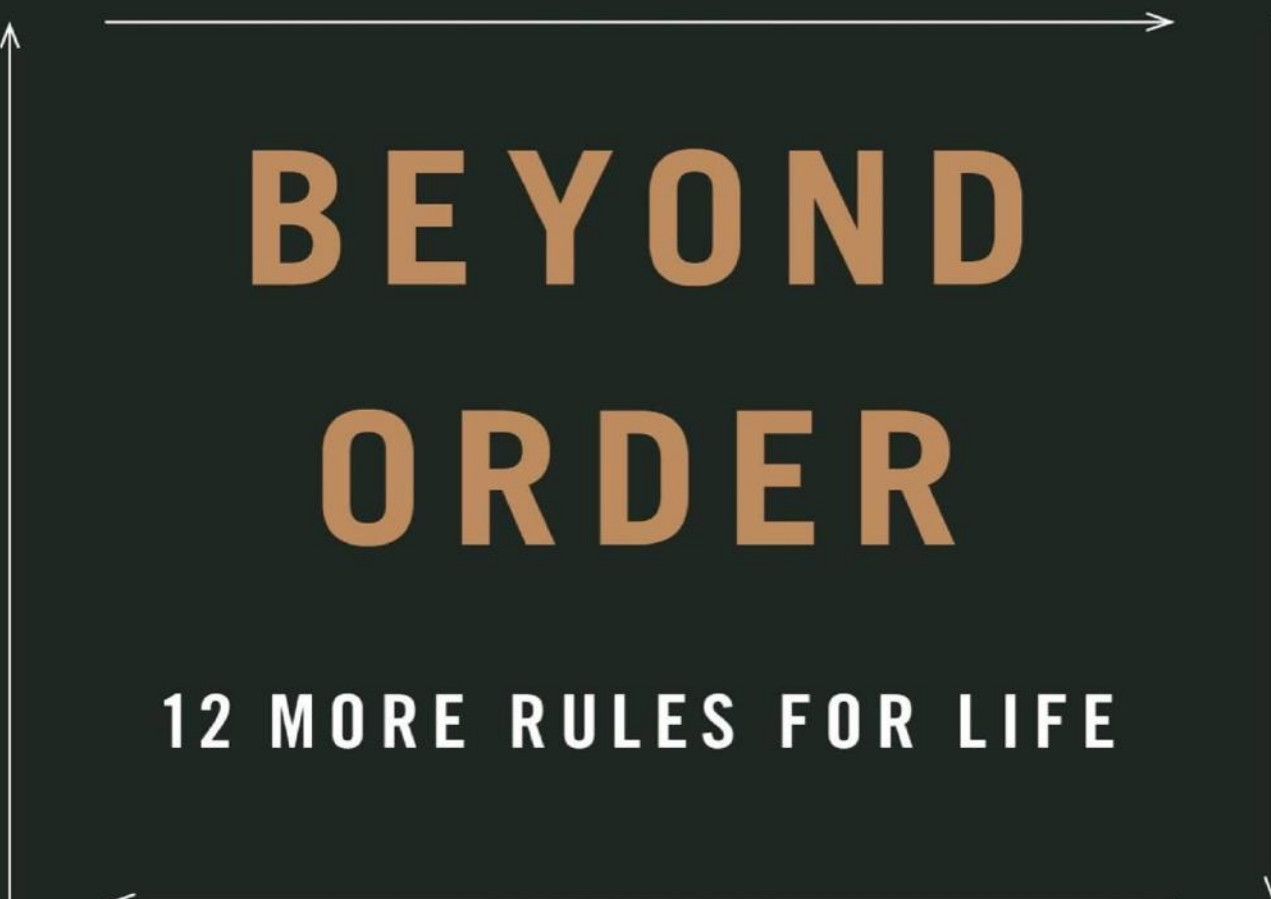


INTERNATIONALLY BESTSELLING AUTHOR OF
12 RULES FOR LIFE: AN ANTIDOTE TO CHAOS

JORDAN B.
PETERSON



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ORDER**

12 MORE RULES FOR LIFE

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12 Rules for Life: An Antidote to Chaos

Beyond Order

12 MORE RULES
FOR LIFE

Jordan B. Peterson

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To my wife, Tammy Maureen Roberts Peterson, whom I have loved deeply for fifty years, and who is admirable, in my estimation, in all regards, and beyond all reason.

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- 3. St. George and the Dragon:** Inspired by Paolo Uccello, *Saint George and the Dragon* (ca. 1458).
- 4. Atlas and the Hesperides:** Inspired by John Singer Sargent, *Atlas and the Hesperides* (ca. 1922–1925).
- 5. Fallen Angel:** Inspired by Alexandre Cabanel, *Fallen Angel* (1847).
- 6. In our Communal Farm:** Inspired by B. Deykin, *In Our Communal Farm, There Is No Place for Priests and Kulaks* (1932).
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- 8. Irises:** Inspired by Vincent Van Gogh, *Irises* (1890).
- 9. The Temptation of St. Anthony:** Inspired by Martin Schongauer, *The Temptation of Saint Anthony* (ca. 1470–1475).
- 10. The Love Drink:** Inspired by Aubrey Beardsley, *How Sir Tristram Drank of the Love Drink* (1893).
- 11. Satan:** Inspired by Gustave Doré, *Satan*, from John Milton, *Milton's Paradise Lost*, with illustrations by Gustave Doré (London: Cassell & Company, Ltd., 1905).

12. St. Sebastian: Inspired by Martin Schongauer, *Saint Sebastian* (ca. 1480).

A Note from the Author in the Time of the Pandemic

It is a perplexing task to produce a nonfiction book during the global crisis brought about by the spread of COVID-19. It seems absurd, in some sense, even to think about anything else but that illness during this trying time. Nonetheless, binding all the thoughts contained in any current work to the existence of the pandemic— which too shall pass—seems like an error, as the normal problems of life will return at some point (and thankfully) to the forefront. That all means that an author of the present day is inevitably going to make one mistake (concentrating too much on the pandemic, which has an uncertain life span, and producing a book that is instantly dated, in consequence) or another (ignoring the pandemic, which is very much like failing to attend to the proverbial elephant under the rug).

After considering this, as well as discussing the issues with my publishers, I decided to write *Beyond Order: 12 More Rules for Life* according to the plan laid out for it several years ago, and to concentrate on addressing issues not specific to the current time (thus, to risk the second error rather than the first). I suppose it may also be the case that those who have chosen to read this book or listen to the audio version might be relieved to turn their attention to something other than the coronavirus and the devastation it has wrought.

Overture

On the fifth of February 2020, I awoke in an intensive care ward in, of all places, Moscow. I had six-inch tethers attaching me to the sides of the bed because, in my unconscious state, I had been agitated enough to try to remove the catheters from my arm and leave the ICU. I was confused and frustrated not knowing where I was, surrounded by people speaking a foreign language, and in the absence of my daughter, Mikhaila, and her husband, Andrey, who were restricted to short visiting hours and did not have permission to be there with me at my moment of wakening. I was angry, too, about

being there, and lunged at my daughter when she did visit several hours later. I felt betrayed, although that was the furthest from the truth. People had been attending to my various needs with great diligence, and in the wake of the tremendous logistic challenges that come about from seeking medical care in a truly foreign country. I do not have any memory of anything that happened to me during the most recent weeks preceding that, and very little between that moment and my having entered a hospital in Toronto, in mid-December. One of the few things I could recall, looking back to the earliest days of the year, was the time I had spent writing this book.

I wrote much and edited almost all of *Beyond Order* during a time when my family was plagued by sequential and overlapping bouts of seriously impaired health, much of which was the subject of public discussion, and for that reason requires some detailed explanation. First, in January 2019, Mikhaila had to seek out a surgeon to replace much of her artificial ankle, implanted about a decade earlier, as the initial installation was never perfect, causing her serious pain and trouble with movement as a consequence, and then came near to failing. I spent a week with her at a hospital in Zurich, Switzerland, for the week of that procedure and her initial recovery.

At the beginning of March, my wife, Tammy, underwent routine surgery in Toronto for a common and eminently treatable kidney cancer. A month and a half after that surgery, which involved the removal of one third of the organ in question, we learned that she was actually suffering from an extremely rare malignancy, which had a one-year fatality rate of close to 100 percent.

Two weeks later, the surgeons involved in her care removed the remaining two thirds of her afflicted kidney, along with a substantial proportion of the related abdominal lymphatic system. The surgery appeared to bring the progression of the cancer to a halt, but produced leakage of fluid (up to four liters, or one gallon, a day) from her now-damaged lymphatic system—a condition known as chylous ascites—which rivaled the original condition in danger. We journeyed to see a medical team in Philadelphia, where within ninety-six hours of the initial injection of a poppy seed oil dye, whose practical purpose was the enhancement of images derived from CAT or MRI scans, the complete cessation of Tammy's fluid loss was achieved. This breakthrough occurred on the very day of our thirtieth wedding anniversary. She recovered rapidly and, to all appearances,

completely—a testament to the luck without which none of us can live, and to her own admirable strength and resistance.

Unfortunately, while these events unfolded, my health fell apart. I had begun to take an anti-anxiety agent at the beginning of 2017, after suffering from what appeared to be an autoimmune reaction to something I had consumed during the Christmas holiday period of 2016.* The food reaction made me acutely and continually anxious, as well as freezing cold, no matter what clothes I was wearing or how many blankets I layered upon myself. Further, it lowered my blood pressure so dramatically that whenever I tried to stand I would gray out and be forced into a crouch half a dozen or more times before trying again. I also experienced insomnia that appeared near total. My family physician prescribed a benzodiazepine as well as a drug for sleeping. I took the latter a mere handful of times before ceasing its use entirely; the terrible symptoms I was experiencing, including the insomnia, were almost immediately and entirely eradicated by the benzodiazepine treatment, making the sleep agent unnecessary. I continued the benzodiazepine for almost exactly three years, because my life did seem unnaturally stressful during that time (the period when my life changed from the quiet existence of a university professor and clinician to the tumultuous reality of a public figure), and because I believed that this drug was—as is often claimed of benzodiazepines—a relatively harmless substance.

Things changed, however, in March 2019, at the onset of my wife's medical battle. My anxiety spiked noticeably after Mikhaila's aforementioned hospitalization, surgery, and recovery. In consequence, I asked my family physician to increase my dose of benzodiazepine, so that I would not be preoccupied by nor preoccupy others with my anxiety. Unfortunately, I experienced a marked increase in negative emotion following the adjustment. I asked to have the dosage raised yet again (by this time, we were attempting to deal with the second of Tammy's surgeries and its complications, and I attributed my even more severe anxiety to that problem), but my anxiety increased even further. I attributed all of this not to a paradoxical reaction to the medication (which it was later diagnosed as), but to the recurrence of a tendency toward depression that had plagued me for years.* In any case, I ceased using the benzodiazepine entirely in May of that year, trying two doses of ketamine within a week, as suggested by a psychiatrist with whom I consulted.

Ketamine, a nonstandard anesthetic/psychedelic, sometimes has overwhelming and sudden positive effects on depression. It produced nothing for me but two ninety-minute trips to hell. I felt to my bones as if I had everything to feel guilty and ashamed about, with nothing gained by my positive experiences.

A few days after the second ketamine experience, I began to suffer the effects of acute benzodiazepine withdrawal, which were truly intolerable—anxiety far beyond what I had ever experienced, an uncontrollable restlessness and need to move (formally known as akathisia), overwhelming thoughts of self-destruction, and the complete absence of any happiness whatsoever. A family friend—a physician—enlightened me as to the dangers of sudden benzodiazepine withdrawal. I therefore started to take a benzodiazepine once again—but a smaller dose than I had climbed to previously. Many, but not all, of my symptoms abated. To deal with those that remained, I also began to take an antidepressant that had been of great use to me in the past. All it did, however, was make me exhausted enough to require an additional four or more hours of sleep a day—which was not helpful in the midst of Tammy's serious health issues—as well as increase my appetite two- or threefold.

After about three months of terrible anxiety, uncontrollable hypersomnia, viciously torturous akathisia, and excessive appetite, I traveled to an American clinic that claimed to specialize in rapid benzodiazepine withdrawal. Despite the good intentions of many of its psychiatrists, the clinic managed only a slow cessation or tapering of my benzodiazepine dosage, the negative effects of which I was already experiencing and which were not and could not be controlled to any significant degree whatsoever by the inpatient treatment offered.

I resided at that clinic, nonetheless, from mid-August, a mere few days after Tammy had recovered from her postsurgical complications, to late November, when I returned home to Toronto, much the worse for wear. By this time, the akathisia (the disorder of uncontrollable movement alluded to earlier) had increased to the point where I could not sit or rest in any position for any length of time whatsoever without severe distress. In December I checked in to a local hospital, and it was at that point that my awareness of events prior to my awakening in Moscow ends. As I later learned, Mikhaila and Andrey removed me from the Toronto hospital in early

January 2020, believing that the treatment I received there was doing me more harm than good (an opinion I concurred with entirely once I learned of it).

The situation I found myself in upon reattaining consciousness in Russia was complicated by the fact that I had also developed double pneumonia in Canada, although that was neither discovered nor treated until I was in the Moscow ICU. However, I was there primarily so that the clinic could facilitate my withdrawal from benzodiazepines, using a procedure either unknown or regarded as too dangerous in North America. Since I had not been able to tolerate any decrease in dosage whatsoever—apart from the initial reduction, months before—the clinic placed me in a medically induced coma so that I might remain unconscious during the very worst withdrawal symptoms. That regimen started January 5 and lasted nine days, during which I was also placed in a machine so that my breathing was mechanically regulated. On January 14, I was taken off the anesthetic and the intubation. I woke up for a few hours, and indicated during this time to Mikhaila that I was no longer suffering from akathisia, although I remember nothing of this.

On January 23, I was moved to another ICU specializing in neurological rehabilitation. I can recall waking up on the twentysixth for a short period, until my more complete return to consciousness, as previously related, on February 5—ten days during which I passed through a period of delirium of vivid intensity. Once that cleared, I moved to a more homelike rehabilitation center in the outer suburbs of Moscow. While there, I had to relearn how to walk and up and down stairs, button my clothes, lie down in bed on my own, place my hands in the proper position on a computer keyboard, and type. I did not seem to be able to see properly—or, more accurately, see how to use my limbs to interact with what I perceived. A few weeks later, after the problems in perception and coordination had essentially abated, Mikhaila, Andrey, their child, and I relocated to Florida for what we hoped would be some peaceful time of recuperation in the sun (very much welcome after the cold grayness of midwinter Moscow). This was immediately before worldwide concern erupted over the COVID-19 pandemic.

In Florida, I attempted to wean off the medication prescribed by the Moscow clinic, although I was still experiencing numbness in my left hand and foot, trembling of those two extremities as well as the

muscles in my forehead, seizure activity, and crippling anxiety. All these symptoms increased quite markedly as my intake of medication decreased, reaching the point where about two months later I returned to the dosages initially prescribed in Russia. This was a material defeat, as the process of lessening their use had been fueled by an optimism that was consequently shattered, as well as returning me to a state of medication usage that I had paid a heavy price for trying to eliminate. I had family members and friends stay with me during this time, thankfully, and their company helped me stay motivated to continue while the symptoms I was experiencing grew unbearable, particularly in the morning.

By the end of May, three months after leaving Russia, it had become obvious that I was worsening instead of improving, and relying on the people I loved and who reciprocated that emotion was both untenable and unfair. Mikhaila and Andrey had been in touch with a Serbian clinic that practiced a novel approach to the problem of benzodiazepine withdrawal, and they made arrangements to move me there, only two days after that country had reopened after the pandemic closure.

I am not going to make a claim that the events that befell my wife, me, and those who were closely involved in her care added up, in the final analysis, to some greater good. What happened to her was truly awful. She experienced a severe and near-fatal crisis of health every two or three days for more than half a year, and then had to cope with my illness and absence. I was plagued, for my part, with the likely loss of someone whom I had befriended for fifty years and been married to for thirty; the observation of the terrible consequences of that on her other family members, including our children; and the dire and dreadful consequences of a substance dependence I had unwittingly stumbled into. I am not going to cheapen any of that by claiming that we became better people for living through it. However, I can say that passing so near to death motivated my wife to attend to some issues regarding her own spiritual and creative development more immediately and assiduously than she might otherwise have, and me to write or to preserve while editing only those words in this book that retained their significance even under conditions characterized by extreme suffering. It is certainly thanks to family and friends (who are named specifically in the Coda of this book) that we are still alive, but it is also true that the meaningful immersion in

what I was writing, which continued during the entire time I have related— excepting my unconscious month in Russia—provided me both with a reason to live and a means of testing the viability of the thoughts with which I wrestled.

I do not believe I have ever claimed—in my previous book or, indeed, this one—that it would be *necessarily* sufficient to live by the rules I have presented. I think what I claimed—what I hope I claimed—was this: When you are visited by chaos and swallowed up; when nature curses you or someone you love with illness; or when tyranny rends asunder something of value that you have built, it is salutary to know the rest of the story. All of that misfortune is only the bitter half of the tale of existence, without taking note of the heroic element of redemption or the nobility of the human spirit requiring a certain responsibility to shoulder. We ignore that addition to the story at our peril, because life is so difficult that losing sight of the heroic part of existence could cost us everything. We do not want that to happen. We need instead to take heart, and to take spirit, and to look at things carefully and properly, and to live the way that we could live.

You have sources of strength upon which you can draw, and even though they may not work well, they may be enough. You have what you can learn if you can accept your error. You have medications and hospitals, as well as physicians and nurses who genuinely and bravely care to lift you up and help you through every day. And then you have your own character and courage, and if those have been beat to a bloody pulp and you are ready to throw in the towel, you have the character and courage of those for whom you care and who care for you. And maybe, just maybe, with all that, you can get through. I can tell you what has saved me, so far—the love I have for my family; the love they have for me; the encouragement they have delivered, along with my friends; the fact that I still had meaningful work I could struggle through while in the abyss. I had to force myself to sit down at the computer. I had to force myself to concentrate, and to breathe, and to keep from saying and meaning “to hell with it” during the endless months that I was possessed by dread and terror. And I was barely able to do it. More than half the time I believed that I was going to die in one of the many hospitals in which I resided. And I believe that if I had fallen prey to resentment, for example, I would have

perished once and for all— and that I am fortunate to have avoided such a fate.

Is it not possible (even though it may not always deliver us from the terrible situation that we find ourselves in) that we would all be more able to deal with uncertainty, the horrors of nature, the tyranny of culture, and the malevolence of ourselves and others if we were better and more courageous people? If we strived toward higher values? If we were more truthful? Wouldn't the beneficial elements of experience be more likely to manifest themselves around us? Is it not possible, if your goals were noble enough, your courage adequate, your aim at the truth unerring, that the Good thereby produced would . . . well, not justify the horror? That is not exactly right, but it still comes close. Such attitudes and actions might at least provide us with meaning sufficient to stop our encounter with that terror and horror from corrupting us and turning the surrounding world into something all too closely resembling hell.

Why *Beyond Order*? It is simple, in some regard. Order is explored territory. We are in order when the actions we deem appropriate produce the results we aim at. We regard such outcomes positively, indicating as they do, first, that we have moved closer to what we desire, and second, that our theory about how the world works remains acceptably accurate. Nonetheless, all states of order, no matter how secure and comfortable, have their flaws. Our knowledge of how to act in the world remains eternally incomplete —partly because of our profound ignorance of the vast unknown, partly because of our willful blindness, and partly because the world continues, in its entropic manner, to transform itself unexpectedly. Furthermore, the order we strive to impose on the world can rigidify as a consequence of ill-advised attempts to eradicate from consideration all that is unknown. When such attempts go too far, totalitarianism threatens, driven by the desire to exercise full control where such control is not possible, even in principle. This means risking a dangerous restriction of all the psychological and social changes necessary to maintain adaptation to the everchanging world. And so we find ourselves inescapably faced with the need to move beyond order, into its opposite: chaos.

If order is where what we want makes itself known—when we act in accordance with our hard-won wisdom—chaos is where what we do not expect or have remained blind to leaps forward from the

potential that surrounds us. The fact that something has occurred many times in the past is no guarantee that it will continue to occur in the same manner.¹ There exists, eternally, a domain beyond what we know and can predict. Chaos is anomaly, novelty, unpredictability, transformation, disruption, and all too often, descent, as what we have come to take for granted reveals itself as unreliable. Sometimes it manifests itself gently, revealing its mysteries in experience that makes us curious, compelled, and interested. This is particularly likely, although not inevitable, when we approach what we do not understand voluntarily, with careful preparation and discipline. Other times the unexpected makes itself known terribly, suddenly, accidentally, so we are undone, and fall apart, and can only put ourselves back together with great difficulty—if at all.

Neither the state of order nor the state of chaos is preferable, intrinsically, to the other. That is the wrong way to look at it. Nonetheless, in my previous book, *12 Rules for Life: An Antidote to Chaos*, I focused more on how the consequences of too much chaos might be remediated.² We respond to sudden and unpredictable change by preparing, physiologically and psychologically, for the worst. And because only God Himself knows what this worst might be, we must in our ignorance prepare for all eventualities. And the problem with that continual preparation is that, in excess, it exhausts us. But that does not imply in any manner that chaos should be eliminated (an impossibility, in any case), although what is unknown needs to be managed carefully, as my previous book repeatedly stressed. Whatever is not touched by the new stagnates, and it is certainly the case that a life without curiosity—that instinct pushing us out into the unknown—would be a much-diminished form of existence. What is new is also what is exciting, compelling, and provocative, assuming that the rate at which it is introduced does not intolerably undermine and destabilize our state of being.

Like *12 Rules for Life*, the current volume provides an explication of rules drawn from a longer list of 42, originally published and popularized on the Q and A website Quora. Unlike my previous book, *Beyond Order* explores as its overarching theme how the dangers of too much security and control might be profitably avoided. Because what we understand is insufficient (as we discover when things we are striving to control nonetheless go wrong around us), we need to