

Navigating the Wilderness

A Heuristic Self-Search Inquiry into the Lived Experience of
Chronic Pain

Tzach Maya-Chipman

A dissertation submitted to Auckland University of Technology in partial fulfillment
of the requirements for the degree of Master of Psychotherapy

Faculty of Health and Environmental Science
Department of Psychotherapy & Counselling

Supervisor: Professor Keith Tudor

2023

Abstract

This dissertation presents a heuristic self-search inquiry (HSSI) into my experience with physical chronic pain syndrome. This dissertation serves as a means of resolving my pain by going beyond the existing literature and accessing implicit, intuitive, and corporeal knowledge. Various methods, including poetic inquiry, drawing, imagery, and journaling, were used to delve into the experience of pain. Through this exploration, my research illuminated physical chronic pain's chaotic, nonlinear, creative, and ontological nature. The experience of chronic pain, while debilitating, provides fertile ground for existential reflection and a fresh perspective on the life of chronic pain sufferers. Following the HSSI process, I discovered the root cause of my illness, namely, heavy metal toxicity. Drawing on my triple role as an individual experiencing pain, a psychotherapist, and a researcher, this dissertation offers a unique and innovative illustration of the subjective encounter with pain, as well as providing a promising outlook for individuals suffering from physical chronic pain syndromes and the psychotherapists involved in their treatment.

Table of Contents

Abstract	ii
Table of Figures	iv
Attestation of Authorship	v
Acknowledgements	vi
Introduction	1
Chapter One - Literature View	3
Chapter Two - Methodology	7
Key Concepts	11
Identification with the Focus of Inquiry	11
Self-Dialogue	11
Indwelling.....	11
Tacit Knowledge.....	12
Intuition.....	13
Focusing	14
Internal Frame of Reference	14
Chapter Three – Method	15
Heuristic Phases/Processes	15
Initial Engagement	15
Immersion	16
Incubation	17
Illumination	18
Explication.....	19
Creative Synthesis	19
Modes of Heuristic Expression	20
Poetic Inquiry as a 'Way In'	21
Drawing, Painting, and Images	23
Journaling.....	23
Critique and Limitations of Heuristic Research	24
Validity	26
Ethics	26
Chapter Four - Discoveries and Discussion	27
Chronic Pain as Chaos	28
Nonlinear Dynamics of Pain.....	30
Pain's Butterfly Effect	31
Fractal Pain.....	31
Pain's Attractors.....	32
The Chaos–Pain Creative Axis	33
The Ontological Assault of Chronic Pain	35
Smoking Gun	40
Elusive Turns Concrete.....	40
Mercury Poisoning	43

Research Implications.....	45
Limitations and Critique.....	45
Contribution to the Discipline of Psychotherapy.....	46
Heuristic Contribution.....	46
Embracing ‘Not-Knowing’	47
Nonlinear and Chaotic Contribution	47
Developing a ‘Third Eye’ for the ‘Hazardous Third’	48
Chapter Five - Creative Synthesis.....	50
Epilogue	51
References	52

Table of Figures

Figure A: Immersion into chaos and the felt aesthetics of chronic pain	28
Figure B: Falling in	29
Figure C: Wherever your pain, there is your task	34
Figure D: Fibromyalgia: Dealing with a flare up.....	38
Figure E: Electrified bionic	41
Figure F: Powerlines in Bangkok	42

Attestation of Authorship

I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined in the acknowledgements), nor material which to a substantial extent has been accepted for the award of any other degree or diploma of a university or institution of higher learning.

Tzach Maya-Chipman

September 2023

Acknowledgements

I am filled with gratitude as I reflect upon the important people who have been instrumental in my research progress. First, I extend my deepest appreciation to Professor Keith Tudor, my academic supervisor, whose unwavering support has been invaluable. Through your guidance and expertise, I have grown both intellectually and personally.

I would also like to express my gratitude to Alex Tant, my soul friend, who has witnessed my journey from its inception. From the early stages of ideation to the arduous process of research, you lent a comforting presence, offering a safe and fertile space for meaningful reflections. Your unwavering support and friendship have been a beacon of light during the most challenging times of my life.

To my dear children, Ella and Ethan, I am forever grateful for your patience and understanding. Your unwavering love and understanding during those moments when I was fully immersed in my research whilst being so unwell is a testament to your resilience and compassion. Your existence has constantly reminded me of the purpose and impact of my work.

Last but certainly not least, I extend my deepest gratitude to my partner, Rob. Your belief in my capacity for self-healing has been my greatest source of strength. Even amid uncertainty and pain, you have remained a pillar of unwavering support.

Introduction

I have been deep sea diving since I was diagnosed with fibromyalgia and chronic fatigue syndrome in 2018. I have grappled with a medical label that seems to elude clear understanding and effective medical and psychotherapeutic treatment. Frustrated by the lack of answers from conventional diagnoses, I consciously decided to strip myself of any external labels and embark on a self-search journey, seeking understanding and healing. This approach allowed me to explore the nuanced and personal dimensions of chronic pain, facilitating the emergence of discoveries that are deeply meaningful to me as a chronic pain sufferer and researcher.

Voegelin (2021) states that the human condition inherently involves a continuous quest for self-understanding and comprehension of our surroundings. Engaging in this heuristic research project, I have found myself diving into uncharted waters and navigating the unknown of chronic pain experience. This process has been daunting and reassuring, allowing me to develop new insights into my condition and gradually regain my health, rediscovering my sense of self. Surrendering to this exploratory journey, I allowed the research and dissertation to guide me, unearthing invaluable gems of understanding that have been integrated into the fabric of this work.

This dissertation documents my exploration to answer the question of "what is the meaning and lived experience of my physical chronic pain?"

The term "physical" pain differentiates it from various psychological, existential, and social distress forms. Furthermore, the main emphasis of this research is on chronic physical pain, as opposed to transient, acute pain that can potentially be resolved through medical interventions. The term "chronic" pain, which can be experienced with a high level of intensity, is characterised by various sources, such as pain that persists for a duration exceeding twelve weeks (IASP, 2023). Alternatively, it can be interpreted as a form of pain that lacks a definitive cause or telos but "persists after all possible healing has occurred, or at least long after pain can serve any useful function" (Melzac & Wall, 1982, p. 36). Despite its lack of precision in medical and experiential

contexts, the concept of "chronic pain" encompasses the idea of enduring pain that consistently prompts enquiries such as "what is the underlying cause?" and "why does it persist?"

Therapists who work with clients with chronic physical pain and the clients themselves often encounter challenges and feelings of confusion when attempting to find significance and alleviate their suffering. Through this research, I endeavoured to navigate this paradox and seek clarity from the entanglement that arises from this contradiction.

Although this is my first foray into academic research, the fundamental human inclination towards self-exploration and understanding remains at the core of my inquiry. Drawing on Sela-Smith's heuristic self-search inquiry (HSSI) based on Moustakas's (1990) heuristic methodology and method, this dissertation serves as an exploratory qualitative investigation into my chronic pain's meaning and lived experience. In addition to the HSSI framework, I weaved in art-based methods that allowed the experience of pain to be explicated and become available to myself as the subject of inquiry and to the reader in the form of poems, creative writing, drawing, and photography.

By divorcing myself from external diagnostic labels, I delved deeper into my experiences and uncovered new understandings. The goal was to contribute to the broader discipline of psychotherapeutic research of physical chronic pain experience and aetiology, offering insights to help individuals in similar circumstances find solace, clarity, and a path towards healing.

This dissertation is outlined as follows: Chapter One contains the Literature View, showcasing my engagement with the literature on pain. Chapter Two is the Methodology section, wherein I outline the heuristic methodological approaches of Moustakas (1990) and Sela-Smith (2001, 2002) that I have drawn upon for this research. Chapter three outlines the heuristic methods as well as my personal framework for utilising these methodologies. Chapter Four is the Discoveries and Discussion section. Here, I share the findings of my heuristic search and discuss them in detail, leading to Chapter Five, which contains the Creative Synthesis I generated through my heuristic process in the form of a personal letter to pain itself.

Chapter One - Literature View

Ever since I can remember, I have attempted to find meaning of my experience of unexplained physical chronic pain. Thus, I have reached out to empirical 'validating' data outside my subjective interiority as a first point of departure. This was because I was raised to believe that the scientific method of understanding human experience was the primary and dominant paradigm, and therefore, it was difficult to resist. It was the 'go to' space that I perceived to have validity and value. It implied perceived certainty and operational direction towards 'diagnoses and remedy', and I felt blindsided by it.

The literature viewing process helped me to contextualise, justify, and locate my desire to research the subjective experience of pain, igniting pain as an 'organic resource' that fuels my embarking journey towards emotional truth and physical health. Roethke's (1975, p. 366-367) poem 'The Marrow' reflects on my desire as a point of departure for this dissertation:

Pain wonders through my bones like a lost fire,
What burns me now? Desire, desire, desire.

According to Moustakas (1990), the researcher finds what they need by following an intuitive process. Therefore, my style of literature viewing follows—and in the dissertation continues to follow—the spiralling direction of my heuristic journey through the undercurrents of memory, tacit knowing, and intuition. I do not experience this as a left-hemisphere analytical description but as a right-hemisphere creative exposition. Therefore, instead of seeking factual accuracy, I hope to evoke inner truths as I navigate through what is already known to others about physical chronic pain experience and meaning.

In no aspect of researching human life can we progress far before encountering the concept of pain (Szasz, 1957), and thus the desire to understand physical pain, as well as to relieve pain, has been threaded throughout human history (Thernstrom, 2010).

I looked to discover whether anything resembling my experience of chronic pain is available within the literature. I believe that knowledge-based insight must be combined with experience for discovery. This is because wisdom, in my view, is a synthesis of mind and embodied understanding,

not just intellectual knowledge. As a result, before understanding the experience of chronic pain, I must first leave the safety of theories and research on pain and find out about it as it is experienced.

Pain is difficult to define, as the clinical notion holds that "pain is what the patient states it is" (Miller et al., 2017, p. 1). Despite this, the International Association for the Study of Pain (IASP) defines *pain* as "an unpleasant sensory and emotional experience associated with actual or potential tissue damage or described in terms of such damage" (IASP, 2023). The IASP definition of pain recognises sensory and emotional aspects of pain experience, which can occur without tissue damage.

No single discipline seems adequate to address or represent chronic pain because every lens through which I explore fractures pain into a different light, into a scattered experience that is confusing, ambiguous, and interactive. Pain raises fundamental enquiries about the objectives of medicine, the inherent conflict between an objective and subjective perspective, the notion of brain pathology and human consciousness, and the interplay between physical and psychological factors, specifically the intricate relationship between the body and mind (Dekkers, 2017).

To Boulton (2018), it is "nothing and everything" (p. 809); for me, it is an experience that is transient, ambiguous, concrete, and contradictory all at once. To Pinin, a character in Nabokov's (1957/2012) novel of the same name, "the history of man is the history of pain" (p. 189). In my view, 'history' refers to pain as something easier to grasp if I relate it to context and recognise pain as a process, a communication, a story, or a metaphor.

Descartes contended that the body functions like a machine that can be studied using experimental physics, even though humans have a mind or soul (Damasio, 1999). This view denies my subjective experience of pain as a holistic manifestation of the intersection between mind, body, relationality, and environment, which laid down the dualistic worldview of mind and soma.

Melzack and Wall's (1965) 'Gate Control Theory' of pain illuminated the complexity of pain mechanisms. They started to recognise psychological factors, "coloured by subjective considerations" (Rey, 1995, p. 5), to be an integral part of pain processing, with various interacting mechanisms that reject simple casual labels (Melzack, 1965). According to Melzack and Wall (1982), the theory they proposed placed significant importance on "parallel processing systems" (p. 191),

which served as the conceptual foundation for incorporating the sensory, emotional, and cognitive aspects of pain.

The development in pain research fostered psychotherapeutic modalities that aimed towards the control of pain, pain management, and tailored interventions towards affective responses to pain (Sturgeon, 2014), but it is yet to have come closer to understanding the possible dynamics between Melzack's (2001) *neuromatrix*, which is the "anatomical substrate of the body-self" (p. 1379), and Francis' (2018) theory of the *Psychomatrix*, which "behaves concurrently with the systems of the body and the brain" (p. 39).

Most importantly, I have yet to identify research that explores the critical processes of both potential systems concerning pain experiences in the context of the Heideggerian *Dasein being*, as well as the experience of being in pain as 'being in the world' (Heidegger, 1962/2010), an area in which my felt sense of understanding pain begins to speak emotional truth.

For example, the positivistic understanding of pain as a biological process, such as sensation (Mitchell, 2007), masked my internally driven desire to come closer to the lived experiences of pain. Moreover, it has blindfolded my understanding of my pain like a barrier that "stands in the way of the basic question of Dasein's being" (Heidegger, 1962/2010, p. 74). For Heidegger, pain is the surest sign of our belonging entirely to this world, our contact with and 'openness' to the world (Mitchell, 2007).

As Buytendijk (1962) sees it, pain is more than just a signal of wounded tissues. It serves numerous functions and has multiple meanings. Buytendijk discusses the ontological significance of pain, arguing that suffering is a necessary component of what it entails to be human. Pain, says Buytendijk (1962), is "a state where man is afflicted in his most intimate unity, his psychophysical nature: self is brought into conflict with the body while remaining bound to the body in its painfulness" (p. 148).

To conclude, in this section, I have generated what I have deemed a 'Literature View' as opposed to a review, following in the view of Sela-Smith (2001, 2002) that a heuristic self-search inquiry process should ultimately draw knowledge from within my intuitive curiosity. Thus, my engagement with the literature has been limited in this project, mainly reflecting my failure to find adequate research that addresses the root cause of my chronic pain, having only found solace in the words of others who, too, have felt the scourge of such an affliction. Indeed, as I discuss in my

findings, this process has been more of "flushing out" rather than "taking in", reflected in my process of overcoming pain and my rejection of information that has not helped me in answering my heuristic question. How I engaged in this heuristic process is outlined in the next chapter.

Chapter Two - Methodology

“I would advise every sick person to evolve a style or develop a voice for his or her illness”.

- Broyard, Anatole, *Intoxicated by my Illness* (1992, p. 61)

In this chapter, I discuss the research design and methodology employed in this study. The following sections outline the philosophical undercurrents of heuristic research, its key concepts and how I utilised its principles to my experience throughout the study. Furthermore, I identify the merits of the chosen research approach whilst critically discussing its potential limitations.

My desire to elucidate the complex phenomenon of pain experience led me to choose a qualitative methodology. I was not drawn toward a quantitative approach since my personal and professional worldview negates the generalisation of human experience that risks diluting the subjective as lived.

Learning about heuristic methodology enabled me to investigate the meaning of chronic pain experience using myself as the subject of inquiry. Although I explored other research methods, such as hermeneutics, I concluded that heuristics were the most effective way to address my research question regarding the nature and significance of my chronic pain. Heuristic research provided me with engaging means of exploring my experience. Above all, and perhaps most importantly, the philosophical ideas underlying heuristic research align very well with my values and beliefs, including my views as a psychotherapist.

My chosen methodology for this research was Sela-Smith's (2002) heuristic self-search inquiry (HSSI), which is based on Moustakas's (1990) heuristic methodology and method. Heuristic inquiry, as an exploratory qualitative investigation and a personal research approach, refers to a process of internal search in a journey by which "one discovers the nature and [underlying] meaning of experience" (Moustakas, 1990, p. 9).

A heuristic approach can be used in "research endeavour[s] where the inquiry is on the cutting edge of new territory being explored" (Sela-Smith, 2002, p. 58), which is how I am situating myself about my subjective experience of chronic pain. As Moustakas (1990) clarifies, there is a fundamental necessity in this type of research for the phenomenon being investigated to arise

within the researcher's "personal encounter with the phenomenon" (p. 14), which, in turn, enables the experience to become transformative. The subjective experience of pain speaks to this approach as I seek to come closer to the root cause of my chronic pain experience.

Drawing on the work of Michael Polanyi (1966/2009) and originating from Douglass and Moustakas (1985), Moustakas (1990) developed heuristic inquiry as a research methodology, which he defined as

[...] a search for discovery of meaning and essence in significant human experience. It requires a subjective process of reflecting, exploring, sifting, and elucidating the nature of the phenomenon under investigation. Its ultimate purpose is to cast light on a focused problem, question or theme. (p. 40)

As a method of researching the subjective, heuristic research is informed by constructivism, humanistic psychology, and phenomenology (Douglas & Moustakas, 1985; Moustakas, 1990). Meaning and truth are generated by engagement with the world in constructivist epistemology. Consequently, the truth is not absolute but constructed, resulting in a fluid worldview accessible to multiple meanings based on relational context (Crotty, 1998).

The constructivist view proposes that subjects and objects produce meaning together, thus acknowledging the researcher's involvement in the research. This perspective emphasises the centrality of the researcher's experience and viewpoint, aiming for them to become explicit (Crotty, 1998). A distinguishing feature of heuristic research is its explicit integration of the researcher and the phenomenon.

A constructivist viewpoint recognises how we create meaning mainly by tacit knowledge, a central concept in the heuristic inquiry process (Douglass & Moustakas, 1985; Moustakas, 1990; Polanyi, 1958/2015). Consequently, constructivism tries to make the implicit explicit and comprehend how we construct context-related meaning (Crotty, 1998). Heuristics are also rooted in phenomenology, with the implicit notion that experience is structured by meanings that need to be discovered (Grbich, 1999).

This perspective lends itself well to a psychotherapy study suitable for researching "authentic accounts of human experience" (Hiles, 2002, p. 1). Hiles (2002) linked the process of "knowing through participation" and psychotherapy as an "authentic participatory practice" (p. 1). As a psychotherapist investigating a personal experience of chronic pain, which is also considered a

universal phenomenon in clinical practice, Hiles' (2002) statement strengthens my sense of alignment between the research question, the chosen methodology, and personal and clinical pain experiences.

Heuristic inquiry strikes a chord with how I practice psychotherapy. Indeed, Rose and Loewenthal (2006) validate heuristics as "a relational research method that facilitates exploration of the lived experience of psychotherapy" (p. 133). Heuristic research and psychotherapy are relational activities that require participants to engage in self-reflection, reflexivity, and subjective awareness, and they require a refined capacity to explore one's interior landscape. Stevens (2006) also highlights the organic position of heuristic inquiry in the therapeutic process, asserting that "heuristic research explicitly operates at third-order awareness - awareness of awareness - creating a cognitive discourse that makes the subjective experience of doing therapy accessible research through self-reflection" (p. 173).

This method includes (at least, for me) engagement with uncertainty, doubt, incompleteness, and questioning as necessary ingredients that ignite the possibility for continuous illumination of the research question. As a result, I entered this journey with an appreciation of the discovery process rather than focusing on the findings. As Heidegger (1962/2010) expressed at the end of *Being and Time*, "whether this is the only way or even the right one at all, can be decided after one has gone along it" (p. 487).

In my endeavour to explore the primordial process of chronic pain experiences, I ask for emotional engagement and openness. Heidegger (1962/2010) articulated this position when he wrote that "knowing oneself is grounded in being with" (p. 161) and talked about the primordial existential connection between knowing oneself and others that is fundamental to our existence. He also added that "in concerned solicitude, the other is proximally disclosed" (p. 161), a view that was later expressed by Rogers (1956/1996) regarding how the most personal is also the most universal.

Moreover, a primary argument for applying a heuristic approach in researching chronic pain is that the personal and anecdotal are essential to this psychotherapeutic study. Carel (2016) supports my argument by asserting that personal suffering and personal growth cannot be abstracted from the context of an individual life in which illness is experienced.

Heuristics acknowledges the scientist's internal processes as the most valid and valuable avenue to novel scientific discovery. It accentuates the scientist's profound commitment to the search for

understanding the scientist's personal experience. Polanyi (1958) asserted the destructiveness of scientific detachment of the researcher from their personal experience when he wrote:

I start by rejecting the ideal of scientific detachment. In the exact sciences, this false ideal is harmless, for it is disregarded there by scientists. However, we shall see that it exercises a destructive influence in biology, psychology and sociology and falsifies our whole outlook far beyond the domain of science. (p. vii)

The crucial tenet of heuristic research recognises that the researcher's biases are inevitable in all studies and do enter the study. However, in response to the voiced critique about the risk of bias, I must assert my position that the added value of examining a problem of great personal significance to the scientist is to the issue of personal experience and its general significance (Rogers, 1956/1996), representing a different paradigm of knowledge and research. These benefits include increased enthusiasm, dedication, innovative thinking, and insight.

In this research, I am following the HSSI approach developed by Sela-Smith (2001, 2002), which was influenced by the heuristic methodology of Moustakas (1990) but is also highly critical of it. Sela-Smith's (2001, 2002) methodology is oriented on researching the self, centred on the 'I-who-feels', wherein tacit knowledge emerges from connecting to one's feelings and embodied experience. In my research, I draw on my own experiences of chronic pain, delving into it to find answers instead of avoiding the pain in analysing it intellectually. This process leads to a creative synthesis akin to that described by Moustakas (1990).

HSSI calls for a deep engagement with the research question by entering the focus of interest, weaving in the researcher's inner and outer landscapes with the research question, and living through it (Sela-Smith, 2001). By utilising an 'inside-out' process of self-discovery, I weaved in reflective elements from poetry, literature, images, drawings, personal journaling (diary), and creative writing (Matousek, 2017) as methods that foster the illumination of chronic pain experience.

Key Concepts

Identification with the Focus of Inquiry

This involves immersing oneself entirely within the study question, seeking to promote internal understanding of the phenomenon through unstructured, self-directed exploration. This idea encourages me to delve deeply into the inquiry and investigate its various components to gain an in-depth awareness of my experience (Sultan, 2019). The researcher merges with the study question, experiencing it first-hand to gain insight into it (Moustakas, 1990).

The inquiry puts me in the context of my painful experiences and motivates me to seek healing. This journey is my life's work. Everything I do serves to understand it better, and everything else fades insignificantly. The degree to which I can relate to the inquiry indicates my importance in finding a solution.

Self-Dialogue

Self-dialogue is an invitation to engage in a conversation with the phenomenon, starting with one's thoughts and feelings. This allows the researcher to inquire into their own experience with the phenomenon, which can lead to new insights (Moustakas, 1990). It is my internal dialogue when on a journey, helping me to find which direction to head, the steady stream of thought or discourse that informs my next step.

My self-dialogue collaborates with my inner compass, drawing emerging insights from the tacit dimension's landscape. Therefore, essential to this process is the ability to be open, trusting, and receptive to all parts of my experience and keep self-disclosure rigorously congruent.

Indwelling

Moustakas (1990) defines 'indwelling' as "the heuristic process of turning inwards to seek a deeper, more extended comprehension of the nature or meaning of a quality or theme of human experience" (p. 24). As a means of grasping its constituent qualities and its wholeness, he says that "it involves a willingness to gaze with unwavering attention and concentration into some facets of human experience" (p. 24).

As I entered the process of Indwelling in my research, I felt like a diver descending into deep, unknown waters. It began with a sense of curiosity, a longing to discover something new and profound. I arrived closer to the terrain of pain, allowing data and understanding to flow like waves, enveloping me completely.

My indwelling experience was not just a mental exercise but also a physical one, an experience that I found challenging and demanding. I pushed myself to explore new perspectives and challenging ideas, sometimes struggling, and sometimes gliding effortlessly. It is like climbing a mountain, where each step takes me further up and closer to the summit.

Tacit Knowledge

The concept of tacit knowledge is essential to the heuristic process. Integrated from the work of Michael Polanyi (1966/2009), Moustakas (1990) asserted that "underlying all other concepts in heuristic research, at the base of all heuristic discovery, is the power of revelation in tacit knowing" (p. 20). The key concept of tacit knowledge is that "we can know more than we can tell" (Polanyi, 1966/2009, p. 4). Moustakas (1990) referred to tacit knowledge as the deep structure encompassing distinctive perceptions, emotions, intuitions, beliefs, and judgments lodged in a person's internal frame of reference that defines how we interpret experience.

Since the underpinning of all knowledge is either tacit knowledge or grounded in tacit knowledge (Polanyi, 1966/2009, p. 144), and along with the notion that the earliest foundation of tacit knowledge is disconnected from the verbal-thinking self, I argue that tacit knowledge is accessed through thought linked to the intuitive, somatic-focused experience of wholes, rather than logical reasoning. Therefore, it gains access and finds its way out, at least for me, through artistic expositions in poetic writing and drawing. As suggested by Sela-Smith (2002), "it is not the thinking-observing self but rather the I-who-feels who is experiencing the feeling that provides access to the aspects of the tacit dimension of nonverbal thought" (p. 62).

In my understanding, tacit knowing is an extension of my identity that does not require conscious thought. Sternberg and Horvath (1999) described it as 'knowing how' instead of 'knowing that'. This knowledge is not something I can understand or express concretely; instead, it is a deeply embedded quality of who I am that has been honed and shaped by experience. It is a silent

expertise just below the surface and ready to be called upon in times of need. It points me in new ways in search of new meaning-making prospects for my experience. My tacit knowledge is whole and thus cannot be segmented into pieces. I either embrace it as such or not at all.

Intuition

Intuition is my compass, pointing towards the true north of the self. The voice that whispers in my mind and heart guides me through the twists and turns of the research labyrinth. Like a skilled sailor who relies on the stars and tide to navigate through great oceans, I, too, need to trust my intuition to navigate the wilderness in search of the root cause of my illness. It is a rare moment when intuition takes centre stage and shines a light on my path, illuminating the way forward.

(Personal diary notes, 24th September 2019)

Moustakas (1990) describes intuition as the link between implicit and explicit knowledge. During the study process, the researcher is encouraged to pay attention to their emerging inner knowledge that reveals itself throughout the research journey.

Many authors (such as Shirley & Langan-Fox, 1996) contrast intuition with logic and reason as unique problem-solving strategies. According to Nisbett and Wilson (1977), people are sometimes unaware that an intuitive process occurs until an answer enters their awareness. In response to that, Vaughan (1979) described intuition as "knowing without being able to explain how we know" (p. 46). In addition, Shirley and Langan-Fox (1996) concur that intuition is also defined by unwavering trust in intuitive feelings and sensations. As Bastick (1982) noted, intuition correlates with a subjective sense of certainty of correctness.

Moustakas (1990) emphasised the importance of intuition in his claim that "every act of achieving integration, unity, or wholeness of anything, requires intuition" (p. 23). As a heuristic researcher, I follow my intuition, which often leads me to new avenues of inquiry, discover valuable resources, modify my approach, and develop new perspectives to pursue meaningful insights. More so, it is through the trust in my intuitive process "like a skilled sailor, one who relies on the stars and tide to navigate the vast oceans" that I have been able to find my way in the chaotic matrix of chronic pain, to "shine a light on my path" and to "illuminate the way forward" (Personal Diary notes, 24th September 2019), not only throughout the research journey but also in its creative synthesis.

Focusing

Gendlin (1978/1981) crafted deliberate experiential methods for employing centring, attentiveness, and introspection in the therapeutic practice known as *focusing*. “Focusing is a simple matter of holding open, non-judging attention to something which is directly experienced but not yet in words” (Cornell & McGavin, 2002, p. i). At one level, focusing is simple, but at another level, it is difficult, and like the experience of pain, it is full of paradox. Like pain, focusing itself is intricate. “It is direct and indirect, subtle, and concrete, active, and receptive” (Cornell & McGavin, 2002, p. i). It's a process that allows me the autonomy to choose my inner trail and adjust my course as needed. It allows me to tap into the meaning stored in my body, whether I am consciously aware of that meaning.

In the study of pain, focusing enabled me to both "plug in" and connect with my bodily experience and look at pain from within the inner structure of my being. It formed structure and illuminated the path towards understanding experience that seems chaotic, paradoxical, and confusing.

Internal Frame of Reference

Understanding the traits, nature, and significance of the study depends on the internal frame of reference of the experiencing person (Moustakas, 1990). Therefore, the researcher's knowledge base and the definitive principle of the research congruency are considered.

The internal frame of reference refers to the perspectives, values, beliefs, and past experiences that shape and orient the researcher towards the phenomenon under investigation. It is what I understand to be functioning in the undercurrents of my psyche and is what, in my view, formulates the researcher's bias towards the research question.

Chapter Three – Method

Heuristic Phases/Processes

The outlined engagement methods are situated within intuitive six phases that support this heuristic research's exploratory, introspective, creative, and experiential aspects as an 'elastic membrane'. These six phases drive the research and form the basis of the research design, which evolves.

Initial Engagement

I step onto the wilderness,
my eyes fixed on the horizon,
eager to get on a quest for discovery.

(Maya-Chipman, 2018)

Within each researcher exists a topic, theme, problem, or question that represents a critical interest and area of research. The task of the initial engagement is to discover an intense interest, a passionate concern that calls out to the researcher, one that holds essential social meanings and personal, compelling implications (Moustakas, 1990, p. 27).

This initial process is like a signpost pointing towards something vital that still needs to be visible but attracts researchers intrigued enough to keep looking. It motivates researchers to think about novel ideas, hypotheses, and inquiries. This is also a time when the researcher may experience a need to go inward for answers and to "live the questions" (Rilke, 2023, p. 15). Even if the researcher does not know what to do in response to this calling, they know that ignoring it would deny a core part of oneself (Sela-Smith, 2001). Here, the research question emerges, developed through the call to the researcher. David Whyte (2020) articulated the necessity of asking meaningful questions as an 'entry point' to the realm of self-search when he wrote about

Questions
that can make

or unmake
a life,
questions
that have patiently
waited for you, questions
that have no right
to go away.

(Whyte, 2020, p. 19)

Indeed, my health crisis ignited my inner resource of knowledge into asking a meaningful question that "can make or unmake a life" (Whyte, 2020, p. 19), a question that unlocks my access to the intuitive, tacit, and inner voice of self-knowledge in a search for healing: what is the meaning and lived experience of my physical chronic pain?

Sela-Smith (2001) writes of how HSSI is generally motivated by a crisis that one must attend to; for me, this was my inner voice calling for the need to resolve my pain, and HSSI offers a secure-based container for the researcher to delve into their personal life narratives and navigate a journey towards healing.

Immersion

The immersion process is sustained and focused attention where "the researcher lives and breathes the question" (Tudor, 2018, p. 152). This process is facilitated through indwelling, self-dialogue, self-searching, and an internal frame of reference. Having identified the topic of the research and the research question(s), the researcher "fully lives the research while awake, asleep and dreaming" (West et al., 2001, p. 62). It is a journey of inner depths (Sherwood, 2019).

The essence of the immersion process is this near-obsessed preoccupation with the question in mind. It is, in the words of Pólya (2014), "more accessible to anything that seems connected to the problem and less accessible to anything that seems unconnected" (p. 145). Getting immersed in the topic entails, according to Rogers (1965), "soaking up experience like a sponge so that it is taken in in all its complexity" (p. 187).

During this stage, no conscious effort is made to compile, organise, or analyse the information the researcher is ingesting. Instead, the researcher is "receptive" to all information and takes it all in by

tolerating "ambiguity and contradiction, a resistance to the need for closure" (Rogers, 1965, p. 187). Whilst immersed, the researcher becomes receptive to the process of indwelling and tacit knowledge to acquire data from the most unexpected sources and settings.

Journaling and poetry gave me the freedom to explore my own reactions, questions, and intuitions without worrying that they would have to conform to any defined theoretical frameworks. Creating my artwork and collecting images furthers this dialogue. From this stage, I arrived at self-dialogue's critical beginning (Moustakas, 1990).

Kenny (2012, p. 8) wrote that the immersion phase is an invitation to "stay fully with the experience of the phenomenon in whatever form it takes". The indwelling quality aided this: the intentional process of gazing inward to grasp an aspect of my experience (Kenny, 2012) more deeply.

Incubation

Moustakas (1990) refers to incubation as "the process in which the researcher retreats from the intense, concentrated focus on the question" (p. 28). This self-imposed internal retreat aims "to seek a deeper, more extended comprehension of the nature or meaning of a quality or theme of human experience" (Moustakas, 1990, p. 24). When the researcher steps away from the focus of the question, the expansion of knowledge unfolds on a deeper level of awareness.

Moustakas (1990) stated that "incubation allows the inner workings of the tacit dimension and intuition to continue to clarify and extend understanding on all levels outside immediate awareness" (p. 29). Although Moustakas describes this process as a voluntary act of power, a kind of self-asserting distinction between the phenomenon and the researcher by 'putting cognition aside for a while', it seems like this process holds a degree of privilege with the assumption that a personal question about one's experience can hold a degree of separation from it.

Critiquing Moustakas, I assert that incubation, as described, is impossible to entrench in chronic pain since this experience is ever-present to some degree. Therefore, the researcher is always making meaning through the lens of pain, even to the realisation that pain is a method of its own accord. In pain, incubation is a privileged experience because the chronic pain sufferer has no control over their experience and is subject to pain's totalitarian force.

Too much pain causes cognitive and somatic 'shutdown'. On the other hand, no pain attracts resistance and a breakdown of the ever-present pain bond, rejecting any desire to engage with the question by embracing the positive feeling of pain-free moments. In this place of 'no escape', I had to learn to tune in and recognise degrees of pain intensities that allowed unconscious processes, intuition, and tacit knowledge to reveal themselves.

By embracing the varying degrees of pain intensity, I was able to tap into a deeper understanding of myself and my experiences. This process of tuning in and recognising different pain levels allowed me to access hidden insights and wisdom that would have otherwise remained unconscious. Through this exploration, I began to appreciate the complex relationship between pain and self-discovery, ultimately leading me towards healing and growth.

Illumination

When the researcher is receptive to intuition and implicit knowing, the illumination process happens organically. An illumination is the conscious awareness of qualities and the clustering of qualities into themes associated with the question (Moustakas, 1990).

According to Moustakas (1990), illumination brings unconscious content into conscious awareness. New aspects and viewpoints arise while one is unintentionally processing material. When the researcher stays curious and attentive, new dimensions of experience or understanding of themes emerge, and cryptic meanings are clarified. Although illumination is positioned as the fourth step of the heuristic technique, the 'eureka' moment of new realisations is woven spontaneously across all previous phases of the inquiry and in a process independent of conscious awareness. My 'eureka' moments correspond with Sela-Smith's (2002) remark that illumination "may take place in a single moment or it may take place in waves of awareness over time" (p. 67).

According to Sela-Smith (2002), illumination permits previously dissociated components of oneself to be integrated when there is a break from dissociation to awareness of wholes and clusters of wholes that create themes inherent to an issue. The illumination period was both distressing and exhilarating for me.

My illuminations were constantly re-envisioned and reinterpreted. In my diary notes, I sought to capture these understanding shifts as they occurred while keeping open to their ongoing progress.

Even though the discoveries are unpleasant, the assimilation of the eureka moments transforms the terrible experience from nothing to something, from meaningless to meaningful.

Explication

The explication phase aims to explore what has emerged in conscious awareness to comprehend its multiple meanings (Moustakas, 1990). My previously internalised consciousness expanded into the exterior world during this period by shifting implicit awareness into explicit form, leading to what Moustakas (1990) described as a new perspective in the researcher.

A more comprehensive picture of the phenomenon emerges as new viewpoints, explanations, and patterns are discovered (Djuraskovic & Arthur, 2010). According to Moustakas (1990), this cannot transpire if the primary data source is based on other's experience. What started as a personal process leads to striving for the universal facets of the experience. At this point, I resonated with the experiences revealed by other writers, which validated the genuineness of my research within these linked resonances.

Creative Synthesis

Once mastering the materials that illuminate and explicate the question, the researcher is challenged to craft a creative synthesis of the findings (Moustakas, 1990). According to the heuristic method, results are presented as an individual depiction, exemplary portrait, and creative synthesis so that "both the phenomenon and the individual persons emerge in a vital and unified way" (Moustakas, 1990, p. 52).

The task is to evaluate all the acquired data in novel ways (Douglass & Moustakas, 1985). Moustakas (1990) further crafted the data presentation, notably the creative synthesis, to "be told in such way that in itself enables self-transformation" (p. 13). Moreso, as asserted by Sela-Smith (2002), when a story is constructed with its embedded transformation, it has "the power to transform anyone who surrenders to it" (p. 64), including the readers.

The creative synthesis can be expressed in various ways (Moustakas, 1990). It is not a summary or a recapitulation of the research. It is more than a simple description of what occurred in the inquiry; "it is the complete depiction of human experience in all its wholeness" (Djuraskovic & Arthur, 2010, p. 1579).

The essence of the experience in inquiry is synthesised and disclosed, maximising the opportunity for others to receive this essence in its entirety. The purpose of the heuristic researcher in generating this synthesis is to capture the key meanings that arise from the lived experience and to convey the lived essence of the experience to others who might or might not have gone through it for them to grasp it at an even greater depth (Clark, 1987).

Douglass and Moustakas (1985) clarified the essence of the creative synthesis when they wrote that "the searcher is challenged to generate a new reality, a new monolithic significance that embodies the essence of the heuristic truth" (p. 52).

The arrival at this profound personal understanding of chronic pain occurred by organically engaging with Moustakas's (1990) outlined seven distinctive yet interconnected concepts/methods that are central to the inquiry process:

Modes of Heuristic Expression

Heuristic inquiry and art-based research methods are process-oriented, self-reflective, and exploratory approaches, humanistic, holistic, participative, imaginative, and creative. Thus, heuristic inquiry provides a framework for pursuing art-based methods, whereas art-based activity provides explicit methods for carrying out heuristic inquiry. Integrating artistic expressions within heuristic self-search inquiry helps the researcher focus on their subjectivity and develop emergent, creative findings throughout the research process.

Polanyi and Prosch (1975) examined meaning as it is founded on the imaginative and creative faculties, moving past the critique of "objectivity" in scientific considerations. They argued that society provides meaning to science rather than accepting science's "truth" and that science is intrinsically normative, asserting that creative imagination is the basis of meaning.

Primarily through symbolic representations in poetry and art, the imagination synthesises life's otherwise chaotic and disparate elements. For Polanyi and Rosch (1975), these integrations are equally valid modes of knowledge as those of science. This understanding of the foundation of meaning, in my opinion, restores the validity of traditional ideas that have been undermined by modern science. Furthermore, I think that the underlying conditions of a free society that allow a

variety of approaches to truth enable the possibility of accepting subjective forms of knowledge in psychotherapeutic research.

Poetic Inquiry as a 'Way In'

The term "poetic inquiry" refers to poems used in the context of my research "as/in/for inquiry" (Faulkner, 2017, p. 210). It includes poetry from other poets and my original work in a way that holds poetic inquiry as "both a method [for data analysis] and product of research activity" (Faulkner, 2017, p. 210). The sounds and rhythms of poetry travel beyond the boundary of the conscious mind to ignite and nourish the imagination. In his poem, *Asphodel, That Greeny Flower*, William Carlos (1954/1994) writes,

It is difficult
to get the news from poems
yet men die miserably every day
for lack
of what is found there. (p. 41)

The power of poetry lies in its potential to convey the unsayable; it allows for miracles, the unexpected, and the unimaginable. It is the language of imagination, and as such, poetry is prophetic. As a tool for communication and articulation of pain and illness, poetic writing emphasises in its singular manner ambiguity, awe, and the complex relationship between words and the lived body (McEntyre, 2012) or between words and embodiment. Through poetic inquiry, I learn to listen differently to words in a way that liberates me from the fixed notion of what is already known to me in its predictable forms, sequences, and patterns.

Poetic expressions allow for deconstructing these forms, sequences, and patterns as preconceived ideas into something new. When I break from preconceived ideas, I then listen in new terms. Re-organised and re-positioned, words mirror my uncertainties and reveal the interiority that underlies the experience of pain and illness in its rarest form. Thus, I create a fertile ground for existing data to be transformed into new meanings and understandings by utilising poetic inquiry.

Similarly, to the way pain and illness define their terms and conditions to be formed and expressed in the lived body, McEntyre (2012) writes about how poems define their terms and prerequisites:

You have to let go of the expectations you bring to a story. You have to accept and dwell in ambiguities that do not resolve themselves immediately, letting meaning emerge, sometime multiple possible meanings, simultaneously. You must stop in odd places and reconsider your assumptions, and accept even the silences as invitation (McEntyre, 2012, p. 2).

According to Grünbein (2011), poetical thinking is not about art but rather about liberating what Gendlin coined as our "felt experience"—our perceived, aesthetical capacities for sensual knowing. Freeman (2016) asserted that "poetical thinking is [...] *felt* experience; the experience of *being in* the whirlpool of sensuous flow that we are as experiencing beings" (p. 72, emphasis original). In this view, poetry shifts from epistemology and its representational forms of knowledge to an ontological form.

Engagement with poetry highlights the flaws, struggles, and complexities of my experiences of pain rather than speaking about them. It creates, at least for me, space for making "the world in words" (Leggo, 2008, p. 167) by offering "textual spaces that invite and create ways of knowing and becoming in the world" (Leggo, 2008a, p. 167).

Heuristic and poetic inquiry are intrinsically compatible since both can articulate human experiences to elicit awareness, reflection, and insights in their readers and hold the potential to transform, empower, and heal both the researcher and their audience. In both my view and experience, writing poetically grounds my Being and fosters illumination of my pain experience. It cultivates creativity and fosters a reflexive spirit; therefore, contributing to the world is part of its achievements.

Critically thinking and writing poetry is a difficult task, primarily in an academic context, and more so when I come to explore my experience of pain. In agreement with Leggo (2008), writing and reading personal work requires understanding that personal writing goes beyond what academic circles perceive as a self-indulging, egoic, and narcissistic endeavour. As expressed by Leggo (2008), "We need to write personally because we live personally" (p. 91) - Our personal life is always braided with our professional, cultural, and academic way of being.

Drawing, Painting, and Images

It is possible to capture the ineffable with images, that which cannot be described with words. Some things must be demonstrated rather than explained. Artistic imagery can assist in expressing the elusive, difficult-to-capture parts of knowledge that may have been concealed or overlooked (Weber, 2008). According to Eisner (1995), the use of visuals offers an "all-at-once-ness" (p. 1) that discloses what would be challenging to comprehend in diachronic forms using language and statistics alone. Using visual imagery is not a privilege or an add-on to scholarship but is, in many cases, required. In my experience, pain and illness require visual mirroring to give them width and depth, pointing to knowing that they are embedded in the world.

Art draws me in and holds my attention. The potential of art to find what I did not know I knew or to see what I never noticed before, even though it was right in front of me, is why using art in research is valuable in researching the subjective experience of pain. Images used artistically can reveal what has been hidden away from consciousness, breaking down resistance and compelling us to explore new ways of seeing (Weber, 2008).

Images can alter the perception of what is already known (Weber, 2008). In my experience, giving an invisible feeling of pain and illness a symbolic visual expression allows it to break through what is already known about the experience and get me to think outside of my theoretical comfort.

Images allow me to keep the whole and the part in focus, presenting a story and assisting in the highly effective synthesis of knowledge. The content of a photo can convey distinct knowledge that keeps a context. Therefore, images can communicate through the processes used to create and present them (Weber, 2008). They might have what Ong (1982) calls an "orality", a narrative quality, or the capacity to incite or reconstruct discourse.

Journaling

Journaling is a method for probing one's mind, "a practise toward deeper self-awareness that moves us along the path of awakening to our true nature" (DeSilver, 2017, p. 12). For writing to be truly transformative, I needed to focus inward on the experience of pain. My journal entries comprise my experiences, theoretical ideas, and musings on living with pain. By journaling, I can

"capture continuously what is going on in and around the research and especially where and how I am in it" (Tenni et al., 2003, p. 4).

Dewey (1933) led me to a deeper understanding of journaling activity. He distinguished between two different mental processes: uncontrolled thought and focused, controlled thought. He named the latter process "reflective thinking". Dewey argued that the drive for reflective thinking results from perplexing circumstances; uncertainty leads a person to inquire and discover information to ease the burden. Accordingly, my suffering from physical chronic pain parallels Dewey's view that journaling enables metaphoric detoxification of pain by letting go, flushing out, and eliminating the burden.

Moreover, Rogers (1982) advocated using journals as a learning and personal development medium. He believed that learners are the experts in their own learning and developmental processes. Rogers (1982) outlined his evolving views on the significance of learning through self-discovery by stating that "the only learning which significantly influences behaviour is self-discovered, self-appropriated learning" (p. 223).

Critique and Limitations of Heuristic Research

HSSI, like the heuristic research by Douglass and Moustakas (1985) and Moustakas (1990), is driven by a crisis or a deeply held problem. As a result, this approach is appropriate for researchers who want to find solutions to their problems or gain insight into their passions. It may be painful to feel and embrace the emotions linked to crises, issues, or passions, and sometimes, facing a crisis (see Figure C) can worsen the symptoms at first. At the foundation of self-discovery is a willingness to experience the entire self, including the aspects that appear undesirable and least accessible to conscious awareness. As a result, not everybody will be drawn to this methodology (Sela-Smith, 2001).

Understanding my defences and sources of resistance to harsh, unexpected, and sometimes quite confronting information or my emotions about such material is essential to connecting with my data. Indeed, Sela-Smith (2001) writes that resistance to feelings is the main obstacle to accessing tacit knowledge within oneself. The alternative is to dismiss, ignore, rationalise, or prematurely intellectualise the data, which might reduce the value of any insights that can be gained from

analysing it. This is difficult since the facts acquired in heuristic research might cause many worries and make me want to run away. All this rests on the necessity of self-awareness and, ironically, the pursuit of a deeper understanding of oneself.

Along with the relevance and quality of examining the subjective in HSSI, the researcher may become "blindsided" and caught up in their subjectivity. Reason and Rowan (1981) pointed out that the researcher may only hear what they want to hear and urged for the importance of support throughout the data analysis process (a component that Douglas and Moustakas (1985), Moustakas (1990), and Sela-Smith (2001) did not recognise). Rose and Loewenthal (1998) made a case for further assistance in addressing blind spots, which they believe can occur, particularly during the immersion phase. By addressing the potential limitation of blind spots, I engaged in conversation and reflections about my process in my dissertation supervision, clinical supervision, and through the support of friends and family members.

Including participants introduces a potential source of distraction from the internal process. As a result, there is a lack of connection between emotions and the research process, leading to a failure in achieving personal growth and development. According to Sela-Smith (2002), the tacit dimension is disengaged, and the internal landscape stay untouched.

Sela-Smith (2002) writes that researchers may encounter difficulty engaging in self-searching when they have unresolved emotions or suffering. In such cases, the researcher may choose a phenomenological inquiry, which she equates with a more comfortable stance of studying others rather than oneself.

Consequently, I decided to embrace my experience of pain within my research, adhering to the HSSI methodology proposed by Sela-Smith (2001, 2002). This rigorous approach, while challenging, focuses exclusively on the individual and thus has the potential to facilitate personal growth and transformation.

In contrast to the perspective presented by Moustakas (1990), Sela-Smith (2002) posits the distinctiveness and superiority of prioritising the researcher's introspective exploration as the genuine heuristic inquiry and "correct methodology" (p. 81) while disregarding the involvement of research participants and limiting the research to a single subject: the self. Sela-Smith coined the term "heuristic self-search inquiry (HSSI)" to describe this methodological alteration. Sela-Smith (2002) and Ozertugrul (2015) are two researchers who employed heuristic self-search inquiries

(HSSI) as a means of facilitating their recovery from obesity and OCD, respectively. While Moustakas incorporated therapeutic techniques and notions into his heuristic investigation, HSSI primarily involves self-healing characterised by complete surrender to the subjective experience and an organic progression of the heuristic phases as a form of treatment.

Validity

Data interpretation has never been a group activity or source of contention between me and others. Looking at the facts from numerous angles could be beneficial but also overly analytical and debilitating. Ozertugrul (2015) talks of how HSSI research cannot be held to positivist measures of validity but is valid in answering the researcher's personal question and the subsequent impact this has on the reader. My translation of the data is based on my findings and interpretation, which I reflect on as I experience it. The fact that I am biased has its benefits. It is integral to who I am as a researching psychotherapist. What I can contribute as a researcher is my biased perspective, which I recognise and accept. As my own coherent and heartfelt contribution, I place it above any cold attempt at objectivity. There is merit and legitimacy to every perspective. Respecting the opinions of other scholars while maintaining my own is essential to my research.

Ethics

Even though no other people other than myself are participating in this research, I still have ethical responsibilities as the study's principal participant. This research takes a stand for faith with emotional repercussions (Ings, 2013) due to its intimate nature and the desire to investigate my responses and limitations to ensure its rigour. While personal psychotherapy and supervision have been helpful places to reflect on the emotional toll of this research, intentionally framing the dynamic between the self as a researcher and the self as a subject has been just as important. According to Guba and Lincoln (1989), researchers and their subjects should have a relationship based on equality, mutual respect, and dignity. These codes have guided my interactions with my observed self and body for the duration of this research, much like the guiding principles of my work with clients.

Chapter Four - Discoveries and Discussion

In my heuristic inquiry, where knowledge is uncovered through exploration and discovery, combining findings with a discussion becomes vital. It creates a synergistic flow where fragmented research components blossom into a self-harmonious dialogical whole. This chapter charts the path to understanding by delving into the rich trove of data collected. During the expedition, it unfolds the complex terrain of my chronic pain, presenting findings with emerging clarity and revealing the associations, correlations, and perplexities that emerged.

As I traversed this cognitive-emotional-embodied landscape, the purpose became clear: to breathe life into the discoveries, transforming them into a narrative of insight and understanding. My research results can be understood as sprouts from the "implicitly revealed trunk" (Maizels, 1996, p. 3), an approach that is endorsed by seeking to articulate multiple interconnected concepts. Thus, the reader is free to understand the accumulated whole while providing connections between findings.

More so, I have come to realise that Rose's (1993) contention that the process of "dissolving wholes into parts" (p. 504) and reconstructing them in new ways repeatedly to find the unfamiliar within what is already known is central to creative research, which has been a guiding principle for me. In this chapter, I create a tapestry of comprehension that transcends isolated perspectives by weaving findings and discussion into one text. In this symphony of knowledge, discoveries are seeds of curiosity waiting to be cultivated by discussion.

Every discovery is intricately shaped by previous discoveries, revealing an interwoven progression towards an entirety. The organic process of self-search led me from the chaotic and elusive ontological dimension to the concrete, from experience and meaning making to the 'smoking gun' and the possible cause of my illness: mercury poisoning. Like my encounter with Moustakas's incubation, in which the acquisition of implicit knowledge hinged upon the intensity of affliction, rendering pain as a method by which self-knowledge and self-understanding are attained, my foray into elucidating my discoveries and engaging in their discourse followed suit.

Chronic Pain as Chaos

“Chaos often breeds life, when order breeds habit.”

- Henry Adams (1997/1999, p. 78)



Figure A: Immersion into chaos and the felt aesthetics of chronic pain

Digital freehand drawing

(Maya-Chipman, 2019)

As I searched for the meaning and experience of chronic pain, I traversed the vast expanse of an inconceivable chaotic reality. In immersion and throughout my heuristic process, every stride I undertook reverberated with the constant recognition that my physical being was not in a state of equilibrium but burdened by my pain as a relentless force, ruthlessly tearing through every fibre of my being.

Alongside my experience of pain as scattered and chaotic, my process of researching and writing this dissertation reflected the chaotic nature of my experience almost every step of the way. Carving a linear path with clear tasks was impossible; sticking to timeframes, making lists, and finding order in my writing took much work.

My experience evoked the emotional pain of being lost in endless ‘rabbit holes’ or ‘black holes’ (see Figure B). In the artwork “Immersion into chaos and the felt aesthetics of chronic pain” (see Figure A) as well as in “Falling in” (see Figure B), which were created out of an intense pain state, I discovered not only the chaotic nature of chronic pain but also its manifestations throughout the research process as a journey of entanglements and disorganisations of both my embodied experience of pain and the heuristic process itself.



Figure B: Falling in

Pencil on paper. Scanned and digitally modified.

(Maya-Chipman, 2019)

The chaotic pain begins with an insidious whisper, taking hold of my body like a malevolent puppeteer. It sets my nerves ablaze, sending searing tendrils of pain coursing through every inch of me. It knows no boundaries, invading the sanctity of my mind, drowning me in a sea of tumultuous emotions.

(Personal diary notes, 19th July 2020)

In its erratic and unpredictable nature, I get lost in the wilderness. I am confused by my pain's manifestations. I know pain, but this chronic companion is unpredictable. It picks parts of my body like a rambling wanderer exploring the unknown. It could seize my joints and make them ache and protest fiercely. Then it settles in my muscles, causing unbearable weight.

I'm most confused by this scattering. Pain traditionally means a sharp sting in a specific area. But chronic pain's confusing hide-and-seek game tortures me. It moves between my shoulders, lower back, and temples, sometimes teasingly. Never giving away its next move, it's impossible to keep up.

(Personal diary notes, 26th July 2020)

Chronic pain syndrome is a complex and pervasive condition (Croft et al., 2007; Harvey, 1995). Its experience extends beyond the physical realm, encompassing emotional, relational, and psychological dimensions entangled in a multifaceted, complex way (Love-Jones, 2019). The experience of chronic pain as chaos and its intuitive association with chaos theory concepts such as nonlinear dynamics, sensitivity to initial conditions, the butterfly effect, fractal nature, and attractors (Feldman, 2019; Gleick, 1998; Lorenz, 1995) allows for the discovery of a new perspective on how the complexity of chronic pain and its uncertainty extends far beyond its physical embodiment, reaching deeply into the labyrinthine corridors of the mind and soul.

According to Briggs and Peat (1989), chaos manifests inside a structured system when the previously constrained and uncomplicated motion deteriorates, enabling nature to investigate the extensive range of possibilities and creation within its expanded phase space (Lorenz, 1995). In a similar notion, chronic pain and illness manifest deterioration and destructiveness in both physical form and the psychic life of the sufferer, an experience that has felt throughout:

How this enigmatic entity defies reason, for its path is ever-changing, forged by the whims of chaos itself. With a capricious spirit, it manifests its truth with fervent abandon, unknown to the eyes of the observer. Yet, behold the delicate harmony it holds, for a small shift in initial conditions can cascade into a symphony of anguish or respite. In this dance of infinite uncertainties, chronic pain unveils my sensitivity to the tiniest of ripples, as it intricately entwines with the essence of existence.

(Personal diary notes, 14th October 2022)

Nonlinear Dynamics of Pain

The nonlinear dynamics of chaos theory can shed new light on the problem of chronic pain. According to chaos theory, even slight variations in the initial conditions can have far-reaching and unforeseen consequences in complex systems (Feldman, 2019; Lorenz, 1995). Seeing chronic pain through the lens of nonlinear dynamics and sensitivity to initial conditions suggests, in my

view, that even little disturbances or imbalances in the body's physiological systems can result in heightened and pervasive pain feelings.

Factors affecting the neurological system, the musculoskeletal system, and the mind can all contribute to these abnormalities (Williams & Clauw, 2009). Furthermore, chronic pain experience is sensitive to initial conditions, where seemingly trivial changes can affect pain severity and perception, “unveiling its sensitivity to the tiniest of ripples” (Personal diary notes, 14th October 2022), entailing friction dynamics between physical, emotional, biomechanical, and environmental factors.

Pain's Butterfly Effect

The butterfly effect (Lorenz, 1995) implies that minute alterations in one component of a system can lead to substantial consequences in other areas.

Like a butterfly's wings, the smallest fluctuations in my pain can create a cascade of consequences, altering my emotions, relationships, and sense of self. The butterfly effect reverberates through my existence, as the slightest pang triggers a wave of despair or an anguished cry.

(Personal diary notes, 14th October 2022)

Within the sphere of chronic pain, the butterfly effect underscores the intricate relationship between physical symptoms and the mental welfare of the person in pain. Various emotional states, such as stress, worry, and depression, have the potential to amplify the experience of pain (Melzack, 2001; Westgaard, 1999), leading to a reciprocal interaction in which pain exacerbates distress and vice versa.

Fractal Pain

Fractals, complex patterns that repeat themselves at different scales, are prevalent in nature (Lorenz, 1995) and can be observed in chronic pain experiences. According to Layek (2015), fractals possess self-similarity, whereby each part resembles the whole, regardless of the magnification level.

An unfeeling power down in the murky depths of my being constantly holds me together. Chronic pain is the disorder's carefully knit fabric. It unfolds and copies indefinitely, and its pattern is fascinating and perplexing. Anguish is like a waterfall, with each droplet reflecting a microcosm of the whole.

(Personal diary notes, 14th October 2022)

Chronic pain can be understood as a fractal phenomenon, as it exhibits self-similarity and intricate patterns across various dimensions. Just as fractals appear across multiple scales, chronic pain permeates various aspects of my life, interweaving physical sensations, emotional distress, and psychological impacts (Edwards et al., 2016). In my experience, the fractal nature of pain holds its ability to impact not only at the physical level but also within their relationships, routines, and overall well-being, underscoring the importance of adopting a holistic approach to chronic pain care.

The experience of pain can manifest differently between individuals, but at its core lies the repetitive nature of pain signals (Melzack, 2001). While the intensity and frequency may vary, the recurrence of pain echoes the self-similar nature of fractals. Whether it is a constant background ache or intermittent sharp spikes, the sensory experience of pain maintains a similarity of distress, regardless of the varied manifestations (Crawford et al., 2014).

Pain's Attractors

In chaos theory, the concept of attractors invokes the idea that order can emerge from chaos, and that amidst the maelstrom, there is the potential for tranquility (Abraham, 1989; Tsonis, 1992). Similarly, within the throes of chronic pain, I have discovered my own personal attractors—sources of strength and solace in friendships, family support, and the use of pain method for creative expression of inner truth that guide me through this tumultuous terrain:

Yet, amidst the seemingly impenetrable darkness that envelops me, glimmers of defiant light emerge, illuminating the path to resilience.

(Personal diary notes, 14th March, 2023)

Chronic pain can be regarded as an illustrative instance of an attractor, wherein the opposite part of the attractor is associated with health. Moreso, an attractor is characterised by its ability to induce unpredictable activity inside a system. This unpredictability gives rise to the potential for a bifurcation in the system's prior conduct, thus enabling the emergence of a novel state of existence (Edwards et al., 2016).

The Chaos–Pain Creative Axis

Pain as chaos served as a mechanism via which creativity manifested itself in this dissertation. The phenomenon serves as a dynamic catalyst that guarantees novelty's perpetual manifestation.

According to Reichardt and Reichardt (2017), the natural world exhibits a disorder. However, within this disorder, a semblance of order arises, manifesting the inherent trajectory of creation.

Likewise, heuristics seeks to deviate from the trajectory of conventional research by inviting the subjective and the imaginative into the academic sphere. According to Moustakas (1990), every stage of the heuristic process represents a domain that has not been explored, wherein the researcher navigates through unestablished terrain and forges a path by venturing into unfamiliar territory.

Sela-Smith (2001) expands upon this metaphor by characterising it as a "surrender to emotion" (p. 114) and a transition into a novel stream of consciousness akin to a "free-fall" (p. 106), an experience I had throughout the research process (see Figure B). For me, this process involves embracing the inherent chaos in pain experience, allowing me to venture into uncharted territory to be discovered. In a similar notion, Carl Jung wrote in his letter to Mr. Mortensen that "wherever your fear, there is your task" (Jung, 1976/2015, p. 306).

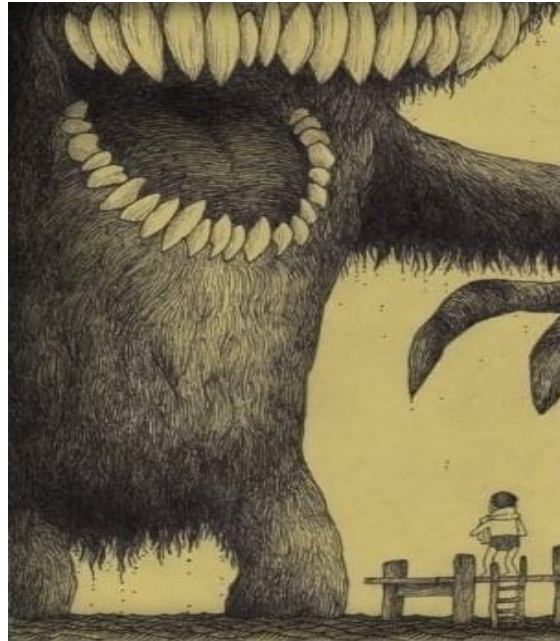


Figure C: Wherever your pain, there is your task

Drawing by J. K. Mortensen (2014)

Although Jung (1976/2015) referred in this quote to the confrontation of fantasies and dreams as a catalyst for differentiation, I have identified with this quote since it reflected my experience of facing chronic pain as a 'monster' that had to be faced with and understood prior to its transformation. Mortensen's (2014) artwork around the theme of monsters and shadows reflected my experience of facing pain. It became the guiding compass of my journey alongside Jung's quote, which I paraphrased as "wherever your *pain*, there is your task" (see Figure C).

Moreover, pain has a pivotal role in stimulating my creative force by compelling me to devise innovative strategies to surmount it, as it has been manifesting itself throughout the research as a poetic and artistic endeavour. Hence, engaging with pain appears to be a viable risk in self-research, compelling the researcher to pursue profound insights to surmount a deeply incapacitating condition (Safan-Gerard, 2018).

In facing pain and looking at it, I felt compelled to seek resolution, which can be seen as a genuine manifestation of my creative structure. Although it can be highly emotionally demanding, engaging with my pain compelled me to relinquish control and confront the disorder.

Nevertheless, in the event of a favourable outcome, this process establishes a distinct structure

that culminates in attaining life's most invaluable benefit, namely, the triumph over personal affliction.

The following discoveries of ontological assault and mercury poisoning emerged from the chaos–pain–creative axis, signifying the creative forces within pain as a method within its chaotic nature that allows the unknown to be found.

The Ontological Assault of Chronic Pain

Through poetic narratives and intuitive drawing, I discovered how my lived experience of chronic pain and dysfunction affected how I thought about myself, my life, and my future. I often had to radically revise my expectations, plans, and goals because of my illness which had no apparent end:

In the stillness of the night,
as the world lays quiet and dark,
a battle wage on inside,
chronic pain leaves its mark.

It's a disruption to my life,
that no one can ever quite see,
an invisible battle that rages on,
affecting the way, I live and breathe.

Every day becomes a struggle,
every step is a painful feat,
a simple task now seems like a mountain,
just moving feels like a defeat.

The world spins on and on,
as life seems to pass me by,
while I suffer in the shadows,
with a silent heavy sigh.

The pain becomes my identity,
a constant companion I cannot shake,
as I try to find a way,
and endure for the next day's sake.

(Maya-Chipman, 2021)

The significant disruption to my life due to pain and my experience in seeking care were perceived as obstacles. Because of my chronic illness, my daily routine has been thrown off kilter, which I interpret as an "ontological assault" (Pellegrino, 1987, p. 44) that had far-reaching effects on my sense of self that went beyond the performance of specific actions.

The disruption caused by my inability to carry out social roles in my personal and professional lives has also been the subject of numerous studies (Locker, 1981; Pennebaker, 2012; Solomon et al., 2016; Williams, 1987), leading to a sense of isolation and invisibility in me. In addition, I have learned that studies have been previously conducted on the varied strategies I use to keep up appearances of normality or adjust to limited resources (Wiener, 1975).

Buytendijk's seminal work, "*Pain: Its Modes and Function*" (1962), serves as an exemplary illustration of attributing personal significance to pain via the lens of scientific elucidations and philosophical grounds. As per Buytendijk's (1962) perspective, pain possesses a multitude of purposes and conveys several meanings that extend beyond its fundamental role as an indicator of tissue damage.

According to Buytendijk (1962), pain can be seen as a condition in which an individual experiences a profound "disruption in their fundamental wholeness" (p. 148), including both their psychological and physical nature. This disruption arises when my sense of self becomes entangled in a state of conflict with my physical body while simultaneously being intimately connected to the experience of pain:

I find myself engulfed in agony, completely defenseless and cut off from everything but my own suffering. It is as if my body rebels against me, refusing to grant any solace or relief. The pain consumes me, eclipsing all other sensations and thoughts. I am reduced to a mere vessel of torment, my very existence defined by aching muscles, searing nerves, and the incessant pulse of agony. The pain takes on many forms - burning, drilling, cutting, stinging - relentlessly assaulting me with its relentless force. It wrenches and rages, vibrating throughout every fiber of my being. With each relentless blow, it shatters my focus and confounds my mind, leaving me stranded in a whirlwind of distraction and perplexity, sinking deeper into the depths of suffering.

(Personal diary notes, 25th February 2023)

The experience of pain results in a 'battle' between my sense of self and my physical body. In everyday experiences, wherein I engage in various pragmatic activities and maintain proximity to worldly objects, it is not uncommon for me to inadvertently overlook my corporeal existence as if it were non-existent. When experiencing intense pain, my body's hurting part assumes a commanding role and exerts influence over the entire situation. As Buytendijk (1962) aptly states, the source of torment does not originate from an external entity, nor is it a result of an isolated event, a verbal expression, a cognitive process, or even a state of illness or mortality, despite the recognition of the potency of these factors. Instead, the torment stems from our bodily existence—our core.

According to Dekkers (2017), the phenomenon of pain does not possess an intentional object. The ability of humans to perceive pain is an innate attribute that can be likened to other sensory capacities such as hearing, touch, desire, fear, and others. Nevertheless, the absence of a tangible external object sets it apart from these encounters, implying a feeling of detachment and invisibility to the external realm within myself "*as the world lays quiet and dark, a battle wage on inside, [...] that no one can ever quite see, an invisible buttle rages on*" (Maya-Chipman, 2021) in a manner that evoked a feeling of seclusion from the outside world.

According to Scarry (1985), although hearing, touch, desire, and fear are directed towards other objects, "pain is an experience that exists in and of itself" (p. 162). The lack of objectivity and absence of referential meaning in this context significantly hinders the expression of sorrow through words, making pain "world destroying" (Scarry, 1985, p. 29).

However, pain has a profound impact on life. Scarry (1985) posits that the experience of pain is a prominent manifestation of confidence. Experiencing pain gives rise to the notion that we exist with the utmost certainty, as expressed by the Latin phrase "doleo, ergo sum", meaning "I hurt, therefore I am". The sensation of pain serves as a pivotal moment that disrupts the perceived stability of my ordinary, well-functioning state of being. Pain serves as a catalyst, a method of its own accord, both in a literal and metaphorical sense, to rouse us from a state of "metaphysical heedlessness" (Frings, 2012, p. 106).

The experience of pain must be conscious. Otherwise, it would not be pain at all, is the assertion of my existence in its ontological content. It is forced to participate in the objective life process into which it has been accepted (Buytendijk, 1962).

My chronic pain leads to an "ontological assault" that challenges various dimensions between myself and my physical embodiment. Pain causes my body to transition from being a subject of unconscious assumptions to becoming an object of conscious thought (Murphy, 1990/2001). According to Gadow (1980), the experience of illness results in a transformation of the "lived body", wherein the self and body are integrated and function as a single entity within the environment, into the "object body", where the body becomes a limiting factor and is perceived as separate from the self.

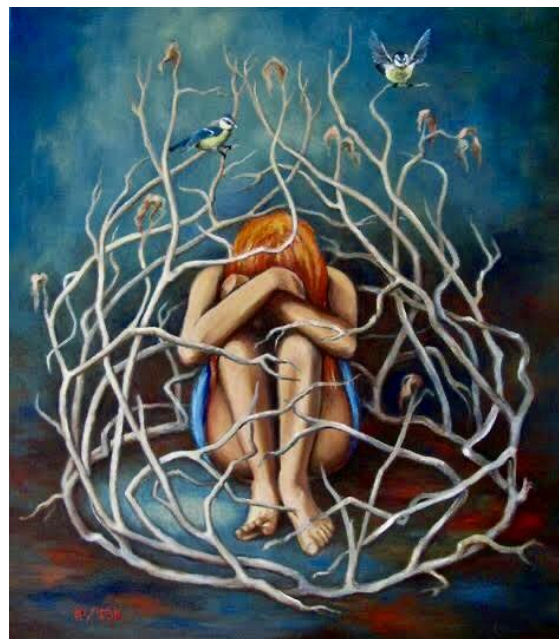


Figure D: Fibromyalgia: Dealing with a flare up
(Southerland House, 2023)

As each day dawns, the rising sun casts its golden rays upon a world that seems distant and foreign to me. I exist within the confines of a prison, an invisible cage built upon the foundation of relentless agony. Like a relentless attacker, chronic pain has laid siege to the essence of my being.

In this battle against pain, I teetered on the edge of despair. With each merciless blow, pain cunningly infiltrates the fortress of my selfhood, chipping away at the once impenetrable walls that held me steady in the world. It has become a malevolent force, a silent assailant that spares no mercy, relentlessly assaulting my sense of self and identity.

I used to define myself through my vitality, boundless energy, and unwavering resilience. Nevertheless, pain has usurped these defining attributes, casting shadows upon the canvas

of my existence. It has woven itself intricately into the tapestry of my daily life, leaving no room for the vibrant hues of hope and joy to flourish.

(Personal diary notes, 8th March, 2022)

My painfulness moves away from the world (see Figure C), a world "so shaped that it echoes every groan" (Woolf, 1926/2012, p. 11), and pain that is "chipping away at the once impenetrable walls that held me steady in the world" (Personal diary notes, 8th March 2023). Thus, health differs from illness because it is a movement away from shared being with the world and being with each other.

Virginia Woolf (1926/2012) points out in her essay "*On being ill*" two distinct phenomenological states: a state of health and illness. In good health, "the army of the upright marches to no battle" (p. 12), while in illness and pain, one may "float with sticks on the stream; heater-skelter with the dead leaves on the lawn, irresponsible and disinterested" (p. 12). In pain and illness, the self is losing its connection with the world because the body is an anchor through which we are connected.

However, Woolf subverts the "burden hood of the body" (Sarkar, 2019. p. 43) in pain into a location of novel viewpoints. In my experience, my body in illness can lead to new horizons which were hitherto unknown and unheard of, "where even the prints of birds are unknown" (Woolf, 1926/2012, p. 15), and that enables me to gain a fresh perspective and new knowledge by utilising pain itself as a method. In a similar spirit, Van der Berg (1966) writes on how physical illness and pain can allow for mental clarity that the healthy person may easily overlook, asserting how living without sickness deprives one of the motivations to live truly, just as life without mental challenges becomes meaningless. Ironically, she writes, "there is no better guarantee for a really unhealthy life than perfect health" (Van der Berg, 1966, p. 73).

Smoking Gun

My heuristic exploration culminated in a transformative process that yielded discoveries, ultimately leading me to a shift in my experience of pain towards healing that brought to light the monistic and interconnectedness nature of my pain experience. Like the process described by Sela-Smith (2001) in her thesis, wherein she fortuitously encountered random events that aided her in addressing her struggle with obesity, following her intuition and 'inner calling', my process led me to realise that I am afflicted with chronic mercury poisoning. This revelation offered a plausible explanation for the persistent symptoms of chronic pain that I experience.

Elusive Turns Concrete

In the year 2022, my body was a battlefield, where pain waged its relentless chaotic war (see Figure D). A myriad of symptoms, both physical and mental, ravaged my being. I was a vessel veiled in suffering, burdened by the weight of depression, anger, irritability, diagnosed ADD, memory lapses, 'brain fog', confusion, pain, and fatigue. I felt "like a rambling wanderer exploring the unknown, [entangled by] pain's confusing hide and seek game" (Personal dairy notes, 26th July 2020). Amid this suffering,

I became attuned through focusing meditation to peculiar sensations coursing through my body, like bolts of lightning crackling through a network of nerves electrifying my whole being. What began as a subtle hum gradually extended into a relentless chorus of tremors, vibrations and ringing in my ears (tinnitus), a chaotic experience lasting for weeks on end, engulfed by the sense of being lost.

(Personal dairy notes, 16th May 2022)

According to Sela-Smith (2002), when neither the researcher nor the field of study has any idea where they're going, 'what works' takes precedence, and anything that seems plausible can be tested; this leads to a process of trial and error that ultimately reveals what does work. Gendlin (1981) and Flanagan (1998) stress the importance of turning inward when unsure to overcome our ingrained patterns of thought and knowledge and arrive at new insights. Focusing (Gendlin, 1981) helped me reach out to the hazy horizon through which my embodied implicit consciousness emerged into conscious awareness, allowing me to attend to the 'felt sense' of feeling disoriented about my pain and where I was in the research process.

During this process, I became more conscious of my pain's physiological actuality rather than just its mental representation. It made me think of Broyard (1992), who stated that she attempted to create a story of her illness, a narrative, "much like a novelist does when he turns his anxiety into a story" (p. 20), to emotionally detoxify her cancer illness. The enigmatic nature surrounding chronic pain syndromes forced me to confront the inner challenge of processing the emotional aspects of my condition. It developed into a potent detoxification process that allowed me to release things I had previously been unable to and gave me a sense of control over my pain. It provided solace by giving meaning to a physiological process that remained hidden and unknown to medical research. It was only at the completion of my emotional journey of finding meaning to my pain when the somatic truth emerged.

My experience of electrical vibrations, tremors, and buzzing sensations was intermittently perceived whenever contact was made with mechanical objects or when I touched people around me. I felt conductive, exposed, vulnerable, and receptive to the world, perhaps in the Heideggerian sense of 'being-in-pain' as 'being-in-the-world' (Heidegger, 1962/2010) in its full painfulness, a discovery that I had come to realise whilst attempting to express the pain through drawing (Figure D).



Figure E: Electrified bionic

Pencil on paper. Scanned and digitally modified.

(Maya-Chipman, 2022)

During my visit to the auto-mechanic to find out if there was something wrong with the car, I was informed that the issue was attributed to electrostatic phenomena, specifically arising from the contact between my clothing and the vehicle. One evening, during focusing practice, I felt an intuitive need, an 'inner calling' to test the mechanic's hypothesis by approaching my vehicle without wearing any clothes. Upon contacting the vehicle, I experienced another instance of electrocution, which served to reinforce my perception that the sensation of electricity was distinctly palpable within my bodily tissues.

This experiment beckoned memories from the implicit depths of my mind. I was reminded through focusing and intuitive reverie of a time in 2012 when I wandered the streets of Bangkok. The chaotic entanglement of power pole cables had captivated my senses back then. Their omnipotent presence unleashed a cacophony of noise, reverberating throughout the cityscape.



Figure F: Powerlines in Bangkok

(Maya-Chipman, 2012)

As I observed the image of entangled chaotic power poles, a sense of their inherent structure seemed to permeate my existence, illuminating bodily unconscious processes that had not been available earlier. The sensation of every pulsation and discomfort within my body became deeply interconnected with the audible vibration generated by the flow of electrical current along those transmission cables. I began associating my nervous system as an intricate network of metallic conduits, wherein even the slightest disruption can propagate excruciating anguish throughout my entire being.

An intriguing association emerged between my memory of power poles in Bangkok, my drawing (Figure D), and my diary notes that revealed the intricate network of nerves within my being. It became a visual and poetic expedition that helped me better connect my affective states with my conceptual understanding of pain (York and Kasl, 2006, p. 53) and to arrive at the intuitive thought that I had metals in my body. The association with metals made me wonder whether I had heavy metal poisoning, leading to a series of medical tests that affirmed my felt sense of being afflicted by heavy metals, specifically mercury.

Mercury Poisoning

Mercury's hazardous nature disrupts multiple physiological and mental processes, (Clarkson, 1972; Cutler, 1999, 2004; Siblingud, 1989), and prolonged mercury exposure over a gradual and inconspicuous timeframe can lead to damage that becomes apparent only after a significant duration, with no traceable origin (Hanson, 1983; Cutler, 1999, 2004).

In addition to lacking awareness of the hazardous consequences of prolonged exposure to low levels of mercury, medical practitioners (and psychotherapists) are uninformed about the potential latency period of mercury poisoning symptoms, which could extend for several years or even decades following the onset of poisoning (Hammond, 2014). The primary challenge I had encountered with chronic undiagnosed pain and other syndromes was identifying the underlying factors contributing to my ailments, leading to seek psychotherapy by believing that it's all 'in my head' after receiving somatoform labels from physicians and other specialists. The experience of being labeled as such made me feel transparent and misunderstood.

When I first read Andy Cutler's (1999) book *'Amalgam Illness: Diagnosis and Treatment'* I started to tear up, finally feeling affirmed and mirrored. For me, it was the cry of illumination, recognition, and hope. For the first time, I felt that my experience became visible rather than transparent. I highlighted so many sentences in the book and reached out to my family to let them know that I had finally discovered what was going wrong with me.

Dr Cutler was conducting a form of heuristic search as he was also trying to find a solution to his health issues by self-searching the root cause of his illness from a biological and chemical orientation. Using his background in chemistry, he developed a method of chelating heavy metals from the body, which he used first on himself before assisting many with this process, a personal discovery that advocates Rogers' (1956/1996) assertion regarding how the most personal is also the most universal. In light of this, heuristic research can be the most impactful form of study in that one's findings can have a significant influence on the lives of others.

This study made me aware of how mercury has been the causal factor of chronic pain in my life. My chronic exposure to mercury in 'smoking' ceremonies as a child, amalgam fillings (Siblerud, 1989; Cutler, 1999), and ongoing exposure to these substances during my lifespan (Taber & Hurley, 2008) has led to a 'butterfly effect' that caused ripples of chaos in my body, leading to debilitating physical and mental pain as time progresses, replicating as 'fractals' throughout my body. It is in mercury and potentially other heavy metals where I believe I have found the physical cause of my ontological assault and chaotic lived experience of pain where all converged into a singular narrative of suffering and transformation.

Research Implications

Limitations and Critique

The present inquiry is predominantly limited by the researcher's exclusive participation as a solitary subject. The imposition of this limitation was crucial because of the reflective nature of the investigation, which intrinsically restricts the range of perspectives on the phenomenon of concealing and exposing chronic pain. The narrative provided in this study is encapsulated by subjectivity and is limited to the researcher's perspective and personal encounters.

Consequently, the outcomes of this research cannot be broadly generalised, externally verified, or reproduced. Nevertheless, as explicated in the methodology section, this distinctive viewpoint presents an innovative methodology for comprehending the phenomena and furnishes valuable perspectives for subsequent examination, thus establishing the foundation for future scholarly exploration.

Moustakas (1990) posits that an unrestrained or unbounded trajectory ideally characterises heuristic inquiry. In a similar vein, Sela-Smith (2002) states that heuristic inquiry ought not to be constrained, arguing that various constraints, such as temporal limitations, word count restrictions, and personal responsibilities, may impede the researcher's complete immersion in the phenomena under investigation.

Nevertheless, this study endeavour was done inside a clearly defined and constrained framework, as it was carried out by a researcher who embodies a particular socio-cultural standpoint. The limited scope of the single-participant approach imposes further limitations on the applicability of the results. Moreover, the study was bound by limitations imposed by the scholarly inquiry, such as time restraints and the university's stipulations for the formal dissertation's structure and word limit.

The examination of Moustakas' (1990) assertion regarding the heuristic process, which posits that it necessitates a re-evaluation of one's own self, has proven beneficial to my understanding. The suggestion to completely embrace the sense of pain during moments of mental distraction suggests the recognition that some deviations from focused attention may be unavoidable. It was necessary to recognise that I had deviated from the intended course and neglected to perceive

incoming stimuli. In my view, the researcher's commitment to the pursuit of self-knowledge, devoid of any disingenuous pretence of transparency, enhances the validity of this study.

Recognising the inescapability of my errors does not provide me with immunity from bias, but it does assist me in refraining from the egotistical inclination to conceal them, a behaviour that would inevitably distort my research outcomes. In a paradoxical manner, Sultan (2020) asserts that self-reflective research aims to comprehensively and deeply understand personal experiences. Moreover, Etherington (2004) emphasises the significance of honesty in recognising the inherent incompleteness of reflective research.

Contribution to the Discipline of Psychotherapy

Heuristic Contribution

Heuristic inquiry is a highly effective method for acquiring valuable discoveries of the cognitive and emotional dimensions of the human psyche. Nevertheless, the importance of heuristic research goes beyond mere investigation of the lived experience as it has been applied in this research. Utilising heuristic processes has significant potential in facilitating a journey of finding one's root cause of their ailment. A heuristic approach allows psychotherapists and scholars to effectively navigate the complex domain of constructing meaning, thereby facilitating a more profound understanding of an individual's subjective truth. This understanding aids in advancing comprehensive clinical and theoretical frameworks that adeptly encompass the intricacies of the human experience.

Moreover, the pragmatic implications of heuristic inquiry transcend the mere construction of meaning and the investigation of personal encounters, alluding to somatic/physiological truth. Through the application of heuristic methodology and methods with its delicate sensitivity to the inner life of the suffering other, psychotherapists possess a distinct set of tools that enable them to arrive at the fundamental origins of illness and psychological distress.

Acknowledging the inherent interconnectedness between physical ailments and psychological factors, incorporating heuristic research as psychotherapy can provide a comprehensive understanding of holistic health that holds a person-centred quality, ultimately resulting in patient outcomes and improved quality of life (Moustakas, 1990; O'Hara, 1986; Stevens, 2006).

A heuristic approach to psychotherapy in understanding pain that is based on intuition and personal experience can also liberate individuals from the restrictive confines of excessive rationalisation. This approach enables clients to explore the profound depths of their anguish, wholeheartedly accept its inherent disorder, and engage in a harmonious interaction with its obscure aspects. By embarking on this introspective and investigative expedition, psychotherapists can uncover concealed patterns, discover insightful associations, and unearth the covert mechanisms that facilitate the process of restoration towards healing.

Embracing 'Not-Knowing'

It's not that I do not see the value in diagnosis or in third-person descriptions of conditions such as Fibromyalgia and chronic fatigue syndrome, but rather that I object to the medicalisation of these conditions. One of my main worries is the tendency of medical terminology to obscure perspectives that differ from its own. When we assume that clients' experiences are already 'known' in the sense that they fit a standard diagnostic description, we are less likely to approach them with a curious, 'not-knowing' stance from a place of 'not-knowing' about the meanings of their experiences. One can relate their pain experience "as novel, unfixed in meaning, and, thus, accessible to previously unexamined" (Spinelli, 2016, p. 115) when the therapist and client approach it with an attitude of "abundant generous curiosity" (Anderson & Goolishian, 1922, p. 29). However, the awareness I hope to ignite for the psychotherapist is not to increase the perception of mystery in the working but rather to make it possible to know and to not know in more creative ways, which is especially challenging when working with pain patients who look for a solution, a fix, and a clear answer.

Nonlinear and Chaotic Contribution

Working with clients' experiences of chronic pain syndromes from a nonlinear and chaotic perspective can benefit psychotherapeutic practise. Within psychotherapy, adopting a perspective grounded in the ideas of chaos theory has the potential to be more effective than linear techniques and their limited focus on symptomology [see Abrams (2011), Galatzer-Levy (2017), and Guastello (2011) for a discussion of these topics].

This alternative approach allows for a more in-depth understanding of the intricate and diverse elements that underpin chronic pain and its relationship to what is considered to belong in the psychotherapeutic space, such as depression, anxiety, ADHD, and emotional pain, not as separate presentations but rather as a "monistic integrative expression of a psychosomatic whole" (Teitelbaum, 1964, p. 17). Furthermore, this approach can help clinicians deconstruct the Cartesian dualistic-reductionistic view of the body–mind relationship.

Nonlinear dynamics and chaos theory acknowledge the inherent unpredictability and interconnectedness of complex systems, providing a rich framework for studying pain aetiology and client psychological symptoms. The linear approach struggles to understand the complexities of human suffering because of its tendency to order. Therefore, pain, unlike evidence-based approaches and manualised treatment plans, requires a more intricate and exploratory approach to understand and overcome its effects.

The path to wellness in the psychotherapeutic encounter, like my experience of chaos and wilderness in finding healing for my physical pain, is not linear; rather, it takes the form of a spiral, a rhythmic movement, an expedition through the untamed terrain of existence. As a result, encouraging courage, creativity, and compassion in the client's process is essential, allowing the client to let go of rigid frameworks that limit the client's understanding and instead embrace the inherent disorder that mirrors the authentic essence of life as such.

Developing a 'Third Eye' for the 'Hazardous Third'

After exhaustive medical workup has 'ruled out' organic causes, psychotherapists are often contacted to work with clients experiencing various indistinct signs and symptoms. Clients in this situation frequently receive a diagnosis of a psychiatric disorder and a psychosomatic label implying that their symptoms are all 'in their heads'. Psychotherapists who deal with psychosomatic symptoms and physical ailments should, therefore, have some understanding of the biological underpinnings of the conditions they treat. This investigation revealed that environmental neurotoxins such as heavy metals—most notably mercury—may be contributing to clients' subjective experiences of emotional and physical pain.

Trace metal environmental and occupational exposures can explain a wide range of conditions whose causes are unknown (Albers et al., 1988). Clients with chronic exposure symptoms (that can be attributed to chronic pain syndromes and the like) are more common on the psychotherapeutic couch. Symptoms may develop gradually over time and can take up to 30 years to appear (Ulmer, 1977). As a result, many clients do not associate their illness with their previous exposure to mercury, attributing them to their psychology. One study (Albers et al., 1988) looked at people exposed to elemental mercury at work over 20 to 35 years. The study's results implied that normal neuronal decline could reveal early-stage symptoms related to previous exposure. Therefore, mercury's neuro-psychotherapeutic effects on clients make it a relevant topic for psychotherapists, and it is crucial that psychotherapists develop a 'third eye' and take environmental exposure history from their clients in their formulation.

Chapter Five - Creative Synthesis

By formulating the discoveries and discussion chapter, I became aware of the inherent challenges accompanying its completion. The perception of this phase as a mere 'culmination' rather than an actual arrival at the coveted state of recovery presents a perplexing roadblock to my progress. Nevertheless, I am steadily forging ahead, inching closer to that elusive point.

Lately, I have been struck by an emotionally stimulating realisation to confront the essence of pain itself through deliberate and candid expression. This epiphany signifies a notable shift in my relationship with the phenomenon of pain—no longer merely perceiving it as a lens through which I comprehend the intricacies of the world and my existence, but rather as an entity I possess. A newfound space, "a breathing space" (Brown, 2012, p. 147), has been established through my discovery between the self and the experience of pain, allowing for more lucid navigation towards healing and restoration. The following creative synthesis as a personal letter to pain emerged as a tool to articulate my confrontation with pain, encapsulating the transformative odyssey of self-discovery and the envisioned trajectory towards holistic recuperation.

Epilogue

Hello, chronic pain, my constant companion of suffering. How have you yearned for my unyielding presence? Have you envied the fleeting moments when I dared to dream of relief? We were once inseparable, intertwined in a toxic waltz, suffocated by the symphony of anguish. You engulfed, defined, and held me hostage within my skin. Desperate for any semblance of sensation, I had no choice but to amplify your existence, to deepen our bond.

But alas, even the firmest chains weaken with time. Whispers of change heralded promises of a different path, shimmering with rays of hope after the darkest of storms. They presented me with an opportunity for liberation and sever the shackles that anchored me to you. Yet, I know you will linger, casting shadows on the brightest days.

Occasionally, you will sow seeds of doubt and despair within the depths of my being, an insidious combination that weighs upon me like an anchor in my soul. You will cloak me in the shroud of solitude, extinguishing any flicker of connection I yearn for. Nevertheless, I am confident that, as surely as the sun rises and sets, your visits will diminish until they fade away completely.

Tomorrow unravels a new chapter, a fresh beginning in the tale of my endurance. With health, endurance, love, joy, happiness, and fulfilment, those long-displaced companions will step forward and reclaim their rightful place. They will blossom and flourish until they overthrow your reign entirely, eradicating any remnants of your agonizing grip.

So, dear chronic pain, I bid you farewell, for I am destined to rise once more on the wings of resilience, stepping away from the realm of darkness that was once our domain.

I now have hope, knowing this dissertation is healing me.

References

- Abraham, F. D. (1989). Toward a dynamical theory of the Psyche archetypal patterns of self-reflection and self-organization. *Psychological Perspectives*, 20(1), 156-167. <https://doi.org/10.1080/00332928908407757>
- Abrams, S. (2011). Steps and lines. *The Psychoanalytic Study of the Child*, 65(1), 3-4. <https://doi.org/10.1080/00797308.2011.11800829>
- Adams, H. (1999). *The education of Henry Adams: An autobiography*. Modern Library. (Original work published 1997)
- Albers, J. W., Kallenbach, L. R., Fine, L. J., Langolf, G. D., Wolfe, R. A., Donofrio, P. D., Alessi, A. G., Stolp-Smith, K. A., & Bromberg, M. B. (1988). Neurological abnormalities associated with remote occupational elemental mercury exposure. *Annals of Neurology*, 24(5), 651-659. <https://doi.org/10.1002/ana.410240510>
- Anderson, H., & Goolishian, H. (1992). The client is the expert: A not-knowing approach to therapy. In S. McNamee & K. J. Gergen (Eds.), *Therapy as social construction* (pp. 25–39). Sage.
- Bastick, T. (1982). *Intuition: How we think and act*. John Wiley & Sons.
- Boulton, T. (2018). Nothing and everything: Fibromyalgia as a diagnosis of exclusion and inclusion. *Qualitative Health Research*, 29(6), 809-819. <https://doi.org/10.1177/1049732318804509>
- Briggs, J., & Peat, F. D. (1989). *Turbulent mirror: An illustrated guide to chaos theory and the science of wholeness*. HarperCollins Publishers.
- Broom, B. (1997). *Somatic illness and the patient's other story: A practical integrative mind/body approach to disease for doctors and psychotherapists*. Free Assn Books.
- Brown, J. (2012). *The art and spirit of leadership*. Trafford Publishing.
- Buytendijk, F. J. (1962). *Pain: Its Mode and Function* (E. O'Shiel, Trans.). The University of Chicago Press.
- Broyard, A. (1992). *Intoxicated by my illness: And other writings on life and death*. Fawcett.

- Carel, H. (2016). *Illness: The cry of the flesh*. Routledge.
- Clark, J. B. (1987). *Duet: The experience of the psychologically androgynous male*. The Union for Experimenting Colleges and Universities.
- Clarkson, T. W. (1972). The pharmacology of mercury compounds. *Annual Review of Pharmacology*, 12(1), 375-406. <https://doi.org/10.1146/annurev.pa.12.040172.002111>
- Cornell, A. W., & McGavin, B. (2002). *The focusing student's and companion's manual*. Focusing Resources.
- Crawford, C., Lee, C., & Bingham, J. (2014). Sensory art therapies for the self-management of chronic pain symptoms. *Pain Medicine*, 15(S1), S66-S75. <https://doi.org/10.1111/pme.12409>
- Croft, P., Dunn, K. M., & Von Korff, M. (2007). Chronic pain syndromes: You can't have one without another. *Pain*, 131(3), 237-238. <https://doi.org/10.1016/j.pain.2007.07.013>
- Crotty, M. (1998). *The foundations of social research: Meaning and perspective in the research process*. St Leonards, Australia: Allen & Unwin.
- Cutler, A. H. (1999). *Amalgam illness: Diagnosis and treatment*. Andrew Cutler.
- Cutler, A. H. (2004). *Hair test interpretation: Finding hidden Toxicities*. Andrew Cutler.
- Damasio, A. R. (1999). *The feeling of what happens: Body and emotion in the making of consciousness*. Harvest Book Harcourt.
- Dekkers, W. (2017). Pain as a subjective and objective phenomenon. *Handbook of the Philosophy of Medicine*, 169-187. https://doi.org/10.1007/978-94-017-8688-1_8
- DeSilver, A. F. (2017). *Writing as a path to awakening: A year to becoming an excellent writer and living an awakened life*. Sounds True.
- Dewey, J. (1933). *How we think: A restatement of the relation of reflective thinking to the educative process*. Houghton Mifflin.
- Douglass, B. G., & Moustakas, C. (1985). Heuristic inquiry. *Journal of Humanistic Psychology*, 25(3), 39-55. <https://doi.org/10.1177/0022167885253004>

- Djuraskovic, I., & Arthur, N. (2010). Heuristic inquiry: A personal journey of acculturation and identity reconstruction. *The Qualitative Report*, 15(6), 1569-1593. <https://doi.org/10.46743/2160-3715/2010.1361>
- Edwards, R. R., Dworkin, R. H., Sullivan, M. D., Turk, D. C., & Wasan, A. D. (2016). The role of psychosocial processes in the development and maintenance of chronic pain. *The Journal of Pain*, 17(9), T70-T92. <https://doi.org/10.1016/j.jpain.2016.01.001>
- Eisner, E. W. (1995). What artistically crafted research can help us understand about schools. *Educational Theory*, 45(1), 1-6. <https://doi.org/10.1111/j.1741-5446.1995.00001.x>
- Etherington, K. (2004). Heuristic research as a vehicle for personal and professional development. *Counselling and Psychotherapy Research*, 4(2), 48–63. <https://doi.org/10.1080/14733140412331383973>
- Faulkner, S. (2017). Poetic inquiry: Poetry as/in/for social research. In P. Leavy (Ed.), *Handbook of arts-based research* (pp. 208-230). Guilford Publications.
- Feldman, D. P. (2019). *Chaos and dynamical systems*. Princeton University Press.
- Flanagan, K. (1998). *Everyday genius: Focusing on your emotional intelligence*. Marino Press.
- Francis, D. M. (2018). *The Psychomatrix: A deeper understanding of our relationship with pain*. Routledge.
- Freeman M. (2016). *Modes of thinking for qualitative data analysis*. Taylor & Francis.
- Frings, M. (2012). *Max Scheler (1874–1928) Centennial essays: Centennial essays*. Springer Science & Business Media.
- Gadow, S. (1980). Body and self: A dialectic. *Journal of Medicine and Philosophy*, 5(3), 172-185. <https://doi.org/10.1093/jmp/5.3.172>
- Galatzer-Levy, R. M. (2017). *Nonlinear psychoanalysis: Notes from forty years of chaos and complexity theory*. Taylor & Francis.
- Gendlin, E. T. (1981). *Focusing* (2nd ed.). Bantam. (Original work published 1978)
- Gleick, J. (1988). *Chaos: Making a new science*. Penguin Group

- Grbich, C. (1999). *Qualitative research in health*. Allen & Unwin.
- Grünbein, D. (2011). *The vocation of poetry*. Upper West Side Philosophers.
- Guba, E., & Lincoln, Y. S. (1989). *Fourth generation evaluation*. Sage Publications.
- Guastello, S. J., Koopmans, M., & Pincus, D. (2011). *Chaos and complexity in psychology: The theory of nonlinear dynamical systems*. Cambridge University Press.
- Harvey, A. M. (1995). Classification of chronic pain—Descriptions of chronic pain syndromes and definitions of pain terms. *The Clinical Journal of Pain*, 11(2), 163. <https://doi.org/10.1097/00002508-199506000-00024>
- Hammond, D. J. (2014). *Mercury poisoning: The undiagnosed epidemic*. CreateSpace.
- Hanson, M. (1983). Amalgam — Hazards in Your Teeth. *Journal of Orthomolecular Psychiatry*, 12(3), 194-201.
- Heidegger, M. (2010). *Being and time*. SUNY Press. (Original work published 1962)
- Hiles, B. (2002). Narrative and heuristic approaches to transpersonal research and practice. Paper presented to CCPE, London. (2022, October 15). <http://psy.dmu.ac.uk/drhiles/N&Hpaper.htm>
- IASP. (2023, January 8). Preventing pain: An introduction. International Association for the Study of Pain (IASP). <https://www.iasp-pain.org/resources/fact-sheets/preventing-pain-an-introduction>
- Ings, W. J. (2013). Narcissus and the muse: Supervisory implications of autobiographical, practice-led PhD design theses. *Qualitative Research*, 14(6), 675–693. <https://doi.org/10.1177/1468794113488128>
- Jung, C. G., & Aniela, J. (2015). *Letters of C. G. Jung* (F. C. Hull, Trans.). G. Adler (Ed.). Routledge. (Original work published 1976)
- Kenny, G. (2012). An introduction to Moustakas’s heuristic method. *Nurse Researcher*, 19(3), 6-11. <https://doi.org/10.7748/nr2012.04.19.3.6.c9052>

- Leggo, C. (2008). The ecology of personal and professional experience: A poet's view. In M. Cahnmann-Taylor & R. Siegesmund (Eds.), *Arts-based research in education: Foundations for practice* (pp. 87–97). New York: Routledge.
- Leggo, C. (2008a). Astonishing silence: Knowing in poetry. In G. J. Knowles & A. L. Cole (Eds.), *Handbook of the arts in qualitative research: Perspectives, methodologies, examples, and issues* (pp. 165-174). SAGE.
- Layek, G. (2015). *An introduction to dynamical systems and chaos*. Springer.
- Locker, D. (1981). *Symptoms and illness: The cognitive organization of disorder*. Routledge.
- Lorenz, E. (1995). *The Essence of Chaos*. University of Washington Press.
- Love-Jones, S. J. (2019). Pain as a subjective, multidimensional experience. *Pain*, 141-144. https://doi.org/10.1007/978-3-319-99124-5_35
- Maizels, N. (1996). Working through, or beyond the depressive position? *Journal of Melanie Klein and Object Relations*, 143–175. https://www.researchgate.net/publication/239-569074_Working_Through_Or_Beyond_The_Depressive_Position
- Matousek, M. (2017). *Writing to awaken: A journey of truth, transformation, and self-discovery*. New Harbinger Publications.
- Melzack, R., & Wall, P. D. (1965). Pain Mechanisms: A New Theory. *Science*, 150(3699), 971–979. <http://www.jstor.org/stable/1717891>
- Melzack, R., & Wall, P. D. (1982). *The challenge of pain*. Penguin Books.
- Melzack, R. (2001). Pain and the Neuromatrix in the brain. *Journal of Dental Education*, 65(12), 1378-1382. <https://doi.org/10.1002/j.0022-0337.2001.65.12.tb03497.x>
- McEntyre, M. C. (2012). *Patient poets: Illness from inside out*. University of California.
- Miller, L. E., Eldredge, S. A., & Dalton, E. D. (2017). "Pain Is What the Patient Says It Is": Nurse-Patient Communication, Information Seeking, and Pain Management. *The American journal of hospice & palliative care*, 34(10), 966–976. <https://doi.org/10.1177/1049909116661815>

- Mitchell, A. J. (2007). Entering the world of pain. *Heidegger Circle Proceedings*, 41, 90-102. <https://doi.org/10.5840/heideggercircle20074112>
- Mortensen, J. K. (2014). *Sticky monsters*. Square Peg.
- Moustakas, C. (1990). *Heuristic research: Design, methodology, and applications*. SAGE Publications.
- Murphy, R. F. (2001). *Body silent: The different world of the disabled*. W. W. Norton & Company.
- Nabokov, V. (2012). *Pnin*. Penguin UK. (Original work published 1990)
- Nisbett, R. E., & Wilson, T. D. (1977). Telling more than we can know: Verbal reports on mental processes. *Psychological Review*, 84(3), 231–259. <https://doi.org/10.1037/0033-295X.84.3.231>
- O'Hara, M. (1986). Heuristic inquiry as psychotherapy: The client-centered approach. *Person-Centered Review*, 1(2), 172–184.
- Ong, W. J. (1982). *Orality and literacy: The Technologizing of the word*. Methuen Publishing.
- Ozertugrul, E. (2015). Heuristic self-search inquiry into one experience of obsessive–compulsive disorder. *Journal of Humanistic Psychology*, 57(3), 215-236. <https://doi.org/10.1177/0022167815592503>
- Pellegrino, E. D. (1987). Toward a reconstruction of medical morality. *The Journal of Medical Humanities and Bioethics*, 8(1), 7-18. <https://doi.org/10.1007/bf01119343>
- Pennebaker, J. (2012). *The psychology of physical symptoms*. Springer Science & Business Media.
- Polanyi, M. (2009). *The tacit dimension*. University of Chicago Press. (Original work published 1966)
- Polanyi, M. (2015). *Personal knowledge: Towards a post-critical philosophy*. University of Chicago Press. (Original work published 1958)
- Polanyi, M., & Prosch, H. (1975). *Meaning*. The University of Chicago.
- Pólya, G. (2014). *How to solve it: A new aspect of mathematical method*. Princeton University Press.

- Reason, P., & Rowan, J. (1981). *Human inquiry: A sourcebook of new paradigm research*. John Wiley & Sons.
- Reichhardt, C., & Reichhardt, C. J. (2017). Disorder in the wild. *Nature Physics*, 13, 10-11. <https://doi.org/10.1038/nphys3929>
- Rey, R. (1995). *The history of pain* (L. E. Wallace, J. A. Cadden, & S. W. Cadden, Trans.). Harvard University Press.
- Rilke, R. M. (2023). *Letters to a young poet: The Norton centenary edition*. W. W. Norton & Company.
- Roethke, T. (1975). *The collected poems of Theodore Roethke*: Anchor Books.
- Rogers, C. R. (1965). Some thoughts regarding the current philosophy of the behavioral sciences. *Journal of Humanistic Psychology*, 5(2), 182-194. <https://doi.org/10.1177/002216786500500207>
- Rogers, C. R. (1982). Now I am only interested in learning. In R. Gross (Ed.), *Invitation to lifelong learning* (pp. 222-225). Follett.
- Rogers, C. R. (1996). *On becoming a person: A therapist's view of psychotherapy*. Peter Smith Pub. (Original work published 1956)
- Rose, G. J. (1993). Affect: A biological basis of art. *Journal of the American Academy of Psychoanalysis*, 21(4), 501-512. <https://doi.org/10.1521/jaap.1.1993.21.4.501>
- Rose, T., & Loewenthal, D. (2006). Heuristic research. In D. Loewenthal & D. Winter (Eds.), *What is psychotherapeutic research?* (pp. 133–143). Karnac Books.
- Safan-Gerard, D. (2018). *Chaos and control: A psychoanalytic perspective on unfolding creative minds*. Routledge.
- Sarkar, J. (2019). *Illness as method: Beckett, Kafka, Mann, Woolf and Eliot*. Vernon Press.
- Southerland House. (2023). *Fibromyalgia: Dealing with a flare up* [Painting]. Southerland House. <https://sutherlandhouse.life/fibromyalgia-dealing-with-a-flare-up/>
- Scarry, E. (1985). *The body in pain: The making and unmaking of the world*. Oxford University Press, USA. H J Kramer.

- Sela-Smith, S. (2001). *Heuristic self-search inquiry: Clarification of Moustakas' heuristic research*. Saybrook University ProQuest Dissertations Publishing. <https://www.proquest.com/docview/304764645?pq-origsite=gscholar&fromopenview=true>
- Sela-Smith, S. (2002). Heuristic research: A review and critique of Moustakas's method. *Journal of Humanistic Psychology*, 42(3), 53-53. <https://doi.org/10.1177/002216702128803116>
- Sherwood, V. (2019). *Haunting Minnie Dean: A Heuristic Inquiry into Baby Farming, Psychological Infanticide and Closed Stranger Adoption*. Unpublished doctoral thesis. Auckland University of Technology, Auckland, New Zealand.
- Shirley, D. A., & Langan-Fox, J. (1996). Intuition: A review of the literature. *Psychological Reports*, 79(2), 563-584. <https://doi.org/10.2466/pr0.1996.79.2.563>
- Siblerud, R. L. (1989). The relationship between mercury from dental amalgam and mental health. *American Journal of Psychotherapy*, 43(4), 575-587. <https://doi.org/10.1176/appi.psychotherapy.1989.43.4.575>
- Solomon, M., Simon, J. R., & Kincaid, H. (2016). *The Routledge companion to philosophy of medicine*. Routledge.
- Spinelli, E. (2016). *Tales of UN-knowing: Therapeutic encounters from an existential perspective*. Pccs Books.
- Stevens. (2006). A heuristic-dialogical model for reflective psychotherapy practice. In D. Loewenthal & D. A. Winter (Eds.), *What is psychotherapeutic research?* (pp. 171-181). Karnac Books.
- Sturgeon, J. (2014). Psychological therapies for the management of chronic pain. *Psychology Research and Behavior Management*, 115. <https://doi.org/10.2147/prbm.s44762>
- Sultan, N. (2019). *Heuristic inquiry: Researching human experience holistically*. SAGE Publications.
- Sultan, N. (2020). Heuristic inquiry: Bridging humanistic research and counseling practice. *The Journal of Humanistic Counseling*, 59(3), 158-172. <https://doi.org/10.1002/johc.12142>
- Sternberg, R. J., & Horvath, J. A. (1999). *Tacit knowledge in professional practice: Researcher and practitioner perspectives*. Psychology Press.

- Szasz, T. (1957). *Pain and pleasure: A study of bodily feelings*. Basic Books.
- Taber, K. H., & Hurley, R. A. (2008). Mercury exposure: Effects across the lifespan. *The Journal of Neuropsychiatry and Clinical Neurosciences*, 20(4), iv-389. <https://doi.org/10.1176/jnp.2008.20.4.iv>
- Teitelbaum, H. A. (1964). *Psychosomatic neurology: A consideration of homeostatic and Neurologic integrative processes in personality dynamics and in psychosomatic disorders with clinical Neurologic manifestations*. Grune & Stratton.
- Tenni, C., Smith, A., & Boucher, C. (2003). The researcher as autobiographer: Analysing data written about oneself. *The Qualitative Report*. <https://doi.org/10.46743/2160-3715/2003.1895>
- Thernstrom, M. (2010). *The pain chronicles: Cures, myths, mysteries, prayers, diaries, brain scans, healing, and the science of suffering*. Picador.
- Tsonis, A. (1992). *Chaos: From theory to applications*. Springer Science & Business Media.
- Tudor, K. (2018). The fight for health: An heuristic enquiry (2010). In *Conscience and critic: The selected works of Keith tudor* (pp. 143-168). Routledge. <https://ebookcentral.proquest.com/lib/aut/reader.action?docID=4741290&pg=1>
- Ulmer, D. D. (1977). Trace elements. *The New England Journal of Medicine*, 297(6), 318-321. <https://www-nejm-org.ezproxy.aut.ac.nz/doi/pdf/10.1056/NEJM197708112970607>
- Vaughan, F. E. (1979). *Awakening intuition*. Anchor.
- Weber, S. (2008). Visual images in research. In J. G. Knowles & A. L. Cole (Eds.), *Handbook of the arts in qualitative research: Perspectives, methodologies, examples, and issues* (pp. 41-54). SAGE Publications.
- West, W., W, S., Milner, P., & Palmer, S. (2001). Critical subjectivity: use of self in counselling research. In *The BACP Counselling Reader* (pp. 60-74). Sage & BACP.
- Westgaard R. H. (1999). Effects of physical and mental stressors on muscle pain. *Scandinavian journal of work, environment & health*, 25 Suppl 4, 19–24.

- Wiener, C. L. (1975). The burden of rheumatoid arthritis: Tolerating the uncertainty. *Social Science & Medicine (1967)*, 9(2), 97-104. [https://doi-org.ezproxy.aut.ac.nz/10.1016/0037-7856\(75\)90101-8](https://doi-org.ezproxy.aut.ac.nz/10.1016/0037-7856(75)90101-8)
- Williams, D. A., & Clauw, D. J. (2009). Understanding Fibromyalgia: Lessons from the broader pain research community. *The Journal of Pain*, 10(8), 777-791. <https://doi.org/10.1016/j.jpain.2009.06.001>
- Williams, G. H. (1987). Disablement and the social context of daily activity. *International Disability Studies*, 9(3), 97-102. <https://doi.org/10.3109/03790798709166331>
- Williams, W. C. (1994). *Asphodel, that Greeny flower & other love poems*. New Directions Publishing. (Original work published 1954)
- Whyte, D. (2020). *David Whyte essentials*. Many Rivers Press.
- Woolf, V. (2012). *On being ill* (10th ed.). Wesleyan University Press. (Original work published 1926)
- Van Der Berg, J. H. (1966). *Psychology of the sick bed*. Unknown.
- Voegelin, E. (2000). *The collected works of Eric Voegelin: Published essays*. University of Missouri Press.
- Yorks, L., & Kasl, E. (2006). I know more than I can say. *Journal of Transformative Education*, 4(1), 43-64. <https://doi.org/10.1177/1541344605283151>