Article

Adversity as Catalyst: A Mixed-methods Analysis of Iboga-induced Psychological Transformation

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Abstract

In this study, I investigate the psychological enhancements associated with iboga experiences using a general interpretivist framework informed by grounded theory and configurational comparative methods. Semi-structured interviews were conducted with 12 individuals who had previously undergone iboga sessions in clinical contexts. The analysis yielded three core categories: (1) processing and psychological shifts, (2) visionary and mystical experiences, and; (3) negative psychedelic experiences. Qualitative comparative analysis (QCA) identified that post-iboga psychological shifts were most consistently associated with perceived plant intelligence, epistemological insight from the plant, and engagement with difficult emotional content. Ego dissolution and identity transformation were linked to trauma release, emotional insight, and relational epistemologies. Contrary to prevailing narratives that pathologize negative psychedelic experiences, this study demonstrates that such experiences—characterized by fear, psychic disintegration, and surrender—functioned as central mechanisms of psychological growth. The findings further reveal that participants frequently attributed their insights to iboga itself, challenging neuroreductive frameworks and supporting participatory, relational models of psychedelic knowledge. This research advances psychedelic science by formalizing adversity as therapeutic, validating plant-based epistemology, and introducing an integrated model of identity deconstruction through affective processing. The study addresses critical gaps in iboga research and calls for expanded ontological frameworks in the design of psychedelic-assisted therapies.

Keywords: Iboga, catalyst, adversity, psychology, transformation, mystical experience.

1. Introduction

Over the past several decades, mental health disorders have surged to unprecedented levels globally, posing one of the most persistent and costly public health crises of the 21st century (Overall & Rosalind, 2022). Epidemiological data indicate that depression now constitutes the leading cause of disability worldwide, affecting an estimated 280 million people, while anxiety disorders impact over 300 million individuals (World Health Organization, 2021). Despite unprecedented advancements in psychopharmacology and psychotherapy, overall mental health outcomes have stagnated or worsened in many western countries, with suicide rates, substance use disorders, and treatment-resistant depression continuing to rise (Twenge et al., 2019; Walker et al., 2021). Recent analyses further reveal that the global economic burden of mental illness is

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projected to reach $6 trillion by 2030, underscoring the inadequacy of existing models to produce sustainable improvements (Patel et al., 2018).

The persistence of these crises despite 120 years of dominant biomedical and cognitive-behavioural frameworks raises critical questions about the underlying assumptions of contemporary psychiatric models. Western psychiatry, emerging in the early 20th century with the rise of psychoanalysis and later dominated by pharmacotherapy, has historically prioritized symptom suppression over systemic or existential healing (Whitaker, 2010; Rose, 2007). Although selective serotonin reuptake inhibitors (SSRIs) and cognitive-behavioural therapies have demonstrated moderate efficacy in symptom reduction, relapse rates remain high, and meaningful psychological flourishing remains elusive for many patients (Andrews et al., 2015). These limitations highlight the necessity of exploring alternative, more holistic approaches to mental health.

Consciousness-expansion has emerged as a promising frontier for psychological healing, offering pathways that transcend symptom management and engage deeper layers of cognitive, emotional, and existential integration (Grof, 2008; Yaden et al., 2017). Research indicates that non-ordinary states of consciousness, whether accessed through meditation, breathwork, or psychedelics, can catalyze profound shifts in self-concept, emotional regulation, and life meaning, often resulting in enduring psychological benefits (Hanley et al., 2020; Davis et al., 2020). Unlike conventional interventions, consciousness-expanding experiences foster a reorganization of perception, allowing individuals to access latent cognitive and affective capacities critical for resilience and post-traumatic growth (Garcia-Romeu et al., 2015).

Within this emerging paradigm, the psychedelic renaissance has generated considerable excitement. Substances such as psilocybin, MDMA, and ayahuasca have demonstrated remarkable efficacy in clinical trials addressing treatment-resistant depression, PTSD, and existential distress associated with terminal illness (Griffiths et al., 2016; Carhart-Harris et al., 2021). Regulatory shifts, including the granting of breakthrough therapy designations by the U.S. Food and Drug Administration, further signal a growing institutional acceptance of psychedelics as legitimate therapeutic tools (Reiff et al., 2020). However, the enthusiasm surrounding the psychedelic renaissance must be tempered by an acknowledgment of its double-edged nature. While these substances offer transformative potential, they also expose individuals to intense psychological challenges, including anxiety, psychosis-like experiences, and existential crises (Carbonaro et al., 2016; Barrett et al., 2016). Increasingly, scholars recognize that the therapeutic value of psychedelics may not lie in their capacity to produce uniformly positive experiences but in their ability to orchestrate confrontations with repressed material and existential fear (Watts et al., 2017; Gorman et al., 2021).

Within this context, iboga presents a particularly compelling yet underexplored opportunity. Iboga, a traditional African plant medicine, occupies a unique position among psychedelics for its extended visionary sequences, structured autobiographical memory retrieval, and facilitation of egoic deconstruction (Fernandez, 1982; Brown, 2013). Preliminary research suggests that ibogaine, its primary active alkaloid, may have profound anti-addictive and psychotherapeutic properties, interrupting entrenched behavioural patterns while catalyzing existential insight (Alper et al., 1999; Noller et al., 2018). Nonetheless, clinical research on iboga's broader psychological impacts remains scarce relative to more extensively studied psychedelics like psilocybin or ayahuasca (Koenig & Hilber, 2015; Schenberg et al., 2017).

Critically, existing literature often isolates iboga's anti-addictive effects without fully examining its contributions to emotional processing, trauma integration, ego dissolution, and epistemological reorganization (Alper et al., 1999; Brown, 2013; Koenig & Hilber, 2015; Schenberg et al., 2017; Davis et al., 2020). Most studies focus on narrow biomedical outcomes or short-term symptomatology, overlooking the deeper consciousness-transforming dimensions reported in both indigenous and contemporary user narratives (Labate et al., 2017; Fotiou, 2020). This research aims to address these gaps by exploring the complex psychological shifts associated with iboga experiences beyond addiction treatment, including the roles of emotional catharsis, mystical insight, and relational epistemologies.

In the first section of this research, I present the theoretical framework that contextualizes the study within existing research on consciousness expansion, psychedelics, iboga's historical and contemporary applications, and the role of mystical and challenging experiences. Next, the methodology section details the grounded theory and qualitative comparative analysis (QCA) procedures employed in analyzing qualitative interview data from 12 participants who underwent iboga experiences. The results section presents the emergent thematic categories and configurational models, followed by a critical discussion that articulates the study's main contributions to knowledge. Finally, the article concludes with an analysis of practical implications, limitations, and directions for future research within the expanding field of psychedelic science.

2. Theoretical framework

Psychology & well-being

Consciousness expansion & mental health

Expanding consciousness has historically been linked to enhanced psychological well-being across numerous philosophical, psychological, and transpersonal traditions (Overall & Rosalind, 2022; Overall, 2020, 2021, 2025a, 2025b, 2025c, 2025d). Contemporary psychological research increasingly recognizes that non-ordinary states of consciousness can facilitate cognitive

flexibility, emotional resilience, and self-transcendent experiences that contribute to improved mental health (Garcia-Romeu, 2010; Hanley et al., 2020). Such expansion often involves a shift from habitual egoic patterns toward broader identification with relational, existential, or universal dimensions of being, a process associated with decreased psychopathology and greater subjective well-being (Yaden et al., 2017). Self-transcendent states, whether induced through meditation, flow, mystical experience, or psychedelics, have been shown to reduce symptoms of depression, anxiety, and addiction by fostering emotional openness, decentering from maladaptive self-concepts, and enhancing perceived meaning in life (Miller et al., 2019; Roseman et al., 2018).

Transpersonal psychology posits that access to expanded consciousness facilitates deep integration of unconscious material, often accelerating therapeutic change compared to conventional cognitive interventions (Grof, 2008). Importantly, rather than bypassing psychological struggles, consciousness expansion often intensifies emotional processing, providing the experiential groundwork necessary for transformation (Lukoff, 2014). Emerging empirical studies have linked shifts toward expanded consciousness with measurable improvements in emotional regulation, existential resilience, and cognitive reappraisal capacities (Davis et al., 2020). Despite these promising findings, mainstream psychology has been slow to integrate consciousness-based models into its frameworks, often due to methodological biases privileging materialist paradigms (Ferrer, 2002; Overall & Rosalind, 2022). As such, expanding consciousness remains an underutilized but increasingly validated pathway for improving mental health outcomes, calling for further empirical refinement and clinical application.

Psychedelics & well-being

The psychological benefits of psychedelic medicines, particularly classic serotonergic psychedelics such as psilocybin, LSD, and ayahuasca, have received substantial empirical support over the past two decades (Overall, 2025a). Controlled clinical trials have demonstrated that psychedelics can significantly reduce symptoms of major depressive disorder, post-traumatic stress disorder, substance use disorders, and existential anxiety in terminal illness populations (Griffiths et al., 2016; Carhart-Harris et al., 2021). These outcomes are often mediated through mechanisms such as enhanced emotional flexibility, disruption of maladaptive default mode network activity, and facilitation of profound mystical-type experiences (Carhart-Harris et al., 2014; Roseman et al., 2018).

Psychedelic-induced experiences often result in enduring increases in traits such as openness to experience, psychological flexibility, self-compassion, and cognitive empathy—traits associated with long-term mental health resilience (MacLean et al., 2011; Watts et al., 2017). Furthermore, psychedelics have been found to promote cognitive de-centering and reduce identification with rigid self-narratives, a therapeutic mechanism that closely parallels mindfulness-based and acceptance-based interventions (Guss et al., 2020). Qualitative research further highlights that

psychedelics often catalyze profound insights into the self, relationships, and existential purpose, leading to post-traumatic growth and redefinition of life priorities (Belser et al., 2017).
Despite these promising results, the field remains cautious due to concerns over adverse events, especially in unsupervised or unsupported settings (Johnson et al., 2008). Nonetheless, when administered in controlled environments with proper psychological support, psychedelics consistently demonstrate strong safety profiles and exceptional therapeutic potential (MacLean et al., 2011; Watts et al., 2017). These findings challenge traditional psychiatric paradigms that conceptualize mental health solely through pharmacological symptom suppression, advocating instead for transformational, consciousness-expanding models of psychological healing.

Iboga

Iboga, derived primarily from the root bark of the *Tabernanthe iboga* shrub, holds a longstanding place in Central West African spiritual and healing traditions. Most notably, it has been used sacramentally within the Bwiti religion of Gabon, Cameroon, and the Republic of Congo for purposes of initiation, healing, and communion with ancestral spirits (Fernandez, 1982; Samorini, 1998). In traditional Bwiti contexts, iboga is regarded not simply as a plant but as a sentient spiritual teacher, integral to practices aimed at balancing personal and communal harmony (Labate et al., 2017). Its ingestion is often embedded within elaborate ceremonial frameworks, involving chanting, drumming, and guided visionary journeys intended to realign the individual with social, ethical, and cosmological orders.

European awareness of iboga emerged during colonial exploration in the 19th century, leading to its isolation of the active alkaloid, ibogaine, in 1901. Early western medical interest in iboga was sporadic, with occasional experimental use for appetite suppression and stimulant properties (Alper, 2001). However, it was not until the mid-20th century that anecdotal reports began to surface about iboga's potential to interrupt addiction patterns, catalyzing a resurgence of scientific interest (Lotsof, 1995). Despite its promising properties, iboga—and its derivative ibogaine—has faced significant regulatory obstacles due to concerns over cardiotoxicity, neurotoxicity at high doses, and lack of large-scale clinical trials (Koenig & Hilber, 2015).
Nevertheless, the historical continuity of iboga's use across cultural contexts highlights its multifaceted nature: as a sacrament, a medicine, and a teacher (Fernandez, 1982; Samorini, 1998). This dual identity challenges the simplistic pharmacological framing often applied in western biomedical discourse, suggesting that iboga's full therapeutic potential may be inseparable from the relational, ritualistic, and epistemic frameworks within which it is traditionally embedded (Labate et al., 2017; Fotiou, 2020; Tupper, 2011).

Despite increasing interest in psychedelic science, academic research specifically investigating iboga's impact on psychological well-being remains limited compared to more widely studied substances like psilocybin or ayahuasca (Alper, 2001; Brown, 2013; Koenig & Hilber, 2015; Schenberg et al., 2017). Early anecdotal and observational studies suggested that ibogaine—a

key alkaloid within iboga—could disrupt opioid dependence and catalyze profound psychological insights related to trauma, self-concept, and existential purpose (Alper et al., 1999; Mash et al., 2000). More recent pilot studies and qualitative investigations have expanded these findings, highlighting iboga's unique capacity to elicit emotionally intense, often painful, but ultimately reparative processes involving memory retrieval, trauma processing, and identity reconstruction (Brown, 2013; Schenberg et al., 2017).

Iboga experiences are frequently described as protracted, intensely introspective, and highly structured compared to other psychedelics, often involving life reviews, confrontation with unconscious material, and perceived dialogue with autonomous intelligences (Davis et al., 2020). This narrative coherence contrasts with the often more fluid or visionary psychedelic states induced by substances like LSD or psilocybin, suggesting that iboga may operate through distinct neuropsychological mechanisms, including enhanced autobiographical memory reconsolidation (Koenig & Hilber, 2015).

Clinical investigations into ibogaine's efficacy for substance use disorders have also reported ancillary improvements in depressive symptoms, anxiety reduction, and enhanced existential resilience (Noller et al., 2018). However, challenges remain regarding standardized dosing protocols, medical screening for cardiovascular risk, and the integration of indigenous epistemologies into western clinical practice. As a result, calls have intensified for more rigorous, interdisciplinary research agendas that can better elucidate iboga's multifaceted contributions to psychological healing beyond its anti-addictive properties (Alper et al., 1999; Brown, 2013; Davis et al., 2020).

Mysticism

Mystical experiences from psychedelics

Mystical experiences induced by plant-based psychedelics have been widely studied in both clinical and anthropological contexts, with increasing recognition of their transformative therapeutic potential (Griffiths et al., 2006; Shanon, 2002; Winkelman, 2010; Garcia-Romeu et al., 2015). Characterized by features such as ego dissolution, a sense of unity with all life, sacredness, ineffability, and timelessness, these states are often reported as among the most meaningful experiences of an individual's life (Griffiths et al., 2006; MacLean et al., 2011). Classic psychedelics such as psilocybin, ayahuasca, and mescaline have all been associated with such experiences, but plant-based traditions—particularly within indigenous and ceremonial frameworks—often conceptualize these encounters not as hallucinations, but as ontological revelations and contact with divine or spiritual intelligences (Shanon, 2002; Fotiou, 2020).
Research demonstrates that the intensity of mystical-type experiences is one of the strongest predictors of sustained psychological benefit, including reductions in depression, anxiety, and addictive behaviour, and increases in well-being, openness, and prosocial values (Griffiths et al.,

2016; Roseman et al., 2018). These findings support a growing interest in 'mystical experience dosing' within clinical psychedelic science (Griffiths et al., 2016; Yaden et al., 2017; Garcia-Romeu et al., 2019). However, scholars in transpersonal psychology have long cautioned that such experiences cannot be reduced to neuropharmacological phenomena alone but must be contextualized within broader spiritual, cultural, and developmental frameworks (Grof, 2008; Ferrer, 2002).

Plant medicines such as ayahuasca and iboga often produce visionary sequences that are interpreted by users as teachings or insights conveyed through sentient forces (Shanon, 2002; Winkelman, 2010; Fotiou, 2020; Gearin & Labate, 2018). These transpersonal elements challenge Cartesian models of cognition and support a participatory epistemology in which mystical consciousness is not self-generated but relationally revealed (Ferrer, 2002; Tupper, 2011). Such experiences thus open new possibilities for understanding consciousness not merely as brain function but as an ontologically porous and interconnected field.

The challenges of negative psychedelic experiences

While psychedelic research has often focused on the healing potential of mystical and peak experiences, negative or challenging psychedelic experiences—often colloquially referred to as bad trips—remain undertheorized and insufficiently integrated into dominant therapeutic frameworks (Barrett et al., 2016; Carbonaro et al., 2016; Gorman et al., 2021). These experiences, which may include terror, disorientation, ontological insecurity, psychotic-like phenomena, or reactivation of trauma, are frequently cited as reasons for participant dropout or trial exclusion in clinical studies (Carbonaro et al., 2016; Studerus et al., 2011). Yet, qualitative and transpersonal literature increasingly suggests that these difficult experiences are not inherently pathological, but can serve important psychological and spiritual functions when properly contextualized and integrated (Barrett et al., 2016; Gorman et al., 2021).

Contemporary clinical models are beginning to shift from pathologizing difficult experiences to recognizing their potential as gateways to transformation (Gorman et al., 2021; Belser et al., 2017; Watts et al., 2017). The challenging experience questionnaire (CEQ) and subsequent studies have shown that such experiences are often later reinterpreted by participants as essential components of growth, self-understanding, or healing (Barrett et al., 2016; Carbonaro et al., 2016). This post-hoc reframing is consistent with theories of post-traumatic growth and shadow work within Jungian and transpersonal paradigms, which argue that psychological progress often emerges through confrontation with repressed content or existential fear (Lukoff, 2014; Grof, 2008).

The current research landscape, however, lacks an integrated narrative that fully legitimizes struggle within psychedelic healing. Dominant discourses often privilege peak states, marginalizing the value of descent experiences (Lukoff, 2014; Shanon, 2002). As such, there is a

pressing need for revised therapeutic models and cultural narratives that normalize discomfort, validate psychic pain, and situate negative experiences as central—rather than peripheral—to the process of transformation (Barrett et al., 2016; Gorman et al., 2021).

Traditional accounts of plant medicines, particularly within animist and indigenous cosmologies, frequently attribute intelligence, agency, and intention to the plants themselves (Fernandez, 1982; Apffel-Marglin, 2011; Fotiou, 2020; Gearin & Labate, 2018). Medicines such as iboga, ayahuasca, and peyote are not seen merely as chemical tools, but as sentient teachers whose guidance is often corrective, confrontational, and designed to catalyze personal transformation (Labate & Cavnar, 2014; Gearin & Labate, 2018). From this perspective, negative experiences—such as revisiting trauma, confronting fear, or enduring psychic dismemberment—are not aberrations but pedagogical devices intentionally deployed by the plant intelligence to reveal repressed truth and facilitate healing.

This participatory ontological framing disrupts pharmacological models that view side effects as noise or dysfunction (Ferrer, 2002; Tupper, 2011; Gearin & Labate, 2018). Instead, struggle is interpreted as a necessary initiation process, often referred to in ethnographic literature as a 'death-rebirth' sequence (Shanon, 2002; Winkelman, 2010). For instance, among Bwiti practitioners, iboga is revered precisely because of its capacity to bring individuals face-to-face with ancestral pain, ego death, and moral transgression—experiences considered foundational to personal maturation (Fernandez, 1982). Within these frameworks, the plant's intentionality is not symbolic but experientially real, embedded in the phenomenology of the session.

Modern psychedelic users increasingly report similar dynamics even in clinical or non-traditional settings, interpreting negative experiences as intelligent interventions rather than accidents (Belser et al., 2017; Davis et al., 2020). This suggests the need for a revised model of therapeutic design—one that accounts for the possibility that struggle is not merely tolerable but central to how these plant intelligences 'work'. Integrating such ontologies into western science remains a challenge but may be essential to unlocking the full healing potential of these substances without distorting their function through the lens of symptom-avoidance or comfort-maximization paradigms.

3. Methodology

Study 1

This study explored the psychological enhancements associated with iboga experiences through a general interpretivist framework grounded in qualitative research methodologies. Interview data from 12 individuals who had previously undertaken iboga sessions provided the empirical foundation. Departing from traditional grounded theory practices, this project did not conduct concurrent data collection and analysis. Classical grounded theory recommends simultaneous

interviewing, coding, and comparative analysis (Bryman & Teevan, 2005; Suddaby, 2006); however, in this study, all interviews were completed in full prior to initiating analytic procedures, following methodological guidance emphasizing the benefits of sequential separation (Suddaby, 2006; Overall & Wise, 2016). This intentional sequencing supported methodological clarity and minimized potential analytic bias during data gathering. Once the interviews were finalized, the analysis phase commenced using open and axial coding procedures (Strauss and Corbin, 1990).

Following best practices in qualitative research, the interview transcripts underwent fine-grained thematic decomposition (Ojastu et al., 2011). Initial codes were generated using the commenting and highlighting functionalities within Microsoft Word, an approach that facilitated flexible code development and revision (Overall & Wise, 2016). This digital workflow enabled dynamic categorization as interpretive patterns emerged, supporting the consolidation of similar experiential elements into progressively broader thematic groupings (Ojastu et al., 2011).

Data analysis

Participants were recruited through a clinical practitioner certified in iboga facilitation, who served as the intermediary for client outreach. Eligibility required participants to have completed an iboga flood dose administered in a controlled therapeutic environment. In line with existing literature, flood dosing typically involves the administration of approximately 15–20 mg/kg of iboga alkaloids, producing a sustained psychoactive state characterized by intense visionary immersion, psychological introspection, and physical detoxification (Brown, 2013; Koenig & Hilber, 2015). The primary psychoactive effects generally persist for 24 to 48 hours, followed by an integration phase that may extend over several subsequent days (Mash et al., 2000; Koenig & Hilber, 2015).

Semi-structured interviews lasting approximately one hour were conducted remotely using Zoom, recorded with informed consent, and transcribed verbatim. The interview protocol (see Appendix) was designed to elicit rich narrative accounts of iboga's psychological and emotional impacts. Participants' recollections spanned from three months to five years post-iboga exposure. Although retrospective interviews can introduce recall variability (Rubin & Wenzel, 1996; Berntsen & Rubin, 2006), neurocognitive research indicates that emotionally salient, self-defining events—particularly those involving altered states—are encoded with exceptional vividness and long-term durability (Conway et al., 2004).

To promote optimal conditions for memory access, participants engaged in preparatory breathwork exercises immediately prior to the interview sessions. Such practices are associated with parasympathetic nervous system activation and increased theta-band activity, physiological states conducive to heightened introspective access and autobiographical memory retrieval (Gruzelier, 2009; Gervais et al., 2020). All research activities conformed to the ethical standards

outlined in the Canadian Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS 2). Participants received comprehensive study information, including confidentiality assurances, and confirmation that all data remain securely archived in compliance with TCPS 2 stipulations.

Data analysis began with a line-by-line examination of each transcript through open coding techniques, consistent with qualitative methodological standards (Silverman, 2008). This systematic process generated 1,336 distinct codes across the dataset. Following open coding, a frequency-based analysis was performed to identify recurrent themes, employing techniques such as word frequency tracking and thematic clustering to surface prominent patterns (D'Andrade, 1995; Overall & Wise, 2016). Reflecting Strauss and Corbin's (1990, p. 61) framing of open coding as a process of "… breaking down, examining, comparing, conceptualizing, and categorizing…" qualitative material, several dominant thematic domains emerged. Key recurring themes included post-iboga psychological shifts, visionary and mystical experiences, and ego dissolution and identity shifts (see Table 1).

Table 1. Open-coding examples

Theme Name	Total Frequency	% of 12 respondents
Post-iboga psychological shifts	719	100
Perceived plant intelligence and guidance	89	100
Visionary and mystical experiences	47	100
Negative psychedelic experience	33	83
Ego dissolution and identity shifts	26	92
Epistemological insight from plant teachers	25	75
Emotional processing and insight	24	67
Trauma and emotional release	22	67

Building upon the open coding phase, axial coding was subsequently employed to explore relational linkages between thematic domains (Silverman, 2008; Overall & Wise, 2016). Axial coding, defined as the process of reassembling "… data in new ways by making connections between categories" (Strauss & Corbin, 1990, p. 96), facilitated the identification of overarching conceptual structures spanning participant experiences. This integrative phase culminated in the delineation of three core analytic categories: (1) processing and psychological shifts, (2) visionary and mystical experiences, and; (3) negative psychedelic experiences. These categories structure the organization of findings presented in the following paragraphs.

Table 2. Axial codes

Axial categories	Themes
Processing and psychological shifts	(1) Post-iboga psychological shifts, (2) emotional Processing and Insight, and; (3) trauma and emotional release
Visionary and mystical experiences	(1) Epistemological insight from plant teachers, (2) perceived plant intelligence and guidance, (3) visionary and mystical experiences, and; (4) ego dissolution and identity shifts
Negative psychedelic experience	(1) Negative psychedelic experience

Processing and psychological shifts

Post-iboga psychological shifts

Post-iboga psychological shifts refer to enduring, stable alterations in cognitive, affective, and perceptual functioning that participants reported following their iboga experiences. Rather than describing temporary states of euphoria or pharmacologically induced dissociation, participants consistently emphasized long-term transformations marked by emotional clarity, a reduction in anxiety, and the emergence of cognitive spaciousness. These findings align with existing psychedelic research indicating that certain substances, particularly classic psychedelics and iboga alkaloids, can induce neuroplastic changes that underpin lasting shifts in personality traits and psychological functioning (Carhart-Harris et al., 2018).

Participant narratives conveyed these changes as both subtle and profound, unfolding not in a single revelatory moment but incrementally across time. As one participant reflected, "Over time, over the years, there was a sort of a transformation" (Interview #9). This temporal unfolding suggests that iboga initiates a processual reorganization of consciousness rather than a discrete event, supporting emerging conceptualizations of psychedelics as agents of slow, integrative healing rather than purely acute interventions (Griffiths et al., 2018).

Several participants emphasized the psychological lightness that accompanied these shifts. As Interviewee #2 noted, "You become lighter. You're not carrying around the burdens of [the] mind." This framing of iboga as unburdening psychological weight resonates with studies on post-psychedelic decreases in neuroticism and internalized distress (MacLean et al., 2011). Yet, rather than depicting a simple alleviation of symptoms, the participant suggests a deeper ontological reorientation, moving beyond mental attachments that previously constrained experience.

Similarly, freedom from existential fear emerged as a central transformation. "I navigate the world now without fear" (Interviewee #2) underscores not merely a reduction of anxiety symptoms, but an expanded sense of existential security—a theme increasingly recognized in

transpersonal psychology and psychedelic studies as a hallmark of authentic post-experiential integration (Grof, 2008; Nour et al., 2017).

Participants also connected their psychological shifts to enhanced affective alignment. One noted, "I can tell you that my life is more peaceful… more aligned as a result of my work with iboga" (Interviewee #10), suggesting a recalibration of life orientation toward inner harmony rather than external striving. Others spoke of newfound self-appreciation: "It just gave me a deeper love and appreciation for who I am" (Interviewee #4). Such reflections parallel findings in psychedelic research showing increases in self-compassion and authenticity following ego-dissolution experiences (Forstmann & Sagioglou, 2017).

Emotional processing and insight

Emotional processing and insight refer to the emergence, confrontation, and integration of deeply held affective material—particularly grief, shame, anger, and self-judgment—facilitated through iboga experiences. Rather than simply evoking catharsis, iboga was described as enabling participants to encounter these emotions with heightened awareness and acceptance, bypassing habitual defenses. This mirrors frameworks in psychedelic-assisted therapy emphasizing affect tolerance and reconsolidation (Roseman et al., 2018).

One participant described the profound unveiling of hidden emotional wounds: "There was this deep shame that informed my whole life. I tried to hide throughout my life, so people wouldn't see that I wasn't enough" (Interviewee #3). This confrontation with latent shame highlights a core therapeutic mechanism—bringing unconscious emotional patterns into conscious awareness for healing (Wilber, 1995). The quote also illustrates how iboga operates not merely on the level of symptom relief, but at the deeper strata of personality structure and identity.

Grief similarly surfaced as a pivotal emotional terrain. Reflecting on unresolved loss, Interviewee #7 shared:

> I probably could use another ceremony. I feel like from my mom's death—I've had a lot of death—kind of just fly off the handle, anger sometimes coming up. But right after the ceremony, I was able to almost see everyone from maybe a more godly perspective.

This shift from reactivity to compassionate witnessing suggests that iboga may facilitate cognitive reappraisal, a mechanism associated with emotional regulation and resilience (Garland et al., 2015).

Importantly, the emotional insight did not eliminate pain but allowed participants to encounter it differently. As Interviewee #7 further reflected, "How iboga helped me with my grief with my sister, and then with my mom, I fully went into a depression. So definitely, iboga didn't let me dip into that depression." Rather than bypassing grief, iboga appeared to offer a protective

scaffold against despair, supporting the recognition of loss while mitigating pathological collapse—a finding consistent with psychedelic studies on existential resilience (Ross et al., 2016).

Finally, many participants spoke of self-compassion emerging through the processing journey. Interviewee #12 recalled, "It was a higher view of myself… being able to really have compassion and love for myself. Because prior to that, my whole life I was quite hard on myself." Here, iboga appears to not only excavate buried emotions but to reconstruct the affective self-system through greater acceptance—an outcome that extends current models of trauma therapy by linking insight directly to self-compassion development (Feldman et al., 2020).

Trauma and emotional release

Trauma and emotional release refer to the ways iboga enabled participants to access, experience, and discharge deeply held trauma-related affect and memory. Unlike standard psychotherapeutic approaches that often rely on narrative reconstruction, iboga appeared to facilitate somatic and symbolic processing modes, aligning with theories of bottom-up trauma healing (Van der Kolk, 2014). For some, this access to trauma material felt overwhelming yet ultimately reparative. As Interviewee #7 recounted, "But the processing of something so traumatic—it's like I don't really think… I don't even want to think about it. I'm a single mom too, so I wouldn't have been able to be a very good mother." The implication is that trauma held outside awareness may exert ongoing influence until addressed. Iboga's ability to safely surface these layers mirrors theories of memory reconsolidation wherein suppressed affective memory becomes accessible for restructuring (Alberini & LeDoux, 2013).

Beyond the mere recall of traumatic memories, participants described a deep experiential insight into self-sabotaging patterns. Interviewee #10 shared that iboga helped with the processing of feelings of low self-worth, self-sabotage patterns, low self-esteem, and other self-inflicted beliefs. Similarly, Interviewee #11 observed, "And so, for me, it allowed me to see deeper layers of my own trauma patterns and how they play out." These statements suggest that iboga's healing mechanisms extend beyond emotional catharsis to include meta-cognitive insight into the recursive dynamics of trauma-conditioned behaviour.

Such findings build upon and extend prior research emphasizing psychedelics' capacity to disrupt maladaptive default mode network activity (Carhart-Harris et al., 2014), suggesting that iboga's distinctive properties may make it particularly suited for penetrating entrenched self-schemas tied to trauma. These results indicate that trauma processing through iboga is neither a passive remembering nor a purely cathartic event. Rather, it entails a structured re-encounter with affective imprints and a cognitive reworking of their embedded life scripts, pointing toward iboga's distinctive role within the landscape of trauma-focused psychedelic therapies.

Visionary and mystical experiences

Epistemological insight from plant teachers

Epistemological insight from plant teachers refers to the phenomenon where participants reported acquiring knowledge through non-rational, intuitive channels attributed to the intelligence of the iboga plant. Rather than perceiving insight as self-generated or deductive, participants described the transmission of information as emergent, direct, and revelatory—suggesting a participatory model of knowing. This challenges dominant western epistemologies that privilege rationalism and invites consideration of relational and non-ordinary modes of cognition (Tupper, 2011).

Several participants articulated a clear sense of receiving teachings beyond the intellect. As Interviewee #2 described, "And then there were beings—beings of light. Incredibly peaceful. Loving. Beings that are evolved millions of years beyond our evolution. And they exist… There were teachings—like information coming in from a source beyond our intellect." Here, knowledge is framed not as the product of analytical reasoning but as a luminous, affectively saturated transmission from transpersonal sources. This resonates with findings in psychedelic research indicating that mystical-type experiences often involve noetic qualities—an intrinsic sense of veracity beyond ordinary thought (Griffiths et al., 2006).

Participants also emphasized the transformative disruption of ordinary thought processes. As Interviewee #5 reflected, "It basically helped me see that no thought is true". This deconstruction of cognitive attachment echoes nondual insights found in both psychedelic and contemplative traditions, wherein thoughts are seen not as facts but as transient phenomena (Letheby, 2021). It suggests that iboga may operate epistemologically by destabilizing conditioned cognitive frameworks, thereby creating space for more expansive understandings.

Other participants highlighted the ineffability and individualized nature of iboga's teachings. Interviewee #4 noted:

> And I guess I just want to reiterate the mystery of iboga—that it is very difficult to try to put it into words intellectually or to frame it, because it only limits it. Iboga just meets everyone in a very different way that's very personalized.

This articulation supports emerging transpersonal models that recognize the uniquely tailored character of visionary knowledge transmission (Ferrer, 2002).

At times, insights were simple yet profound, emphasizing embodied wisdom. As Interviewee #7 recalled, "I remember one of the insights I was given several times during iboga when I contemplated what I can do for myself was 'breathe.' It kept coming up." Such somatic

directives suggest that iboga teachings are not only cognitive but integrative, addressing the full psychophysical system (Grof, 2008). Throughout the narratives, participants' accounts indicate that iboga functions as an epistemological agent, mediating access to knowledge systems that bypass linguistic articulation and rational deduction—a finding that calls for an expanded phenomenology of psychedelic insight beyond current cognitive models.

Perceived plant intelligence and guidance

Perceived plant intelligence and guidance captures the widespread attribution of agency, consciousness, and intentionality to the iboga plant by participants. Rather than seeing their experiences as merely neurochemical effects, individuals often described iboga as a sentient guide actively collaborating in their healing. This challenges materialist-reductionist interpretations of psychedelic phenomenology and aligns with relational ontologies found in indigenous and animist traditions (Apffel-Marglin, 2011).

Participants frequently spoke of iboga possessing its own autonomous wisdom. As Interviewee #1 explained, "It has its own spirit or intelligence. Very, very intelligent in itself… That's why I trust it… It can help me. … Continue to help me on my journey". This relational trust in the plant's consciousness underscores a key difference between iboga and pharmacocentric models of medicine, situating healing within an intersubjective dynamic (Gearin, 2015).

Similarly, Interviewee #4 emphasized, "I think it has its own intelligence", reinforcing the perception that iboga is not simply a passive substance but an active teacher. This attribution mirrors reports from ayahuasca research, where plants are also described as possessing self-aware intentionality (Gearin & Labate, 2018).

Others articulated a profound sense of interconnectedness with plant consciousness. Interviewee #12 noted, "Whatever spirit is in the plant then interacts with my spirit", emphasizing a relational cosmology wherein healing arises from mutual interaction rather than unilateral action. This relationality reflects a broader epistemic shift visible in contemporary psychedelic studies, which increasingly recognize the co-creative nature of these experiences (Fotiou, 2020).

The reverence for plant agency extended beyond individual sessions. As Interviewee #8 shared, recounting a guide's words, "The plants… we work for the plants". This reversal of human-centered hierarchies suggests a radical reimagining of agency and purpose within the therapeutic encounter, with humans framed as partners rather than masters.

Finally, the immediacy of truth transmission was a salient feature of these relational dynamics. As Interviewee #5 expressed, "You could ask any question internally, and it comes out as: this is the truth". Such experiences of unmediated truth access echo mystical descriptions of direct knowing, challenging western epistemologies that privilege skepticism and evidence-based verification (James, 1902/1985). These findings collectively suggest that psychedelic science

must develop ontological models that accommodate the experience of plant agency and intelligence, rather than reducing these encounters to hallucinations or projections.

Visionary and mystical experiences

Visionary and mystical experiences encompass participants' accounts of encounters with transcendent imagery, beings, and realms imbued with deep spiritual meaning. These visions were not dismissed as mere hallucinations but were regarded as ontologically significant, carrying existential, cosmological, and ethical implications. The noetic quality of these experiences—perceived as "more real than real"—has been well-documented in psychedelic studies (Griffiths et al., 2006) and was robustly affirmed here.

Many participants reported profound encounters with luminous beings. Interviewee #2 described, "These beings were some kind of evolution—pure crystalline light", suggesting contact with entities that transcend anthropomorphic conceptualizations of consciousness. Such reports align with studies documenting non-human intelligences encountered during psychedelic states (Luke, 2012), but also extend these accounts by emphasizing the beings' embodiment of evolutionary transcendence.

Visual phenomena were described as vivid, multidimensional, and often beyond linguistic capture. As Interviewee #4 shared, "Sometimes you get pulled into that portal, and it's like incredibly vivid imagery". This description of visionary immersion supports theories that psychedelics temporarily dismantle ordinary perceptual filters, revealing previously inaccessible dimensions of reality (Metzner, 2015).

Physical healing and somatic work were also embedded within the visionary process. Interviewee #10 recalled, "It had worked on my body so beautifully for about seven hours. And showed me three, four absolutely exquisite visions…" suggesting that visionary experiences were intertwined with energetic and physiological recalibration, a theme that challenges mind-body dualisms often assumed in western clinical models.

The ineffability of the mystical encounter was repeatedly emphasized. Interviewee #10 elaborated, "Just these mysterious and mystical experiences that… that you can't see with the filter on. So iboga lifts that filter. And iboga showed me the filter as this black lace—beautiful". Here, the notion of perceptual filters aligns with theories of psychedelics as reducing the 'predictive coding' constraints of the brain, allowing for expanded conscious access (Carhart-Harris & Friston, 2019). Taken together, these findings reaffirm but also expand current models of psychedelic-induced mystical experience, suggesting that iboga uniquely blends visionary content with somatic, relational, and epistemic dimensions not fully captured in existing scales like the MEQ (mystical experience questionnaire).

Ego dissolution and identity shifts

Ego dissolution and identity shifts refer to the transient disintegration of self-boundaries and identity structures during iboga experiences, leading to subsequent reorganization of self-concept and relationality. Participants described the experience as simultaneously disorienting and clarifying, challenging the pathological framing of ego loss in mainstream psychology and instead positioning it as a gateway to expanded selfhood (Nour et al., 2016).

Several participants described the stripping away of defensive psychological structures. As Interviewee #6 observed, "I noticed… that one of the beautiful things about iboga is that it somehow has the capacity to pull away the defenses of the self-structure... Disarming the ego". This mirrors findings that ego dissolution often coincides with therapeutic breakthroughs by undermining rigid, maladaptive self-schemas (Watts et al., 2017).

Others spoke of an expansive redefinition of identity beyond human form. Interviewee #7 reflected, "Yeah, I would say that after that, iboga turned more into a spiritual elevation for myself. I got to see almost like maybe from God's perspective—the fractal that I am—and that I'm far beyond just a human form". This resonates with transpersonal theories suggesting that psychedelic states can facilitate identification with universal or cosmic consciousness (Grof, 2008).

The encounter with ego death was not always serene but involved existential fear. As Interviewee #8 recounted:

> Because it disrupts your ego, right? It sort of puts the ego in a place where it's like, 'Oh no! Don't let me drown!' And I'm like, 'No. You gotta go.' … And sometimes throughout the journey… I've had it where I have this lingering feeling of just like… being dead.

Such descriptions affirm that ego dissolution is not a passive event but an active surrender, often accompanied by death-like phenomenology (Millière, 2017). Yet participants uniformly indicated that the dissolution yielded positive post-experiential outcomes—less rigid identity attachments, greater humility, and expanded relationality—suggesting that iboga's mode of ego transcendence may be particularly reparative for trauma-related identity constriction.

Negative psychedelic experiences

Negative psychedelic experiences

Negative psychedelic experiences refer to sessions during which participants encountered profound fear, psychic discomfort, emotional overwhelm, or disturbing perceptual phenomena. In this study, such experiences were not dismissed as failures but rather retrospectively

interpreted as crucial phases of psychological work. This aligns with emergent scholarship suggesting that difficult psychedelic experiences often serve reparative, rather than purely pathological, functions when properly integrated (Carbonaro et al., 2016; Barrett et al., 2016).
Several participants described embodied and psychological distress during iboga sessions. Interviewee #4 recounted, "…the energy feeling like it was being sucked out of my body, and all the mental health stuff coming to the surface. I guess you could say that's negative". This somatic and emotional intensification reflects the collapse of habitual defenses, suggesting that iboga catalyzes a confrontation with disowned psychic material. Rather than constituting harm, this process mirrors trauma-focused therapeutic frameworks wherein distress signals the activation of reparative memory reconsolidation (Alberini & LeDoux, 2013).

The theme of attachment to outcomes exacerbating suffering was also salient. Interviewee #6 observed, "There was a grasping for [a] certain thing to happen. And… it was not happening. So … there was … attachment—To a certain outcome… And so it became very, very uncomfortable—Physically, mentally, psychologically". Here, iboga appears to expose underlying existential structures of control and resistance, a dynamic consistent with transpersonal psychology's emphasis on surrender as a critical mechanism of ego transcendence (Grof, 2008).

Vulnerability to interpersonal dynamics during fragile post-iboga states was another axis of difficulty. Interviewee #7 described, "I was so raw and so vulnerable that someone laughing at my statement of godliness was very triggering". This underscores the necessity of ethically attuned settings, supporting research that inadequate preparation or integration environments can exacerbate post-psychedelic distress (Phelps, 2017).

Several participants framed their struggles not as aberrations but as resistances to surrender. As Interviewee #8 reflected, "The bad trip—the negative outcomes—are usually when I don't surrender to… Surrender to what the experience wants to show me." This insight aligns with studies suggesting that psychological resistance, rather than the pharmacological properties of psychedelics per se, often mediates the emergence of adverse experiences (Johnson et al., 2008).
More extreme perceptual disturbances were also reported. Interviewee #9 recalled, "The psychedelic part of it… was very disturbing. People, faces melting, and all kinds of stuff like that… hearing sounds, hearing voices… almost like what I would consider a schizophrenic kind of inducing [experience]". While challenging, such phenomena may reflect the acute disorganization of ordinary perceptual schemas rather than pathological psychosis—a distinction increasingly emphasized in contemporary psychedelic research (Dos Santos et al., 2017). Ultimately, the findings suggest that negative iboga experiences serve as crucibles for psychological deconstruction and reorganization, underscoring the necessity of nuanced clinical models that recognize struggle as integral to psychedelic healing rather than as a deviation from it.

Study 2

Analytical method

This study utilized QCA to extend the examination of psychological enhancements resulting from iboga experiences. Individualized case histories were developed for each of the 12 participants, synthesizing their qualitative accounts into structured analytic profiles. This case-based construction preserved the depth of the original narratives while facilitating the application of QCA, a method specifically designed to retain qualitative richness while systematically identifying cross-case patterns (Crilly, 2011; Overall, 2016, 2025a; Overall & Wise, 2016). Grounded in Boolean algebra, QCA acknowledges that outcomes such as psychological improvements rarely result from single-variable causality; rather, they emerge through multiple interacting conditions (Crilly, 2011).

QCA procedure

The QCA process unfolded in four sequential stages. First, the dataset was calibrated by manually assigning binary values to each condition under investigation. In accordance with established QCA practices, conditions were initially coded as either full membership (1) or full non-membership (0) based on participants' qualitative data (Crilly et al., 2012). This binary coding established a consistent analytical foundation across cases, ensuring rigorous comparability (Overall & Wise, 2016).

The second phase involved constructing a truth table using fs/QCA software (Overall & Wise, 2016; Schneider & Wagemann, 2010). The truth table mapped the presence or absence of input conditions across the cases relative to the outcomes. Although seven theoretical conditions allow for 2^6 possible combinations, only empirically observed configurations were retained for analysis. Hypothetical logical remainders—combinations not found within the dataset—were excluded to maintain empirical integrity (Crilly, 2011; Crilly et al., 2012).

Boolean minimization comprised the third analytic stage. Utilizing algebraic simplification protocols within fs/QCA, recurring condition sets were systematically distilled into the most parsimonious causal pathways linked to the outcomes (Grandori & Furnari, 2008). This process allowed for the reduction of complex multi-condition expressions into more interpretable patterns, supporting the identification of core drivers of psychological change (Fiss, 2007). Finally, the robustness of minimized solutions was evaluated through consistency and coverage metrics. Consistency assesses the degree to which a given configuration reliably produces the same outcome across cases, with values exceeding 0.8 indicating strong empirical support (Greckhamer, 2011; Crilly, 2011; Ragin, 2007). Coverage, conversely, measures the proportion of the outcome that the solution accounts for, offering an index of explanatory reach (Greckhamer, 2011). Greckhamer (2011, p. 94) delineates three forms of coverage:

Overall coverage of a combination that may overlap with other combinations is its *raw coverage*; coverage uniquely due to a combination is its *unique coverage* (the difference between raw and unique coverage is due to overlap between combinations); the combined coverage of all combinations leading to the outcome is the *solution coverage.*

Measurement and calibration

Six core conditions were selected for analysis based on the themes generated from the grounded theory findings: (1) perceived plant intelligence and guidance, (2) visionary and mystical experiences, (3) negative psychedelic experience, (4) epistemological insight from plant teachers, (5) emotional processing and insight, and; (6) trauma and emotional release. Initial calibration involved binary assignment, where participants were designated full membership (1) or full non-membership (0) in each condition based on qualitative evidence. To capture a more nuanced spectrum of experiential intensity, the analysis subsequently employed fuzzy-set calibration. Participants' experiences were scored on a 10-point Likert-type scale, which was then systematically converted to fuzzy membership values ranging from 0.0 to 1.0 in increments of 0.1 (Crilly et al., 2012; Overall, 2016; Overall & Wise, 2016). This method allowed partial membership, preserving subtleties that binary coding might obscure. Manual calibration was conducted to ensure that fuzzy scores accurately reflected participants' narrative depth, following best practices in configurational methodology (Crilly et al., 2012).

Data analysis

Two distinct QCA models were developed to account for the layered nature of psychological enhancements following iboga use. The primary model focused on the outcome of post-iboga psychological shifts. A secondary model was also introduced to examine ego dissolution and identity shifts as an outcome of interest. The inclusion of this secondary outcome was theoretically justified by participants' frequent descriptions of profound changes to their sense of self, relational orientation, and existential understanding following their iboga experiences. Given the prominence of ego transformation in transpersonal psychology and psychedelic research (Millière, 2017; Nour et al., 2016), and its conceptual independence from more general psychological well-being, ego dissolution warranted distinct analytical attention. Furthermore, distinguishing between broader psychological shifts and identity-specific reconfigurations allowed for greater specificity in the causal models and expanded the theoretical contribution of the findings.

Both models utilized the same six input conditions. Truth tables were generated and analyzed through fs/QCA, adhering to standard protocols for identifying consistent causal pathways. Each input condition was treated as a core element in recognition of its centrality to existing theories of psychological growth and consciousness expansion (Fiss, 2011). Consistency thresholds were set at 0.8 to ensure empirical rigour (Crilly, 2011). The fs/QCA software outputted complex,

parsimonious, and intermediate solutions. Following methodological best practices, intermediate solutions were selected for interpretation to maintain a balance between parsimony and empirical completeness (Crilly et al., 2012; Overall, 2016). Parsimonious solutions were excluded to prevent over-reduction, while complex solutions were disregarded for their excessive elaboration (Ragin & Sonnett, 2007).

Table 3. Calibration table for qualitative comparative analysis

Participant	Post-Iboga Psychological Shifts	Perceived Plant Intelligence and Guidance	Negative psychedelic experience	Visionary and Mystical Experiences	Epistemological Insight from Plant Teachers	Ego Dissolution and Identity Shifts	Emotional Processing and Insight	Trauma and Emotional Release
Interviewee #1	0.4	0.9	0.3	0.7	0.6	0.3	0.4	0.5
Interviewee #2	0.9	1	0.5	1	1	0.8	0.7	0.5
Interviewee #3	1	0.3	0.1	0.2	0	0.8	0.9	0.8
Interviewee #4	1	0.8	1	0.9	0.8	0.8	1	1
Interviewee #5	1	1	0.6	0.7	1	0.9	1	1
Interviewee #6	0.9	0.8	0.8	0.3	0.6	0.8	0.5	0.3
Interviewee #7	1	0.9	0.9	0.8	0.9	0.7	1	1
Interviewee #8	1	0.9	0.8	0.8	0.9	0.8	1	0.9
Interviewee #9	1	0.7	0.7	0.6	0.6	0.9	0.8	0.8
Interviewee #10	1	1	0.4	1	0.9	0.9	0.7	0.5
Interviewee #11	0.9	0.9	1	0.5	0.8	0.7	1	1
Interviewee #12	0.9	0.8	0.8	0.4	0.8	0.7	0.9	0.8

Results

The analysis of the first outcome—post-iboga psychological shifts (see Table 4a)—revealed three primary conditions associated with positive psychological transformation: (1) perceived plant intelligence and guidance, (2) negative psychedelic experience, and; (3) epistemological insight from plant teachers. The model exhibited a perfect consistency score of 1.0, a raw coverage of 0.76, and a unique coverage of 0.55. The overall solution consistency was calculated at 0.71 with an overall solution coverage of 1.0, indicating comprehensive explanatory strength.
These findings suggest that participants who experienced psychological shifts post-iboga tended to attribute agency and intelligence to the plant, engage deeply with epistemological insights arising from the experience, and confront psychologically-challenging content. The inclusion of negative psychedelic experiences as a core condition underscores that psychological growth often emerges not despite—but through—difficult encounters with fear, disorientation, or cognitive dissonance. The perfect consistency score reflects a high degree of empirical regularity across cases, while the raw and unique coverage values demonstrate that these three conditions collectively explain a substantial proportion of the observed outcome without excessive overlap. Taken together, the model illustrates that iboga-induced psychological transformation is not a product of passive visionary states alone, but of relational, epistemic, and emotionally taxing engagements with the substance.

Table 4a. Configuration of causal conditions leading to post-iboga psychological shifts

	Configurations for post-iboga psychological shifts
Causal conditions	**1**
Perceived plant intelligence and guidance	●
Negative psychedelic experience	●
Epistemological insight from plant teachers	●
Consistency	1
Raw coverage	0.76
Unique coverage	0.55
Overall solution consistency	0.71
Overall solution coverage	1

Key: ● core causal condition (present); ⊗ core causal condition (absent).

Note: This format of presenting the results of the fuzzy-set analysis is based on Ragin and Fiss (2008).

The second outcome—ego dissolution and identity shifts (see Table 4b)—identified four causal conditions as central: (1) emotional processing and insight, (2) trauma and emotional release, (3) epistemological insight from plant teachers, and; (4) perceived plant intelligence and guidance. This model produced a consistency score of 0.91, a raw coverage of 0.75, and a unique coverage of 0.62. The overall solution consistency reached 0.82 and the overall solution coverage was 0.91.

Table 4b. Configuration of causal conditions leading to ego dissolution and identity shifts

	Configurations for ego dissolution and identity shifts
Causal conditions	**1**
Emotional processing and insight	●
Trauma and emotional release	●
Epistemological insight from plant teachers	●
Perceived plant intelligence and guidance	●
Consistency	0.91
Raw coverage	0.75
Unique coverage	0.62
Overall solution consistency	0.82
Overall solution coverage	0.91

Key: ● core causal condition (present); ⊗ core causal condition (absent).

Note: This format of presenting the results of the fuzzy-set analysis is based on Ragin and Fiss (2008).

These results indicate that ego dissolution following iboga use is closely linked to participants' emotional and somatic processing of unresolved trauma, alongside the reception of epistemological insights and relational experiences with plant intelligence. The inclusion of both emotional processing and trauma release suggests that destabilization of identity structures is frequently precipitated by profound emotional catharsis and confrontation with suppressed effect.

The strong consistency and coverage scores confirm the empirical reliability and explanatory breadth of the model, indicating that these four conditions robustly account for variations in ego dissolution across cases. Overall, the analysis points to the importance of emotional integration, epistemological restructuring, and relational engagement with iboga as core pathways through which identity transformation unfolds.

4. General Discussion

This study examined the psychological effects of iboga experiences through an integrated qualitative and configurational comparative analysis, revealing distinct pathways to emotional transformation, identity reconstruction, and epistemic reframing. Beyond offering empirical support for the therapeutic potential of iboga, the findings generate novel conceptual insights that extend current models of psychedelic healing. Specifically, the study advances understanding in three key areas: the reparative function of psychologically difficult experiences, the epistemological legitimacy of relational and non-ordinary knowledge systems, and the psychodynamic mechanisms underlying ego dissolution. Together, these contributions challenge prevailing assumptions in psychedelic science and psychology, calling for expanded theoretical models that can account for the complexity, relationality, and depth of consciousness transformation facilitated by iboga.

Reconceptualizing adversity in psychedelic healing

The mainstream psychedelic literature has long emphasized the therapeutic potential of mystical experiences, ego dissolution, and positive emotional breakthroughs (Griffiths et al., 2006; Ross et al., 2016). However, fewer studies have critically examined the structural role of negative, disorienting, or even terrifying experiences in catalyzing long-term psychological change. While some scholarship acknowledges that challenging psychedelic sessions can yield post-traumatic growth (Carbonaro et al., 2016; Barrett et al., 2016), most remain anchored in a curative narrative that privileges transcendence over struggle.

This research challenges that emphasis by demonstrating that negative psychedelic experiences—often involving fear, perceptual chaos, psychic overwhelm, and interpersonal vulnerability—were not peripheral but central to lasting psychological shifts. Participants described these experiences as crucibles that forced the confrontation of unconscious material, including unresolved trauma, shame, and existential insecurity. QCA analysis further confirmed that the presence of negative experiences was not merely tolerated but necessary: they emerged as a core causal condition in models of post-iboga psychological transformation. This directly contests biomedical framings that pathologize distress during psychedelic sessions and instead aligns with transpersonal psychology frameworks that interpret struggle, surrender, and ego resistance as integral to psychospiritual development (Grof, 2008; Wilber, 1995).

The contribution here is twofold. First, it reframes the ontology of the so-called bad trip, situating negative affect not as noise or therapeutic failure but as signal and mechanism. Second, it provides formal, cross-case analytic evidence—via QCA—that these negative experiences are not anecdotal outliers but statistically consistent predictors of transformation. This moves beyond individual case accounts into a structured theory of psychedelic adversity-as-therapeutic, thereby filling a significant gap in both clinical psychedelic science and qualitative psychedelic phenomenology. Future models of psychedelic-assisted therapy and integration must more fully account for the reparative role of struggle and re-evaluate frameworks that overemphasize mystical unification at the expense of emotional deconstruction (Phelps, 2017; Johnson et al., 2008; Dos Santos et al., 2017).

Expanding epistemological frameworks in psychedelic science

Contemporary psychedelic research has increasingly documented the occurrence of noetic experiences—subjective perceptions of receiving profound truths during altered states of consciousness (Griffiths et al., 2006; Nour et al., 2017). Yet dominant interpretive models often remain rooted in western cognitive paradigms, emphasizing these insights as internal projections, neural artifacts, or therapeutic metaphors (Letheby, 2021). This study introduces a substantial conceptual disruption to that discourse by foregrounding epistemological insights attributed not to the self, but to the plant intelligence of iboga.

Participants consistently described their experiences as involving teachings, instructions, or direct knowledge transmissions from an external intelligence. These were not figurative metaphors but ontologically real encounters with sentient plant consciousness. The findings align with indigenous ontologies and entheogenic cosmologies that view plants not as inert biochemical compounds, but as agents capable of reciprocal communication and diagnostic insight (Apffel-Marglin, 2011; Fotiou, 2020). Crucially, this study advances the literature by demonstrating that such relational epistemologies are not exclusive to indigenous practitioners; they are reported by western participants and are deeply integrated into their healing narratives.

This challenges the internalist assumptions of much psychedelic science and calls for a radical broadening of epistemic models. Rather than conceiving psychedelic insight solely as an intrapsychic event, this research supports a distributed model of knowing—where intelligence is relationally mediated between human and non-human consciousness. Furthermore, QCA analysis confirms that epistemological insight from plant teachers functions as a consistent causal condition for both psychological and identity transformations. The implication is not just phenomenological but ontological: future psychedelic science must reckon with the limits of neurocognitive reductionism and engage with relational, transpersonal, and participatory theories of knowledge (Ferrer, 2002; James, 1902/1985; Tupper, 2011).

Toward a model of identity deconstruction through emotional integration

Ego dissolution has become one of the most frequently discussed constructs in psychedelic research, often conceptualized as a temporary disruption of self-referential processing mediated by downregulation of the default mode network (Carhart-Harris et al., 2014; Nour et al., 2016). However, existing research has focused predominantly on its neural correlates or its phenomenological intensity, with limited attention to the specific psychological mechanisms that precipitate identity destabilization.

This study offers a theoretical refinement by showing that ego dissolution during iboga sessions is not merely a neurological event or mystical encounter, but a structured psychodynamic process involving deep emotional integration. The findings revealed that identity shifts occurred through emotional processing and trauma release—two conditions that QCA identified as necessary for ego dissolution. Participants did not report ego death as spontaneous; rather, it was facilitated through painful emotional work, including grief, shame, and re-encountering childhood trauma. These findings extend trauma-informed psychedelic theory by illustrating how ego dissolution can function as a mechanism of affective integration and relational reorganization (Van der Kolk, 2014; Feldman et al., 2020).

This contribution challenges prevailing framings of ego dissolution as purely pharmacologically induced or spiritually transcendent, reframing it instead as an embodied, emotionally mediated unraveling of defensive structures. It thus bridges psychedelic neuroscience and depth psychology, offering a more comprehensive model of how identity can be deconstructed and reconstructed in psychedelic therapy. The study provides empirical and theoretical groundwork for future work that integrates transpersonal, somatic, and psychodynamic theories of selfhood within psychedelic treatment frameworks (Grof, 2008; Wilber, 1995; Millière, 2017).

Implications for practice

The identification of negative psychedelic experiences as causal drivers of psychological transformation necessitates a shift in clinical expectations and preparatory frameworks. Practitioners should prepare participants not only for transcendent or euphoric experiences but also for the likelihood—and the therapeutic necessity—of encountering profound psychological discomfort. Integration protocols must therefore be adapted to normalize struggle as an integral part of healing, emphasizing processes of meaning-making and emotional digestion rather than pathologizing acute distress (Phelps, 2017; Johnson et al., 2008).

The centrality of epistemological insights attributed to plant intelligence calls for a more culturally sensitive and epistemologically pluralistic approach to psychedelic practice. Practitioners should be trained to recognize and honour relational ways of knowing that emerge during iboga sessions, even when they diverge from western biomedical paradigms. Rather than

dismissing reports of plant intelligence as hallucinations or psychotic symptoms, facilitators can engage with these experiences as meaningful components of the participant's healing narrative, thereby enhancing therapeutic rapport and participant empowerment (Fotiou, 2020; Apffel-Marglin, 2011).

The insights from this research emphasize that iboga therapy should not be conceptualized as an acute intervention but as an extended, relational, and integrative process. Practitioners must view healing trajectories as nonlinear and temporally expansive, providing ongoing scaffolding for participants months after the initial experience. Embedding iboga treatment within longitudinal support frameworks that integrate psychological, relational, and existential dimensions may substantially enhance therapeutic outcomes and promote sustainable psychological growth.

Limitations and future directions

While this study offers novel insights into the psychological impacts of iboga experiences, several methodological limitations must be acknowledged. First, the relatively small sample size (n = 12), though consistent with qualitative research standards, constrains the generalizability of findings. Although the use of QCA allowed for systematic cross-case comparison, larger samples could provide more robust configurational models and potentially identify additional pathways to psychological transformation (Greckhamer, 2011; Crilly et al., 2012). Future research employing larger, more demographically diverse samples could enhance the external validity of these findings and explore potential moderating variables such as gender, age, and cultural background.

The interpretivist epistemology underpinning this research prioritizes participants subjective meaning-making, potentially at the expense of triangulating data through physiological or neurobiological measures. Future interdisciplinary studies combining qualitative inquiry with neuroimaging, psychophysiological tracking, or biomarker analysis could deepen understanding of the embodied mechanisms underlying the reported shifts (Carhart-Harris & Friston, 2019). Finally, the centrality of relational epistemologies and plant intelligence narratives in participant accounts calls for the development of new analytic frameworks sensitive to non-western and transpersonal ontologies. Future research should explicitly engage with participatory and relational epistemologies to avoid reducing such experiences to metaphor or psychopathology (Ferrer, 2002). Expanding methodological pluralism within psychedelic science will be critical to fully capturing the ontological complexity of psychedelic healing.

Appendix

List of semi-structured interview questions:

1. How has iboga impacted your life?
2. How has iboga impacted your relationships?
3. How has iboga impacted your mental health?
4. How has iboga impacted your career?
5. How has iboga impacted your motivation?
6. How has iboga impacted your productivity?
7. How has iboga impacted your work ethic?
8. How has iboga impacted your entrepreneurial tendencies?
9. How has iboga impacted your seeking?
10. Have you had a dark night experience? Was this before or after your psychedelic experience?
11. Did you have a negative psychedelic experience?
12. Is there anything that you feel compelled to share that you haven't?

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