

# Tulpamancy: Transcending the Assumption of Singularity in the Human Mind

Jacob J. Isler

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University of Texas at Austin*

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## A. Abstract

Current models of consciousness, the human experience, and mental health rely heavily on the assumption that only one agent of self exists in every one brain. In the status quo, deviations from this model of singularity in mind are heavily stigmatized and often considered disordered. This paper opposes this bias by analyzing one form of such plurality of consciousness: tulpamancy.

Tulpamancy is a meditative technique used to create and interact with tulpas, which are experienced as being fully autonomous and conscious entities within the mind. This paper builds on research defining the relationship between tulpamancy and mental health by analyzing the results of a series of surveys. It investigates two associations found in the population of tulpamancy practitioners: first, the prevalence of mental illness, which exists in over 50% of the population. Second, reports of improvements in mental health and cognition, especially amongst those diagnosed with a mental or neurodevelopmental disorder.

This paper explores several hypotheses that may explain these associations. Analysis of survey data reinforces the correlation between tulpamancy and improvements in perceived mental health and concludes that there is likely no causal relation between tulpamancy and the development of new psychopathologies. Assumptions of the connection between individual identity and biological mind may be flawed. Rather, there may be several models of this relationship that are optimal for functionality, happiness, and mental health.

## B. Introduction

In medicine, society, and our personal biases, there exist certain presumptions about what is optimal for health, functionality, and happiness. One such supposition is the requirement that, for every one brain and body, there ought to be one consciousness. Consciousness is used in this paper to describe the self-reflecting cognition that forms an identity. The words “plurality”

and “multiplicity” are used to denote the phenomenon of multiple consciousnesses coexisting in one mind.

Nowhere are assumptions of the desirability of oneness more apparent than in the scientific literature surrounding Dissociative Identity Disorder, one such incarnation of plurality. Dissociative Identity Disorder (DID) is a condition characterized by

derealization, amnesia, and the trauma that often causes its development. However, rather than citing these dysfunctions, psychologists frequently emphasize the plurality as being what makes DID a disorder. *Psychology Today's* most recent publication that introduces the disorder implies that all experiences of multiplicity are pathological. "Dissociative Identity Disorder (DID) is a severe condition in which two or more distinct identities, or personality states, are present in—and alternately take control of—an individual" (Psychology Today, 2014). Here, DID is not branded by its negative symptoms like most disorders are. Rather, this definition suggests that the problem starts and ends with the plurality.

In clinical psychology, a behavior may be considered disordered when it inhibits functionality or health. The violation of a norm, on the other hand, ought not be the basis for a diagnosis. In the medical literature, DID seems to be an exception to this rule. Until the DSM-V, there was no requirement of distress or impaired functioning in the diagnosis of DID.<sup>1</sup> "Unlike other

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<sup>1</sup> The DSM-IV and DSM-IV-TR do not list distress or dysfunction as diagnostic criteria for Dissociative Identity Disorder.

"Diagnostic Criteria for Dissociative Identity Disorder:

A. The presence of two or more distinct identities or personality states (each with its own relatively enduring pattern of perceiving, relating to, and thinking about the environment and self).

B. At least two of these identities or personality states recurrently take control of the person's behavior.

C. Inability to recall important personal information that is too extensive to be explained by ordinary forgetfulness.

disorders, dissociative identity is deemed a disorder and thereby dysfunctional, purely on the basis that those who experience it have a self that is not singular (Klayton, 2005)."

Despite this stigma, groups have formed around plurality, embracing it as a non-disordered variant of human cognition. In 2010, an online community sprouted over a practice known as "tulpamancy." Tulpamancy is inspired by traditional Tibetan meditation techniques (from which the word "tulpa" is borrowed) and is defined as the practice of creating and interacting with tulpas. Tulpas are experienced as being fully autonomous and conscious entities within the mind. The word "host" is used in this paper interchangeably with "tulpamancer" to describe someone who creates and interacts with tulpas. This paper uses tulpamancy and the experience of healthy plurality as an argument against the requirement of oneness in mind.

### C. Previous Research

Until recently, media features of tulpamancy and healthy plural phenomena have been limited to infrequent online articles, with its scientific accounts being all but nonexistent. This changed with novel research from Professor Samuel Veissiere of McGill University. In his paper, Veissiere (2015) overviews the

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D. The disturbance is not due to the direct physiological effects of a substance (e.g., blackouts or chaotic behavior during Alcohol Intoxication) or a general medical condition (American Psychiatric Association, 2000)"

results of a year-long observational study on the tulpa community. Data on the demographic profile of tulpamancers, socio-cultural aspects of the tulpa community, and the experiences of tulpamancers were collected through a series of opt-in surveys and interviews.

Veissiere found that tulpas are perceived to be entities distinct from one's own thoughts, with over a third of hosts reporting that their tulpas felt as real as any physical person. This is achieved because tulpas seem to be independent in their emotions, cognition, and opinions, and they are experienced through a mix of auditory, visual, and somatic visualizations and hallucinations. Possession, a technique that allows a tulpa to temporarily be in command of the body, and switching, in which the host dissociates to have an out-of-body experience while the tulpa controls the body, are both common techniques in the community, with an abundance of guides written on how to master them. However, despite the similarities between advanced tulpamancy techniques and the experiences of DID diagnosed folk, the complete absence of amnesia, depersonalization, and other symptoms make these techniques a reportedly positive and mutually enjoyable experience.

Demographically, Veissiere characterized most tulpamancers as being middle class, white, and educated. On personality tests, the

majority tested as being shy and having few avenues for social interaction. This coincides with another of his findings on tulpa creation: the most cited reason for creating a tulpa is "loneliness."

However, this all contrasts starkly to his other observations. Veissiere found his sample to be highly imaginative, cerebral, and articulate, even scoring above average on theory of mind and empathy tests. This held consistent even among tulpamancers on the autism spectrum, who despite their condition, showed no hindrances in these skills. Faced with all this, Veissiere went so far as to hypothesize that tulpas may enhance theory of mind and empathy.

Veissiere further investigated the relationship between mental health and tulpamancy and unveiled two surprising associations. Foremost, an extremely high frequency of clinical diagnoses: in his sample, 25% were diagnosed with Asperger's syndrome, 21% with Attention Deficit Disorders, and 18% with General Anxiety Disorder, to name a few. This is compared to the figures of <1%, 11%, and 3.1%, respectively, in the general population of the United States (Lister Hill National Center for Biomedical Communications, 2016; Center for Disease Control and Prevention, 2016, National Institute of Mental Health, 2016). Secondly, Veissiere found that tulpas were reported to cause remarkable improvements in mental health and social life, with 93.7% of respondents

expressing that taking up Tulpamancy had “made their condition better.” Veissiere elaborates on one example of this. In his sample, over half of the tulpamancers on the autism spectrum reported that their tulpas enhance their ability to read and understand others. These claims support the previously mentioned tests that showed no impairments in theory of mind or empathy amongst tulpamancers on the autism spectrum.

#### **D. Purpose**

The purpose of this study is to further investigate these two associations: the high frequency of disorders among tulpamancers, and the reports of psychological improvements related to tulpas. The research seeks to clarify these associations’ existence and gather data that allows us to hypothesize their cause. While Veissiere showed that there seemed to be a relationship between tulpamancy and mental health, the reasons and nature of it are still a mystery. The noted associations have a plethora of possible explanations.

For example, although unlikely, the frequency of mental illness among tulpamancers could be caused by a causal relationship between tulpas and psychopathologies. Alternatively, tulpamancy could merely be more appealing or have more exposure to those with a clinical diagnosis.

Similarly, it would be presumptive given the current evidence to claim the

association between tulpamancy and perceived improvements in one’s mental health is caused by plurality being therapeutic in and of itself. The frequent practice of meditation has many benefits on its own (Grossman, P., Niemann, L., Schmidt, S., & Walach, H., 2010). Its frequent practice amongst tulpamancers may be responsible for these improvements rather than something unique to tulpas. Likewise, forming positive relationships through the tulpa community could also explain this association. Additionally, there is the possibility of tulpamancy being therapeutic.

The research looks to address as many of these possibilities as possible in pursuit of identifying the cause of phenomena associated with tulpamancy.

#### **E. Methods**

This study was observational and non-experimental. A series of randomly sampled surveys were used to gather data from users on several of the most popular tulpamancy forums and chat websites. The majority of the tulpa community is based on four websites: <http://reddit.com/r/tulpas> (a subreddit), <http://tulpa.info> (a forum and Internet Relay Chat (IRC)), <http://tulpa.io> (forum), and <http://tulpa.im> (IRC). The tulpa subreddit was excluded from the study due to an inability to view a list of its users. The user bases of the <http://tulpa.info> IRC, <http://tulpa.io> forums, and <http://tulpa.im> IRC were the

studied population. A total of 365 accounts existed on these sites on the survey request date (January 13, 2016). These accounts were sent a message requesting their contribution to the survey, and participation was limited to individuals who had received this message.

Before completing the survey, participants were required to give informed consent and agree to the disclosure and publication of their responses. The purpose of the study was outlined on this consent form. The survey consisted of 58 questions divided into four sections: relationship to the tulpa community, experiences in tulpamancy, mental health, and demographic information. Questions were predominantly Likert scales, polar, or short answer. The remainder of this section is an overview of the questions of greatest significance to the conclusions. For a full transcript of the survey, see Appendix A.

### Experiences in Tulpamancy

Survey participants were confirmed to be practitioners of tulpamancy by answering the question, "Does your system practice tulpamancy and/or have a tulpa?" with the option yes and no. Respondents who answered "no" skipped the subsequent questions and were directed to the end of the survey. Respondents who answered "yes" were directed to more questions inquiring their specific practices and experiences with tulpas.

To investigate the effect of meditative practices often performed alongside tulpamancy, the survey asks: "Please select all the techniques that are/ have been used by your system for tulpamancy" with meditation and hypnosis among the possible responses.

To explore how individual goals and the relationship one forms with their tulpa impacts their overall experience, the survey asked, "What relationships exist between [you and your] tulpa(s)?" and "If your tulpas came to be through conscious effort and/or forcing, for what purpose did you create them?" Both questions have similar response options that included, "Friends or companions," "A romantic relationship or significant other," "Curiosity or experimentation," "To become a part of a community," and "Self-Improvement or life/mental health benefits."

### Relationship to the Community

To probe how one's experiences and relationship with the tulpa community affected the perceived impact of tulpas, various questions queried the participant's opinions and commitment towards the online community. The survey asked: "On a scale of 1-9, how would you describe your involvement with the tulpa community?" with options like "7: I regularly view or post in forums, blogs, or chat rooms of the community."

It later asked: "How would you describe your opinion of the parts of the

tulpa or plural communities you regularly interact with?” followed by subtext that read: “What type of feelings come to mind when you think of it?” and possible responses “Very negative,” “Negative,” “Neutral,” “Positive,” and “Very positive.”

### Associations with Mental Illness

The association between tulpamancy and disorders was investigated through several questions in the survey. Participants were asked to select yes or no to the question: “Have you been diagnosed with a mental or neurodevelopmental disorder?” If “yes” was selected, the participant would be directed to more questions investigating the relationship to their condition(s) to their experiences with tulpas. If “no” was selected, they would skip those questions and be directed to the next portion of the survey.

To inquire the potential of there being a causal link between tulpamancy and mental illness, these respondents were asked “Were these diagnosed before or after you began practicing tulpamancy?” To follow up this question, the next one asked: “If any of your disorders were diagnosed after you started tulpamancy, do you think this practice contributed to the diagnosis?” Response categories were “Yes, significantly,” “Yes, somewhat,” “Unknown,” “No,” and “Not applicable.”

It is also possible that the high volume of psychopathologies in tulpamancers is caused by the practice being especially appealing towards

those diagnosed with a condition. To address this, the survey asked: “Do you feel that your condition(s) influenced your decision to begin practicing tulpamancy?” with subtext reading “Did your disorder(s) make you want to have a tulpa?” Respondents were given the options: “Yes, strongly,” “Yes, somewhat,” “Unknown, and “No.”

Continuing this line of thought, the next question read: “How do you feel the symptoms of your disorder(s) affect the desirability of tulpamancy?” with the subtext “Does your condition make tulpamancy a more appealing or enjoyable practice?” Respondents were requested to select what best described their experiences (for example, “They make tulpamancy a significantly more desirable practice”).

Later questions explored the relationship between tulpas and perceived mental health in these respondents diagnosed with a psychopathology. The question “How do you feel tulpamancy has affected your condition(s) or ability to cope with them?” requested respondents to select what best described their experience for example, “It has significantly improved my condition or ability to cope with it.”

The survey also queried a specific phenomenon that could help explain the association between tulpas and perceived improvements: “Does your tulpa seem to be independent of your disorder(s)?” The question’s subtext read: “For example, if a host has ADHD, a tulpa that is independent of

their host's disorders may not struggle with hyperactivity and attention. Essentially, does your tulpa seem to be unaffected by your disorder(s)?" Respondents were given the options: "Yes, strongly," "Yes, somewhat," "Unknown," and "No."

This was followed by the questions of greatest significance to the survey: "How do you feel plurality has had an impact on your social life?", "How do you feel plurality has had an impact on your mental health?", and "How do you feel plurality has had an impact on your overall life?". Response options for these three questions were "It has had a significantly positive impact," "It has had a somewhat positive impact," "It has had a neutral impact," "It has had a somewhat negative impact," "It has had a significantly negative impact," and "It has not had an impact."

Answers to most of the other questions in the survey will be analyzed for associations with the responses to these four inquiries.

The survey concluded with questions inquiring the age, gender, country of residence, and race of the respondent.

## F. Results

Out of the 365 survey requests sent, a total of 63 responses were submitted. 1 submission was removed due to the respondent selecting that they had not practiced tulpamancy and did not have a tulpa. Results of greatest significance to the investigated

associations are overviewed in this section. See Appendix B for additional survey results.

### Demographics

74% of the sample classified themselves as Caucasian, with the other most frequent identities being Multiracial (11%), Asian (5%), and Black (3%). With regards to gender, 59% of respondents identified as male, 29% as female, and 12% as "other." A total of 16 nationalities were represented in the sample, with the United States making up 58% of the responses (*Table 1*).

Nationality	Frequency	Nationality	Frequency
United States	32	Belgium	1
United Kingdom	5	Germany	1
Australia	3	Italy	1
Canada	2	Denmark	1
Mexico	2	Ireland	1
New Zealand	1	Bosnia and Herzegovina	1
Belarus	1	Singapore	1
Poland	1	Austria	1

*Table 1*

### Experiences in Tulpamancy

Most respondents reported doing meditation (54%), hypnosis (25%), or both (21%) as part of their tulpamancy practice, with 31% of the sample reporting doing neither.

Responses to the question, "For what purpose did you create [your tulpas]?" revealed that tulpas are most

frequently created in pursuit of companionship. Results from the question, “What relationships exist between [you and your] tulpa(s)?” shows that this is achieved in most cases, with most respondents stating that their relationship with their tulpa is friendship (n=46) or romantic (n=18).

Associations with Mental Illness

56% of the sample (n=32) reported being diagnosed with a mental or neurodevelopmental disorder, with the most common diagnosis being Depressive Disorders (n=14), Anxiety Disorders (n=10), and Autism Spectrum Disorder (n=9) (*Table 2*).

Diagnosis	Frequency
Depressive disorders	14
Anxiety disorders	10
Autism Spectrum Disorder	9
Bipolar Disorder	5
ADHD	4
OCD	3
PTSD	2
Dissociative Disorders	2
Stress Response Syndrome	1
DCD	1
Dyslexia	1
Tourette's	1

Table 2

It was also found that 79% of these diagnoses occurred before the practice of tulpamancy, and even among those who were diagnosed after (n=7), only one respondent stated that tulpas contributed towards their diagnosis.

Two thirds of respondents reported that their decision to begin practicing was either somewhat (33%) or significantly (33%) furthered by their

condition. An almost identical ratio of respondents stated that their condition made tulpamancy a more desirable practice, with 37% citing a significantly positive influence, 37% for a somewhat positive influence, and the remainder noting “no or neutral impact.”

Similarly, most respondents reported that their tulpas had a significant (34%) or somewhat (44%) positive impact on their disorder(s) and/or ability to cope with them, with the remainder selecting “neutral or no impact.”

The majority of tulpas were noted to be independent and unaffected by their host’s condition to some degree. 37% report significant independence, 48% report some independence, and 15% report no independence.

Most respondents reported tulpamancy having a positive impact on their mental health (*Table 3*) and overall life (*Table 4*), with “Neutral or no impact” being the most frequent response regarding the impact of tulpas on social life (*Table 5*).

Impact of Tulpas on Mental Health	Frequency	Percentage
Significant positive impact	21	36%
Somewhat positive impact	25	42%
Neutral or no impact	13	22%
Somewhat negative impact	0	0%
Significant negative impact	0	0%

Table 3



Impact of Tulpas on Overall Life	Frequency	Percentage
Significant positive impact	29	51%
Somewhat positive impact	23	40%
Neutral or no impact	5	9%
Somewhat negative impact	0	0%
Significant negative impact	0	0%

Table 4

Impact of Tulpas on Social Life	Frequency	Percentage
Significant positive impact	8	14%
Somewhat positive impact	19	33%
Neutral or no impact	28	49%
Somewhat negative impact	1	2%
Significant negative impact	1	2%

Table 5

**Relationship to the Community**

The distribution of involvement in the tulpa community amongst respondents loosely resembles a bell curve, the peak being on “7: I regularly view or post in forums, blogs, or chat rooms of the community”(Table 6).

On a scale of 1-9, how would you describe your involvement with the tulpa community?	Frequency	Percentage
1: I am not involved	5	9%
2	4	7%
3: I may view a blog, thread, or forum once in awhile	18	32%
4	10	18%
5: I may occasionally view or post in threads, forums, chat	10	18%

rooms, or community related sites		
6	3	5%
7: I regularly view or post in forums, blogs, or chat rooms of the community	4	7%
8	1	2%
9: I spend most of my time interacting with the community	1	2%

Table 6

Additionally, most respondents reported having a very positive (18%), positive (52%) or neutral (29%) opinion towards the parts of the community they regularly interacted with.

**G. Analysis**

We can better understand the relationship between tulpamancy and mental health by finding associations between the perceived impact of tulpas and other responses. See Appendix C for supplemental data and the tables that modeled the graphs present in this section.

Nowhere in the survey data and short answer responses were there evidences suggesting that tulpamancy is harmful. Additionally, almost all respondents diagnosed with a psychopathology stated that their diagnosis occurred before having tulpas. These facts should discourage hypotheses that suggest tulpas cause mental illness or are a disorder in and of itself.

Rather, the survey results reinforce the association between practicing tulpamancy and improvements in perceived mental health, socialization, and overall life. The survey data was analyzed to find if the perceived impacts of tulpas on social life, mental health, or overall life had any association to responses to other questions on the survey.

Concerns of alternate causation as outlined in the Purpose and Methods sections were investigated-- foremost, whether practicing meditation as a part of one's tulpamancy practice affected the impact of tulpas on mental health. No association was found, with individuals who did not practice meditation reporting similar rates of improvements as ones who did (*Chart 1*).

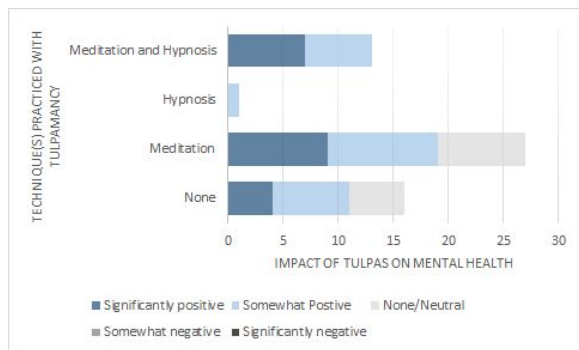


Chart 1

There is also the possibility that a self-fulfilling prophecy principle is driving the reports of improvements. To address whether expecting tulpas to cause enhancements plays a role, the reason a respondent began practicing tulpamancy was compared to the impact of tulpamancy on their perceived mental

health. No association was found, with individuals who created their tulpa for “self-improvement or life/mental health benefits” reporting almost identical rates of improvements as ones who cited friendship, curiosity, or other reasons (*Chart 2*).

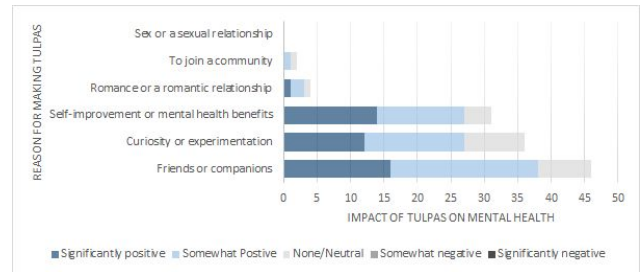


Chart 2

It was also considered that the improvements could be derived from the tulpa community, which most respondents were found to be moderately involved with and hold a positive opinion of. The impact of tulpas was compared to the respondent's involvement and opinion of the tulpa community, but no significant relationships were found (*Chart 3*). Those who had a “Very positive” opinion of the tulpa community were more likely to report improvements in their social life, mental health, and overall life. However, this association did not exist among those who had a “Positive” opinion, and having a “Neutral” or “Negative” opinion was not associated with more neutral or negative impacts of tulpas. The online community, while undoubtedly a plus, is likely not solely responsible for the improvements associated with tulpas.

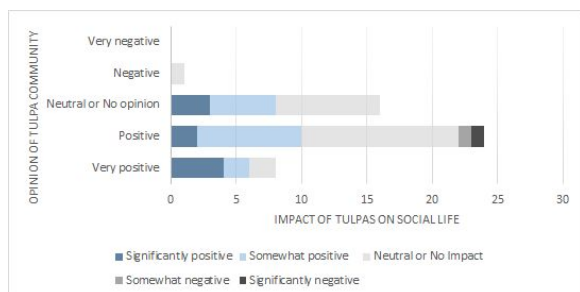


Chart 3

Even when compared to a myriad of factors, the reported improvements in mental health, overall life, and social life seem unrelated to the most likely candidates of alternate causation. These associations appear to be phenomena specific to the practice of tulpa.

## H. Conclusions

### Tulpas and Mental Health

The survey results clarify the existence of the two associations identified by Veissiere. A majority (56%) of the sample reports being diagnosed with a mental or neurodevelopmental disorder, which is an exceptionally high frequency when compared to the United States' rate of 18.2% (National Alliance on Mental Illness, 2015).

However, there was no evidence of tulpas causing or furthering cases of mental illness. In fact, the association between tulpas and improvements in mental health was reinforced, with 78% of these respondents diagnosed with a psychopathology stating that tulpas had either a significantly or somewhat positive impact on their condition or ability to cope with it. 91% of the sample

claimed that tulpas had a significant or somewhat positive impact on their overall life. 78% upheld the same for their mental health, and 47% reported this improvement for their social life.

It is likely that the high frequency of disorders among tulpamancers is not caused by tulpa being pathological in nature, but rather, the practice being especially appealing towards those already diagnosed. The survey data supports this hypothesis: 66% of respondents diagnosed with a psychopathology report that their disorder either somewhat or significantly furthered their decision to make a tulpa.

To make sense of this, consider two factors: first, that two of the most common diagnosis among tulpamancers are Social Anxiety Disorder and Autism Spectrum Disorder—conditions often associated with hindrances in interpersonal relationships. Second, that tulpas are advertised as being “the perfect kinds of companions” (Veissiere, 2015). Tulpa.info, the flagship website for tulpa resources, elaborates on this. “A bond with one’s tulpa is often extremely strong, because they can know you intimately, understand you, and generally like and trust you almost implicitly, and all this is due to them being in the brain with you. That allows them to understand you like no other person” (Tulpa.info, 2014). In fact, the data not only suggests that tulpas may be more appealing to those struggling with a psychopathology, but that it is especially beneficial towards such

individuals. 74% of respondents state that their condition makes tulpamancy either a somewhat or significantly more desirable practice. Several individuals diagnosed with social anxiety disorder discussed how their tulpa not only provided a means to have pleasant, worry-free socialization, but that their tulpas also helped them have more positive interactions with other people.

This notion of tulpas being ideal companions who can form strong bonds with their hosts can also explain the association between tulpas and improvements in mental health. The overwhelming majority of tulpamancers develop strong and intimate bonds with their head-mates. Hosts consistently describe how their tulpas keep their best interests in mind and take steps to alleviate any ailments, mental or physical, that the host may have in their life. If a disorder is causing distress and one's tulpa happens to be independent from it, then we would expect to see what we already observe: tulpas helping their host cope with mental illness.

At the end of each section of the survey, I gave the respondent the option to elaborate on their answers in short answer form. The responses were eye opening towards the diversity of impacts tulpas can have on mental illness. For instance, in cases of disorders that involve delusion and misperceptions, the tulpa often becomes the voice of reason during bouts of irrationality. One respondent diagnosed with Schizophrenia writes how his tulpa can

not only identify between hallucination and actuality, but that they developed a technique that allows the delusions to be "zapped" away. There are reports of tulpas alleviating the desire to perform irrational routines in individuals diagnosed with OCD, and others claim that their tulpas innovated workarounds for their dyslexia.

Even in disorders where delusions are not a factor, tulpas still make their mark. Multiple respondents diagnosed with depression shared how their tulpas help them simply by providing their friendship and positive voices. Still others discuss how their tulpas prevented their suicide, be it through words or acting to remove the host's control of the body.

The experience of having a warm relationship with one's tulpas is almost synonymous with tulpamancy practice, and when combined with the more outstanding factors of tulpamancy, namely the perceived independence of tulpas from one's ailments, a relationship unlike any corporeal one forms. One respondent diagnosed with Schizophrenia phrases it like this: "I hear voices all the time. It's good to hear a nice one from a tulpa for a change."

### Considerations

It is important to acknowledge the limits of the results presented. Self-reported data gathered through online surveys, regardless of the care taken to ensure objectivity and accuracy, is bound to be influenced by

biases and misconceptions. The intent of this paper is not to provide definitive assertions on the psychology of tulpamancy. Rather, the purpose is to accentuate outstanding associations and suggest further research into them. Garnering an understanding of tulpa phenomena may not only allow us to identify and further apply its therapeutic properties, but also add to the understanding of human cognition and its plasticity. The highest suggestion of this research is to further investigate tulpa and healthy plural phenomena.

#### Implications for Clinical Perspectives

The nuances of dissociative and traumagenic plurality should also be addressed. Dissociative disorders like DID are usually the consequence of childhood trauma or abuse. The problems arise from the many side effects of this, such as compartmentalized emotions, fragmented memories, derealization, and amnesia. These are the qualities that cause dysfunction and make DID a disorder, not the plurality (Kunzendorf, R. G., Crosson, M., Zalaket, A., White, J., & Enik, R., 1998).

As is evident from the experiences of tulpamancers, multiplicity is not inherently pathological. Plurality, as a side effect of the trauma and resulting symptoms, but not a negative symptom in and of itself, should not be labeled the problem. The prevalence of treating plurality as the start and end to dysfunction in DID indicates a

fundamental misunderstanding in clinical psychology.

Being plural often becomes an inexorable identity that is not only difficult to change, but makes attempts to do so harmful. Because of this, psychiatrists have found that the most effective therapies for DID do not require merging different consciousnesses or enforcing oneness. Rather, it is more effective to simply teach the separate identities to communicate, share information, and work with each other in through a therapy dubbed “integrated functioning” (International Society for the Study of Trauma and Dissociation, 2011; Brand, B. L., Myrick, A. C., Loewenstein, R. J., Classen, C. C., Lanius, R., McNary, S. W., . . . Putnam, F. W., 2012).

Rather than tulpamancy being an exception to the general rule of plurality being pathological, the reality is that only a fraction of plural systems have a dissociative disorder. Because healthy plural experiences rarely affect functioning, they have fallen very much under the radar of the mental health system (Clayton, 2005).

When the diversity of plural experience is considered, multiplicity may seem to be less of an extraordinary achievement and more of a fundamentally human experience. Many fiction writers, for example, report that the characters of their design seem to come to life in their heads, behaving autonomously and being perceived as full-fledged consciousnesses (Taylor,

M., Hodges, S. D., & Kohányi, A., 2002). Evangelically religious individuals, where the God, Gods, or spirits of their faith can interact with them to a degree, report similar phenomena, regardless of their specific religion or culture (Luhmann, 2013). There is also an online community of headmate systems, wherein many report being plural as long as they can remember, but do not exhibit any of the negative symptoms of DID. And, of course, there is also tulpamancy. Tulpamancy is unique in the sense that new identities are willfully created. Essentially, tulpamancy is a means to achieve healthy plurality.

The notion of plurality being a healthy and functional state of being opposes the norm of the most common variants of human cognition being considered required for these things.

The concept that societies should embrace persons of alternate psychological variants rather than label them as disordered, inferior, and in need of becoming normal is dubbed “neurodiversity.” This idea is most frequently upheld by the ASD community, which purports that Autism is a condition that, rather than being inherently disordered, is more accurately an alternative state of human cognition with its own benefits and detriments.

Plurality, being deviant from the norm but with the potential of being a healthy, functional, and even optimal state of being, should be destigmatized and added to the advent of neurodiversity. We ought to value diversity and acceptance over the enforcement of conformity by including, rather than excluding, the exceptional.

*Jacob Isler is a psychology student at the University of Texas at Austin. His interest in tulpamancy began when he started practicing it himself over three years ago, experiencing its benefits firsthand. He operates a blog where he writes opinion, satire, and research essays on the subject, some of which have been referenced on podcasts and the social psychology journal PrimeMind. He believes that studying plurality and tulpamancy may not only inspire groundbreaking new therapies for mental illness, but also further the scientific understanding of human consciousness and cognition.*

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## **Appendix A: Survey Transcript**

# Observations of Plurality: Therapeutic Applications of Thoughtform Meditative Practices (SURVEY)

This survey is for an observational study that seeks to explore the relationship between plurality and mental health. It will ask questions about your experiences with plurality/tulpamancy, the community, and your demographic. Your personal information and answers to free response questions will be completely confidential. Thank you for your valuable contribution.

Estimated time to complete: 10 minutes

\* Required

## 1. Informed consent \*

By selecting "I agree," I consent to my answers on multiple choice questions to be anonymously published online or in scientific journals in the form of polls, graphs, and statistics.  
*Mark only one oval.*

I agree

## Relationship to the Community

This section of the survey is designed to assess your involvement in and relationship with the tulpa and plural communities. This will enable a comparative analysis between systems of various levels of devotion to tulpamancy/plurality.

For questions involving dates, estimate to the nearest month or year if necessary.

## 2. When did you first learn about tulpas or plurality?

.....

## 3. Where did you first learn of the existence of tulpas or plurality?

*Check all that apply.*

4chan, /mlp

4chan, /a

4chan, /x

My Little Pony hypnosis

Friends

Reddit

Tumblr

Other: .....

**4. Where did you first discover the tulpa or plural communities?**

This commonly happens through a google search after discovering tulpamancy or plurality.  
*Check all that apply.*

- [tulpa.info](http://tulpa.info)
- [tulpa.io](http://tulpa.io)
- <https://www.reddit.com/r/tulpas>
- <https://www.reddit.com/r/plural>
- Tumblr
- Other: .....

**5. Including the sites you selected in the previous questions, what tulpa or plural related sites have you visited more than once?**

*Check all that apply.*

- [tulpa.info](http://tulpa.info)
- [tulpa.io](http://tulpa.io)
- <https://www.reddit.com/r/tulpas>
- <https://www.reddit.com/r/plural>
- Tumblr (tulpa or plural related blogs)
- Rizon IRC
- Tulpa.im IRC
- I have not visited any tulpa or plural related sites.
- Other:

**6. What tulpa or plural related sites do you identify as an active member of?**

*Check all that apply.*

- [tulpa.info](http://tulpa.info)
- [tulpa.io](http://tulpa.io)
- <https://www.reddit.com/r/tulpas>
- <https://www.reddit.com/r/plural>
- Tumblr (tulpa or plural related blogs)
- Rizon IRC
- Tulpa.im IRC
- I do not identify as an member of any tulpa or plural related sites
- Other:

**7. Please select all of the following options that describe your involvement in the tulpa community**

*Check all that apply.*

- I am not affiliated with the tulpa or plural communities
- I observe or interact with members of the community
- I am a viewer of tulpa or plural related blogs, forums, websites, or other content
- I post in forums, blogs, or chat rooms of the community
- I consider myself a member of the tulpa or plural community
- Other: .....

**8. On a scale of 1-9, how would you describe your involvement with the tulpa community?**

*Mark only one oval.*

- 1- I am not involved
- 2
- 3- I may view a blog, thread, or forum once in a while
- 4
- 5- I may occasionally view or post in threads, forums, chat rooms, or community-related sites
- 6
- 7- I regularly view or post in forums, blogs, or chat rooms of the community
- 8
- 9- I spend most of my time interacting with the community
- Other: .....

**9. How much time a week do you spend on tulpa or plural related websites, chat rooms, and other forms of media?**

.....

**10. If you would like to offer an explanation of your answers above or give additional details to your relationship with the tulpa or plural communities, feel free to do so below.**

.....

.....

.....

**11. How would you describe your opinion of the parts of the tulpa or plural communities you regularly interact with?**

What type of feelings come to mind when you think of it?

*Check all that apply.*

- Very negative
- Negative
- Neutral
- Positive
- Very positive
- Other: .....

**12. If you would like to, please elaborate**

How would you describe your opinion of the parts of the tulpa or plural communities you regularly interact with?

.....

.....

.....

.....

**13. How would you describe your opinion of the tulpa and plural communities as a whole?**

What type of feelings come to mind when you think of it?

*Check all that apply.*

- Very negative
- Negative
- Neutral
- Positive
- Very positive
- Other:

**14. If you would like to, please elaborate**

What is your opinion of the tulpa and plural communities as a whole?

.....

.....

.....

.....

**15. What other internet communities do you identify as a member of?**

*Check all that apply.*

- Brony community
- Furry community
- Daemonism community
- Rule 34 community
- Therian community
- I do not identify as a member of any other internet communities.
- Other: .....

## System Details

This page of the survey will ask questions about how you have experienced plurality, enabling a comparative analysis of different system types and backgrounds.

**16. If applicable, when did you start identifying as a plural system?**

"Plural system" is an phrase used to describe the phenomena of multiple consciousnesses or persons existing in one brain and/or body.

.....

**17. If applicable, when did you begin practicing tulpamancy?**

.....

**18. What do you identify as?**

*Check all that apply.*

- Tulpamancy system
- Multiple or Headmate system
- Median system
- Soulbond system
- DID system
- Gateway system
- I do not identify as a system
- Other: .....

**19. If applicable, how did you come to be plural?**

*Check all that apply.*

- I intentionally became plural (ie tulpaforcing)
- I have been plural for as long as I can remember
- I do not know how I came to be plural
- Other: .....

20. **Does your system practice tulpamancy and/or have a tulpa? \***

*Mark only one oval.*

Yes

No *Skip to question 42.*

## System Details: Tulpamancy

21. **Please select all the techniques that are/ have been used by your system for tulpamancy**

*Check all that apply.*

Narration

Meditation

Hypnosis

None of the above

Other: .....

22. **What relationships exist between the host and tulpa(s) in your system?**

*Check all that apply.*

Friendship

Romantic

Sexual

Sibling-esq

Roommate-esq

Parental or child-esq

Neutral or no relationship

Enemies

Other: .....

23. **If applicable, what relationships exist between the tulpas in your system?**

*If you have one tulpa, please skip this question.*

*Check all that apply.*

Friendship

Romantic

Sexual

Sibling-esq

Roommate-esq

Parental or child-esq

Neutral or no relationship

Enemies

Other: .....



**24. In what ways does the host experience tulpa(s)?**

*Check all that apply.*

- "Mindvoice" auditory experiences
- "Mind's-eye" visualization
- Auditory hallucinations
- Visual hallucinations
- Somatic (touch) hallucinations
- None of the above
- Other: .....

**25. On a scale of 1-9, how realistic is interaction with your tulpas?**

*Mark only one oval.*

- 1- I hardly experience them in any way
- 2
- 3- Interaction is similar to regular thoughts or internal dialogue
- 4
- 5- Interaction is distinct from other thoughts and/or similar to vivid daydreams or visualized images
- 6
- 7- Similar to interactions with physical beings in some ways
- 8
- 9- Indistinguishable from interactions with another physical being
- Other: .....

**26. Please select any abilities that the tulpa(s) are capable of**

*Check all that apply.*

- A skill or talent that the host does not have
- Knowledge or intellectual ability that the host does not have
- Recall lost or forgotten memories
- Possession (one or multiple body parts)
- Possession (full body)
- Parallel processing
- Switching
- Other: .....

**27. Which best describes how you came to have tulpas?**

*Check all that apply.*

- Intentionally creating and/or forcing them into existence
- Roleplay characters that gained autonomy
- Imaginary friends that gained autonomy
- "Walk-ins"
- I do not know
- Other: .....

**28. If your tulpas came to be through conscious effort and/or forcing, for what purpose did you create them?**

*Why did you take up tulpamancy?*

*Check all that apply.*

- Friends or companions
- A romantic relationship or significant other
- Sex or a sexual relationship
- Curiosity or experimentation
- To become a part of a community
- Self-improvement or life/mental health benefits
- Other:

## **Mental Health**

This section of the survey will ask questions pertaining to your history with disorders and the perceived impact of plurality on your well-being.

**29. Have you been diagnosed with a mental or neurodevelopmental disorder?**

*If yes, you will be able to elaborate on the next page.*

*Mark only one oval.*

- Yes
- No *Skip to question 42.*

**30. Please specify the mental or neurodevelopmental disorder(s) that you have been diagnosed with.**

.....

.....

.....

.....

**31. Were these diagnosed before or after you began practicing tulipamancy?**

*Mark only one oval.*

- Before
- After
- Both before and after
- Other: .....

**32. If any of your disorders were diagnosed after you started tulipamancy, do you think this practice contribute to the diagnosis?**

*Check all that apply.*

- Yes, significantly
- Yes, somewhat
- Unknown
- No
- Not applicable
- Other:

**33. How do you feel tulipamancy has affected your condition(s) or ability to cope with them?**

*Mark only one oval.*

- It has significantly improved my condition or ability to cope with it
- It has somewhat improved my condition or ability to cope with it
- It has had a neutral effect
- It has not had an effect
- It It has somewhat worsened my condition or ability to cope with it
- It has significantly worsened my condition or ability to cope with it
- Other: .....

**34. Has this effect increased over time?**

*Mark only one oval.*

- Yes
- No
- Unknown
- Not applicable
- Other: .....

**35. How did you feel that your disorder(s) influenced the ease of practicing tulpamancy?**

*Mark only one oval.*

- They have made tulpamancy significantly easier
- They have made tulpamancy somewhat easier
- They have not affected the ease of practicing tulpamancy
- They have had a neutral effect
- They have made tulpamancy somewhat more difficult
- They have made tulpamancy significantly more difficult
- Other: .....

**36. How do you feel that your disorder(s) influenced the development of your tulpa(s)?**

*Mark only one oval.*

- They have accelerated or enhanced development significantly
- They have accelerated or enhanced development somewhat
- They have had a neutral effect
- They have not affected development
- They have decelerated or reduced development somewhat
- They have decelerated or reduced development significantly
- Other: .....

**37. How do you feel your disorder(s) have affected your overall experience with tulpamancy?**

*Mark only one oval.*

- They have made it a significantly more positive experience
- They have made it a somewhat more positive experience
- They have had a neutral effect
- They have not affected my experience
- They have made it a somewhat more negative experience
- They have made it a significantly more negative experience
- Other: .....

**38. Does your tulpa seem to be independent of your disorder(s)?**

For example, if a host has ADHD, a tulpa that is independent of their host's disorders may not struggle with hyperactivity and attention. Essentially, does your tulpa seem to be unaffected by your disorder(s)?

*Mark only one oval.*

- Yes, strongly
- Yes, somewhat
- Unknown
- No
- Other: .....

**39. Do you feel that your condition(s) influenced your decision to begin practicing tulpamancy?**

Did your disorder(s) make you want to have a tulpa?

*Mark only one oval.*

- Yes, significantly
- Yes, somewhat
- Unknown
- No
- Other: .....

**40. How do you feel the symptoms of your disorder affect the desirability of tulpamancy?**

Does your condition make tulpamancy a more appealing or enjoyable practice?

*Mark only one oval.*

- The symptoms of my disorder make tulpamancy a significantly more desirable practice
- The symptoms of my disorder make tulpamancy a somewhat more desirable practice
- It has had a neutral effect
- It has not affected the desirability
- The symptoms of my disorder make tulpamancy a somewhat less desirable practice
- The symptoms of my disorder make tulpamancy a significantly less desirable practice
- Other: .....

**41. If you would like to elaborate on any of your answers on this page, please do so below.**

.....

.....

.....

.....

**42. How do you feel plurality has had an impact on your social life?**

*Mark only one oval.*

- It has had a significantly positive impact
- It has had a somewhat positive impact
- It has had a neutral impact
- It has had a somewhat negative impact
- It has had a significantly negative impact
- It has not had an impact
- Other: .....

**43. How do you feel plurality has had an impact on your mental health?**

*Mark only one oval.*

- It has had a significantly positive impact
- It has had a somewhat positive impact
- It has had a neutral impact
- It has had a somewhat negative impact
- It has had a significantly negative impact
- It has not had an impact
- Other: .....

**44. How do you feel plurality has had an impact on your overall life?**

*Mark only one oval.*

- It has had a significantly positive impact
- It has had a somewhat positive impact
- It has had a neutral impact
- It has had a somewhat negative impact
- It has had a significantly negative impact
- It has not had an impact
- Other: .....

**45. If you would like to elaborate on any of your answers on this page, please do so below.**

.....

.....

.....

.....

## Demographics

This page of the survey will ask questions pertaining to your social life, education level, economic background, and other influences.

**46. What is the age of the body in years?**

"How old are you?"

**47. What is your gender?**

*Check all that apply.*

- Male
- Female
- Other: .....

**48. What is the highest level of education that you have achieved?**

*Mark only one oval.*

- Some high school or equivalent
- Completed high school or equivalent
- Trade school
- Some college or university equivalent
- Associate's Degree
- Professional or Graduate School Degree
- Doctorate Degree
- None of the above
- Other: .....

**49. What is your annual household income?**

.....

**50. What is your total monetary wealth?**

.....

**51. What is your job or occupation?**

.....

**52. What is your marital status?**

*Check all that apply.*

- Single
- In a relationship, unmarried
- Married
- Divorced
- Other: .....

**53. How would you classify yourself?**

*Check all that apply.*

- Caucasian
- Asian
- Black or African descent
- Arab
- Pacific Islander
- Hispanic
- Indigenous or Aboriginal
- Multiracial
- Would rather not say
- Other:

**54. Where do you reside?**

*Mark only one oval.*

- United States
- United Kingdom
- Australia
- Russia
- Mexico
- France
- Poland
- Other:

## Contact Information

This page of the survey will ask about how we can get in touch with you after the survey. All of your answers and information on this page will be kept completely confidential.

**55. May we contact you after the survey with follow up questions?**

The researchers conducting this study would strongly appreciate it if you allow us to contact you after the survey.

*Check all that apply.*

- Yes
- No
- Other: .....



**56. Would you like to participate in a semi-structured interview conducted through Skype or a similar program?**

These qualitative interviews will be another means by which our team gathers information for our research paper.

*Check all that apply.*

- Yes
- No
- Other: .....

**57. What is your email address or preferred means of contact?**

If you affirmed either of the questions above, please answer this question.

.....

**58. What is your preferred name or alias?**

We will use this name when we contact you.

## The End

Thank you for completing this survey. Your participation is valuable and appreciated.

**59. If you have any additional information, comments, or advice on how we could improve this and/or future surveys, please share them below.**

.....  
.....  
.....  
.....

---

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## Appendix B: Additional Results Tables

“Please select all the techniques that are/ have been used by your system for tulpamancy”

Technique	Frequency	Percentage
Meditation	28	54%
Hypnosis	13	25%
Meditation and Hypnosis	11	21%
Neither	16	31%

“If your tulpas came to be through conscious effort and/or forcing, for what purpose did you create them?”

For what purpose did you create your tulpas?	Frequency	Percentage
Friends or companions	42	35%
Curiosity or experimentation	39	32%
Self-improvement or mental health benefits	31	26%
Romance or a romantic relationship	5	4%
To join a community	3	2%
Sex or a sexual relationship	1	1%

**“What relationships exist between the host and tulpa(s) in your system?”**

What relationships exist between the host and tulpa(s) in your system?	Frequency	Percentage
Friendship	46	37%
Romantic	18	15%
Sexual	13	10%
Sibling-esq	14	11%
Roommate-esq	15	12%
Parent or child-esq	14	11%
Neutral or no relationship	2	2%
Enemies	2	2%

**“Have you been diagnosed with a mental or neurodevelopmental disorder?”**

Have you been diagnosed with a mental or neurodevelopmental disorder?	Frequency	Percentage
Yes	32	56%
No	25	44%

**“Were these diagnosed before or after you began practicing tulpamancy?”**

Were you diagnosed before or after you began practicing tulpamancy?	Frequency of Selection
Before	31
After, did not contribute to diagnosis	7
After, did contribute to diagnosis	1

**“Do you feel that your condition(s) influenced your decision to begin practicing tulpamancy?”**

Do you feel that your condition(s) influenced your decision to begin practicing tulpamancy?	Frequency	Percentage
Yes, Significantly	10	33%
Yes, Somewhat	10	33%
No	10	33%

**“How do you feel the symptoms of your disorder(s) affect the desirability of tulpamancy?”**

How do you feel the symptoms of your disorder(s) affect the desirability of tulpamancy?	Frequency	Percentage
They make tulpamancy a significantly more desirable practice	11	37%
They make tulpamancy a somewhat more desirable practice	11	37%
No or neutral impact	8	27%
They make tulpamancy a somewhat less desirable practice	0	0%
They make tulpamancy a significantly less desirable practice	0	0%

**“Does your condition make tulpamancy a more appealing or enjoyable practice?”**

How do you feel tulpamancy has affected your condition(s) or ability to cope with them?	Frequency	Percentage
Significant positive impact	11	34%
Somewhat positive impact	14	44%
Neutral or no impact	7	22%
Somewhat negative impact	0	0%
Significant negative impact	0	0%

“Does your tulpa seem to be independent of your disorder(s)?”

Does your tulpa seem to be independent of your disorder(s)?	Frequency of Selection	Percentage
Yes, Significantly	10	37%
Yes, Somewhat	13	48%
No	4	15%

“How would you describe your opinion of the parts of the tulpa or plural communities you regularly interact with?”

Opinion	Frequency	Percentage
Very positive	10	18%
Positive	29	52%
None or neutral	16	29%
Negative	1	2%
Very negative	0	0%

## Appendix C: Additional Analysis Graphs & Tables

### A. Data Tables for Charts 1-3

Table of *Chart 1* comparing the practice of meditation as a part of tulpamancy to the impact of tulpas on mental health:

Impact of Tulpas on Mental Health

	Significantly positive	Somewhat Positive	None/Neutral	Somewhat negative	Significantly negative
None	4	7	5	0	0
Meditation	9	10	8	0	0
Hypnosis	0	1	0	0	0
Meditation and Hypnosis	7	6	0	0	0

Practice of Techniques Associated with Tulpamancy

Table of *Chart 2* comparing the reason for making tulpas to the impact of tulpas on mental health:

Impact of Tulpas on Mental Health

	Significantly positive	Somewhat Positive	None/Neutral	Somewhat negative	Significantly negative
Friends or companions	16	22	8	0	0
Curiosity or experimentation	12	15	9	0	0
Self-improvement or mental health benefits	14	13	4	0	0
Romance or a romantic relationship	1	2	1	0	0
To join a community	0	1	1	0	0
Sex or a sexual relationship	0	0	0	0	0

Reason for making tulpas

Table of *Chart 3* comparing the opinion of the tulpa community to the impact of tulpas on social life:

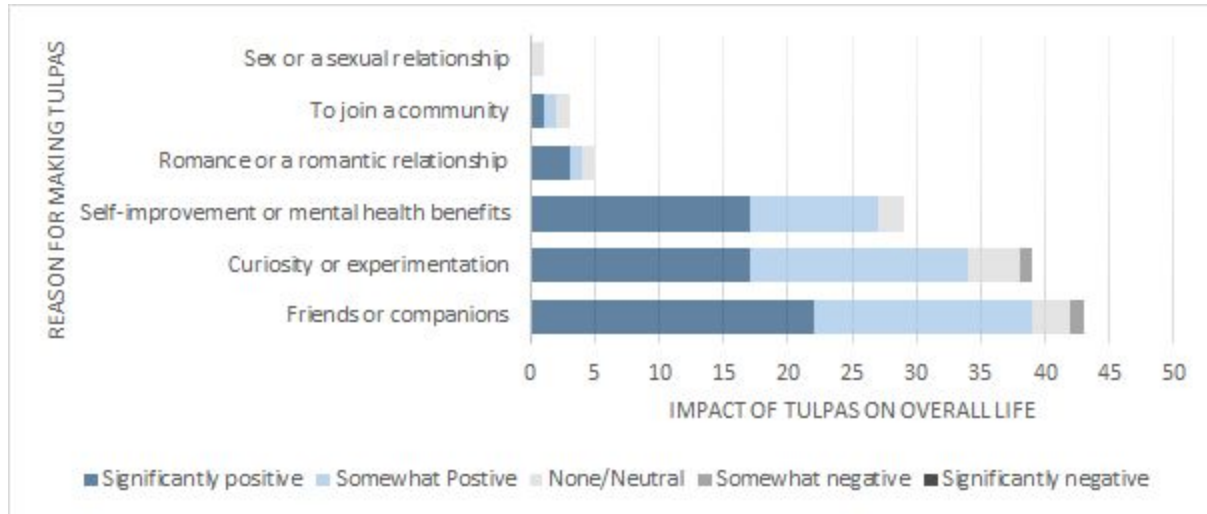
Opinion of frequented parts of the tulpa community

	Very positive	Positive	Neutral or No opinion	Negative	Very negative
Significantly positive	4	2	3	0	0
Somewhat positive	2	8	5	0	0
Neutral or No Impact	2	12	8	1	0
Somewhat negative	0	1	0	0	0
Significantly negative	0	1	0	0	0

Impact of Tulpas on Social Life

B. Additional Charts

*Chart 4* compares the reason for making tulpas to the impact of tulpas on overall life:



*Chart 4*



Chart 5 compares the opinion of the tulpa community to the impact of tulpas on overall life:

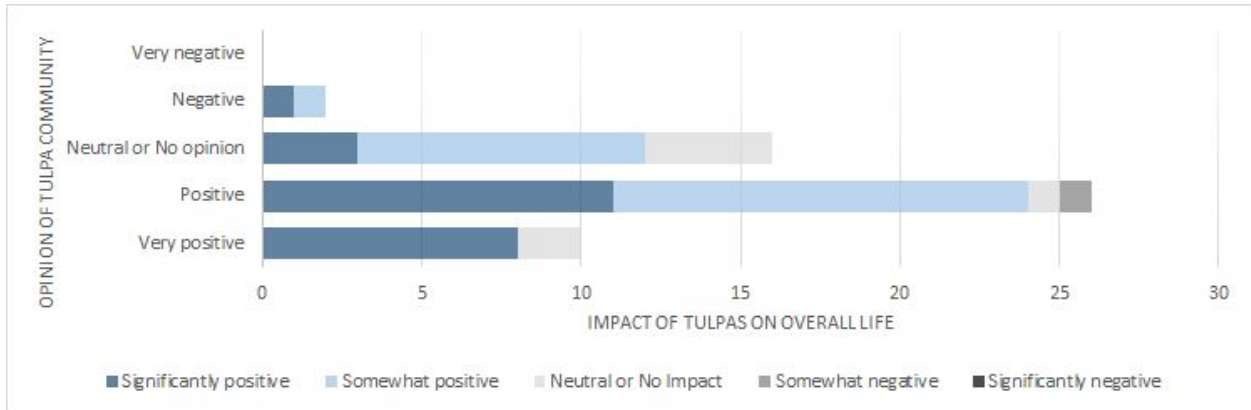


Chart 5

Chart 6 compares the opinion of the tulpa community to the impact of tulpas on mental health:

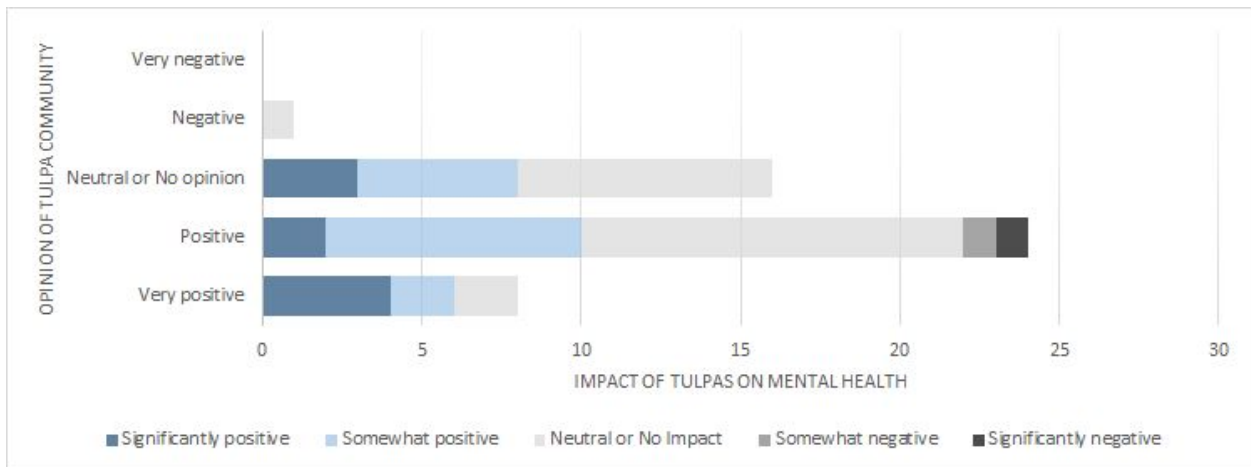


Chart 6

C. Data Tables for Charts 4-6

Table of *Chart 4* comparing the reason for making tulpas to the impact of tulpas on overall life:

		Impact of Tulpas on Overall Life				
		Significantly positive	Somewhat Postive	None/Neutral	Somewhat negative	Significantly negative
Reason for making tulpas	Friends or companions	22	17	3	1	0
	Curiosity or experimentation	17	17	4	1	0
	Self-improvement or mental health benefits	17	10	2	0	0
	Romance or a romantic relationship	3	1	1	0	0
	To join a community	1	1	1	0	0
	Sex or a sexual relationship	0	0	1	0	0

Table of *Chart 5* comparing the opinion of the tulpa community to the impact of tulpas on overall life:

Opinion of frequented parts of the tulpa community

		Very positive	Positive	Neutral or No opinion	Negative	Very negative
Impact of Tulpas on Overall Life	Significantly positive	8	11	3	1	0
	Somewhat positive	0	13	9	1	0
	Neutral or No Impact	2	1	4	0	0
	Somewhat negative	0	1	0	0	0
	Significantly negative	0	0	0	0	0

Table of *Chart 6* comparing the opinion of the tulpa community to the impact of tulpas on mental health:

Opinion of frequented parts of the tulpa community

		Very positive	Positive	Neutral or No opinion	Negative	Very negative
Impact of Tulpas on Mental Health	Significantly positive	9	7	4	0	0
	Somewhat positive	2	16	6	2	0
	Neutral or No Impact	1	8	0	0	0
	Somewhat negative	0	0	0	0	0
	Significantly negative	0	0	0	0	0