TRANSCRIPT WITH COMMENTARY

Tristan

Tristan Debrief

Below in black is a word-for-word transcript of the June 18th debrief interview with Tristan that is available on YouTube at https://youtu.be/vXl2QOaB5os. In green are comments about and explanations of the Descriptive Experience Sampling process. If you have corrections, suggestions, or questions, please post them as YouTube comments.

RTH = Russ Hurlburt
AG = Amber Goto
Tristan = Tristan

0:00 RTH: So, haven't seen you for a while. Nice to see you.

0:04 Tristan: Yeah, it was. Good to see you.

0:08 RTH: And our object here is to chat about what we've done, ask, make sure everybody's understanding what we've done, ask, answer any questions that we've got. And, uh, and I don't have a choreography for this event. I think we can, we can do whatever it is that we wanna do. If you've got questions, maybe we can start there, or, or I can, I can say what it is that we've found, I think, or we can [Tristan: Yeah.] speculate about that or chat about that.

0:39 Tristan: Yeah, I think let's, let's, uh, curious to hear what you guys think.

Review of the "green meeting" and rectification procedure

0:44 RTH: Well, we have in a, in a, in a, if, if we were doing a regular research project kind of a thing, we would do what we call a green meeting, and then a rectification meeting. And a green meeting is basically we go back through all of the samples that we have gotten and try to bring them back to mind because we've been sampling now for several months. And, and, uh, and as a general procedure in our work, the first, the day, the samples from the first few days or are A, a long time ago. And so we have a hard time remembering those. And, and B, we didn't really understand as a general rule, what experience was the, our participants generally have a hard time describing it. We have a hard time understanding it, so it takes us a few days. So we go back, we go back and we try to review all those kinds of things.

1:35 RTH: And, uh, and then, and then we try to characterize what it is that we found and what I would, and, and then we do a more, a more formal kinda that characterization. So we've done a green meeting, we have done, Amber and I have done the green meeting, and then we go back through those samples again. Well, and well, the result of the green meeting basically is that we then we either in the green meeting or thereafter, we characterize what we think sort of the main features are, and then we

go back through the samples again and, and, and bring those features that we have sort of, uh, advanced as being the, what we call the idiographic. And that's a fancy word that just means personal to Tristan is a characteristic of Tristan, regardless of the rest of the world. That's what we call idiographic.

2:29 RTH: But then we go back, so we, we generate what we think are idiographic characteristics, and then we go back and look, apply those characteristics to every one of Tristan's samples to see whether the characteristics need to be refined or adjusted or ref, whatever, or, or we missed something. Or there, there are samples that don't fit. So that's basically where we are.

Tristan's samples were complex and not clearly focused

2:50 And what I would, what I would say about the results of those, which is, is that most of your samples were complicated or complex or, or something that there was, what I would say, and, and, and, and I guess before I get too far down, down the road here, is I don't want to be understood as being saying, well, this is the truth with a capital T about Tristan's samples. And, and so if you've got clarifications or disagreements or amplifications or whatever, we'd be delighted to hear them. But what, what I would say is that your samples were almost all or maybe all complicated or not clearly focused. There was not just one thing. I, I was, y'know, we, you had very few samples with something like I was saying to myself in my inner voice quote, I'll have a hamburger, please, unquote. And that's, and, and that was it as far as your experience, that is not the way your experience was. Your experience had multiple strands. And even within those strands, it was things that were sort of hard, hard to know exactly what the focus was. I guess we knew what the focus was, but what the details were, even within the strands. So that was one characteristic.

Latching onto, and its relation to anxiety

4:!9 Another characteristic was you frequently had words that you latched onto. And that's a, an unusual characteristic from our, our DES experience. But, but by latching onto, I think we, I think we all understand what that is, but, but you might be listening to a podcast and the podcaster was saying something and you'd be hearing with understanding and continuing to hear understanding with what the podcaster was saying. But you were somehow keeping in mind a word or words from what the podcaster recently said. Maybe the last words of the last sentence, not necessarily the last words, but, but some number of words that continued in your experience while the podcasters stream of words continued on. And that was not necessarily a podcaster, it was when, when a friend of yours was speaking, and maybe even when you were speaking or when you were reading. So when you were reading, sometimes you would latch onto words as you continued on onto read. And that, that's a fairly unusual con, fairly unusual content of experience, I would say. And, but I would also say that it is, in my understanding, in my own personal theory, is sort of related to anxiety.

5:52 Tristan: Mm hmm.

5:52 Tristan: That, that the non-anxious people experience words as, and the words come at them and they're processing the words and extracting the meaning out of 'em. And that's sort of an automatic thing in the verbal community. When people talk, other people un apprehend, that's what is sort of everyday non-anxious understanding. But people, but people who are anxious, at least some people who are anxious, and I don't have big samples of this, so this is what my own personal theory here, you can take it or leave it, but I have sampled with a number of anxious people who, what I have called the, the doing of hearing. So instead of just hearing as being a receiving operation, it's like, I gotta go out and grab this thought, this this stream that's coming out. I have to, I have to go meet it rather than just wait for it to wait, wait for it to arrive or so, and, and in my thinking, which is not to say everyday psychology thinking, because it's everyday psychology thinking doesn't really think like this. But in my understanding, that's a related to anxiety, why that is, I'm not exactly sure whether it's the, whether it's a cause of anxiety or the result of anxiety or has nothing to do with anxiety. It's just been luck that I have happened to seen a couple of people like that I don't really know.

7:29 Tristan: Really interesting.

7:31 RTH: So the, what I would say about that is that, that most people mo, and by most people, I mean most non-anxious people, most non-anxious people feel words when somebody else is speaking words, the, the, the person is just receiving them. And then when they're talking, they feel themselves to be guiding the words, creating the words. They're the creator of the words and the anxious people, at least a few, at least some anxious people seem to have that sort of backwards. So when they're talking, the words just seem to roll out and they're, they're not guiding those words, but when they're hearing, they have to somehow feel like they have to meddle with the words or capture the words or something, rather than just have those words come in and stick. So I, I would say sorta content wise, those are the sort of the two major characteristics. Three, I guess if we.

8:39 Tristan: Mm hmm. Now what have, what have the, what have the, the body and systematic parts of, of it.

Diffuse bodily anxiety

8:53 RTH: So we, we, we, I would say we saw there many samples. Many of your samples had a, what we called, I forget what we called it in inchoate bodily anxiety or something like that.

9:10 AG: Uh, diffuse bodily anxiety.

9:12 RTH: Sorry.

9:13 AG: We had inchoate, we had inchoate inner seeing and diffuse bodily anxiety.

9:17 RTH: Diffuse, diffuse bodily anxiety.

9:18 AG: Yeah.

9:18 RTH: Where there were quite a few, quite a few samples where it seemed like there was anxiety going on that was bodily, but you wouldn't, couldn't, didn't, wouldn't whatever say where in the body it was. So it seemed like this was a bodily sensation, but it wasn't like in my chest or in my neck or in my hands or wherever it was seemed somehow bodily. And that's somewhat unusual. And I would say most people when they think it was something is in their body, they can say, well, it's in my chest or whatever. Not everybody, but, and I would say it wasn't as frequent as I had understood. You had understood before sampling began. I, I understood that you had thought that you thought of yourself as being in pain or bodily discomfort or whatever all the time, or nearly all the time. And we didn't find that, we found that actually pain. We found pain a few times, but not very often.

10:29 Tristan: Yeah.

10:29 RTH: And but a but a sort of a bodily anxiety semi often by, by, by no means half the time it was like a quarter or a third or something like that at the time.

Pain was usually *not* directly apprehended

10:48 Tristan: Now, would you, what can we learn from that? Because we, does, does that mean I wasn't experiencing pain at that moment or consciously experiencing pain? Or does that, if, if, if say it wasn't in the sample that moment?

11:08 RTH: Well, I'd be interested in what you think about that. I, I, I would say the answer to that is that there, that at most of the samples, you were not directly apprehending pain, but when you retrospect, you retrospect yourself as always apprehending pain and those are different kinds of things.

11:34 Tristan: Mm. No, I I would also say in most of the samples, I wasn't directly apprehending vision either. Like there, there wasn't a strong visual content towards most of them, right.

11:50 RTH: I think that is basically correct, but that is not unusual.

11:56 Tristan: Right.

11:56 RTH: Most people have their eyes open most of the time when they're, when they're sampling. And, and very often people's experience is more about what they're creating on the inside. I was thinking about that. Or seeing a visual image of that, or feeling this or whatever. Their eyes are open, they're paying attention and the paying attention in the sense that they're skillfully moving through the world, but it's not directly apprehended.

About the unconscious

12:27 Tristan: Yeah. So maybe, maybe for me, I feel the pain is working a sim, I mean, I was surprised by, by how little visual con content there was sometimes. Um, but what was I gonna ask? So it seems that there's something, how do, how do you define the unconscious? Like what, what, what model do you have for how the unconscious or supposition basically for how the unconscious work stay safe? Cuz, cuz if we're driving a car and we're not directly thinking about our experience of what we're seeing, I assume we're still unconsciously seeing, or we're seeing at some level beneath that of direct experience, right?

13:10 RTH: So what I, so if you're asking me what I think is that, is that your question? You want to, you wanna know what Russ, [Tristan: Yeah.] what Russ Hurlburt thinks about that. Which is, so I'm gonna tell you what I think about that. And that is that I think that the unconscious, unconscious is a artificial distinction on the world. And that isn't, and, and in the, when inner experience is understood directly, we won't be worried about things like conscious and unconscious. I think it's much more the world is the, the human world. I think this is, I'm my own thinking. I think we are multiprocessors and we're doing all kinds of stuff all the time, and we're doing it skillfully. Right now, I'm sitting on a chair and I'm not falling off of the chair because I'm skillfully processing the chair. And I wouldn't say that processing is unconscious. I would say I'm just, I got a proprioceptive way of organizing or organizing the world that keeps me sitting on chairs when the, when I'm sitting on chairs and, and, and a whole lot of other skills that my complex set of, of, uh, neurons and synapses and glial cells and bones and muscles and whatever, all know how to, how to work and, and driving is that way. So I have a driving skill and I can be totally engrossed in the conversation. If we were in my car, we could have a con, having a conversation. I'd be driving skillfully, stopping at the lights, weaving in and out of traffic, doing whatever else that I have to do and, and have it. And, and if you beeped me at any of those times, the driving portion of it wouldn't be, wouldn't have been in my experience.

14:59 Tristan: Hmm.

15:01 RTH: But it's not because there's a conscious and a, a unconscious. At the same time as I'm weaving in and outta traffic, I'm also sitting on in the chair and, and, uh, adjusting my posture when I've pushed down on too long on that glute or whatever. And, uh, and paying attention to the temperature and turning up the air conditioner when it's too cold and whatever all that stuff is pro, I'm processing that. Not, not consciously or unconsciously, but I'm processing that. And, and at the same time, I have no doubt thinking about the war in Gaza and the, y'know, the parade in Washington and what, whatever else happens to be still occupying some subset of my neurons. And, uh, but, uh, but, but it seems that, it seems like there is one stream that's conscious, and I just don't think it's true. And I think your, your sampling, one of the, one of the reasons I think your sampling is interesting for people to understand it is, is that there, there was no one consciousness in your experience, almost ever.

16:24 Tristan: Mm.

16:24 RTH: And, and one could argue if one were a consciousness theorist, which I'm not, is that, well, there is, there was a conscious, in his consciousness, there's one kernel of consciousness and it gets divided up into four strands or whatever.

16:39 Tristan: Mm.

16:41 RTH: I think that's possible. I, I'd bet against it if I had to bet. But y'know, what I think is that, what I think is that there's all kinds of strands that are going on, more or less like spaghetti in a bowl. And, and, and I can take a bite out of that spaghetti, in which case I get this strand and that strand and this meatball, and that makes it seem like that was the important organization, but it's just, that's the organization that I happened to get at a particular time.

17:10 Tristan: Right. Right.

People are confused about what they experience

17:13 RTH: And I also think that it's the confusion between the self-characterizations or self-theories or whatever. I understand myself to be in pain all the time, or I understand myself to be thinking about this all the time or whatever. I mean, Amber is working with a bunch of people with OCD, with obsessive compulsive disorder. It, the people are confused about the distinction. Almost, almost everybody, maybe as I'm, I'm working with some philosopher people, and a lot, a lotta people are substantially confused about the, about what are the characteristics of their own inner experience. And I, y'know, I think, I think being confused is, is, is difficult.

More about pain

18:17 Tristan: Um, yeah. Interesting. Now see, it's hard for me to give up the idea of being in pain all the time. I do, because I, because the after sampling, the way I saw it was, oh, maybe I don't have this direct experience of pain all the time, but I have sort of like driving a car. That's kinda how I saw the, the pain operating underneath. And I, I saw the pain sort of more exhibited as anxiety in most samples. Um, but, y'know, and then what I thought was interesting was, was it seems that there are certain moments where you think about something consciously, and maybe it brings it up in a, in a way, but, y'know, maybe this, this is just self theorizing, so maybe we can discard all this. But, but for, for me, it, it sort of makes me, it, it sort of still brings up more question. I, I don't feel like I've, I've found the solution as neatly perhaps as, as you might've thought regarding, regarding the pain. But I, I dunno if that makes sense at all. Maybe it doesn't, but.

About anxiety

19:45 RTH: So, so let me, let me say what I was reacting to, which might be the same thing that you were saying, and I, and it might be off to the, off to the side or, or whatever. But I would, what I would say about your anxiety is that you said pretty frequently, I think, actually during the sampling that you had had some sort of what you might call *free floating* anxiety. It was just a sort of a general anxiety. It wasn't about anything

particular happening. And then if some particular event happened that free floating anxiety would sort of coalesce around the event and then it would become a particularized anxiety, no longer free floating. But I was anxious about

20:28 Tristan: Right.

20:29 RTH: But it wasn't like that, that anxious about *X*, whatever that was, came out of nowhere. It was a organization of the anxiety that was sort of underlyingly already there. That's the way I understood that.

20:44 Tristan: Yeah.

Pain

20:44 RTH: And what I understood you to, to be saying about the pain is that, that maybe the pain is an underlying organization of the anxiety.

20:54 Tristan: Yeah, it's, well, it's not the cause because I certainly had the same anxiety before I had the pain, but I feel like, um, I feel, I feel like the two, the two were related because I often, I would be having more anxiety when I could look at that moment and say, oh, I was having more pain perhaps at that moment, like, for, for example. But, but anyways, go on with what you were saying before perhaps maybe it's better.

21:36 RTH: Well, I, I, I think I got to the, sort of the end of that thought. The, so I, but I guess I also, I was reacting to what you were just saying is, I, I, it wasn't part of our contract or if you could say that I, or part of my expectation that, that I was gonna solve or this exercise was gonna solve your pain issue.

22:05 Tristan: Right.

The science of pain therapy

22:06 RTH: That was, would've been happy to have that happen. But that was the, I, I think if, if there were a mature science of inner experience, which I think we're just a very long way away from. But if there were, then maybe we would know what to do about Tristan's pain that we could say, well, he's got this kind of pain, he's got that kind of experience and this is the kind of experience that leads to that kind of a pain. And what he ought to do about that is, I don't know, yoga or, or, uh, mindfulness based on sensory awareness or whatever. I don't, I don't, I don't know the answer to that because I don't think the science knows the answer to that. And so I would, I would say I see what we have done as sort of at the foothills of that and we're trying to make sense of something in a, in a, in a field where we don't really know nearly enough to be able to make sense of it. Maybe never will make sense of it, or maybe we will make sense of it. That would be, y'know, your generation's problem, not mine or whatever. And, uh, figure that out.

23:48 Tristan: Right, interesting.

Tristan's pain has not changed

23:50 RTH: If I, if I had to guess, I would guess that the kind of thing that we have done, the sampling that we have done is probably the most therapeutic thing that you could do. But I don't actually know that. I really think that that's might be true, but I don't really know. So what, what, what would you say actually about your pain? Is your, is your pain better or worse the same as it was three or four months ago when we started this?

24:20 Tristan: Well, well, well, I certainly wasn't trying to solve the pain either, to be honest. I was just curious because, because it deals with self-conception versus actual experience. And in my, af, after the samplings, I, I always felt that, that maybe there is a type of experience that exists beneath direct experience, whether we wanna call it the unconscious or some sort of like inchoate unconscious or sort of conscious or something. I, I always felt there was that there were, there were always aspects to it that, that escape direct sampling, especially for, for me. But, but maybe that is, y'know, maybe that is my, I'm willing to, to cast that. That's sort of like a hypothesis for me. I'm, I'm definitely not certain about that. I'm, I'm, the thing I'm searching about is I do feel the pain, that the pain has, has not changed from the beginning. I would certainly say it's, I don't think the, the pain was the primary source, source of my anxiety throughout the discussions either. I, I think the source of the anxiety is more so, um, social anxiety or anxiety around, uh, my, my work, et cetera.

25:46 RTH: Yeah. So as, as for the portion is, is there stuff that's underlying what DES produces? I have no doubt about that. I, I think I've been fairly pretty, totally forthcoming with you and what everybody else, I don't think, I don't think DES gets to the essence of Tristan. It gets to what Tristan happens to have experienced at that time. And, and I think that's likely to be important, but I'm (A) I'm not sure about that. And (B), in what way, it would be important once we know, once we know how it's important. I, I, I think I would be surprised when I figure out when it, when it is discovered how, for what, how and for what it is important. But the, the, y'know, the essence, the essence of Tristan, I think is beyond my ability, our ability to grasp that doesn't make it unimportant. It makes it something else.

27:09 Tristan: Mm hmm.

27:12 RTH: So I think, I think what we have done is in, in a way sort of like blood pressure. Y'know, we can measure your blood pressure and there's some importance to blood pressure measurement doesn't get to the essence of Tristan, but it might have some importance to something. And I think it's, I think DES is a sort of a differentiated blood pressure measure or something like that. It, it, it attends to something which is related to in some fundamentally important way what, what Tristan does. But what that relationship is, I don't think I know, and I don't, I'm not sure that most physicians who are prescribing blood pressure medication know either way, some theory that says these things are connected.

Inchoate inner seeing

28:13 Tristan: Um, so I'm curious about, you mentioned the, the term "inchoate interceding." I'm curious what that is.

28:20 RTH: Inner *seeing*. Inter, inchoate inner seeing, inner seeing. So you had several samples where you felt like you were, you, you were seeing an image, seeing innerly, seeing something, but the thing that was being seen was either not present or was only present sort of sketchily or what I'm preferring to call inchoately, there's a hint of a, there's a hint of a thing seen, but it's not there. You had, I get I think one or two fairly clear inner seeings.

28:58 Tristan: Right.

28:59 RTH: Right. Now it's escaping me what they were, but, but.

29:03 AG: Um, one was Emily's apartment.

29:05 Tristan: Mm-hmm.

29:05 AG: That was one of the examples.

29:09 Tristan: But even that wasn't completely clear.

29:12 AG: Right, exactly.

29:15 RTH: So there are people, many people actually who on occasion innerly see, and when they innerly, see as best I can tell with as careful reporting as I've done with you, so you know what, you know, how confident I'm gonna be about these things. But the, those folks are seeing totally differentiated visual imagery. So I don't think it's a, I don't think it's a question, just a vocabulary in the sense that Tristan is speaking broadly about his inner speaking, inner seeing, and other people are speaking particularly about their inner seeing. I think the inner seeing is different.

29:57 Tristan: Yeah.

29:58 RTH: And there are some people who innerly see all the time, that's every, every beep they're innerly, innerly seeing something.

30:05 Tristan: Mm hmm.

A mature science of inner experience

30:05 RTH: And what, what the import of that is, I think is still, that's the kinda thing that I'm, what I'm calling a mature science of inner experience would know the answer to. What I, what I think the work, the work that we are part of here. That is, I, I think it's trying to lay out, look, look here, humanity, science interested people, whatever. There are, there are big differences between people and those differences are, are important and they're not merely linguistic reporting style differences. And that, I think organized psychology doesn't really know. And, uh, and so I've, I've been trying

to lay out examples. Well, this is one kind, this is another kind. This is another kind. We should at least if you're gonna have a theory of people, you should really at least know that these are what, what kinda people you should be having a theory about.

31:20 Tristan: I agree with that.

31:25 RTH: And I, I think it's, I think it's fundamentally important. So I think, I think the scientific community is heading, has been heading in the direction of dehumanizing people for quite some time, maybe, maybe forever, but for quite some time. And, uh, the effort that we're involved in is sorta the opposite of that. We, uh, as, as I conceptualize it, I think we have tried to describe one guy or one guy at a time, Tristan, in this case. We have tried to describe with care, with genuineness, a few samples of Tristan's experience. And, and then if we decide that we're, we're willing to put these on the web, then other people can look at them, we'll say, well, Tristan is certainly different from Mel or different from the other people that were out there.

32:32 Tristan: Mm.

32:32 RTH: And, and then once it's established that there are differences, then science would have to figure out, well, so what, so there are, there are experiential differences, what to make of it, what difference does that make?

32:51 Tristan: Right.

Inner experience in mental health

32:58 RTH: So that's the, sorta the big picture there. And I guess, I guess I would amplify on what I was saying ear, earlier on, that I, I think it is mentally healthy, whatever that means. And I'm not, I'm, I don't hold myself up as a arbiter or judge or whatever what is mentally healthy, but it seems, but it does seem to me that being clear about your own inner experience, having clear inner experience is generally a good thing. And by good I don't mean Good with a capital *G*, I mean, well productive whatever.

33:44 Tristan: Yeah.

33:45 RTH: And uh. And some people just naturally end up with clear inner experience and some people don't. And why is that? Well that would seem to me to be a sort of a fundamentally important question and I don't know the answer to that.

34:01 Tristan: Yeah.

34:01 RTH: Whether it's genetic, you know, we can say, you know, the genes made the hippocampus have a left turn in it. Then if you got a right turn in it and you end up with this kind of stuff or a left turn, you get that kinda stuff. I don't have any idea about that. Not sure that's the best way to think about it even, but I,

34:22 Tristan: Yeah.

34:22 RTH: I, I have encountered some people whose inner experience became sort of dramatically clearer than it was. And when that happened, they seemed to be a whole lot mentally happier, healthier, whatever.

34:41 Tristan: So you think I would be mentally healthier with my inner experience were clearer and less inchoate?

34:54 RTH: I think that's what I think, I don't know whether that's true. I, so I wanna make, I wanna make clear that that's the distinction. I don't know whether that's true. I think it's true.

35:03 Tristan: Mm hmm.

35:03 RTH: That, that a clear distinction I'm trying to make here. I'm, I'm, I, I, I, I feel like I owe it to you to be as honest with you about what I think as I can be, because I've asked you to be honest with me about what your experience is. So it seems like I gotta answer your question.

35:22 Tristan: Mm hmm.

35:22 RTH: But, but I also want to, part, part of the answer to that question is I have to be honest about my own limitations about that. I don't really know the answer to that question.

35:33 Tristan: Mm hmm.

35:33 RTH: That's what I think.

Bulimia

35:38 Tristan: Well you, you did a study with people with bulimia, right? And did they have like dozens of things going on at the same time?

35:44 RTH: Some, some did, yes. And I would say for some of them, the paying attention to the, to the world and of their own inner experience as DES requires, which means, which is to slow it down and let's, let's stick with this experience and this then again with this experience and keep with this experience for 10 or 15 minutes. For some people that seem to make their bulimia better.

36:13 Tristan: Mm hmm.

36:15 RTH: Whether that's because their experience changed or because of the force of my personality or because it was the phase of the moon or whatever, I don't really know the answer to that question.

36:28 Tristan: Mm hmm.

36:33 RTH: That's, that's what, that is the fundamentally important question or a fundamentally important question. And, and what we have done here is one grain of sand in the sandbar of the answer to that question. I think.

37:06 Tristan: Mm hmm. Interesting.

37:06 RTH: Lemme look through my notes and see whether we're,

37:18 Tristan: What do you think Amber?

37:23 AG: I think about like inner experience and mental health?

37:29 Tristan: Sure, yeah.

Scrolling

37:30 AG: Um, I think, I think what I, what we've seen so far is, and I wanna be careful not to extend my reach too far, but I think that um, what we pathologize people as, or what we think pathology looks like, um, seems to somehow look like different inner experience. What that means, I don't know if that's true. I also don't know, I just think that that's something that we've kind of seen with people. Um, y'know, um, I think an example is when people are scrolling on their phones, we often see that there's nothing in their experience, something like that. So why are people scrolling on their phones all the time? That's beyond us. But I think that there's something to be said about that. Um, I don't know if that really answered your question, but that's kind of what I think about this whole, this whole deal, um. But yeah.

38:37 Tristan: Yeah, I would say that's probably why I scroll—to have more nothing.

38:46 RTH: I think that's quite possible. That's why most people scroll, scroll or drink or take drugs or whatever and to get closer to nothing.

Thinking vs. feeling

38:59 RTH: Again, I'm looking through my notes, I was looking through my notes while you all were talking. And the one thing that I have not said today that I thought was a characteristic of your experience is there are many people, maybe most of the people that I sample with make a fairly clear distinction between when they're cognizing or thinking or whatever and when they're feeling that's, so the word thinking generally means something and the word feeling generally means something else. For most people they would, people get confused at the edges of, of, of that. But, but you had experiences that were somewhere in the middle ground or both of, or undifferentiated cognitive and affective at the same time. And I guess I think about that and sorta the same thing about the, the inchoateness or the lack of making all, making things come together as one thing. You are responding to the things that most people would call feeling and, and responding at the same time to what most people would call thinking and ending up with something that seems like thinky-feely stuff.

40:23 Tristan: Yeah. It's hard, it's hard for me to differentiate the two.

40:29 RTH: Yeah. And, and I, I would say with all, with all humility (I guess is the word) I don't think I'm in a position as one individual, one guy talking about me personally here. I'm not in a position to know what's Good or bad with a capital *G* on it, y'know, with the, the difference between what is good and evil or I think there is good and evil and, but the knowledge of good and evil is a pay grade way higher than mine. I think the Bible's got a, Bible's got it right. I'm no Biblical scholar, but "thou shalt not eat of the tree of the knowledge of good and evil or something like that." And uh, and I think that's right. So I don't know whether it's a good thing to have cognitive affective awareness. I don't know whether it's a good thing to have, y'know, frequent inchoate experiences. It's, you know, you might very well be operating at a higher level of consciousness than I am capable of conceptualizing. I am not in a position to judge that. That doesn't mean that there is not an answer to that question. It just means that Russ isn't the guy to, to be able to say this is what is good and that's what's not good.

42:05 Tristan: Yeah, I mean the high, the high level of inchoate experience, I guess is not, it's, it's interesting to hear that, confirm that that's not how most people operate. Um, I mean, I sort of knew how that's, that's always how I operated. I'm always trying to crystallize and create experience and, and turn it into something more concrete. And that's sort of, y'know, that only happens, y'know, it might not happen one day, it might happen another. And, and when I really does then I get some value out of that. I think that's probably why I'm a scholar cuz I'm trying to, trying to turn the inchoate into, into something concrete and expressible. But I, it, it is sort of the source of my social anxiety that I can never express how I, how I feel to people. And I'm sort of, I never exist directly with them. I only, I only operate in a form of anxiety that's removed from direct indirection with people.

43:12 RTH: Yeah. I I think, I think social anxiety is really common, but I think it, I think there's a lot of different kinds of social anxiety and I think it comes from a lot of different kinds of experience.

43:23 Tristan: Yeah.

43:25 RTH: But that's, that's the kinda thing that we would, it would be nice to know more about. And it isn't going to be found by giving people questionnaires and.

43:36 Tristan: Right.

43:38 RTH: So I, I think, I think we gotta do better than that. And this is my attempt, I guess I would say to do better than that.

43:48 Tristan: Mm.

Should we put these interviews on the web?

43:55 RTH: So I, I do have one line of questions and, and that is, shall we put this stuff, make this stuff public? And if, and if the answer to that is a tentative yes, this is what we would do, I would, I think I, I think I've already sent you everything except the video for day nine, which I haven't been back to my university office since that time, so I, so I haven't put day nine yet on the web. When I do, I'll let you know, but, but if we, if we're in agreement that, that there, there's a possible yes to the answer to the question that I just asked, then I would make a website that looks similar to the kinds of websites that I've got a collection of out there for Mel and Kerry and, uh, Michael, Pollan, and a bunch of other people. I would make something like that in a, in a private way and circulate that amongst us so that when it, when it's done, you could, you could say, well this is exactly what it would be before I, before I turn the switch and make it public. And, and at any time up until the end of that time, you can say, no, I changed my mind. And now that I see the whole thing, I can't, I don't want part to do about that. So, so what I guess I'm looking at what my question at the moment is do do we have tentative approval to advance to the final approval stage?

45:38 Tristan: Um, sure. I could probably even give you final approval, but if you want tentative first we, we'll start with tentative.

45:45 RTH: Well, I, I, I would rather wait in, wait, wait for the final approval because for, for a whole variety of kinds of reasons. But the, the, the fund, it's all, they all come down to the same kind of a thing. And that is, I want to make sure that, so, so we're gonna, we, we are contemplating putting on the internet for anybody to see and comment on and do whatever crap people do on the Internet. Some things which are fundamentally privately Tristan. And, and I want to do that with as in as slow a procedures as I can. So for example, I would make, I'll make this whole website, I think we've gotten that far. I'll make this website take me a week or so to do it probably, and or maybe more there's, there's work to be, work to be involved in doing that. And, and then I'll send y'all a link and then you can send that link to whomever you want to send it to, seeking whatever advice you want to seek about it. It's just a good idea to put this out there or whatever. And, uh, and you should have the right to consult whomever that you want to have in whatever cool hour you would like to have before you make something which is fundamentally privately, Tristan, anything more than that.

47:12 Tristan: Okay. Yup then you have my tentative approval in that case.

47:20 RTH: Okay. And, and I, and I, I, I've happily accept the risk that that is for me, the risk for that is for me that I would spend time and you would eventually say, no thank you or whatever. And, and I have done that and then, and people have said, no, thank you. And, and, and that's the, that's the price to be paid for the game that we're playing here. That's the admission price from my point of view.

47:58 Tristan: Let's go ahead.

48:00 RTH: Okay. And then, and somewhere along in there, Amber, you and I probably ought to count some of the stuff so we can at least provide some ballpark so when we say there's frequent this, we should be able to say what we mean by frequent. And is

there anything else that we should be talking about today? And I would, and I would, I would say we don't, we don't need to conceptualize when, when this conversation ends with that, if tomorrow or whenever Tristan says, well, shit, I really wanted to ask him that or tell him that or what, then we could do this again, this is.

48:49 Tristan: Um, yeah, I mean, I, I suppose, but otherwise this would be our, our sorta last conversation for, for the session. And I just give you the approval for the final one by, by email or something or?

48:59 RTH: Yeah, probably. But, and there aren't any rules about this game. It's, uh,

Tristan has found it enlightening

49:06 Tristan: No, I mean this sounds good. I guess we should say, say a goodbyes for now. I think this has been a pretty enlightening experience for me and I appreciate you guys spending so much time with my brain.

49:20 RTH: Well, I appreciate it and Amber can speak for herself, but I think, I think the work that we're doing is a contribution. So as best, as best I can align myself with what I think is the good thing that is the Good with the capital *G*, which this is as close as I can get to that, whether I'm right about that, I don't, I don't know. But this is,

49:42 Tristan: It's been great. This is, I may, I may write about DES in the future to try, try to do something like Kracauer did, even though I'm not really a cognitive film guy, but.

49:54 RTH: So I, I would say that's your property. What you, what you have done is up to you and, and if you write something about it and I disagree with what you write, then, then I would've the right to write something in response to that or whatever.

50:09 Tristan: Yeah.

50:09 RTH: But, but that, that's, you, you should have the freedom and particularly what's out there on the web, you should have the freedom to, and, and just about everything is out there on the web, including I would probably put this interview out there as part of the, part of the deal.

50:29 Tristan: Right.

50:29 RTH: And, and, and I would also say that once, once you see everything out there on the web, if there's some particular piece of it that you would say, well, you can do everything but that, or you gotta redact that or whatever, we can do that. It's redaction is possible in a lot of different ways, y'know?

50:51 Tristan: Yeah. Yup sounds good.

50:59 RTH: Alright. So anything else we should be talking about today?

51:03 Tristan: I'm, I'm good. I'm happy.

51:06 RTH: Excellent. I would like you to send me the beeper back.

51:08 Tristan: Oh, right.

51:10 RTH: And I will, I will email you an address to send that to me. Alright, good. Yeah, I guess the, the email that's at the, at the bottom of every one of my emails, that address is probably good.

51:25 Tristan: Broken beeper.

51:27 RTH: Yeah. You don't need to send me back the earphone. Just send me back the beeper.

51:29 Tristan: 4-5-0 S South Maryland. Okay. Right. Cool.

51:33 RTH: 45-0-5, 4-5-0-5 South Maryland Parkway.

51:39 Tristan: Cool.

51:39 AG: Thank you so much for all your time.

51:42 Tristan: Thank you.

51:45 RTH: I appreciate it. Tristan. And I, and I will be in touch with you when, when I have made the next step, but it's, you know, there, there's a fair amount of time involved so it's, and I dunno what else I have to do between now and then so.

51:59 Tristan: Look forward to reliving the trauma, no just kidding. Thanks guys.

52:04 AG: Thank you.

52:06 RTH: Alrighty, thank you very much. My pleasure. The whole, whole.