



ORIGINAL ARTICLE

## Coping with - and resisting - fear of madness through mad intersubjectivity

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### Abstract

This paper focuses on the 'fear of madness' as arguably the most debilitating aspect of mad experience. It is necessary to see this 'fear of madness' as situated within contextual factors; within dominant social responses to madness that frame madness as something to be feared – the ultimate 'Other'. My work concerns the social contexts for madness and how they weave into what madness is; how the ways that society frames and responds to madness affect the ontology of mad experience. With this in mind, coping with the fear of madness requires addressing this fear, as well as its social context. It is embedded in dominant responses to madness through stigma, taboo, erasure, correction and control. Here, I approach mad people's coping mechanisms through thinking about how we can co-create different ways of being *with* madness that de-escalate this fear by countering some of these Othering assumptions, precisely through such relational processes. I draw on some parallel contexts and 'mad world' examples as scaffolding and inspiration for approaching madness from a point of sharedness and 'being with' that challenge this fearful rhetoric.

### Keywords

Mad studies, mad philosophy, intersubjectivity, phenomenology, I-thou, abolitionism, mythos, peer support

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I am interested here in coping mechanisms for the 'fear of madness', since this is a central and debilitating aspect of mad experience. It is necessary to see this 'fear of madness' as situated within contextual factors; within dominant social responses to madness that frame madness as something to be feared – arguably the ultimate 'Other'. My work concerns the social contexts for madness and how they weave into what madness is; how the ways that society frames and responds to madness affect the ontology of mad experience. With this in mind, coping with the fear of madness requires addressing this fear as well as its social context. It is embedded in dominant responses to madness through stigma, taboo, erasure, correction and control. Here, I approach mad people's coping mechanisms through thinking about how we can co-create different ways of being *with* madness that de-escalate this fear

by countering some of the Othering assumptions about mad experience. I draw on some parallel contexts and 'mad world' examples as scaffolding and inspiration for approaching madness from a point of sharedness and 'being with' that challenge this fearful rhetoric.

## 1. The fear of madness

There is a deep social fear of madness. Madness is the ultimate 'Other'; broadly understood in (mainstream) society as a loss of reality or reason resulting from a disordered mind. Whether this is reduced to a neuro-biological mechanism, an error in predictive capacities for sensing the world, or something else, there is a dominant tendency to essentialise madness as something along the lines of 'self-consciousness not experiencing itself and the world correctly' – experience has 'gone awry'. There is also a common assumption within pathological conceptions that this pathology is carried around with you, even if not currently present, and may come to surface at any point. This presents a strong risk rhetoric; madness is something to be feared but also something that cannot be fully escaped, once it is there. Of course, mad experience can be extremely scary and distressing. Many mad people have experienced a deep fear of losing their way, losing access to shared reality, even alongside being 'seduced' by the desirable and compelling hold of mad experience. However, it is difficult to isolate such a fear from the dominant and pervasive social conception of madness as essentially something (very) bad, and at the heart of this is fear of being othered, of losing access to a shared world. In this paper, I focus on coping mechanisms for this fear, located in how we navigate madness with each other. I believe that we can respond to, navigate, and *be* with madness in ways that do not extenuate this fear by 'othering' it as something to be feared, contained and captured, as dominant society does.

### 1.1 Madness as pathology

The essentialising aspect of this dominant attitude relates to its pathological roots; mad experience is interpreted as symptoms of an essential pathology, framed as a long-term or chronic condition that stays with a person and that they will consistently have to manage. The management concerns managing this problem of the mind's understanding of itself and reality, commonly characterised as a kind of 'self disorder'. What I am drawing attention to here is the essentialising aspect of this conception, that the pathology concerns a person's whole existence and their ability to know and partake in reality, even, and especially, in regards to the reality of their own experience. I am concerned with the fear and distrust that this essentialised take on madness can promote. John Hood, a person diagnosed with schizophrenia, describes the experience of living with this assumption: "When it comes down to it, there's no greater stigma than the client thinking that his mind is diseased" (Luhmann 2016, 34). Will Hall (2012) describes his experience of being diagnosed with schizophrenia:

That moment was like the doctors were casting a spell on me. They had a certain belief about my experience, that was not anything like a dialogue, or a discovery, about my own understanding. It was an outside, "objective" assessment of who I was, leveraged by all the power that they had as physicians in that hospital, where I was locked up. It was like they were

casting a spell on me. And I started to believe that spell. I started to believe that I was schizophrenic. My recovery process has in large part been about unlearning the lessons that I learned in the hospital.

I want to be clear that I have no judgements about any individual's diagnostic framing of their own madness. I am drawing attention to the way in which this method of framing mad experience is applied from the outside in a coercive and essentialising way and presents itself as the objective truth on the matter. I will now move on to explicate the fear of madness that runs through this dominant response.

## 1.2 Intersubjective Fears

The fear of madness has a distinctly social character. I am referring here not only to the dominant social responses to madness that Other it, but to an underlying fear of losing access to shared life and to intersubjectivity on a basic level. Intersubjectivity refers to shared experience and denotes the sense in which we are all plugged into reality as something that is shared; able to be known by other self-consciousnesses who are also experiencing it. On a minimal, pre-reflective level, we generally experience reality as *with* others, through feeling a sense of it as in line with what is able to be perceived by others and ourselves – what is available to the consensus. This marks the 'perceptual realm' of the shared world, whilst other modes of experience such as imaginings or memories are not experienced as available to others. We rely on each other, to some extent, to regulate what we feel to be real, through how we all react and interact with the world and each other, plugged into a shared reality. In this way, we are all regulating each other's pictures of reality constantly, through corroborating or challenging one another's perceptions of this shared reality which we all 'have a stake' in. We also co-create what matters in consensus reality through shared projects and shared existences with each other, which brings some things to affordance rather than other things. I explicate this to demonstrate how being plugged into a shared reality is fundamental, yet at the same time, it is something that relies on each of us, and can shift depending on what kinds of consensuses are present.

Evidently, we all have a stake in one another's reality. This may be true on a fundamental level of structuring our perceptions; we look to each other as sources of corroboration and validation of our perceptual experiences of the 'here and now'. This requires a kind of trust that the shared world is real, and that other people have access to it too – that they have a stake in it. This has been referred to as 'habitual trust' (Ratcliffe 2017), or 'intersubjective trust' (Fuchs 2015). But clearly, madness questions this fundamentality and 'queers' this picture. Mad experience disrupts this standard structure in which perceptual faculties concern shared reality, which governs the 'here and now', and non-perceptual faculties concern one's own private, internal world. Mad experience brings things to the forefront with a similar (or often greater) richness and realness, often without being corroborated by others around us. Mad experience is a kind of experience that often diverges from 'sharedness', which can be alienating, but also can be profoundly interesting and enlightening.

Whether or not we see this intersubjective trust as fundamental to structuring experience of reality, what I aim to draw attention to here is that we do rely on a trust in each other's

subjectivities and their access to some form of consensus reality, in order to live in a shared world together, whether or not we may diverge from this sharedness into other worlds. And it is the fear of losing this altogether that can present a profound terror in madness; fear of losing access to shared reality/the consensus world – it would leave us profoundly alone. This trust also relies on us trusting that others are subjects like us, capable of experiencing and responding to the shared world; that they have their ‘stake’ in it, which has been referred to as the ‘I-thou’ level of interpersonal intersubjectivity.<sup>1</sup> In order to take part in habitual and affective processes that affirm this trust in the intersubjective world, we also need others to extend it to us and recognise our stake in shared reality.

As the title of this section denotes, the fear of losing access to this trust and to shared reality is an intersubjective fear, not merely in content (fear of losing intersubjectivity itself) but also in character, in the sense that it is reflected in, reinforced by, and, arguably, to an extent constituted by, the pathological framing of madness.

In being framed as Other, lacking in the/a capacity to know reality, mad people are often related to through a ruptured I-thou connection – stripped of subjectivity. This may happen in subtle ways in person-to-person encounters, but also through the institutional backdrops of the consensus world which legally enshrine the legitimacy of incarceration and other coercive measures as methods of ‘meeting’ madness. This is a meeting madness that has a goal of capturing, confining, and correcting it. Such measures literally make the consensus world a threatening place to be, which may fragment this habitual trust of others as agents with whom we regulate and co-create shared reality; the baseline trust of others as subjects who also see us as subjects. I am interested in how we can interrupt such cycles, through creating a responsive ‘sharedness’ with madness. Meeting madness in a way that is open to its existence and also to being moved *by* it – that does not ‘enclose it’, rendering its stake in reality futile to the consensus.

Allow me to expand a little on this point. I am referring to the way in which the consensus world responds to madness through how it pathologically frames it and intervenes in it, and how this is felt by mad people as they move through the world and interact with others. How does it shape the intersubjective field in which mad people exist as subjects? What is the affectivity of living amongst this fear, as someone who is seen as madly ‘other’? I have argued in depth that the affective experience of psychiatrization is one that can disrupt intersubjective trust at varying levels of interaction (thus contributing to the ontology of madness): on the most obvious level of coercive treatment and solitary confinement, on the level of diagnostic categories being applied from the outside, and also on the more subtle level of being ‘at risk’ of supposed pathological madness (Wantoch 2022). For the purpose of this article, I aim to draw attention to how mad people are denied access to participatory processes to create and regulate shared reality, through being related to as people whose take on reality doesn’t matter, or is dangerous/incorrect. Importantly, this is not applied to

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<sup>1</sup> Rodemeyer (2020) has argued that there are several levels of the constitution of experience in Husserl’s phenomenology and this is one such level. ‘I-thou’ refers to Buber’s (1923/1996) work on the relational stance between subjects.

singular instances of being ‘off the mark’ about reality, it is applied in an essentialised way, to the whole being across time, following one like ‘a spell’.

Many people (especially health professionals) respond to mad experience, even that of a subtle kind, with concern, worry, and a risk based agenda: madness poses risk, which needs to be minimised at all costs. And the more the mad person tries to use their mad reason to demonstrate something in response, the more this is seen as a sign of something having ‘gone wrong’, or at risk of ‘*really* going wrong’, and in need of intervention which corrects and controls it. This is especially highlighted by the concept of ‘clinical insight’: if the mad person does not share this pathological view about their experience, then they are seen to be madder, and in need of more correction and control. The fact that these responses can be coercive, and that the threat of coercion is always there, increases the urgency of this situation, which fuels the fear on all sides. But the fear also floats around on a subtle intersubjective level; engaging in a world which stigmatises, coercively medicates, and incarcerates mad experience, even when one is acting in line with consensus norms. This may bring about a sense of ‘certain uncertainty’ through the threat of, as well as alienation and detachment from, others that follows the ‘spell’ of an essentialised pathological marker. Not knowing when one’s behaviour may be interpreted as having crossed the consensus line of sanity and in need of intervention, the shared world may become a place of ‘certain uncertainty’; threatening yet distant and difficult to meaningfully contribute to.<sup>2</sup>

What I aim to point to here is that this situation for mad people effectively denies their access to shared processes by which we create shared reality together, because these processes rely on the I-thou level; on subjectivity being recognised, which requires a recognition of the subject’s ability to know and experience and take part in shared reality. The fear of madness as a pathological Other acts as a block which contains madness and is not able to engage with madness on its own level. It is only interested in interpreting it through pathologizing or psychologising formula, which it applies from the outside. Madness is not able to respond, it cannot ‘make a dent’ in shared reality; madness becomes a ‘bird in a cage’.

My point is that this happens from the outside towards madness, because it essentialises this kind of experience as something wrong in need of correcting. The underlying assumption and fear is that if left unmanaged, madness will reach a dead-end – a loss of access to sharedness. But containing madness in such a way effectively makes it a dead-end: the mad do not have a stake in shared reality as they are already judged to be outside of it, or at risk of ending up there, which instigates the fear and the urgency to comply with such an interpretation – especially with coercive threats in the background. Such assumptions

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<sup>2</sup> See Fanon (1986, 83) for a description of racialisation as an experience of being marked out and othered by the world that perceives you: “surrounded by an atmosphere of certain uncertainty”. Ahmed (2006 and 2007) provides a rich account of this phenomenon of ‘marking’ in relation to having a Muslim name, constantly anticipating being presumed to be a terrorist. I have previously applied this to the phenomenon of being marked through psychiatrisation, and being constantly seen as a risk and a threat (Wantoch 2022, 110-14). Since this phenomenon refers to the way the consensus world, consisting of other people, react to a person, it has a generalised ‘floating’ affect: one is never sure exactly how and when they will be marked out, but they are sure that this marking will have some impact.

may rupture I-thou relationality by closing madness off from the possibility of sharedness; the mad are denied in their capacity to know and share the world with others.

So, whilst madness can indeed present a fear of losing one's way, this is viscerally demonstrated through essentialising pathological interpretations of and responses to madness, which are not capable of hearing madness on its own terms. This social situation makes 'going/being mad'<sup>3</sup> a much more scary prospect, particularly through the fear of reaching a point of no return akin to losing access to intersubjectivity altogether. However, we can actively resist this by formulating intersubjectivities that do listen to madness on its own terms and bring sharedness to madness.

## 2. Madness in dialogue

In terms of coping mechanisms, first acknowledging this fear, and its social context, is helpful; then, participating in reforming consensus world(s) about madness, that meet and respond to madness; that are dynamic in engaging with mad experience; creating alternative kinds of mad intersubjectivities, where madness does have a stake in reality, and madness can be part of a consensus reality. This de-escalates the fear through demonstrating, or at least demonstrating the possibility of, an intersubjectivity that is with madness. This is not easy or simple since mad experience is vastly heterogenous, but I am not proposing a universalising or explaining of it. I am putting forward an attitude that remains open to madness; that sits with mad experience and engages with it, in all of its mystery as well as connection.

I have found it helpful to relate to madness as a kind of 'world'; the mad world has its own rules which need not be persistently judged by consensus world rules. Relating to a mad world has opened ways of sharing about it, and in it, with others, without immediately running into reductive tendencies. I will elaborate on this in the next section, but first let us consider this idea of remaining open to, and responsive to, madness in a dynamic way. This means allowing madness to 'make a dent' in the consensus world, and not falling into a trap of capturing it. This means never 'giving up' on a person as having crossed a point of no return, and resisting attitudes that do this. No-one has ever 'lost it' in an essentialised way, never to return to intersubjectivity again. Here, the difference between 'can't' and 'isn't' is striking; a person can't access shared, consensus reality, vs a person isn't accessing shared reality. Embodying the latter requires remaining open to the person's capacity to be an intersubjective agent, remaining in I-thou presence, even if we are struggling to find any common ground of shared existence. I think that there usually is common ground, though, and it starts with an open attitude – a kind of epistemic humility, and playfulness or curiosity about another person's world that resists an urge to explain or theorise it, and is open to being moved and changed by it. This openness to what might emerge extends to mad experience a dynamic relationship in which it can respond. Responses may at times seem 'non-sensical' in a contingent way, in a sense that they challenge our habitual accepted ways of conversing and participating in shared sense-making. However, often

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<sup>3</sup> In fact, the difference between the expressions 'going mad' and 'being mad' marks a difference in what I am explicating in this paper: madness as a place to go to, far away and a departure, vs, madness as not necessarily a faraway place but a state of being that can be a point of sharedness.

some form of dialogue (perhaps non-verbal) emerges, and it is this sharedness that I propose we lean into and embody, in the communities that we form through Mad Pride and Mad Philosophy and otherwise, to de-escalate the fear of madness as Other.

### **2.1 Caution in not re-shaping the cage**

In these shared ways that we come together around (and with) madness, it is important to remain open to madness in all of its forms and not fall into a trap of ‘othering’ certain kinds of madness whilst privileging or romanticising others. We must allow space for madness that may be seemingly non-sensical and remain in I-thou relationship with it, which means the possibility of being changed by it. We do not want to create conditions for what madness ‘should be’. This effectively reshapes the cage of the Other by shifting the experiences there which ‘cannot be understood’, for example, which only re-maps the borders which deny access to intersubjectivity.

Kusters comments on the tendency in philosophy of psychiatry and psychopathological theories to explain madness as “an understandable reaction to problems elsewhere; either of a social nature, or as a problem of the faculties of imagination or association” (2023, 318):

These models make sense in building bridges of understanding between the at first sight ununderstandable insanity of the mad, and the supposed reasonability of the sane. They operate by analyzing and detecting in what way the experiences, thoughts and discourse of the mad can be understood, decoded and translated onto some common ground of mutual understanding and communal living. This is part of an emancipatory project, in clarifying deviant experience, and understanding deviant people, and by explaining how their life trajectories, experiences and language, have gone astray. With these understandings and explanations of what was at first sight ununderstandable, this project attempts to build and co-create common ground in a common-sense world.

(Kusters, 2023, 318)

This is an example of the consensus world (through psychology/philosophy of psychiatry) attempting to build these bridges of common ground with madness. However, in doing this through attempting to exhaustively explain madness from the outside, rather than being with it and open to listening to what it may have to say, it runs the risk of Othering madness which cannot be explained in such a way, or not really listening to madness in insisting that it fits into this theoretical model. Indeed, Kusters concludes that they end up Othering madness anyway in remaining focused on the mad as lacking something: “although this lack is not situated in reason in the sense of inferential logic, or higher cognitive capabilities, it is a lack that prevents them from being part of the communal” (Kusters 2023, 319) Madness has again been defined by its Otherness and departure from the collective.

### **2.2 De-centralising the consensus world**

I am interested in building and co-creating common ground in and with mad worlds, through mad intersubjectivities. In this way, we ‘de-centralise’ the consensus world through

building mad consensus, and challenge the fear of madness as profoundly alone. Perhaps there is something slightly contradictory here (but again, that is a problem for a common-sense perspective that seeks to immediately 'correct' contradictions rather than meeting them with creativity). I am not denying the depth of departure from intersubjectivity that mad experience *can* follow. I am also not proposing that we let go of Reality either, but shifting the focus to madness having a stake in consensus reality and making a mark on it. This is possible if the consensus world makes itself open to this possibility and experimentation.

This already happens through peer support communities and Mad Studies, and in other pockets of shared existence with madness that are on the fringes of the consensus; these are consensus world phenomena that are *with* madness in a de-centralised way. Why should we be trying to universalise madness and find one macro explanation or formula for it anyway, usually for the benefit of those studying it and not for the mad? Haarsma-Wisselink (2023) points at this distinction in describing their ongoing inquiry into their own mad experience as "Not trying to (fully) understand, or to propose a new totalising theory, but as an experience never to fix nor settle." It is surrendering to the mystery in being with, yet not abandoning, madness that we can find mad intersubjectivity.

Pathological conceptions of madness, and their associated fear of it, are culture bound yet dominant, masquerading as universal 'essential' facts about human experience. De-centralising the consensus on madness to co-create cultures, shared practices and epistemic communities that focus on being with the madness that is present, invites it in to a shared experience, rather than defining it as inherently lacking in possibilities of the communal. In mad consensuses, madness can 'speak back' and make a mark on consensus reality. These are spaces that can meet madness, and in which we can meet each other's madnesses, trickling into a new consensus on madness. This is a kind of intersubjective trust that is open to madness, rather than one which does not extend to the mad, othering them, and keeping madness stagnant and enclosed, or one which reifies madness into something from the outside – thereby enclosing it.

Some questions emerge from this: what kind of shape can this mark be? Are there limits to the shape that it can make – the shape of what and how mad experience can enlighten what we call Reality? Should Reality be guarded in some sense, and to what measures should mad consensuses guard it? How far do we go to police or not police Reality? These are all interesting questions, and I'm not supposing that we do away with Reality altogether; being open to madness contributing to it does not mean accepting everything the mad say as true. But it does mean remaining open to the possibility on a baseline, I-thou level. I think how mad realities trickle in to consensus reality – which may indeed fracture or threaten other consensuses on madness – through mad intersubjectivities, is for us to experiment with and find out; it is not something that can be determined from the outset in an overarching manner. In decentralised shared experiences with madness, we practice and together build the shared worlds that regulate and challenge each other's experiences. The shape of this is dynamic and constantly shifting, but the point is that madness is part of this process; it has a stake. In the next section I briefly outline three practical mechanisms for bridging madness with intersubjectivity that feel helpful to me.

### 3. Mad Worlds, Mad Intersubjectivities

#### 3.1 Mythos as scaffolding

In not fearing madness, I take inspiration from other 'strange worlds', and the way that they are in dialogue with more mainstream worlds, through having a place in 'the consensus' – or some kind of consensus: i.e. they are things that are talked about, and that cultures or subcultures form around. Importantly these subcultures do not have a sole project of erasing those worlds, rather they are contexts to explore such worlds through. Finding glimmers of integration between worlds is a helpful strategy, as it enables the mad world to find its way through the consensus world through threads of insights. This means that the mad world is not a dead end or a wholly separate universe, which de-escalates the fear of it.

By other 'strange worlds', personally I refer to that of mythos, as providing a kind of intellectual and practical scaffolding for a different kind of relationship to reality that can inspire integration, sharing, and insight. I refer to the world of mythos not as something to be reduced to some kind of psychological content or process, but a world which exists in its own kind of reality. The mythic reality has a kind of consensus reality to it (through symbols and archetypes and figures that people engage with), but at the same time these 'actors' defy spatiotemporal constraints (they can be everywhere at once) and embrace cyclical resonances over causality or linear time. They also affect, and are affected by, our belief in, and engagement with, them. Singular spatiotemporal consciousness is queered through the positing of a 'collective unconscious' which may be seen as a modality for engaging with mythos.<sup>4</sup> Symbols can take on a form of reality that have cycles and reverberations of depth, different from linear causality. This provides a kind of scaffolding for mad worlds that have their own kind of rules and modalities, yet, at the same time, it offers opportunities to traverse between worlds – the mythic or mad world need not be wholly cut off and separate. Practices such as creative processes (poetry, dance, clowning), prayer, ritual, and divination offer routes to traverse between the mythic, mad, and consensus worlds, as well as engaging with the work of creatives such as William Blake, who can be seen as someone who attempted similar things in his works. In turning to creativity as a vehicle for being with the mad world whilst in the consensus world (creative outputs offer a shared vantage point for madness from the 'inside, out'), I resonate with the sense that imagination – or something similar to it – *can* be a mode of experiencing other *kinds* of realities.<sup>5</sup>

In mythic reality associations are not necessarily reduced to a 'trick of the mind' or an overactive imagination akin to pathological 'bottom-up' theories of madness, because imagination can be a mode of accessing other kinds of realities - whether they be collective unconscious or spiritual or otherwise - and this can have meaning in the everyday world.

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<sup>4</sup> I am not well read on the ontology of the collective unconscious to meaningfully comment on this, but I hope it gives some idea of what I am conjecturing. For me, the engagement with mythos has a spiritual or religious quality to it and is not something that I reduce to psychology. I remain open to the ontological reality of mythic entities, which coexists with a more ordinary reality – though they have distinct rules and modalities. This is really not very far-fetched at all when we consider the multiplicity of belief systems of peoples, cultures, and communities across the world, and their corresponding ontological 'worlds' and cosmologies.

<sup>5</sup> Note that I am not saying whatever we imagine is true. I am just sketching out a possible route, opposed to defining imagination as entirely disconnected from any ontology.

Associations and symbols can exist amongst a wider mythic reality that is not a wholly separate realm. It exists and interacts with the human realm. Harpur's (2003) book 'Daimonic Reality' presents Imagination with a capital 'I' (distinct from but connected to little 'i' imagination) as a mode of experiencing certain kinds of phenomena. He focuses on strange, otherworldly experiences that are common or archetypal to some extent but that are not directly accessible to most people, such as alien sightings, angels, fairies, and visions of the Virgin Mary. His work is about these 'crossings over' between worlds, which he connects through the work of William Blake, and other romantic poets, as well as Jung. He presents 'Daimonic Reality' as a kind of container for these experiences and posits them as having a certain kind of ontological relationship to consensus reality.

These ideas, and engaging with the mythic world in a responsive way, offer scaffolding for a mad world with its own kind of reality but which is also not wholly separate. It remains unknown what kind of meta-reality must exist which enables traversing between them, but creative practices serve as praxis for living this. This de-escalates the fear of madness as a lonely trap that one may get stuck in, since it enables a kind of flexibility or fluidity, and routes of dialogue, between the consensus world, the mad world, and subsequently new consensus worlds that form through mad intersubjectivities and dialogues.

### **3.2 Intersubjective crisis response**

When it comes to engagement with others, I have personal experience of volunteering with Psycare UK, a harm-reduction and crisis response organisation that specialises in psychedelic induced crises that occur at events such as music festivals. Sometimes service users had not taken any drugs, and yet presented experiences that would commonly be categorised as 'acute psychosis' or some kind of 'extreme experience'. So, in working on the ground, we would receive people having a diverse range of experiences across the continuum of 'psychedelic' or 'psychotic'/'mad'. Our main ethic of practice was simply being present for the people who arrived, facilitating them moving through what was happening, not 'guiding' in any way, but remaining in a kind of empathic openness and curiosity to their experience. Importantly, we were not theorising their experiences or fitting them to any criteria, and we extended I-thou connection to the mystery of what was happening for them; we were in a dialogue of some form. And we, ourselves, have been moved and changed by the strange worlds that people turned up and presented with. I have also applied these principles and practice when supporting a friend in an extreme mad state. Being practiced in this, and having affectively engaged in what it is like, has de-escalated the fear of madness, since I have extended sharedness to extreme states of madness. Whilst it has not always been easy, and some cases have not transitioned from Psycare's care in a way that feels peaceful, I know that it is possible to be with madness in a way that is genuinely intersubjective. Furthermore, I am inspired by the work of organisations such as the Kiva Centres - a nationally recognized indigenous-led, peer-run, and trauma-informed organization - that offers a 'crisis-alternative'; peer-run residential and mobile respites for people in extreme states. I am inspired by its peer-run nature: 100% of their staff, including management, have lived experience of extreme states and/or the behavioural health system, and by its guiding principle of engaging in mutual and trusting relationship throughout a 'crisis' experience. The premise behind their peer-run respites is that

“psychiatric emergency services can be avoided if less coercive or intrusive supports are available in the community”.<sup>6</sup> The availability of such supports presents an alternate consensus on madness, in which its extreme states can still be related to in trusting I-thou relationship.

### 3.3 Intersubjectivity with the more-than-human

One final coping mechanism that I would like to briefly mention (in regards to my own practice but also as a call to how we can be with madness differently; how we generate mad intersubjectivity) is actually expanding the bounds of intersubjectivity and I-thou relationality to include the more-than-human, through a kind of animist ontology. Sometimes, for a myriad of reasons, the shared world of humans can be difficult to navigate and trust. One coping mechanism for this is leaning into the ‘mad’ ability to commune with the more-than-human, such as plants, animals, bodies of water, places, and ancestors. It is possible to listen to them and develop relationships with them, as is normal and fundamental to many indigenous communities across continents. This practice attempts to meet and invite in more-than-human actors to our intersubjective communities and divergent consensus worlds.<sup>7</sup> This can, in turn, embody a being with madness that is more-than-human. Mad intersubjectivities may include more-than-human presence and dialogue, and this can be a way of resisting the fear of madness as alone, through practicing and co-creating such intersubjectivities. This may generate meeting points between spiritual, mad and consensus worlds, as well as simply providing sources of presence and dialogue in moments of divergence from human consensus norms.

## 4. Conclusion

I have aimed to answer the call for mad coping mechanisms by turning to the social situation of madness, amongst a (dominant) consensus world that struggles to engage with it as something other than a problem in need of – at the most stringent end – restraining, isolating, coercively medicating, ‘correcting’ in some way, and – at the least severe end – desperately theorising in a universal and essentialised manner from the outside. This contains madness, leaving it unable to genuinely respond, which can functionally deny the mad access to genuine shared connection: an intersubjective trust in being able to contribute to shared processes of regulating and co-creating shared reality. Whilst mad experience can diverge from sharedness, it should not be essentialised as lacking ability to access a shared world and thereby be left out of shared processes that constitute intersubjective trust and dialogue with others. This dominant framing and response to madness, and its affectivity, distil a fear of madness as something wholly Other. I have

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<sup>6</sup> Kiva Centers: Supporting Trauma-Informed Healing.

<sup>7</sup> The Tipuna Project is a UK AHRC funded participatory action research project that is researching this through including Māori and Pākehā Indigenous and settler ancestors as co-researchers in the participatory action research. They are guided by the question: ‘What are the decolonial possibilities and complexities of including ancestors as co-researchers in PAR?’ I cite this as an example of consensus world ways of exploring intersubjective community with the more-than-human, and to turn the question back to those who Other and pathologise mad experience, whether they would include such practices in their signs and symptoms of madness as experience ‘gone awry’?

focused on coping mechanisms that counter this fear of madness, through building other kinds of consensus about and with madness that are open and responsive to it. This enables the conditions for madness to contribute to and shape shared reality through mad intersubjectivity.

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### **Integrity statement**

I declare that this manuscript is my original work, has not been published before and is not currently being considered for publication elsewhere.

### **Conflict Of Interest statement**

I declare that I have no known competing financial or personal relationships that could be viewed as influencing the work reported in this paper.

### **References**

- Ahmed, S. (2006). *Queer Phenomenology: Orientations, Objects, Others*. Durham: Duke University Press.
- Ahmed, S. (2007). 'A phenomenology of whiteness', *Feminist Theory*, 8(2), 149–168.
- Fanon, F. (1986). *Black skin, white masks*. Translated by C.L. Markmann. London: Pluto Press.
- Fuchs, T. (2015). 'Pathologies of Intersubjectivity in Autism and Schizophrenia', *Journal of Consciousness Studies*, 22(1–2), 191–214.
- Haarsma-Wisselink, A. (2023). 'From mastery to mystery in psychosis inquiry,' Presented at the Too Mad To Be True Conference, Ghent, Belgium. Available from: [www.psychiatrieenfilosofie.nl/too-mad-tobe-true-ii](http://www.psychiatrieenfilosofie.nl/too-mad-tobe-true-ii) (Accessed: 14 November 2024)
- Hall, W. (2012). 'Will Hall at Unitarian Church, Vancouver Canada on March 2012', 9 July. Available at: <https://www.madnessradio.net/will-hall-unitarian-church-vancouver-canada-march-2012-transcript/> (Accessed: 14 November 2024)

- Harpur, P. (2003). *Daimonic Reality: A Field Guide to the Otherworld*. Illustrated edition. Ravensdale, WA: Pine Winds Press.
- Kiva Centers: Supporting Trauma-Informed Healing* (no date) *Kiva Centers*. Available at: <https://kivacenters.org/> (Accessed: 14 November 2024).
- Kusters, W. (2023). 'How to Reason Beyond Reason? Toward a Philosophical Understanding of Madness', *Philosophy, Psychiatry & Psychology*, 30(4), 317–322.
- Luhrmann, T. M. (2016). "'I'm Schizophrenic!": How Diagnosis Can Change Identity in the United States', in T. M. Lurhrmann and J. Marrow eds. *Our Most Troubling Madness: Case Studies in Schizophrenia Across Cultures*. Berkeley: University of California Press.
- Ratcliffe, M. (2017). *Real Hallucinations: Psychiatric Illness, Intentionality, and the Interpersonal World*. Cambridge, MA: MIT Press.
- Rodemeyer, L. M. (2020). 'Levels of Embodiment: A Husserlian Analysis of Gender and the Development of Eating Disorders', in C. Tewes and G. Stanghellini eds. *Time and Body: Phenomenological and Psychopathological Approaches*. Cambridge: Cambridge University Press, 234–255.
- The Tipuna Project* (no date). Available at: <https://www.thetipunaproject.co.nz> (Accessed: 14 November 2024).
- Wantoch, S. (2022). *The Meta of Madness: How the Social Framing of Anomalous Experience Affects its Ontology*. PhD Thesis, University of Sheffield. Available at: <https://etheses.whiterose.ac.uk/32646/>.(Accessed: 1 October 2024).