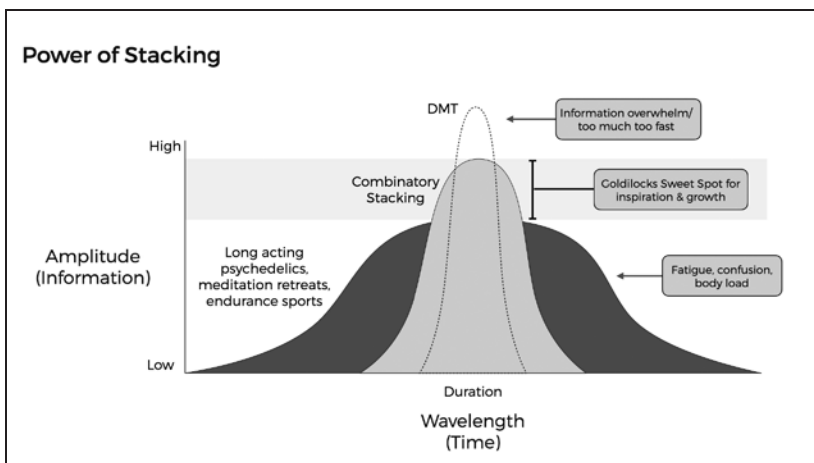
Appendix

Sexual Yoga of Becoming Study

THE POWER OF STACKING

Combining practices like in this study provides two very specific advantages compared to stronger singular interventions—more responsive steering and shorter durations. If you use only one tool from the Hedonic Engineering tool kit—say, psychedelics or high-tech brain stimulation—then if things go sideways it can be much harder to correct. Your thrusters are set full throttle in one direction. Stacking methods together gives us the equivalent of trim tabs on a plane—we can add or subtract from our recipe, making micro-adjustments across several domains. It also makes it easier to reverse effects if someone runs into challenges.

Shorter durations also matter, for a bunch of reasons. For starters, not everyone has ten days to disappear for a silent Vipassana retreat, or twelve hours to invest in LSD therapy (which is a big part of the reason why psilocybin studies



have taken precedence lately, their six-to-eight-hour duration fits better within working shifts at hospitals).

There's also the half-life factor to consider. If you're trying to get to the zone of peak inspiration on LSD or ayahuasca, for instance, you have to take a substantial dose that may grant you 60 to 120 minutes in that sweet spot of insight with hours managing the come up and come down on either side. If you're in a ten-day meditation retreat, you might have profound breakthroughs somewhere between days four and seven, with lots of sitting and suffering before and after. If, at mile seventy of an ultramarathon, you slide into the runner's high to end all runners' highs, it could make your year, but might take months to mend your beaten body.

That's not to say that kind of "earned wisdom" doesn't have a very real place in our efforts to mend and grow. It's just to say it requires large commitments of time and energy, leaves us exposed in the transitions between non-ordinary states and waking consciousness, and takes far longer to recover from and integrate.

Instead, by combining or stacking methods precisely, you can compress the duration while boosting the elevation. Not only does this fit more readily into busy lives and schedules, it also allows us to pay more attention to the insights we do receive and come back with fewer distortions, confusion, or fatigue. It's a game of amplitude over wavelength—height over time.

C³ Physicians

Subjects in the study who elected to pursue more intensive use of pharmaceutical compounds did so under the guidance of their own overseeing physicians who were able to make off-label prescriptions of the relevant substances. While we outlined the baseline protocols that subjects could follow, we left room for self-organizing experimentation within and across couples based on their own curiosity and creativity.

Sex-advice columnist Dan Savage advises that when looking for a romantic partner you want someone who fits the "3G's"—good, giving, and game. Kind, generous, and up for exploration. For anyone especially enthused by Chapter 8 on Sacraments, and Chapter 11 on the Hedonic Engineering study, we'd recommend you seek the care of a supervising physician who fits the "3C's"—curious, connected, and courageous. That means that (1) they are keeping up on contemporary research, MAPS trauma studies, and the use of off-label prescriptions; (2) they have access to informed colleagues and compounding pharmacies; and (3) they are willing to work with responsible patients and help them chart a course to fully dimensional health.

You may have noticed references to Schedule III and IV compounds—ones that are broadly available with a prescription. In this instance we are referring to cannabinoids (technically still Schedule I but legally available in most states), oxytocin (*not* to be confused with OxyContin), nitric oxide boosters (most readily ED drugs), intranasal or sublingual ketamine, therapeutic oxygen, and ni-

trous oxide. In order to access these you will almost certainly need a physical exam, a compelling and credible reason for use (the *DSM-5* has recently added “adjustment disorder” to its coded diagnoses, so if you are having difficulty “adjusting” to the state of the world globally, nationally, or personally, this could be a criterion to explore).

If any particular intervention or practice goes against personal, moral, legal, spiritual, ethical, or cultural norms that are important to you, simply skip that part. All you will need to do is increase the intensity or duration of the methods you do choose to compensate.

The breath work and PTSD study at Johns Hopkins is an example of how this can work. With Dr. Matt Johnson’s leadership, we’ve designed a program that is specifically tailored to work in the Veteran’s Administration, as well as in schools in South America, Africa, and India. We had to design a program that met the evidence-based requirements of large institutions such as the VA, while also being flexible enough and respectful of local cultures and belief systems not to threaten or undermine their values. Otherwise, a profoundly healing practice that unmoored people from their usual foundations could create controversy and blowback, ultimately making things worse, not better.

Because internal review boards have extensive restrictions on hands-on touch, we’ve substituted self-administered bodywork for therapeutic massage. Because non-ordinary states are usually interpreted via cultural norms and religious faith, we’ve backed off many of the frameworks that Stan Grof established in his holotropic breathwork (such as notions of past-life regression and re-birthing experiences) to something more neutral and open to interpretation by the subjects themselves. Because sexuality and substances are nowhere near ready for prime time, we omitted them entirely, while still seeking to replicate some of the same neurochemical and physiological shifts they prompt. So, of the Big Five, we only deployed three—respiration, embodiment, and music. And that should be more than enough to help sufferers of trauma heal and grow.

There’s one additional sliding scale that’s helpful for us to consider in the design phase: the range between high-tech/high-cost options and lower-tech/lower-cost options. With enough time, money, and cutting-edge equipment, you can pretty much get to wherever you want to go—but cost and access become real issues.

Three examples:

Adam Gazzaley, a polymath MD/PhD at UCSF, for example, has pioneered a multisensory immersion pod called the SensSync. It combines VR/AR with high-fidelity acoustics and biometrics that sense and respond to a user’s physiology in real time. It’s an utterly amazing experience, like inhabiting a video game that your body and brain are scripting in front of you. Next steps for the project include integrating this kind of immersion with psychedelic therapies for a maximally transformative experience.

But as of this writing, the only version lives at the Four Seasons Hotel spa in

Oahu, and retail units are expected to launch north of a hundred thousand dollars. It's a cutting-edge innovation, but it's not going to solve our scale issues any faster than buying everyone tickets to Mars.

Or if you are seeking to explore the kind of deep brain-stem resets we've been discussing involving the induction of the vagal nerve or transient hypofrontality (where the conscious executive functioning part of your brain goes offline for a moment), you could get access to the PoNS device we discussed in Chapter 6, some of the newest "vagal pacemaker" implants, or possibly even transcranial magnetic stimulation. But each of these involve expensive, regulated technology, accessible only with formal medical oversight, and typically not covered by insurance.

If you read Michael Pollan's *How to Change Your Mind* and are intrigued by the transformational promise of Schedule I psychedelics, you can submit your name to a research study and hope to be included at some point—but there are tons of exclusionary criteria and it can take a while. Even though the FDA is fast-tracking expanded access for MDMA-assisted psychotherapy, broad availability and affordability are still complex issues that need to be resolved. And repeat use beyond the one to three sessions typically addressed in studies is another issue: the FDA trials aren't even testing for neurotoxicity and other safety issues because, under their rubric, the drug therapy is considered a "single-use intervention." Off-label clandestine use, while prevalent, does not seem to be delivering the same sorts of consistent positive effects (see Age of Aquarius and Rave culture).

If we're sticking to our original IDEO design commitments, and wanting to make sure that solutions remain open-source, scalable, and anti-fragile, then we are drawn back, again and again, to leveraging our innate survival circuitry—respiration, embodiment, and sexuality (music and substances can be seen as effect amplifiers of the first three).

Participant Summary

We accepted twelve couples who'd expressed interest in this research and who had enough stability and focus to successfully complete a three-month longitudinal study. Length of relationship ranged from two to thirty years. While we attempted to represent a variety of experiences and backgrounds, our first criterion was relational and emotional stability. Gender, religion, relational format, and ethnicity are better represented in this cohort than economic background, which tended to skew toward the WEIRD (western, educated, industrial, rich, and democratic).

The Uribe-Sanchezes. Heterosexual, forty-something unmarried couple in San Antonio, Texas, in stable fifteen-year relationship with two grade-school daughters. Both Mexican American. Catholic background. He: architect. She: immigration lawyer.

The Waley-Divines. Gay couple, unmarried. Live-in committed relationship

of six years. Mid-forties and early fifties, respectively. Entrepreneurs in Boulder, Colorado. Puerto Rican and Irish ethnicity. Secular Jewish and Catholic background, “spiritual but not religious” (SBNR).

The McNeelys. Lesbian thirty-something couple. Married. Three-year relationship. Split time between Boston and Los Angeles, California. One partner is an MD, the other a former pro soccer player. SBNR.

The Trables. Heterosexual couple. Thirty-year marriage in Annapolis, Maryland. One son, one daughter, high school age. Both Caucasian. Nonreligious. He: insurance business owner. She: charter school administrator.

The DeMerwes. Heterosexual couple. Ten-year marriage in Austin. South African and American. One son, one daughter, both elementary school age. Atheists. He: business owner. She: commercial real estate broker.

The Daubes. Heterosexual couple. Twelve-year relationship in San Francisco. Secular Jewish Americans. Two sons, grade school age. He: finance executive. She: interior designer.

The Duboises. Heterosexual couple. Twenty-five-year marriage in Washington, D.C. Asian American and Caucasian. One son, one daughter, both college age. “Christmas and Easter” Methodist background. He: aerospace engineer. She: lawyer.

The Davises. Heterosexual couple. Five-year open relationship in Los Angeles. African American and Armenian. No children. Baptist background, SBNR. He: banker and crypto currency specialist. She: event producer.

The Comforts. Heterosexual couple. Ten-year marriage in Bozeman, Montana. No children. Caucasian. SBNR. He: digital marketer. She: real estate.

The Lins. Two-year open relationship (not primary spouse) in Atherton, California. Asian American and Jewish background. No children. SBNR. He: private equity. She: gallery owner.

Objective Metrics

We wanted to track what we were doing. If this protocol wasn’t helping people experience more peak states, healing, and connection—it probably wasn’t worth the time or risks. So we identified a pair of objective metrics for each of those three categories. To better facilitate comparative analysis, we chose measurement tools that cross-reference to other studies in the field. This is no small point. If the nascent discipline of Hedonic Engineering stands a chance of addressing the Meaning crisis, we need objective, open-source research that can build on itself. Otherwise we’ll remain stuck in the realm of unverifiable truth claims. Hopefully other academic and citizen scientists can use these initial baselines to advance their work.

We also included subjective self-reporting in the study, which while technically “anecdotal” would likely capture the experiences of the participants and provide context and color for the objective measure. (A selection of these responses is included in the findings below.)

Ecstasis Measures

Johns Hopkins Mystical Experience Questionnaire (MEQ30, weekly/episodic): This is the thirty-question instrument we mentioned earlier that measures sense of the mystical, positive mood, transcendence of time and space, and ineffability.

Flow State Scale (FSS, weekly): This is a nine-question assessment determining the level of mastery, engagement, and reward someone experiences in daily life.

Communitas Measures

IOS relational closeness scale (weekly): Inclusion of Other in the Self (IOS) scale is a simple instrument where raters score how close they feel to another based on a seven-point scale from completely separate, to partially overlapping, to totally merged.

PANAS positive affect scale (weekly): ten questions measuring positive emotions based on a five-point Likert scoring. The instrument also has ten questions measuring negative affect, which we omitted from this study.

Catharsis Measures

PCL 5 Trauma score (pre/post): The PCL-5 is a twenty-item self-report measure that assesses the *DSM-5* symptoms of PTSD. It does not take the place of the clinician-administered CAPS trauma assessment in dedicated trauma studies but can serve as a helpful initial benchmark.

Resting HRV (via Oura) (daily): Heart Rate Variability measured overnight by the Oura Ring, a biometric wearable device. Heart Rate Variability is a marker of how balanced our sympathetic (fight/flight) and parasympathetic (rest/digest) bodily responses are.

Cortisol Waking Response (weekly): Urine-based sampling upon waking to determine cortisol levels as an indicator of rest, recovery, and activation levels and as a measure of balance of the hypothalamic-pituitary-adrenal (HPA) axis.

The Protocol

We established a baseline-suggested commitment for the twelve weeks of the project.

Daily: Fifteen minutes clitoral stimulation of the female partner (or comparable genital stimulation for gay couple). This practice was intended to create a neurochemical baseline of priming and to serve as a comparison to the existing research on this practice.

Fifteen minutes of partner yoga, Thai massage, and myofascial release (with an emphasis on soft-tissue structural integration using basic tools like rollers, balls, percussive therapy guns, etc.).

Morning monitoring of sleep data and overnight resting Heart Rate Variability.

Journal entries.

Twice weekly: Sixty-minute sessions of Hedonic Yoga—fifteen-minute clitoral stimulation. Thirty minutes of exploratory sexuality and body work (using the Rule of 9s practice—which is a structured sequence of deep and shallow thrusting combined with breathing and eye contact. Nine shallow thrusts followed by eight shallow thrusts, one deep thrust. Seven shallow thrusts two deep thrusts . . . until nine deep thrusts, and then return to beginning with nine shallow thrusts. This is harder to pull off than it is to read about, and few couples successfully get in more than two or three sets before losing track). Fifteen minutes of breath work/closed-eye recumbent meditation to curated musical soundtrack.

Once weekly: One-hundred-and-twenty-minute fully integrated Hedonic Yoga practice. Fifteen minutes of clitoral stimulation, followed by mutual body work, including traction of joints and palpation of soft tissues, “edging” (bringing a partner up to but not past the point of climax), intensive hyperventilatory breath work followed by gas-assisted static apnea. The “52.1 Method”—fifty hyperventilations, followed by two deep breath holds with 100 percent oxygen, followed by one inhalation of nitroxxygen and maximum-static apnea combined with pleasure/pain optimization. Fifteen minutes of closed-eye recumbent Savasana meditation to music. Documentation of insights.

Once monthly: Three-to-four-hour deeper dive with full exploration of all above practices plus potential addition of more intensive visionary elements—extended breath work, prolonged sexual and sensory stimulation, longer-acting compounds. Ideally timed to coincide with week of ovulation for female partner(s).

Partners were encouraged to explore and experiment within the Hedonic Engineering Matrix, selecting from Mild, Medium, and Spicy options, with an encouragement to “start low and go slow.” They were then free to add additional intensity and complexity only after comfortably integrating prior practices. This approach is the opposite of a conventional study, which seeks to rigidly control for variables. By imposing minimal scaffolding, we were trying to support individual and collective exploration and innovation within boundaries.

The Findings

An unexpectedly interesting finding was the self-organizing innovation that arose within the study cohort. Instead of sharing specific instructions, we dumped out a bunch of LEGO blocks (in the form of the Hedonic Engineering Matrix and default practice schedule), showed how they can snap together in different configurations, and left a few potential recipes around to inspire creativity. That was the “liberating structure” of this experiment.

Over the course of those three months, couples continued to modify and innovate the beginnings of what can perhaps best be described as a Sexual Yoga of Becoming.

While we were able to gather some meaningful data from this study, not everything went as planned. First, the human factor. Four participants (two couples, not included in list above) pulled out of the program within the first six weeks, nullifying their results.

Mr. and Ms. N: “We said yes to this study because . . . we hoped that maybe it would help change things up for us. It really hasn’t helped. If anything, it made things worse. We’ve got enough on our plates as it is, this isn’t our hill to die on.” For them, the focus and intensity of the training wasn’t a good match with their relational status, despite initially hoping it could be.

The other couple who stepped out had dependent/caregiver issues and did not feel they had the ability to fully participate while balancing those demands. This is a common challenge for many families, especially those in “the sandwich years” with aging parents and growing children. It’s a factor to consider in any broader applications of this approach.

Three additional couples had to manage similar issues (family commitments and relational challenges) but were able to complete at least three-quarters of the program and were included in the analysis.

Two couples completed the program but subsequently separated. This highlights the limitations of a twelve-week intervention to save or fix longer-standing issues in place of more established interventions.

On the measurement side of the study, we had to scrub the Waking Cortisol test, as sampling, collection, and testing weren’t consistent enough across the cohort to remain valid. This breakdown illustrates the tension common to many study designs. Measure too little, and you risk missing the golden insight. Measure too much, or too often, and you end up with subject fatigue and a breakdown in compliance across data sets.

Additionally, we had no way to validate accuracy of self-reporting and had to take participants at their word. Like many dietary studies, where subjects over- or undercount calories consumed outside clinical settings, we had to accept their data at face value.

While the objective metrics offered some encouraging insights on the ability of Hedonic Engineering to prompt inspiration, healing, and connection, some of the most interesting data to come back from the Kitchen Sink Study were the subjective reports. We include a few representative examples here after the metrics for each section (lightly edited for clarity and consistency).

Communitas Results

Since this was a couples study, it makes sense to begin with the Communitas measures. After three months of dedicated focus, did partners feel closer and more connected to each other?

On the PANAS Scale initial baselines, the group averaged 2.1/5 for their identification with ten subjective happiness scores. By the completion of the program, that score had moved to 3.3—an increase of 24 percentage points.

(We do not know how persistent that effect was, as we did not conduct any long-term follow-up assessment.)

On the IOS Scale, which measured how close or separated partners felt from each other, the pretest average was 3.8/7 (indicating “some overlap” of intimacy). This moved to a 5.6/7 (indicating “strong overlap” of individuation and intimacy), an overall raw score increase of 26 percent.

In general, people felt happier over the course of this study, and more connected in their relationship with each other. This is not particularly surprising, as focusing on a relationship for three months is likely going to be more intentional than the default settings of most lives. But there were serious challenges as well—as evidenced by those who abandoned the program, or ended their relationship subsequently.

Even for those who completed the study, the practices often surfaced uncomfortable emotional and relational content that participants weren’t always well equipped to face.

Ms. Dubois: “As soon as we felt we had this totally dialed . . . we hit a brick wall. Old stuff, from way back in our relationship where I had a brief affair, while Mr. D had been drinking and working too much. All of that came roaring back and I honestly didn’t know if we’d make it as a couple—never mind sticking with this study.”

Conversely, a man found that his commitment to his partner increased.

Mr. Waley: “I have to admit it—I’ve always had a high sex drive and a wandering eye, and the thing that always terrified me about ‘settling down’ was all the fun and adventure I’d be missing out on if I did. But now that we’ve been exploring this together? . . . It’s expanding my life, not limiting it. . . . I feel like I can commit with no regrets.”

A woman noticed the difference between roommate/teammate dynamics with her spouse and the increased polarization they experienced over the program.

Ms. Uribe: “When we first met we were constantly physical and romantic together, but over the past few years of my firm getting hectic and our kids, we’d just settled into teammate roles. But just doing the daily practice did something crazy to our attraction. It was like electro-magnets that build up charge from spinning. . . . I thought those feelings were in the rearview mirror! I feel like I’ve been learning sex through love, and Mr. U has been learning love through sex.”

At least in theory, this heightened sense of positive connection (communitas) would serve as a supportive foundation for any potential healing and integration that participants might accomplish. To confirm that, we needed to assess the markers of physical and emotional stress (i.e., catharsis results) to see if healing was happening.

Catharsis Results

The resting HRV scale tracks physiological stress markers, measured by the millisecond variation in heartbeat rhythm. Seventy-five percent of normal

healthy users have scores ranging from 46 to 72 milliseconds. A higher score is generally considered healthier. The group baseline was 60 milliseconds, and their post-study average was 66 milliseconds, indicating an overall increase in the health of their autonomic nervous systems. Women experienced greater improvement in this metric, experiencing a 9-millisecond increase, compared to the men, who only gained 3 milliseconds.

This loosely matched the results from the PCL5 Trauma Scale. The initial benchmark scored women at 42/120 points, meaning they had experienced more trauma, while men scored 34, for a blended average of 38 points. This placed the group on the lower end of the “Moderate Level of PTSD” band. Post-testing indicated a general reduction in those scores to the lower range of Moderate with 32 points. Women still scored in the Moderate range with 36, while the men dipped below into the Mild/Sub Threshold Level with an average of 28 points.

One woman had an unexpected regression into a traumatic incident from her past that she was able to meet with the support of her partner.

Ms. Trable: “This didn’t really start happening until we were into the second month and got a little more comfortable with the extended sessions with lots of stimulation and more intense breathing—but when we were making love and holding eye contact I saw Mr. T’s face start shape shifting. . . . At first I was really scared, because it reminded me of flashbacks of when I was molested growing up, but when I breathed through it and trusted him, it turned into something really powerful. . . . But without the love and trust I have for my man—there’s NO WAY I would’ve felt safe enough to explore that. It still scares me, tbh.”

A man reported a meaningful neurological/respiratory release from an improvised somatic healing session.

Mr. Daube: “We tried that Vagal Protocol we’ve been discussing on the chat [a modification involving the male partner wearing the Aneros prostate device, along with throat massage and abdominal palpation], and something broke open in me. When Ms. D started to push on my lower belly I felt all this shame and vulnerability rush through my body. . . . I never realized how much self-loathing and fear of weakness I was hiding in a rigid stomach. But she kept pushing deeper and deeper—almost like her hand was gonna press into my spine. Then I couldn’t take it anymore and took a huge sucking breath. I cried in big giant spasms, and my whole body started trembling and shaking uncontrollably. Afterwards I felt calmer and more grounded than I can remember.”

Another woman innovated an interesting variation on MDMA PTSD therapy, but instead of MDMA she used other state-shifting tools to put herself in a supersaturated state to revisit and rework a past traumatic memory.

Ms. McNeely: “We kind of stumbled into something—magical role play, I guess? . . . I found myself doing the breath-hold/gas and going down what we’ve come to call the Cosmic Fuck Tunnel, I found myself flashing back to a sketchy,

deeply regrettable one-night stand I had during pledge week in college. But instead of being that nineteen-year-old girl, I was me—now. A fully empowered Turned On Woman. I got to relive that night and rewrite the script. Turned On me was there, showing that young boy exactly how to meet me. Calling the shots. Not putting up with any of his shit. Feeling my pleasure. It was super empowering. It's not that the old memory of what 'really happened' is gone. It's more like it's dimmer now, and the new version is fresher and in color."

The relatively low initial trauma scores of the cohort make sense considering that selection criteria for the study did not focus on previously diagnosed symptoms or adverse incidents. The range, or variation from highest to lowest scores, was greatest on the PCL5 of all six metrics we tracked, reflecting the asymmetric impact or absence of trauma in subjects' lives.

Additionally, women scored higher initially and remained above the "sub-threshold" level in follow-up testing, but they did record the strongest improvement in resting HRV. This would indicate a positive neurophysiological reset of some kind, and a lessening of residual stress in their bodies. Since the PCL5 is self-administered, we would likely need to clinically administer the more robust CAPS test to separate out people's subjective self-reporting from a more accurate diagnosis.

Ecstasis Results

In assessing the category of peak experience, we wanted to try to capture both micro and macro non-ordinary state experiences. We wanted to see if there was an increase in easefulness and autotelic functioning (known as a flow state), along with any more significant experiences of mystical states.

The nine-question short version of the Flow State Scale measures overall, non-task-specific experience of autonomy, mastery, absorption, and purpose. The pretest measured a 3.4/5 score (68 percent). The posttest scored 4.2/5 (84 percent), for a 16 percent boost in overall raw score. There were no significant gender differences. The baseline scoring tracks closely to what our organization has assessed with thousands of subjects. The final result is higher than what we have observed after completion of a six-week digital training, which is to be expected given both the increased duration and the physical embodiment of this twelve-week program. There is ample selection bias in both these results though, as people interested in taking a course on peak performance (or an hedonic engineering study) may have a greater proclivity for attaining these states, a conscious awareness of them, or both. But in general, participants did report a significantly higher incidence of timelessness, effortlessness, and selflessness through their weeks in the study.

The final score to consider is the Johns Hopkins Mystical Experience Questionnaire (MEQ30). Initial benchmarking of prior life experiences placed the men at a 2.5/5 in the "Slight" mystical experience category, while the women scored a 3.1/5, breaking into the "Moderate" category. Final results saw an

overall average of 3.95, with a men's score of 3.8 and a women's of 4.1, elevating them into the "Strong" category of mystical experience.

One woman found that combining the sonic driving of music with coordinated movement, breath, and stimulation meaningfully boosted access to non-ordinary states. (We would hypothesize that this type of "neurosomatic discombobulation" might knock out executive functioning and Default Mode Network activity, leading to a visionary state, but we were not able to test this during this study.)

Ms. DeMerwe: "Okay. Maybe we were slow figuring this out? . . . We do the 15 min stroking prep, then do some body work together on the bed. Then we'd take turns edging each other (orally) while one partner relaxed and did the breath work. With [cannabis] edibles and nitroxy onboard, we found ourselves naturally synching our movements, breathing and touching to the pulse of the music. I know that sounds corny—"Make love to the music!"—but when we would do it—especially to that playlist the group's been sharing—we would come unstuck in time! It was the dreamiest, easiest way to unlock really visionary spaces—it felt like horizontal dancing!"

A man reported an intense visionary experience, combining a full selection of options from the Hedonic Engineering Matrix, including prescription compounds.

Mr. Davis: "Week Ten we finally dialed in what we called the Whole Enchilada . . . breath work, blending pleasure/pain, working with cannabis and nitrous, and dialing our space and music. Then we added in oxytocin and ketamine nasal spray. WOW! We ended up doing spontaneous yoga on our backs—pushing and pulling on our bodies and joints, doing backbends and massaging each other's bellies—it felt like getting in a month of yoga in an hour. By the time we actually got around to lovemaking it was super intense—but we also got . . . insights into our life—where our daughter was suffering in school, and even why we have the circle of close friends we do—it was like looking at our life through a crystal ball."

A few of the couples coordinated with their functional medicine doctors to develop some substantial innovations (their report is the first full expression of the Vital Respiration Protocol we outlined in Chapter 5, "Respiration").

Mr. and Ms. Comfort: "Week Ten. We figured we'd really go for it. So we got our doc to prescribe us Meduna's mixture [carbogen, a 70 percent oxygen/30 percent carbon dioxide blend], the nitrogen [70 percent nitrous oxide/30 percent oxygen], and the [oxytocin-ketamine] nasal spray. We did our regular warm-up, body work, scene setting—even added in the Vagal nerve stack too [anal plugs plus throat massage/traction]. . . . We did the breath prep and the carbogen just as the dark music came on loud (I had a blindfold on too). It was awful! . . . But Ms. C. just kept her hand on my heart and belly . . . I was lost in the underworld and barely remembered I had a body. But then we switched

to the nitroxxygen blend right as the music went celestial. I lost all track of time and space. I was just floating. Peaceful. Extreme tension followed by total release . . . I was looking down on my whole life, this whole human experience from another dimension. It felt super familiar too—like I’d always known this? . . . It felt like we’d just hacked some kind of timeless death/rebirth ritual. It’s been four days, and I’m still trying to figure it all out.”

Both genders reported meaningful increases in their mystical states, with almost as large a variation in range as the PCL5 data. Some users had profound level 5 breakthroughs, while others could be classified as close to level 1 or 2 nonresponders. While there were no consistent gender differences in the incidences of flow state among the cohort, when it came to stronger, potentially mystical experiences women pulled ahead. This was consistent with the clitoral stimulation study, as well as Padmasambhava’s ancient assertion of women’s capacity in this domain. The rate of overall increase and the final scores indicated a higher incidence of strong mystical experiences than many current psychedelic studies.

* * *

If we were to really try to put proof to a key thesis of the book, that we need to move as rapidly as possible to global-centric consciousness, then we would hope that boosting inspiration, healing, and connection would accelerate development to those higher stages.

To do that, we would need to have pre- and post-tested participants’ stages of consciousness. Two of the most rigorous metrics come from Harvard—the Maturity Assessment Profile first developed by Jane Loevinger and then augmented by Susanne Cook-Greuter, and the Lectica assessment developed by Zak Stein and Theo Dawson. If it could be reliably established that hedonic engineering practices not only reduce trauma, boost mystical states, and heighten connection but also expand perspective and problem-solving, then we’d really be into meaningful territory. This validation awaits further study as it was beyond the scope of this pilot.

Participant Journal Reports

The following are excerpts (with original anonymized naming) from the weekly journal entries that participants kept over the course of the three-month experiment. All members were on their own recognizance to be exploring with the oversight of their own C³ physician/therapists/clergy and to ensure that they were observing all applicable legal, moral, ethical, professional, and medical guidelines. They were also free to “adapt rather than adopt” and explore their own unique innovations within the boundaries of the experiment. (Lightly edited for clarity and consistency, grouped under categories of experience type. Some of these entries were partially excerpted in the prior summary.)

Initial Experiences with the Protocols

Ms. V: “At first, it felt awkward and kinda forced to have to schedule our sessions. We’ve always thought of ourselves as spontaneous—especially when it comes to our love life. But once we got over that, we started valuing the ‘sexual fitness’ time, knowing that it was going to be there no matter what—and with kids in the house, we definitely found it easier to squeeze in these smaller chunks of time together than if we’d been holding out for a full romantic date night.”

Ms. O: “I found it really uncomfortable to be on the receiving end of the ‘fifteen-minutes’ practice. I realized that all of my life I’ve been so conditioned to be a pleaser that to just lie back and receive sensation, and not even have to stress about climaxing (or satisfying my partner), was incredibly difficult for me.”

Ms. Y: “Once I got used to the routine (and I made sure to set up our space nicely and put my favorite music on my headphones), I found that I could get into some pretty dreamy spaces during our [daily fifteen-minute] sessions. Only time I’ve felt something similar was during long mountain runs or ninety-minute intense yoga—but this was much faster to get to same place.”

Mr. Z: “To be honest, I wasn’t looking forward to the daily practice much at all. Figured it was gonna be kind of boring to just sit there and ‘twiddle my thumbs.’ It was way harder than I’d expected. Paying attention and really learning to go slow and soft was, for me, a good challenge and it forced me to really tune into Z’s signals, which I thought I had dialed, but realize I kinda didn’t! I’d never realized how much I was wired for harder, faster ever since learning to masturbate as a teenager. This felt like I had to reprogram my entire arousal routine.”

Mr. S: “When I first looked at the calendar for this study, my heart sank. We’ve really fallen off the horse as far as romance goes, and the idea that we had to make time to have sex three times a week seemed pretty excessive. I mean, who has time in their life for that? But a month into this, it’s almost the opposite. We can’t wait until our next session.”

First Exposure to Peak States

Ms. Q: “First time we tried the deeper-dive weekly session, there was too much going on to really relax and experience it. It was like going to a tango class and all I could think of was getting the steps right. But the second and third weeks? OMG! When we finally got the breathing and edging together, along with the music? I found myself on another planet. I came back laughing and crying, it was so beautiful.”

Mr. U: “At first, we set it up so I was in the ‘driver’s seat’ for our weekend sessions. Figured I’d rock my lady’s world. But then, when it came to my turn [with the gas-assisted breath hold], I dissolved into this place where I heard a voice say, ‘So, this is where you’ve been sending your lover without any idea where she was going?’ I felt like a total fool—like I’d been given a dunce cap and had to sit in the corner!”

Ms. T: “I didn’t have what I would call my aha moment until now [week 5]. It was my turn to do the edging/breath work process, and when I held my breath and Mr. T stimulated me, right as the song kicked into another gear, everything went still, I felt like I’d slipped outside of time. I saw perfectly how I’d been afraid of my big creative project at work and how it all traced back to a spelling bee I choked at in grade school! It sounds crazy—but it made total sense—I’m still thinking about it.”

Mr. Q: “Our weekly ‘Sabbath’ practice has turned into something pretty indescribable. It makes me think of that ‘vomit comet’ airplane that does those big roller-coaster loops in the sky and leaves everyone weightless, like they’re in space. Doing the protocol and the vital respiration breath hold, it feels like we’re taking turns lobbing each other into zero G—but for our minds. When I’m there, I can think anything I want, about anything I can think of, with a 300 IQ for five to ten minutes. It’s like jacking into the mainframe of a cosmic computer!”

Relational Experience of Sustained Practice

A note from one of the couples who dropped out of the study:

Mr. O: “Sorry to say, don’t think this study is for us. We gave it an honest start, but then things got pretty uncomfortable. I know this was supposed to enhance our intimacy, and we did try that—but that meant getting more intimate with some pretty major problems in our relationship (mostly unresolved sexual history stuff). We’re gonna bow out, maybe try some couples therapy, but, to be honest, I’m not that hopeful. Not the right time or approach for us.”

A note from a woman in a couple who dropped out:

Ms. N: “I said yes to this study because Mr. P was so excited by it and I guess I thought/hoped that maybe it would help change things up for us. It really hasn’t helped. If anything, it made things worse. We can’t even agree on how to do the ‘daily fifteen’ together. I get mad at his controlling, he gets mad at my nagging. Pretty soon, the mood is done, and we don’t even want to talk to each other. We’ve got enough on our plates as it is, this isn’t our hill to die on.”

Ms. R: “When we first met, we were constantly physical and romantic together, but over the past few years of my business getting hectic and our kids, I didn’t realize how much we’d just settled into teammate roles. We still cared for each other, obviously, but the spark had kinda fizzled. But just doing the daily practice did something crazy to our attraction. It was like electro-magnets that build up charge from spinning. We couldn’t wait for our Tuesday/Thursday sessions, and by Sunday I couldn’t think of anything else. I thought those kinds of feelings were in the rearview mirror!”

Ms. Z: “Our ‘romantic hookups’ still happen, but adding sexual fitness—something we commit to ahead of time and just do—I didn’t know that was an option. Now I treat it like flossing my teeth or going for a run—we do it because we know we feel better having done it.”

Mr. N: “I have to admit it—I’ve always had a high sex drive and a wandering eye, and the thing that always terrified me about ‘settling down’ was all the fun and adventure I’d be missing out on if I did. But now that we’ve been exploring this Hedonic Engineering together? It’s not even in the same ballpark! I feel like I’d trade all the flirting and novelty in a heartbeat to keep going down this road together. It’s expanding my life, not limiting it. For the first time in my life, I feel like I can commit with no regrets.”

Ms. V: “At first I was a little irritated and self-conscious about the daily stuff. Then I relaxed and basically surrendered to it. It felt good, and my days seemed a little lighter. It wasn’t until [this couple took a two-week hiatus due to a family event] and we stopped that I actually realized how much of a positive difference it had made. I guess I was like a frog in a hot tub! But those two weeks I felt more stressed, was snapping at Mr. V, and had a harder time falling asleep. Wasn’t until we got back home and started practicing again that I felt that tension go down again. I’m getting used to this ‘new normal’! Can’t believe we were trying to make it through the grind without it before.”

Mr. Y: “Since college, I’d pretty much settled into a familiar evening routine where I’d have a couple of beers and maybe a joint. It’s been how I decompress from work and turn my brain off. Since we’ve been doing this practice, I’ve found myself wanting that less, and even saving up our ‘state shifting’ to do together on our weekend sessions. I’m like a boy scout now—six days a week;).”

Intimacy and Trauma

Ms. M: “Actually, we’ve kind of run into an issue that’s pretty scary for us. I’m concerned this is becoming an addiction? At first I was pretty skeptical that anything out of the ordinary was gonna happen. We both had our fun in college and in our twenties—I figured this would be pretty tame in comparison. But once we started doing the daily and weekly stuff, especially combining with substances, it became something we started doing all the time—like Sunday practice every day. I’d joke that I was like Charlotte in *Sex and the City* [where she gets a Rabbit vibrator and her friends have to stage an intervention]. But now I’m seriously having to question priorities and whether this is ‘too much of a good thing?’”

Ms. W: “Once we got the hang of things and kind of settled into a rhythm that worked for us (about weeks three to six) we started consistently getting ‘there.’ We were literally high-fiving and laughing on the bed some days. But as soon as we felt we had this totally dialed and couldn’t miss getting to what we started calling ‘the Yum,’ we hit a brick wall. Old stuff, from way back in our relationship where I had a brief affair, while Mr. W had been drinking and working too much. All of that came roaring back and I honestly didn’t know if we’d make it as a couple—never mind sticking with this study.”

Later related entry by Ms. W:

"It was confusing to go from such high highs to low lows. If we hadn't had the other couples going through this, I'm not sure what would've happened. But we stuck with it and kept going with our practices. Some days it felt awful. We literally hated each other's guts! But we did it anyway. (That was a complete change for me, as I used to withdraw and withhold sex when I was pissed at him.) Then, all of a sudden, we were back in the Yum again! It felt like psycho-archeology—just burning through all the layers of our relationship."

The Ws hit two more rough patches over the course of the study.

"The second one was just as hard and confusing. I actually ended up spending a couple of nights away at a girlfriend's house, it got so bad. But by the third time, we could kind of remember the pattern, so it didn't knock us so far off track. One night we wrote a Post-it note: 'Remember—we did this ON PURPOSE!' and stuck it on the fridge. That saved us more than once! Now when we get to those rough patches, we know they're coming, and keep practicing through them. It's weird—you don't actually have to talk about all your problems all the time. At the end of a session we often feel better, and half of the stuff we were fighting about just doesn't seem that important anymore. (that doesn't mean we're out of the woods, it just means we're slowly learning some new ways to deal when things get sh*tty)."

Ms. X: "This didn't really start happening until we were into the second month and got a little more comfortable with the extended sessions with lots of stimulation and more intense breathing—but when we were making love and holding eye contact, I saw Mr. X's face start shape shifting—he flickered between a madman, a Viking, even an almost demon-looking dude, before coming back to himself. At first I was really scared, because it reminded me of flashbacks of when I was molested growing up, but when I breathed through it and trusted him, it turned into something really powerful. It was almost as if we weren't just me and him anymore—we were every man and every woman ever—like we weren't just doing our work, we were doing 'the work.' But without the love and trust I have for my man—there's NO WAY I would've felt safe enough to explore that. It still scares me, tbh."

Mr. Z: "I'm a pretty type-A alpha kind of guy, but this week we tried that Vagal Protocol we've been discussing on the chat [a modification involving the male partner wearing the Aneros prostate device, along with throat massage and abdominal palpation], and something broke open in me. When Mrs. Z started to push on my lower belly, I felt all this shame and vulnerability rush through my body—I flashed to my Army dad making me stand up straight with shoulders back and my gut sucked in. Same in high school and college locker rooms. I still catch myself looking sideways in the bathroom mirror to make sure I've still got a six pack. That whole time, I never realized how much self-loathing and fear of weakness I was hiding in a rigid stomach. But she kept pushing deeper and deeper—almost like her hand was gonna press into my

spine. Then I couldn't take it anymore and took a huge sucking breath. I cried in big, giant spasms, and my whole body started trembling and shaking uncontrollably. Afterward, I felt calmer and more grounded than for as long as I can remember—I can actually feel my center now as I'm writing this."

Mr. X: "This is kind of awkward to write about. I was raised by liberal parents in NYC, a feminist mom, progressive schools, etc, and I always considered myself super-respectful of women. When Ms. X first wanted to explore more intense sensation play and pleasure/pain I was really conflicted. It was so against everything I thought a 'good guy' did, and there's literally no models for how to do this outside of porn, which seems not okay and not safe. Then our second month special night, Ms. X started to playfully tease me into whipping her—but she called me out on how confused I was. 'You're whipping me like a little boy who doesn't know what he's doing,' she said, 'and that makes me not trust you. Whip me like a strong man!' she said. 'Whip me like a dangerous man,' she said. 'Whip me like a good man!' she said. 'Whip me like a loving man!' Each time I tried to do what she'd asked. It was powerful to have her lead me like that, and really interesting to explore all of those different flavors. Her trusting me let me trust myself. We both realized violence and disrespect have nothing to do with exploring more intensive sensations. You can want the latter without ever having to put up with the former."

Deepest Dives—Innovations with the Protocols

Mr. S: "Week Ten we finally figured out what we called the 'whole enchilada.' We were pretty comfortable by that point with the breath work, blending pleasure/pain, working with cannabis and nitrous, and we had our space and music pretty locked. Then we added in oxytocin and ketamine nasal spray. WOW! We ended up doing spontaneous yoga on our backs—pushing and pulling on our bodies and joints, doing back bends and massaging each other's bellies—it felt like getting in a month of yoga in an hour. By the time we actually got around to lovemaking it was super sensual—but I also got a ton of insights into our life—where our daughter was maybe suffering in school more than she'd told us, and even why we have the circle of close friends we do—it was almost like looking at our life through a crystal ball."

Ms. U: "Coming into this third month has been fun, fun, fun! Also heavy. Every week seems to bring up something we need to work through. Sixty days of daily stimulation have left me feeling much more open, more playful, and more relaxed. I like this version of me better. On our weekend sessions especially we've been getting to some pretty amazing places, and last weekend something happened where we kind of stumbled into something—magical role play, I guess? I've never been into the whole 'sexy nurse/French maid' thing—always seemed objectifying and cheesy. But when I found myself doing the breath hold/gas and going down what we've come to call the Cosmic Fuck Tunnel (not mine, my partner said that one), I found myself flashing back to

a sketchy, deeply regrettable one-night stand I had during pledge week in college. But instead of being that nineteen-year-old girl, I was me—now. My fully empowered turned-on woman. And I got to relive that night and rewrite the script. Turned-on me was there, showing that young boy exactly how to meet me. Calling the shots. Not putting up with any of his shit. Feeling my pleasure. It was super-empowering (and crazy hot;). It's not that the old memory of what 'really happened' is gone. It's more like it's dimmer now, and the new version is fresher and in color. It's almost like I can time-bend and go back and reclaim my past from my present."

Ms. Z: "This one's a little embarrassing, but the more we got into this whole 'sexual fitness' space and really committed to it, the more I gave myself permission to explore my own edges and desires. And something I've always been curious about was having two lovers at the same time. But that's so risky for a woman to admit! What are the odds of having a boyfriend/husband and then finding another trustworthy guy to explore that—and if I did really let go or like it, or not like it, then what would happen? Would I get slut-shamed if it ever got out? Would my husband ever look at me the same? Seemed too risky. Then [Ms. Q] shared on the chat about some of the toys they've been experimenting with, and I finally plucked up the courage to try it. Not the extra lover part—but the experience of making love to two men with just my man actually present and toys standing in. Holy Smokes! We played fancy dress-up, arranged the bedroom mirrors so we could see and be in the scene at the same time. I felt alive, in charge, and fully stimulated. It was like I unlocked some ancient temple priestess in me. Even dealing with the kids and lunches this morning, it all felt more doable—less crushing. Like I had a little secret I could come back to that only I knew. It was like I 80/20'd a threesome—80 percent of the fun and learning, and only 20 percent of the risk!"

Mrs. W: "Okay. Maybe we were slow figuring this out? But OMG it seems so simple now that we have! We do the fifteen-minute stroking prep, then do some acro yoga together on the bed [partner-balancing yoga practice that is often taught in conjunction with traction-based massage techniques]. Then we'd take turns edging each other (orally) while one partner relaxed and did the breath work. With [cannabis] edibles and the N_2O on board, we found ourselves naturally synching our movements, breathing and touching to the pulse of the music. I know that sounds corny, or obvious 'make love to the music!'—but when we would do it (especially to that playlist the group's been sharing), we would come unstuck in time! It was the dreamiest, easiest way to unlock really visionary spaces—it felt like horizontal dancing!"

Mr. Y: "Week ten. We figured we'd really go for it. So we got our doc to give us access to Meduna's Mixture [carbogen, a 70 percent oxygen/30 percent carbon dioxide blend], the nitrogen [70 percent nitrous oxide/30 percent oxygen], and the [oxytocin-ketamine] nasal spray. We did our regular warm-up, body work, scene setting—even added in the Vagal nerve stack, too [anal plugs

plus throat massage/traction]. And we mixed up our music playlist, so we had some darker, heavier stuff in there, followed by more angelic tracks. We did the breath prep and the carbogen just as the dark music came on loud (I had a blindfold on, too). It was awful! I felt like I was dying, like one of those horror movies where you're buried alive. But Ms. Y just kept her hand on my heart and belly. The music was frightening and emotional—I was lost in the underworld and barely remembered I had a body. But then we switched to the nitroxxygen blend right as the music went celestial. I'm not sure what did it—but I lost all track of time and space. I was just floating. Peaceful. Extreme tension followed by total release. Truly heavenly. I was looking down on my whole life, this whole human experience from another dimension. It felt super familiar too—like I'd always known this? But somehow was just remembering it again. It's been four days, and I'm still trying to figure it all out. It felt like we'd just hacked some kind of timeless death/rebirth ritual."