



## Future directions in meditation research: Recommendations for expanding the field of contemplative science

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### Abstract

The science of meditation has grown tremendously in the last two decades. Most studies have focused on the effectiveness of mindfulness-based interventions, neural and other physiological correlates of meditation, and emotional aspects of meditation. Far less research has been conducted on more challenging topics, such as group and relational, transpersonal and mystical, and difficult aspects of meditation; anomalous experiences related to meditation; and post-conventional stages of development associated with meditation. While meditation may be crucial to people's psychological and spiritual development, could represent mechanisms by which meditation confers benefits, and could themselves be important outcome measures. In addition, since large numbers of novices are being introduced to meditation, it is helpful to investigate the encounter that are not well understood. Over the last four years, a task force of meditation researchers developed recommendations for expanding the current meditation research field to include these topics. These meetings led to a cross-sectional online survey to investigate the prevalence of anomalous experiences among meditators. Results show that the majority of respondents report having had many of these anomalous experiences. While some of the topics are potentially controversial, they can be subjected to rigorous investigation. These arenas represent largely uncharted scientific terrain and provide excellent opportunities for both basic and applied research. We provide suggestions for future directions, with accompanying online materials to encourage their implementation.

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## Introduction

The field of meditation research has grown exponentially in the past two decades. A total of about 100 articles on the science of meditation existed in 1990. Today, there are over 4,000 (US National Library of Medicine). About 25 papers were published per year in the 1990's, whereas over 400 were published in 2017. This growth is commendable and has led to a large increase in the knowledge of cognitive, psychological, and physiological processes associated with meditative practices, as well as making important contributions to the current psychological literature.

Careful efforts by clinicians, theorists, and researchers to understand meditation have led to a significant increase in the number of studies translating meditative practices into clinically relevant interventions, and examining their effects on various health outcomes. For example, secularized mindfulness interventions such as MBSR (Mindfulness Based Stress Reduction) and MBCT (Mindfulness Based Cognitive Therapy) have shown therapeutic benefit for managing pain [8–10] improving mood [11–12], and addressing health behaviors such as overeating [13] and substance dependence [14–15]. Studies have also found that contemplative practices infused into 8-week interventions can reduce stress and increase positive affect [16] and improve psychotherapeutic control interventions [11, 18, 19]. Mindfulness has also been linked to increased attention and memory [17], reduced age-related cognitive decline [21], and improved behavior and attention in youth educational settings [22].

This burgeoning body of research has shed significant light on the effects of meditation practice on perception, emotion and cognition [24–26]. A robust new field of contemplative neuroscience has emerged, showing changes in brain function and structure associated with long-term meditation practice [3, 24] and short-term practice [27–30]. A growing body of literature has been exploring the biological and physiological mechanisms underlying these changes, including modulation of inflammation, cell-mediated immunity, self-related processing, inhibitory control and other markers of aging [31–33].

While these efforts in meditation science are deeply insightful, there are many outcomes, as well as non-ordinary experiences, that have rarely been examined in the scientific literature.

Numerous non-ordinary experiences during or as a result of meditation are described in the texts from various spiritual traditions [34–41]. Some examples of these include: “awakening” or “enlightenment” experience, altered state of consciousness, self-identity, self-narrative and clarity of perception; transcendence of the physical body or out-of-body experiences; sense of oneness and interconnectedness; spiritual transmission from teacher to student; dyadic, group, or collective experiences; experiences of non-physical energies (e.g. chi, qi, shakti); mind to mind communication, precognition, past-life recall, and reincarnation experiences; synchronicity, and experiences with angels and other non-physical entities; and difficult stages of meditation, and periods of disorientation and confusion.

With some notable exceptions, most empirical research on meditation does not address these non-ordinary components, outcomes, or mechanisms of meditation, in part because these non-ordinary states are difficult to investigate in laboratory settings. However, anecdotal, survey, and interview data indicate that these non-ordinary experiences are more prevalent than is commonly recognized, could represent important mediators or mechanisms for beneficial cognitive, behavioral, and physiological outcomes [42–44], and could themselves be a key component of the therapeutic process.

It is generally accepted that meditative practices engender a “witnessing awareness” [35] or mental stimuli that is distinct from ordinary consciousness. Researchers have investigated this mediators of the benefits of mindfulness training, including decentering (the ability to observe or temporary, objective events in the mind, as opposed to reflections of the self that are necessarily awareness (in which negative thoughts/feelings are experienced as mental events, rather than as objects) [47]. Metacognition (being able to disidentify from the contents of consciousness such as thoughts and view moments with greater clarity and objectivity) [48]. But there are subjectively reported states of awareness that go beyond metacognition.

A small body of research has been conducted into mystical, transcendent, nonlocal or nondual states [49] that have been proposed as a way to improve psychological well-being. Goleman [50] surveyed several types of meditation philosophy and practice that received scarce attention in psychology or empirical research, noting that most of them focused on fostering an awakened state or a hypothesized “fifth state of consciousness” [51] characterized by “witnessing awareness” in waking life. Transpersonal psychology has explored mystical experiences in depth through qualitative rather than experimental research [52–54]. William James [40], Carl Jung [55, 56], and others have also written about these areas as well, although the spiritual or transcendent aspects of their contributions do not fit into a psychotherapeutic or scientific milieu.

More recently, both theoretical descriptions [58] and empirical investigations [59, 60] of subjective states such as a sense of oneness, or a perceived dissolution of the distinction between the observer and the observed, have emerged. These states are thought to occur when the silent background awareness encountered in meditation stabilizes and integrates with the daily waking experience, so that the habitual reified dualities between self and other, in-group and out-group dissipate. These states are hypothesized to lead to a more spacious way of being [61], and appear to have a distinct neurophysiology [60, 62].

A large body of research exists on Transcendental Meditation (TM), a popular mantra-based contemplative practice utilized in secular settings such as schools, hospitals, and business settings. TM is explicitly designed to induce transcendent states (as opposed to other forms of secularized meditation that are designed to reduce cognitive load, for example) [63]. TM proponents posit that a reduction in mental and physical activity during TM engenders an experience of “transcendent consciousness,” described as “self-awareness isolated from the objects of experience...characterized by the absence of the very framework (time, space, and body) that define inner and outer perception) that define waking experiences” (p. 77) [64]. The practice is theorized to affect the body, particularly those that engage the sympathetic nervous system and associated hypothalamic-pituitary-adrenal axis, adapting to environmental stressors [65]. Empirical evidence indicates that the transcendent state is distinct from usual waking, dreaming, or sleep states [66, 67], and it is hypothesized to be responsible for the reduction in stress and anxiety associated with TM [68].

There have also been empirical studies of what have been termed “nonlocal” aspects of human consciousness that go beyond the typical five senses or seems to extend across space and time, such as precognitive interactions (described as “siddhis” in the Hindu yogic traditions) [68]. While controversial, these findings suggest that meditation practice increases the likelihood that laboratory measures of these extended forms of consciousness are valid [71], indicating that there may be veridical elements of the subjective reports by meditators of tin explainable perceptual phenomena.

It is possible that these experiences of self-transcendence (defined as the extent to which individuals feel connected to integral parts of the universe as a whole [72]), are active ingredients in contemplative practices. These experiences might engender a transformation from a body/ego-based self-identity to a world/universe that is not limited to the local body or limited to the self-narrative of the individual practitioner [73]. Some empirical findings emerge supporting this idea. For example, Bormann et al. [59] specifically investigated the spiritual

repetition meditation intervention in veterans, showing that existential spiritual well-being media symptoms. Another study showed that transcendental meditation decreased anxiety, improved i tolerance in comparison with secular forms of meditation [74].

Vago and Silbersweig [75] propose a framework for understanding the neurobiological mechanism referring to self-awareness, self-regulation, and self-transcendence. Their definition of self-transcendence between self and other that transcends self-focused needs and increases prosocial characteristics is a definition, but comes close to the forms of transcendence we are proposing might bear further investigation. An emphasis on secularizing meditation practices for clinical use, it is clear that transpersonal, or transcendent aspects of contemplative practices are not only epiphenomena, but also meditation practice, or mechanisms of action that are in part responsible for positive outcomes such as improved mood.

Between 2013 and 2016, a task force of meditation researchers and teachers met in a series of workshops to identify the state of the current literature on this topic and discuss how to broaden the types of experiences that could be studied in meditation research. The group ultimately identified several candidate domains that future research could move forward to recommend these domains, a cross-sectional survey was conducted to investigate the significance of these under-studied experiences among meditation practitioners. The results of this survey informed recommendations for domains of experience most frequently encountered by real-world practitioners.

## Materials and methods

### Participants

Participants were recruited through social media and email distribution, academic list-servs, and personal contacts of researchers, teachers and practitioners. Recruitment was not random, but a wide net was cast to achieve as many participants as possible. In recruitment materials no mention was made of extraordinary, transcendent, or unusual experiences, as this might bias respondents. Instead, participants were told that the survey concerned the prevalence of “personal experiences” during or related to meditation. The only inclusion criterion was having practiced meditation at least once. If participants responded “no” to the survey question “Have you ever practiced meditation?” they were excluded. Participants had to be 18 years of age or older.

### Online survey

Development of the online survey occurred during the third of four 2–3 day working group meetings. A comprehensive literature review prior to the meetings, to explore whether the domains of meditation experiences that had been under-studied had received any substantive research attention. At the first two meetings, we engaged in a process of mapping the field to determine what domains of meditation research were experiencing growth and change as compared to aspects of meditation experiences and outcomes that had received less interest. This included consensus building regarding which categories remained to be pursued with academic rigor. Several but potentially important domains of meditation experience were identified, and our next step was to determine if the experiences and outcomes associated with those domains were actually experienced by people. If defined, existing measures identified, and items created for constructs without adequate measures, new measures were developed to assess such experiences during, after, or related to meditation.

**Mystical and transcendent experiences** were measured with an adapted version of the Revised Meditation Experience Questionnaire (MEQ30). The MEQ30 is a thirty-item questionnaire originally used to measure the effects of psilocybin and other psychedelic compounds’ effects in laboratory studies [76, 77]. The scale has excellent internal consistency (alpha = .93), and good internal consistency for the four subscales: (1) Mystical, alpha = .93; (2) Transcendent, alpha = .89; (3) Transcendence of Time and Space, alpha = .81; and (4) Ineffability, alpha = .80. The revised measure includes items from the original MEQ30 and items developed specifically for this study.

these experiences while meditating?" with respect to 30 experiences such as "Loss of your usual awesomeness," "Experience of amazement and ecstasy," or "Sense that the experience cannot be explained by normal means." Response options were 1 = This has never happened to me; 2 = This has happened once; 3 = This has happened many times; or 5 = This almost always happens to me. The maximum mean score is 5 and the minimum is 1. Mean scale scores with standard deviations and percentage of total possible and percentages of respondents endorsing each item are also presented.

#### Extraordinary experiences.

To assess the prevalence of and response to other extraordinary experiences, the survey asked participants about experiences that emerged during the working meetings. Social/Relational items included items such as feeling connected to a meditation teacher, experiencing a sense of collective energy in group meditation, and whether they experienced a group, during a retreat, or in a sacred place. Anomalous Physical and Perceptual items included items apparently caused by the physical environment (e.g. heat, cold, tingling), altered sense of vision, taste and breathing, an altered sense of time or space, an altered sense of awareness or identity (unlikely coincidences perceived as meaningful), and perception of nonphysical entities (such as divine beings or angels, demons or negative figures, guides, or other visitors). Experiences related to extended perception included external physical phenomena (objects moving without apparent physical cause) and clairvoyance/telepathy (perceiving information that could not have been known to you by any known means but turned out to be true). Difficult States included items such as disturbing feelings of fear, and dread associated with meditation.

Participants were also asked if they communicated any of those experiences to a meditation teacher. They were asked 1) if the teacher was interested or willing to discuss the experiences, 2) how important the teacher thought the experiences were, whether the teacher gave any advice or insight into the experience, and the setting in which the experiences occurred. Because these experiences may be considered distractions or non-meaningful side-effects of meditation, participants were also asked to rate the experiences as meaningful to them, how pleasant/unpleasant they found those experiences.

Data were also collected on demographics, current and past religious/spiritual beliefs and practices, self-reported history of psychological disorders. The survey was administered with the SurveyMonkey (<http://www.surveymonkey.com>) and took approximately 45 minutes to complete. Surveys were conducted between January 10, 2014 and February 3, 2015. All research activities were approved by the Institute of Noetic Sciences (IRB) and were conducted according to the principles expressed in the Declaration of Helsinki. Informed consent was obtained from all research participants. The survey instrument and codebook can be found in the supplementary information.

#### Statistical analysis

Data were retrieved from SurveyMonkey and each entry checked for appropriate values. Since prevalence, descriptive statistics were calculated, including means, standard deviations, frequency and data type. Data were analyzed in Microsoft Excel 10.0 (Microsoft, Redmond, WA) and STATA 13.0 (StataCorp, College Station, TX).

## Results

#### Demographics

1,856 participants began the survey. 1,793 responded "yes" to having ever practiced meditation (those who responded "no" were not asked to continue). Of those, 1,130 participants completed the survey. Demographic completers are reported here. Participants were 59% female, and 41% male with an average age of 39 years old.

participants had some college education (8% high school or equivalent; 20% college/technical & master's degree; 15% doctoral degree/professional degree). Meditators from 66 countries around the world participated in the survey. The most represented countries included the United States (57%), Canada (8%), United Kingdom (2%), India (2%), Portugal (2%), Germany (2%), and New Zealand, Norway, and Mexico (1%), with the remaining countries having less than 1% of participants. Twenty-five percent of participants said "Yes" to having ever been diagnosed with a psychological disorder, with depression and anxiety being the most prevalent disorders endorsed (Obsessive compulsive- 6%, Eating- 2%, Psychosis- 1%, Impulse control- 1%, Personality- 1%).

### Religion/Spirituality

Participants were asked to indicate their childhood spiritual or religious affiliation. Christianity was the most common affiliation for all participants (73%) with the next highest being None (11%) (see Table 1). Most had a single religion (73%) while 27% of participants endorsing multiple religions in childhood. Participants were asked how much their religion influenced their upbringing or how much it was part of their family life growing up, with a Likert scale ranging from Not at all to Very Deeply. The responses were generally evenly distributed. (Not at all- 14%; 1–18%; 2–14%; 3–20%; Very Deeply- 11%). "Spiritual but not religious" was the most endorsed current spiritual or religious affiliation for all participants (49%). Current spiritual practice was quite important in participants' current lives, in comparison to their childhood experiences. When asked "How important is your religious or spiritual practice to you now?" 69% of participants rated their practice as Somewhat Important, 6% A Little Bit Important, and 9% Not Important.

	Childhood		Current	
	1 Affiliation (n = 1947)	>1 Affiliation (n = 73)	1 Affiliation (n = 944)	>1 Affiliation (n = 176)
Agnostic	3%	30%	4%	28%
Atheist	4%	34%	2%	34%
Buddhist	1%	11%	11%	62%
Christianity	73%	71%	13%	49%
Hindu	2%	7%	1%	11%
Islamic	1%	11%	1%	2%
Jewish	2%	11%	1%	9%
None	11%	15%	24%	14%
Spiritual but not religious	3%	20%	30%	30%

Values listed are the percent of participants endorsing each affiliation. % of respondents reported more than one affiliation in childhood, and 10% reported more than one affiliation currently—for those who reported more than one affiliation, total percentages of respondents reporting each affiliation are reported in the second and fourth columns.

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**Table 1. Childhood and current spiritual or religious affiliations.**

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### Meditation practice

The average number of years participants engaged in regular (at least once per week) meditation was 0–75. In the last six months, 71% of participants engaged in "daily" or "more than weekly" meditation, 20% less than monthly—4%, Less than weekly, more than monthly—12%, Weekly- 11%, Less than daily, 41%). The most common type of meditation practice was breath-focused followed by open awareness (participants could select more than one: Transcendental Meditation—28%, breath-focused—67%, prayer—20%, mantra repetition—31%, open awareness/mindfulness—50%, visualization—38%). The most common posture was sitting (Sitting- 74%, Laying down- 20%, Walking- 2%, Other- 4%). Most people practiced weekly, and more than half of the participants (56%) had completed a multiple-day meditation retreat.

### Mystical experiences

The Revised Mystical Experience Questionnaire (MEQ30) subscale scores are detailed in Table 2. The MEQ30 has four subscales: Positive Mood (PM), Transcendence of Time and Space (TTS), and two subdomains (Mystical (MYS), Positive Mood (PM), Transcendence of Time and Space (TTS), a range of 3–71, indicating frequencies between "2–5 times" (3) and "many times" (4). The Positive Mood subscale was the most frequently experienced, followed by Ineffability, Transcendence, and Mystical experiences.

Mystical Experiences	Mean (range 1-5)	Standard Deviation
Mystical	3.26	1.04
Positive Mood	3.71	0.80
Transcendence	3.34	1.03
Ineffability	3.62	1.08
Total	3.39	0.89

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Table 2. Revised Mystical Experiences Questionnaire (MEQ30) scale scores.

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Frequencies for each item in the Mystical Experiences Questionnaire are shown in Fig 1. Over-experiencing all items except one (experience of ecstasy) “many times” or “almost always.”

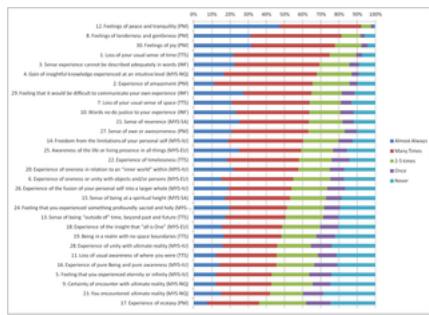


Fig 1. Frequencies of Mystical Experience Questionnaire items.

MEQ Subscales: PM = Positive Mood, TTS = Transcendence of Time and Space, INF = Ineffable Mystical; MYS-NQ = Noetic Quality, MYS-SA = Sacredness, MYS-IU = Internal Unity, MYS-E have been truncated due to space. MEQ full items and MEQ subscale scores are available in <https://doi.org/10.1371/journal.pone.0205740.g001>

### Extraordinary experiences

Extraordinary experiences were measured by items newly developed for this study by the work including 1) extraordinary physical experiences, 2) spatial-temporal, 3) cognitive-psychological, phenomena. Categories were not combined into subscales, but were used for assessing prevalence therefore no factor analysis or internal consistency analysis was performed.

The frequencies of these experiences are displayed in Table 3. Altered breathing and sensations apparently caused by the physical environment (such as heat, cold, pressure, tingling or other) are common physical experiences, with 88% and 85% of participants respectively reporting experiencing those. 75% and 73% of people reporting that they had experienced this many times or almost always. Increased synchronicities were the most common spatio-temporal experiences, with 86% and 81% of those, 62% and 65% experiencing them many times or almost always. Altered awareness and common cognitive/psychological experiences, with 91% and 89% respectively reporting these. 62% many times or almost always. Sensing the collective energy of the group was the most common reported at least once by 76% of respondents, and many times or always by 47%. Clairvoyance is a common extended perception experience, with 56% reporting experiencing this at least once or at least common, but still quite prevalent, experiences overall were external physical phenomena (with no apparent physical cause) (31%), and disturbing emotions (32%).

Physical	No	Yes	Frequency			
			One Time	2-5 Times	Many Times	
Absent breathing	12	68	2	12	42	39
Sensations in body	15	85	4	18	60	37
Absent sensing	20	80	2	22	38	12
Absent time	28	72	6	22	33	38
Absent body sensations	39	61	5	23	26	7
Absent sounds/words	45	55	5	18	11	1
<b>Mystical/Transcendent</b>						
Absent time	14	86	4	19	44	18
Absent space	40	60	6	21	27	7
Absent sense/boundaries	41	58	2	17	48	17
Nondescript entities	40	60	8	20	36	4
<b>Cognitive/Psychological</b>						
Absent associations	9	91	6	18	49	18
Absent thoughts	11	89	4	14	53	5
Absent identity	31	69	8	20	33	9
Disturbing emotions	48	52	9	16	7	0
<b>Relational</b>						
Collective energy	24	76	6	23	39	8
Connection with teacher	47	53	8	17	23	5
<b>Extended perception</b>						
Clairvoyant/Telepathy	61	38	6	16	24	6
External Physical Phenomena	49	51	10	21	22	0

Percentage ordered of each item ordered by most to least common within domain. No = item has never happened; Yes = sum of remaining responses (This has happened once. This has happened 2-5 times. This has happened many times. This almost always happened). Frequency details the percentage of participants who reported each frequency. Full wording for each item is available in online supplemental materials. N = 1,230

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### Salience and valence of experiences

To control the length of the survey, and because these experiences have been often pointed to side effects, we asked follow-up questions regarding valence and salience of only the two extre shown in table). Participants who had clairvoyant or telepathic experiences (56%) rated the exp important" (mean = 4.01, SD = 1.11; Response Scale: 1 = Not at all, 2 = A little bit, 3 = Somewh and "somewhat pleasant" (mean = 4.10, SD = 1.10; Response scale: 1 = Very Unpleasant, 2 = 4 = Somewhat Pleasant, 5 = Very Pleasant). Participants who had experienced external physi experience as "quite meaningful or important" (mean = 4.01, SD = 1.11) and "somewhat pleasa

### Sharing experiences with teachers

Participants were asked "Of the meditation experiences you reported on this survey, which did you spiritual teacher?" Participants could endorse sharing more than one experience. Six-hundred and two participants reported sharing the following experiences with teachers Mystical/Transcendent n = 10; Spatial/Temporal n = 352; Cognitive/psychological n = 426; Relational n = 358; Extended Perception n = 358. Participants did not report any experiences to a teacher. Teachers were mostly willing to discuss these experiences (11% Not at all, 8% A little bit, 20% Somewhat, 22% Quite a bit, 40% Very much). Many teacher experiences were important to address and reflect upon (15% Not at all, 10% A little bit, 22% Somewhat, 28% Quite a bit, 40% Very much). Also, many teachers provided insight and/or advice to help integrate and understand these experiences (11% Not at all, 12% A little bit, 22% Somewhat, 24% Quite a bit, 28% Very much).

### Context of extraordinary experiences

For each extraordinary experience, participants were asked in what setting the experience occurred. Most experiences happened when the meditators were alone (Table 4).

	Meditating Alone	Meditating at Retreat	Group Meditation	Spontaneous (not during meditation)
Mystical/Transcendent	42	18	21	24
Body	40	13	20	23
Spatial/Temporal	40	13	21	23
Cognitive/Psychological	42	18	19	21
Relational	35	16	29	20
Extended perception	35	16	16	34
Total	42	18	21	23

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### Relationship of experiences to length of meditation practice

To explore whether length of meditation experience was related to the frequency with which respondents conducted Pearson correlations between the self-reported number of months of lifetime meditation and of mystical and extraordinary experiences. There were small but significant correlations ( $p < .01$ , max  $R^2 = .09$ ) for all but 7 of the 50 items, excluding "feeling of peace and tranquility," "feelings in your body," "altered breathing,: "disturbing feelings of fear, dread or terror," and the importance or value of extended perception items. None of the items were significantly negatively correlated with length of meditation practice. There were small but significant positive correlations ( $p < .01$ ) between self-reported length of meditation practice and mystical or extraordinary experiences such as "clairvoyance or telepathy" ( $r = .30$ ), "feeling that you experienced eternity or infinity" ( $r = .30$ ), a guru who was not physically present, or did not interact with you in any physical way at the time.

## Discussion

The results of this survey indicate that mystical and extraordinary experiences are prevalent enough to warrant further scientific inquiry.

Limitations of this study were that the sample was not randomly selected, and this could limit generalizability. To address this concern, in addition to the masking of the topic of the survey in recruitment, we used generalized lists of meditators rather than those known to have a special interest in these domains. The sample was different from the general population of modern meditators in their demographics, including religious/spiritual background and beliefs. Participants were generally middle-aged, gender-balanced, and well-educated. Though we are aware of no global population-based surveys of meditation practice, our findings are similar to general survey populations who report meditating [78] and who utilize complementary and alternative medicine [79]. Seventy-five percent of our respondents were from the United States, the UK, and Canada, with participants from 66 countries around the world. Our participants also represented a broad range of amount of practice, which may increase the global generalizability of our findings.

Participants reported slightly higher lifetime prevalence of depression than the general population (17% vs. 19% in this sample) and higher rates of lifetime anxiety disorders (11.8% [81] vs. 14% for anxiety). There have been few formal studies of anxiety and depression prevalence in a general population of meditators. A recent study examined depression and anxiety levels in meditators from Germany and Spain. They found depression (19.9%) and anxiety (13.6%) to ours in the German sample, but levels lower than ours in the Spanish sample (depression 11.1% and anxiety 7.1%) [82].

There were differences between our respondents and the general population in terms of religiosity. More respondents identified as "spiritual but not religious" (36%) as their current affiliation than any other organized religion, while 15% endorsed Christianity, whereas global surveys list Christianity at 32% [83]. In general, we found our sample to be similar enough to a general sample of meditators to make our results likely generalizable, though this was based on random sampling.

Another limitation of our sample is that only 63% of eligible participants who started the survey completed it, suggesting selection bias. There may also be inherent bias in those who complete a lengthy questionnaire. A formal population-based survey of meditators would be valuable for future research, as well as other limitations include the self-report and retrospective nature of the survey. Future studies could include meditators using daily experience sampling or ecological momentary assessment to capture experiences in real-time.

Since the results of this survey show that experiences associated with the domains identified in the survey are common, frequent, and there is little to no empirical research on them in the literature, the following section provides recommendations and future directions for scientifically pursuing these lines of inquiry.

Readers interested in pursuing any of these domains should refer to the Future of Meditation Research website (<http://noetic.org/fomr>) for links to papers which provide methods, measures, and protocols for further investigation.

## I. Mystical and transcendent experiences in meditation

Experiences that transcend ordinary perception are a common component of religious and spiritual experiences. They can occur spontaneously [84] or can be elicited by a variety of rituals, such as meditation, as ingestion of naturally occurring substances (e.g. plants with psychoactive properties) [77, 85]. These experiences are rare as they might seem. In the general public, 30–50% of people report having had what they consider to be a mystical experience [88, 89]. Both historical and modern descriptions of mystical experiences reveal common themes: a sense of unity and interconnectedness with all people and things, a sense of sacredness, feelings of peace and well-being, loss of normal time and space, ineffability, or an intuitive belief that the experience is a source of objectivity [89, 90].

Our respondents reported a high frequency of mystical experiences during or related to their medical reporting having them “2–5 times” or “many times” for almost all items. Increased scientific investigation may be important to understanding the full range of human potential and well-being.

As reviewed earlier, a common component of many contemplative practices is the recognition of and the contents of awareness (thoughts, feelings, sensations, etc.). In fact, an “altered sense of going beyond the physical senses, an increased intensity of awareness, or awareness of aware overall experience (91%) among our participants. Some traditional contemplative theories propose from awareness recognizing itself [91], or the presence of a background non-conceptual awareness subject-object dichotomy (i.e. “nondual”), and are thought to under certain circumstances be brought experience through the practice of meditation [92]. In this mode, perceptions, emotions, cognitive appear to this awareness as contents, whereas awareness is experienced as a contextual space (e.g. the sky). While neuroscience research in this area is still in its very early stages, studies conducted states are accompanied by increased large scale synchronization and connectivity in the brain [93-95].

Past experiments carried out with split brain patients indicate that the distinction between thought and biological basis [96]. Recently, studies have focused on moments when meditators realize that they are meditating and are mind wandering, followed by re-orienting of attention on the meditation task. These conscious processes are arguably related but different from the awareness responsible for my

In addition, sacred texts in contemplative traditions such as Buddhism and Hinduism claim that states of mind that have not been adequately explored or differentiated phenomenologically in the yoga tradition describes multiple kinds of *samadhi* (states of intense concentration, absorption) differentiating between for example, *nirvikalpa samadhi* of pure awareness, and *sahaj samadhi* experience both co-arise but are perceived as inseparable, nondual, or coessential [99]. Investigating new insights about cognition and perception that can only be reached through expanding content.

Mystical or transcendent aspects of meditation can be challenging to measure, and difficult to pin down. With rare exceptions, current research on mystical and transcendent experiences to date rely on self-reports using face-valid measures, and are therefore highly open to recall bias and demand effects. Future research should focus on better conceptualization and measurement of mystical or transcendent experiences, using both first, second, and third-person measures. In addition, methods of reliable induction of mystical experiences, such as those able to produce such experiences at will, may allow for more controlled investigations of those able to produce such experiences at will.

Given the frequency and salience of mystical and transcendent experiences related to meditative practice, this is a fruitful area for future research. In particular, we suggest conducting studies that 1) investigate the nature of mystical and transcendent experiences, 2) develop improved methods and measures for investigating the effects of these experiences on health, psychological and prosocial outcomes, 3) examine psychophysiological mechanisms of such experiences (when, why and how do they happen?), and 4) determine actual correlates of such experiences. For example, prospective studies of novice meditators could include

transcendent experiences, examine the predictive value of the occurrence or type of such experiences, explore them as potential mechanisms of other psychological or physical changes, or correlate experiences with mood data from experience sampling or biomarkers.

## **II. Social and relational aspects of meditation**

To date, most experimental studies of meditation have focused on cognitive, emotional, and physical practice within individual subjects. However, meditation has traditionally been taught in a relational context, either between student and teacher or in a group of students. There are numerous meditation approaches that encourage relational practice, and individuals often find that meditating in the presence of others can deepen their meditation experience.

Practitioners from a wide variety of spiritual traditions have reported strong psychophysiological effects of the presence of a spiritual teacher who has achieved some level of mastery, particularly when the teacher is present toward the practitioner. These reports are common across spiritual traditions, being described in reports based in Hinduism and Buddhism. In these traditions, the phenomenon is thought to reflect a “third eye” of consciousness or a form of energy from teacher to student. Recipients also report subjective experiences of transmissions at a distance, or by listening to a recording or simply looking at a picture of the spiritual teacher. Energy “many times” or “almost always” during meditation practice was endorsed by nearly half of respondents; three-quarters reported this happening at least once. Connection with a teacher who was not present “many times” or “almost always” by 28% of respondents, and 45% experienced this at least twice.

Research on social norms and social influence suggests that the mere presence of other people can affect an individual's experience such that his or her motivations and behavioral choices occur in response to the presence of others. Simple examples of this can be found in the social conformity and social facilitation literature [102–103]. The effects of meditation practice have just begun to be studied, such as comparing meditation programs taught alone [104], and long-term meditation retreats [60, 105]. Interestingly, our sample of meditators report that extraordinary experiences happened more frequently when meditating alone (35–46% depending on the measure) vs. meditating in a group (16–29%) or on retreat (10–16%).

Some questions for future research on the social and relational aspects of meditation include: 1) does meditating alone vs. meditating in a group of people influence outcomes from biomarkers to mood to behavior? 2) does it affect one's practice positively, negatively, or does it depend on the outcome? 3) do group effects differ when people know others are meditating at the same time (or asynchronously) in different locations? 4) do personality (such as introversion/extroversion) or other baseline or contextual elements? 5) what is the relationship between social support and the experience of meditation? 6) are there reliable means of measuring group “energy” or spiritual transmission? 7) what is the impact of meditating with all women or all men, vs. co-ed meditation? 8) what happens when meditating with a significant other? These are intriguing research questions that have only barely begun to be addressed. Opportunities to study dyadic or group outcomes of meditation practice, such as effects on intimacy, classrooms, or organizations. Multiple simultaneous measures of biomarkers such as heart rate variability, blood pressure, and skin conductance could also be used to investigate whether dyadic or group synchrony is detectable, and whether it enhances the experience of meditation.

Furthermore, many goals of meditation practice are specifically oriented toward developing prosocial behaviors. These include emotions such as love and joy, attitudes such as ethics and altruism, relational skills such as compassion, virtues such as patience and humility, as well as insights and wisdom about the self and the world. Contemplative science is growing rapidly in studying these prosocial emotions and behaviors related to meditation [108–112] as well as clinical outcomes of compassion and lovingkindness practices [113], but the mechanisms through which meditation cultivates them are just beginning to be investigated. There remains an enormous amount of work to be done in this promising area.

## **III. Physical and perceptual phenomena**

Body-based meditation practices are some of the most commonly disseminated techniques in the field. Awareness of breathing, in particular, is a foundational practice across many contemplative traditions. “Altered sense of breathing” was the body sensation most endorsed by respondents in our survey (75% always).

A large and growing amount of studies have been conducted on physiological correlates of meditation. Clinical studies have focused on physical and perceptual outcomes following meditation training measures [114, 115], tactile and pain perception [116–118], visual and auditory perception [119–121], temperature at will in freezing conditions [123, 124]. In some meditation traditions, practitioners report altered physiology, such as respiration rate [125] and heart rate [126].

Physical and perceptual sensations not apparently caused by the physical environment were experienced by our survey respondents, including: heat, cold, pressure, or tingling; seeing lights, visions, or images; floating, out-of-body experiences, body parts disappearing, or feeling like the body changed in size; sounds, humming, or voices or music that were not in the physical environment. These are experiences that have been examined in a scientific context, but were endorsed by 60–90% of our respondents. Smelling or tasting something was the least endorsed item, though still reported by 35% of those surveyed.

Some meditation practices focus attention on “energy” flowing through the body. Contemplative traditions have a deep understanding of what this subjectively experienced “energy” is, such as kundalini, chi, or subtle energy. These traditions detail energy pathways (such as meridians) or nodes (such as chakras) in the body. Many moving meditations, such as qigong, tai chi, and martial arts are designed for moving or balancing energy in the body, and were developed for, or used in conjunction with, sitting meditation. These physical phenomena associated with meditation have not been well addressed by the scientific community, and future studies on these topics could not only help us understand the physical outcomes of meditation, but also more about the connection between mind and body, and perhaps how the body becomes known as the “biofield” and its role in our well-being [127].

Other outcomes of meditation practice have to do with a visceral sense of greater embodiment, awareness of one’s body. Repeatedly directing attention toward what are typically implicit or automatic aspects of the sense of embodied presence—in other words, experiencing oneself to be fully one’s body in the world. Awareness (awareness of signals from inside the body) is also an area of increasing interest [128]. A recent study showed that meditators are no better at accurately assessing heart rate than non-meditators [129]. Other studies have found increased breath awareness [131], increased heartbeat detection accompanied by increased heart rate variability [132], and increased coherence between subjective assessment of emotion and heart period in trained meditators [133]. This evidence suggests that humans can become aware of what were previously purely non-conscious processes, and provides a large and potentially valuable sphere of scientific inquiry.

Once again, these phenomena certainly provide challenges in terms of measurement and methodology. Future directions for rigorous research on anomalous phenomena during or as a result of meditation could include 1) qualitative measures to better understand subjective experiences; 2) development of quantitative measures to assess subjective experiences of embodiment, such as tingling and prickling of the skin, “energy” surges, etc.; 3) objectively measuring physiological correlates of perceptual, or energy experiences; 4) investigations of whether meditative activities can result in physical performance improvements (e.g. strength, balance) or extraordinary capacities for physical performance; or 5) exploring how meditation practices influence human interactions with virtual or augmented reality (see [134]).

These and other areas of body sensations and perceptual phenomena that occur naturally in meditation merit further research. These lines of inquiry not only provide an opportunity to learn more about the effects of meditation on the body, but also more about mind-body interactions in the context of the special training that meditation practice requires. For example, if we want to learn more about the potential of the human body through Olympic level sports, we might learn more about how meditation practices influence human interactions with virtual or augmented reality together by investigating those with extensive mental training through meditation.

#### **IV. Spatial/Temporal phenomena**

Contemplative practitioners anecdotally report experiencing time and space differently during or after meditation. Indeed, an altered sense of time such as regular time seeming shorter or longer than usual, or a sense of time being distorted from its usual mode, or a sense of time being experienced in the future was reported by 86% of our survey participants, with over 60% reporting this “most often.” Similarly, half of our respondents experienced an altered sense of space such as feeling something crack or stretch across a distance, or a sense of space being distorted from its usual mode, with over 30% reporting this “almost always.” Increased synchronicities (meaningful coincidences, or events or information arriving at the same time for no apparent reason) were endorsed by 82% of the participants. Indeed, increased synchronicities were more common among all those surveyed (82% having experienced it at least once), even higher than what one might expect from meditation practice, such as altered body sensations.

Recommendations for future research in this domain include: 1) using qualitative research to assess the descriptive nature of meditators’ altered perceptions of time, space, or synchronicities in their lives; 2) using daily assessments, or questionnaires to evaluate the frequency and salience of such experiences; 3) investigating physiological correlates of the subjective experience of timelessness [69] or connections with other dimensions of the sense of spaciousness or timelessness (see [136]); 4) assessing the effects of these experiences on mood regulation, or other clinical outcomes; and 5) developing methods for reliable induction of these altered states of consciousness.

#### **V. Extended perception**

Extended perception refers to perceptions people may have naturally, or develop over the lifespan, that go beyond commonly understood notions of how information can be perceived. Advanced meditators have demonstrated capacities that scientists once dismissed as impossible [107]. These capacities include, for example, precognition, out-of-body experiences, nondream sleep, and heightened perceptual speed and sensitivity. What further capacities await discovery?

Over half of the meditators in our sample reported experiencing clairvoyance or telepathy (perceptions that had not been known to them by any known physical means, but later turned out to be true) at least once. The majority also found the experience “somewhat pleasant” and “quite meaningful or important.”

Discussions of the relationship between meditation practice and advanced capacities of meditation can be traced back to Patanjali’s Yoga Sutras, published roughly two thousand years ago [36]. Claims such as psychokinesis, precognition, and mind-matter interactions are still controversial, although a growing body of literature suggests that they could be supported by data [137–139]. External physical phenomena, or objects moving by a nonlocal agent (such as appearing when they had not been there before, objects falling over, a light going out, psychokinetic levitation of objects by mental attention or intention alone), or other physical manifestations that seemed to be controlled by the mind, have been discussed in historical literature. Approximately one-third of the meditators in our sample endorsed experiences like this at least once.

People also reported sensing a connection with non-physical entities (defined as nonphysical entities that cannot be detected by the five senses, such as hearing, touch, taste, smell, and sight), such as a God presence, higher powers, divine beings or angels, demons or negative entities, or other spiritual beings. This was even more often than experiencing a connection with real-life meditation teachers, with 32% reporting this “most often,” and another 52% at least twice.

If new to this literature, scientists encountering these ideas for the first time might argue that if they had heard about them, they would have heard more about them. However, the vast majority of clinicians and researchers have not reported these experiences in their assessments of meditative practices, and given their controversial nature, researchers are less likely to share such experiences under non-anonymous conditions. However, many but not all respondents did share their extraordinary experiences to their meditation teachers. When they did share the experience, they ranged from “somewhat” to “very much” willing to discuss the experience with them, and 75% of teachers gave the experience “somewhat” to “very much” importance to reflect upon, 40% “very much” so.

It is important to note here again that there did not appear to be a substantially higher rate of psi than in the general population. While these experiences could be completely illusory, they also represent potential and reality that challenge prevailing paradigms. Western scientists may hesitate to entertain possible explanation for these perceptions of non-local aspects of consciousness are that they are not meditative traditions, whether they are considered real or not, these experiences are discounted. Some and others have cautioned that focusing on such experiencing can be seductive, cause egocentrism.

At the same time, there are views within some contemplative traditions that such experiences can be signs of compassion by experienced masters, and some highly respected practitioners of contemplative research on such domains. For example, Buddhist monk and collaborator on several neuroscience studies, Richard Davidson was asked at the Mind and Life Institute's International Symposium on Contemplative Science what would be important for scientists to study next. He responded that reincarnation/past lives and the frontiers to investigate [141], sharing his own personal experience of telepathy with a meditation teacher. The strongest positive correlations between self-reported length of lifetime meditation practice were "with a guru who was not physically present" ( $r = .29$ ,  $r^2 = .08$ ,  $p < .01$ ) and "clairvoyance or telepathy".

While respecting the concerns of both perspectives, it is possible that the time has arrived to consider assumptions and for investigations to include some of these capacities. Methods currently exist to study the areas described in this paper. Some empirical research already shows that those with a history of meditation demonstrate greater "psi" capacities [68, 69, 71, 142–144]. Future directions that intrepid researchers might consider include: 1) correlating different types, frequency, and length of meditation practice with a variety of rigorous measures; 2) testing for extended human capacities such as precognition, clairvoyance, telepathy, orESP under controlled conditions during or just following meditation; 3) utilizing implicit measures (i.e. those that are not choice but examine physiological or reaction-time measures) to investigate extended human capacities associated with meditation practice; or 4) including extended human capacities variables or questionnaire items related to meditation, to assess them as predictors, outcomes, or mediators, and 5) studies of people engaged in meditation practices who have been reported to exhibit exceptional capacities, virtues, states of mind, or postconventional stages of development.

## VI. Other recommendations

Difficult experiences in meditation.

Meditation is usually considered a low risk intervention and adverse events are relatively rare. Very few adverse events were the least commonly reported type of experience among respondents in our survey, this does not mean they should be ignored. A full 32% of participants in our sample reported feeling disturbing feelings or symptoms as a result of their meditation practice. A small but growing body of research on adverse effects from meditation suggests there is opportunity to investigate this domain further.

For example, meditation practices have at times been associated with antisocial behavior, restlessness, and instability [146]. Even long term meditators have reported adverse effects [147]. There have been reports of mania triggered by meditation in the scientific literature [148–150] [151] and in lay publications [152], depersonalization [153], and case reports of brain activity correlated with seizures [154, 155]. Given that consistent with the notion that meditative practices can have powerful effects on mind and body, changes in worldview can be signs of psychospiritual progress, but can also be accompanied by significant side-effects. Significant negative psychological side-effects may occur in a minority of individuals with a disposition towards mania or psychosis.

Among researchers who are enthusiastic about the benefits of meditation being discovered in contemplative research, there is often a hesitance to examine adverse events, negative side effects of meditation, for fear that this will lessen enthusiasm for the practice. Most studies do not include any items asking about difficult experiences in meditation.

practice. However, it is possible that difficult and distressing experiences may be involved in one's research on meditation: adherence.

As mentioned earlier, Lindahl and Britton [156] have addressed these questions by collecting data on impairing experiences associated with meditation, the resulting taxonomy of which should aid in building and extending this research using a variety of methodologies will only strengthen the findings. In addition, distressing or difficult states can be viewed as natural aspects of the trajectory of spiritual growth when properly supported can catalyze positive outcomes [157, 158]. As one American Buddhist teacher put it:

It is certainly the case that almost everyone who gets anywhere with meditation will pass through periods of negative and heightened sensitivity... for some duration of time, things may get worse before they get better.... This phenomenon is sometimes referred to as "falling into the Pit of the Void." It entails an authentic and irreversible insight into Emptiness, Enlightenment's Evil Twin...In some cases it takes months or even years to fully metabolize, but in my experience it is always positive.

Conducting more research on these difficult states and stages should help clinicians help their clients to leverage these experiences.

Context.

Though not included explicitly in our survey, we recommend that investigation of the role of the context in meditation practice occurs represents another essentially wide-open field for future researchers. Objects, icons, rituals and sacred places have traditionally been thought to enhance meditative perception. Perceptual cues such as incense, candles, images, music, bells, and the wearing of special clothing or avoiding certain foods that are routine parts of contemplative traditions and have yet to be investigated. In these cases, these contextual elements are thought to help "carry" a person into deeper meditative practice.

Environmental cues such as color [160], odor [161], and images [162] have been demonstrated to influence processing, and behavior. This may account for the role that environmental cues play in meditation. Research suggests that buildings, rooms, places, or objects in which many people have engaged in spiritual or meditative practices feel qualitatively/subjectively different than objects or places that have not been associated with them. For example, some talk about the "stillness" or "vibration" of a temple or old church—but objective measurements of this perceived phenomenon are lacking. Only a small amount of research has been conducted on what is called "imprinting" of space [163]," in other words, space that has been purported to be imprinted by intentions alone without exploration.

In addition, the cultural context, intentions, purpose, and values held by the meditator's tradition (or practitioner) likely impact meditative experiences and outcomes. For example, a person who comes from a particular orientation [164] might have different experiences of meditative benefit than those who come from another. Many long term meditation practitioners hold rich worldviews, belief systems and ethical guidelines that inform their meditative practice and quite possibly the phenomenology of their experiences in meditation. However, the extent to which these ethical systems components has not been specifically measured in the bulk of the clinical and non-clinical research. The novices assayed in meditation research to date hold a broad range of worldviews, often pointing to religious foundations of the meditative practices in which they are engaging. For better or worse, these practices have by and large been divorced from teachings about ethical guidelines or philosophical foundations of self and relation of self to world and/or the sacred. There are benefits and drawbacks to this. For example, there is a much larger dissemination of them, as well as practices unburdened by dogmas that may or may not be true. However, some of the "built-in" ethical protections in traditional settings and teachings have also been lost. For example, a meditation student being assigned to clean the temple to learn humility and service (and the resulting transcendent states), and practices run the risk of becoming superficial when decontextualized.

The field of meditation studies is likely to benefit from assessing even in a rudimentary way some meditation practice, and how they might impact outcomes. For example, researchers could randomize contextual environments for practice and then collect subjective and objective measurements. One person could meditate in a room with an object randomly selected as one that is regarded to deepen. Alternatively, repeated measures designs could also be used in which the same person meditates at different times, and differences in neurophysiological correlates are measured.

#### Psychological development.

One of the most dramatic findings of developmental psychology and neurobiology is that, contrary to what was once believed, personal growth and psychological development can continue throughout much of adulthood [165, 166]. There are now more than 100 models of adult development [167] and stages of adult psychological development [168, 169]. Preliminary maps have been offered by various theorists, but a growing body of empirical research suggests that for moral, cognitive, and spiritual development, development can continue well into the elder years [170–177]. Future research on the effects of meditation on psychological development, even though accelerating such growth, will be important to understand the most important contributions the practice of meditation can make, and one of our contemporary challenges is to do so ethically.

#### Ethical issues.

As the scope of meditation research is broadened, and extraordinary experiences are the increasing norm, it is important to identify and address ethical issues that may arise. Indeed, a barrier to including the field of meditation research may have been a concern that too much emphasis on these experiences would distract from the primary goals of meditation, foster experiences in meditation that could be harmful to clients, or bring to light experiences that clinicians were unequipped to address. However, simply acknowledging that these experiences can occur, does not make them go away, nor does it preserve the ethical foundations of meditation practice, nor is it an ethical approach to ignore them [178]. Instead, we must create a set of clinical and ethical guidelines for helping clients, students, and teachers integrate these experiences to enhance, rather than detract from, their well-being. Educating clients about the potential for these experiences to occur, including questions to screen for distress, depersonalization, and related to meditation practice in assessments, and identifying a clinician with expertise in treating such experiences in consultation are all possible components of an ethical approach.

## Conclusions

The goal of this paper and the accompanying online materials is to share the findings and conclusions of the PLoS ONE Meditation Research working group. These include the findings of a survey investigating the prevalence of various types of experiences and recommendations for expanding future research on meditation. The survey demonstrated that a wide range of experiences—mystical/transcendent, social/relational, physical/perceptual, and spatial/temporal—are prevalent and salient to those who experience them, and that meditation teachers often share them with students.

One theoretical trajectory of psychological and spiritual development through meditation practice is as follows: 1) participant comes in with distress or a desire for greater understanding or contentment; 2) through exposure to and practice of mindfulness and other forms of meditation, the participant learns to stabilize attention, 3) the participant learns to decenter from their awareness or experience rather than being completely fused with their experiences, 4) the participant begins to make choices about how they wish to approach experiences (e.g. with acceptance, friendly investigation, simple non-reactive awareness, with compassion), 5) through both subtle and profound insights, the participant begins to see themselves and reality as less fixed, is better able to understand context, feels a sense of connectedness (less duality) between themselves and others, and 6) through the practice of compassion, the participant feels more compassionate for themselves and others, less reactive, less stressed, and observes improved health and well-being.

anxiety, and more happiness. The premise of this paper is that in addition to experiences recognized as signs of spiritual progress, such as decentering from individual ego-based concerns, the kinds have entertained in this paper may also be important parts of this process.

We propose that these experiences are important to study. They hold the potential not only to serve those who practice it, but may also illuminate new understandings about human potential and transformation. These experiences may be purely subjective or even illusory, but if this is the case, they remain worth study for their functional utility and transformative (or disruptive) potential. In addition, as meditation practices move into clinical care settings, it will be important for clinicians to be aware of potentially important, distressing or beneficial experiences that patients may have.

Researchers wishing to explore some of these domains may encounter reluctance, resistance and suspicion from both the general public and academic community. Many aspects of meditation have been excluded from scientific dialogue because they are not yet fully mature and accepted as a field with scientific rigor. A focus on the cognitive and physiological effects of meditation itself is a highly unconventional topic of study, assured that the field of contemplative science would be seen as soft or pseudoscience. The field has understandably de-emphasized what may be considered important by scientists by focusing on component parts that are easier to operationalize and more palatable to scientists.

But as shown by our survey results, there are deeper and more mysterious aspects of meditation that are often excluded from scientific dialogue. Our premise is that these important aspects of meditation are within the bounds of scientific inquiry and can be studied with scientific rigor, and that their exclusion from scientific dialogue unnecessarily limits the field. The purpose of this paper thus far, presenting this research to students and at professional meetings is that 1) researchers can demonstrate that emerging findings often map on to their personal experiences and observations of students as well as the spiritual traditions from which many of these practices emerged, and 3) they are gratified by the lack of rigorous, and empirically sound methods to study them. Students and researchers who are interested in these domains of meditation may find it useful to visit the Future of Meditation Research website to find recommendations, an online course expanding on the topics reviewed in this paper, and a community pursuing these domains of inquiry.

The aim of this paper was to bring attention to some of the more controversial and less studied aspects of meditation. We hope that these aspects of meditation may be crucial to people's psychological and spiritual development, could represent important outcomes of meditation practice, or serve as mediators and/or moderators that confers benefits. These arenas represent largely uncharted scientific terrain and provide excellent opportunities for experienced researchers. We hope this paper provided a foundation from which future research can build upon preliminary support to Maslow's [179] provocative claim that "what we call 'normal' in psychology is so average, so undramatic and so widely spread that we don't even notice it ordinarily" (p. 16). The hope is for us to step into a new paradigm from which to explore one of the greatest of human quests—the enhancement of the human mind.

## Supporting information

**S1 File. Meditation experiences survey.**

<https://doi.org/10.1371/journal.pone.0205740.s001>  
(PDF)

**S2 File. Meditation experiences survey codebook.**

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(PDF)

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