

“ I have spent my life  
seeking all that’s still unsung,  
bent my ear to hear the tune,  
and closed my eyes to see”.

-Robert Hunter (lyricist of the Grateful Dead) “Attics of My Life”,  
*American Beauty*, Warner Brother Records, 1970.

...and it was always supposed to be this way.

VALUE AND VALUES  
IN RELATION TO PSYCHEDELIC SUBSTANCES  
AND EXPERIENCES

by

Jeremy Foss

*Bachelor of Arts, University of New Brunswick, 2013*  
*Bachelor of Social Work, St. Thomas University, 2018*

A Thesis Submitted in Partial Fulfilment of  
The Requirements for the Degree of

Master of Interdisciplinary Studies

In the Graduate Academic Unit of Interdisciplinary Studies

**Supervisors:** Joseph Galbo, PhD, Sociology  
Eric Weissman, PhD, Sociology

**Examining Board:** Dann Downes, PhD, Faculty of Arts  
Ian Rice, PhD, Social Work

This thesis is accepted by the  
Dean of Graduate Studies

THE UNIVERSITY OF NEW BRUNSWICK

December, 2023

© Jeremy Foss, 2024

## **Abstract**

The following is an interdisciplinary study of the uses of psychedelics for self-improvement, ritual and integrative social functions, medicinal relief of psychological and emotional trauma, and other mental health pathologies and illnesses.

There is a dual purpose to this study. The first is to deconstruct the stigma surrounding psychedelics to explore how they have been excluded as natural remedies from common narratives on treatment. Stigma effects the way in which the world views these substances, and as this research shows, influences how users interpret and value their experiences with them. The second purpose is to explicate the similarities and differences between three unique settings outlined for the study: *Clinical*, as in being used under the supervision of a professional clinician, *Ceremonial or Ritualistic*, as in ceremonies such as an Ayahuasca ceremony, and *Recreational*, as in use by people in social settings. The research identified specific protocols, defined as *best practices* by interviewees, for maximizing the impacts of psychedelic use in each of these discrete contexts.

Based on the first-hand experiences of users in these three settings, this thesis has proposed strategies for harm-reduction across all settings. This thesis informs current and future efforts to de-stigmatize psychedelics and promotes educating the public about their use. It contributes to harm-reduction approaches by demonstrating smart ways to manage psychedelic experiences for the purposes of enhancing mental health, reducing trauma and, for optimizing forms of self-improvement.

Key Terms: Psychedelics, Therapeutic, Set and Setting, Ritual, Ceremonial, Recreational, Clinical, Harm Reduction, Psychedelic Renaissance, Drug use, Drugs, Self-Improvement, Medicine, Medication, Self-Medication.

## **Dedication**

My Dad for always believing in me, Griff for having such a large impact on my life in such a short time, Preston for being the absolute very best I could imagine him being and making every day brighter, my Mom, whose contributions to this project are beyond any value that could be assigned, Kristina Birch and her family for their consistent support and understanding, Sully for being the most loyal companion I could ever ask for and for sticking around for so long, Devin Donegani for helping sow the ground for this idea and in the end reaching the harvest, Rose Porter for being there when the idea took root, Matt Scott for introducing me to this way of seeing psychedelics, Ryan O'Hourihan for the conversations during the planning phase, the interviewees for their time and consideration and all being awesome in their own right, James McClure, Joe Galbo, Eric Weissman, Clive Baldwin, Ian Rice, Dann Downes, Arielle Dylan, David Foster Wallace, Rod Serling, Lou Reed, Layne Staley and The Replacements.

## Table of Contents

<b>Abstract</b> .....	ii
<b>Dedication</b> .....	iii
<b>Table of Contents</b> .....	v
<b>List of Tables</b> .....	viii
<b>List of Appendices</b> .....	ix
<b>Introduction</b> .....	1
0.1 An Autoethnographic Approach to the Research .....	1
0.2 Overview of the Purpose of the Research: The Disciplines Included .....	6
0.3 The Role of Settings in Psychedelic Use and Goals of Research.....	7
0.4 The Hypothesis .....	8
0.5 The Relevance of the Research .....	8
0.6 Summary of the Introduction.....	9
<b>Chapter One: Theoretical and Historical Backdrop: Mapping Out the Themes</b> ....	12
1.1 Mapping the Origins of Ritualistic/Ceremonial Use .....	13
1.2 Mapping the History of Clinical Use .....	22
1.3 Mapping Recreational Use .....	25
1.4 The Psychedelic Renaissance and the New Therapeutic Ethos .....	30
1.5 The Clinical and Ceremonial Setting: Treating Psychic Trauma .....	34
<b>Chapter Two: Setting the Context for the Research</b> .....	38
2.1 Sample: Finding the Participants .....	38
2.2 Interview Style: Designing the Interviews .....	40
2.3 Methodology: The Approach .....	43

2.4 Ethics and Consent .....	47
2.5 Entering the Field: Identifying the Participants.....	48
2.6 Identifying the Drugs of Choice .....	51
<b>Chapter Three: Theme Analysis and First Experiences with Psychedelics .....</b>	<b>55</b>
3.1 Theory .....	55
3.2 Initial Themes from the Interviews: Reasons for Initial Psychedelic Use .....	58
3.3 Reasons for Early Use Contrasted with Reasons for Later Use .....	59
3.4 Set and Setting as a Factor in Early Use .....	62
3.5 The Effects of Stigma .....	63
3.6 Accessibility .....	68
<b>Chapter Four: Set and Setting, Protocols and Best Practices .....</b>	<b>73</b>
4.1 A Brief History of Set and Setting .....	73
4.2 Interviewees' Accounts of Protocol in Varying Settings .....	80
Protocols in a Clinical Setting .....	80
Protocols in a Ceremonial Setting: Mushroom Ceremony.....	85
Researcher's Account of his Experience and the Protocols of the Ayahuasca Ceremony .....	88
4.3 Summary of Protocols Described .....	95
4.4 The Interviewees and their Advice on Best Practices .....	98
<b>Chapter Five: Perceived Benefits of Psychedelic Use .....</b>	<b>116</b>
5.1 Interviewees' Reflections on the Benefits of their Psychedelic Experiences	116
5.2 Summary List of Benefits Identified Through the Interviews.....	140
<b>Conclusion .....</b>	<b>143</b>

6.1 Where We Are Now .....	143
6.2 Looking to the Future .....	150
<b>Bibliography</b> .....	160
<b>Appendices</b> .....	170
7.1 Appendix A: Interview Questions .....	170
7.2 Appendix B: Information Letter .....	172
7.3 Appendix C: Informed Consent Letter .....	174
7.4 Appendix D: Research Ethics Board Approval .....	176

**Curriculum Vitae**



## **List of Tables**

4.3 Summary of Protocols Described, p. 87.

5.2 Summary List of Benefits Identified Through the Interviews, p. 129.

## **List of Appendices**

- 7.1 Appendix A: Interview Questions, p. 157.
- 7.2 Appendix B: Information Letter, p. 159.
- 7.3 Appendix C: Informed Consent Letter, p. 161
- 7.4 Appendix D: Research Ethics Board Approval, p. 163.

# Value and Values in Relation to Psychedelic Substances and Experiences

## Introduction

### 0.1 An Autoethnographic Approach to the Research

The researcher has had subjective experiences with psychedelics and incorporates three of his own personal and meaningful experiences with psychedelics into the text, intertwined with the accounts drawn from the interviews conducted. Reading about his journey, as well as the accounts of his research participants, will give the reader a thicker description of the experience of psychedelics. His own journey includes a value change from seeing drugs as substances to seeing drugs as medicine with some potential benefits. This transition is very personal and the reason he chose to pursue this research in the first place. The narration of his journey needed to be included. He cannot write himself out of the interpretation of the psychedelic experience, so he might as well acknowledge it.

This thesis is an example of *messy text*, as described by Denzin (1995). A messy text combines interviews, research, data collection and narrative autoethnography to produce a text that draws on a variety of styles, approaches, and media to address an issue or subject. The reason messy texts are commonly used is that the individual doing the research has a personal connection or personal experience with the topic. They are messy because the idea of an easy, objective truth or a singular interpretation is highly unlikely and, because all ethno-truths are fictions of a sort.

This study thus takes an autoethnographic approach to the research because the researcher integrates his own experiences with psychedelics into his interpretation. The result is something academic but also very personal and cathartic, as can be seen as this thesis moves in and out of personal and scholarly voices. The underlying motivation for

the research was to combine the personal and the academic for discussion about the value and values associated with psychedelic drugs.

As an example of the processes entailed in an auto-ethnography, the researcher would like to give the reader an excerpt from a diary written by him about his own psychedelic experience;

It was the Thursday after the 20<sup>th</sup> annual, and what would be the last, *Evolve* music festival, which had been held for the last three years in Beersville, New Brunswick. I had just got back a few days earlier from doing psychedelic harm reduction at the festival. Since having just moved into a new apartment, I had spent the last few days since the festival sorting boxes and, by this point, had put everything away, arranging the new place to my satisfaction. However, in the process of sorting through the last of the festival things, I had found three grams of mushrooms that were smooshed into a piece of crinkled cooking tinfoil. This particular Thursday morning, I had just finished an over-night shift when I found myself looking at those last remnants of the festival.

Seeing that dulled crinkly shattered mirror package gave me a feeling of nostalgia; remembrances of being a pre-teen/teen and procuring drugs wrapped in tinfoil and zip lock bags. I thought back to how they were sometimes melted at the ends to hold lesser amounts, a trick I had later learned to be common in the cocaine trade.

I looked around the freshly nested apartment and it came over me, I should eat those mushrooms. I had been participating in ayahuasca ceremonies for a few years each spring and, at the last one I attended, an idea occurred to me on the

drive home from the ceremony in Cape Jourimain, located at the end of New Brunswick before you hit the Confederation Bridge to Prince Edward Island. I had graduated with my Bachelor of Social Work a year and half prior to that ceremony and had been working doing full time support work for Indigenous children, not using my degree but working in the field.

During this period, I had learned a great deal about the psychedelic renaissance and the use of these substances in a variety of settings. I had taken a lot of acid in early high school but had gotten away from it when I was around 17 or 18. That was until I had attended an ayahuasca ceremony four years earlier (more on that experience in Chapter Four). Since then, I have gone and participated in two or three ceremonies once a year. I had taken acid, MDMA and mushrooms a few times at festivals and concerts and a few times staying up too late with a few good friends. The best way to consume mushrooms is with an eyeshade on, I had read, during my research, while listening to classical music, in the dark, by yourself, and with no external stimulation. I had never tried it before or known someone who had. At that moment when I walked in the door and looked around, I knew what I was going to do. I called a close friend and asked him for a favour. I took the dog outside and when I got back, I got the mushrooms, put them in my pocket with some cannabis, and sat down on the couch. After I finished rolling a large joint, he arrived. I patted my dog on his head, went into my room, and closed the door behind me.

My bed, at the time, was just a mattress in the middle of the floor, in a spacious room with a desk at one end and hip-high windows running across the

top of the far wall from the door. I got a bandana, my laptop, and some water. I drew the curtains and found a Multi-Disciplinary Association for Psychedelic Studies (MAPS) curated playlist I had read about. I changed into shorts and a T-shirt. I turned the playlist on, placed my laptop on the desk on the far wall and fiddled with the volume, adjusting the sound to get it exactly right. I went into the bathroom connected to my bedroom and sat down on the toilet. As I held the crinkled-up tin foil patty of mushrooms in my hand, I lit the joint. I thought about what I wanted from this experience. Intention is particularly important to the drug experience. What I wanted on this occasion was to confront existing trauma in my life that I felt prevented me from living as full a life as possible. I went into this experience looking to confront no particular trauma. As I took the last puff off the joint, I unwrapped the mushrooms from their crinkly womb. With a singular motion, I threw the roach into the toilet, the tinfoil carcass into the garbage beside the toilet and placed the mushrooms in my mouth. It felt pretty smooth. I lit a cigarette and sat there and contemplated the journey I was about to take.

When I had finished smoking, I went and laid down on my bed and, as I lay there waiting for the mushrooms to kick in, I faded in and out of consciousness, as you never fully sleep on an overnight shift. When they had completely kicked in, I felt a warm and comforting presence on my right side. However, as my experience continued, I became aware that, if I rolled on to my left side, it was like I was engaging with the trauma I had wanted to confront. I soon came to the realization that, if that engagement was getting to be overwhelming, I could turn to my right and take a break. This was understood

with no interaction, no teaching, just something that I knew, something that was obvious. It was as if I had a control that enabled me to turn on and off the intense part of the experience and approach it at my own pace.

To understand the content of my experience requires brief, personal context to what I was experiencing. The trauma I was now confronting was a skateboard accident that happened when I was 12, an accident that resulted in a traumatic brain injury. I was in the hospital for a few months and had to learn to walk and talk again. This had a huge impact on how I viewed myself.

What I experienced that morning was a vision of a tie-dyed stick figure. I understood the character as *myself*. This little tie-dyed stick figure was on a skateboard and was flying along against a black back drop. Describing it, I would say it was almost like a picture on a black board, but unrestrained by space.

The character fell and broke into physically separate pieces. This experience was quite intense. I understood the character as *me*, watching my own story being acted out by a nameless and faceless figure. When things got too intense, I could turn to the right side and was embraced by a warm welcoming presence.

As the broken stick figure was lying there on the floor, a sort of conveyor belt, clothesline came along and scooped up the tie-dyed figure by his shoulders and started pulling him along. I saw that the character was limp, and the toes of his feet scraped across the floor, inverted in a way that I felt would be stretching out the muscles between the top of his feet and his legs in an excruciating way. I understood that the passive way in which the character was dragged was

representative of my life since the accident. I had not had the opportunity to put myself back together. I felt I was broken and just pulled passively through life. The experience with the character brought a realization that is hard to describe. I feel that, through the psychedelic experience, I was able to get a look at scattered memories, with the associated feelings of pain and insecurity and was able to put it all together into a singular, simple narrative story.

This narrative helped the researcher to formulate the idea of exploring the use of psychedelics for analyzing traumatic experiences. The personal nature of this experience is the reason behind this project making use of personal ethnography and the messy text strategy (Denzin, 1995). The story underscores a strong rationale as to why such an autoethnographic approach is useful.

## **0.2 Overview of the Purpose of the Research: The Disciplines Included**

The purpose of this inquiry is to explore the potential psychological and social benefits of using psychedelic drugs. While the focus is on benefits, there is also a recognition that there are negative effects associated with psychedelics. Harm reduction is an important component of this research as well.

The thesis has two broad approaches. First, the thesis investigates the historical and sociological reasons as to why varied stigmas are attached to psychedelic substances and their use. The study reconstructs the historical roots of this stigma and how such narrative impairs our ability to embrace the potential therapeutic benefits of psychedelics. Stigmatizing narratives must be excavated before advocates can attempt to overturn stigma. Stigma affects the way in which science, medicine, and the public view these



substances, and tends to project a negative image on people who use psychedelics recreationally, or medicinally.

The second approach investigates the varied ways in which media and popular literature focus on how psychedelic substances can be used for therapeutic self-improvement. Psychedelics have been recognized to expand consciousness, relieve stress and depression, and open philosophical and moral pathways.

In the early 2020's, a new interest in psychedelics emerged with what the writer Michael Pollan (2015) has called a *psychedelic renaissance*. This renaissance is characterized by new vogue in psychedelic-assisted psychotherapies and in ayahuasca ceremonies, which are perceived as potentially viable alternatives to current mental health practices.

While there is a great deal of research being conducted and published about the potential benefits of the clinical use of psychedelic-assisted psychotherapy, there is little research being done on the recreational use of psychedelics. This is because of the difficulty in gaining access into using subcultures, a typical problem for scholars of deviance (Becker, 1953; Bourgois, 2009; Goffman, 1974; Weissman, 2013). By using an ethnographical approach, where the researcher identifies with the sub-culture, he was able to gain access to interviewing people within the sub-culture.

### **0.3 The Role of Settings in Psychedelic Use and Goals of Research**

The first goal is to deconstruct the stigma surrounding psychedelics to explore how they have been excluded, as natural remedies, from common narratives on treatment. Stigma effects the way in which the world views these substances, and as this research shows, influences how users interpret and value their experiences with them. The second

goal is to explicate the similarities and differences between three unique settings outlined for the study: *Clinical*, as in used under the supervision of a professional clinician, *Ceremonial or Ritualistic*, as in used in ceremonies such as an ayahuasca ceremony, and *Recreational*, as in used by people in social settings. The research identified specific protocols, defined as *best practices* by interviewees, for maximizing the impact of psychedelic use in each of these discrete contexts. The reason for focussing on different settings is to discuss the potential benefits gained from using psychedelics and to discuss protocols or best practices for the highest potential benefit, given the different settings.

#### **0.4 The Hypothesis**

Since there is a gap in information, despite broad use, there is reason to investigate why people use psychedelics for recreational purposes and how they are exploring their use for mental health. This thesis is based on the hypothesis that people who are using these substances are wrapped up in an unconscious collective seeking of enlightenment, creativity, insight, connectedness, and healing. The participants in the study were able to identify what they perceive as benefits to using psychedelics and to provide guidelines as to best practices for the use of psychedelics. It is believed by the researcher that whether it be in a clinical setting, a ceremonial setting or recreationally, the reasons people use these substances, for therapeutic benefits, across all three settings, are the same in nature.

#### **0.5 The Relevance of the Research**

The popularity of Michael Pollan's book, *How to Change Your Mind* (2018), shows that there is public interest in changing society's perception of psychedelics, as well as a willingness to examine existing laws and conventions. As a result, this appears to be a

good time to do such a study and to contribute to the transformation of the political, social, and ideological landscape. As Stanislav Grof (1980) said;

It does not seem to be an exaggeration to say that psychedelics, used responsibly and with proper caution, would be for psychiatry what the microscope is for biology and medicine or the telescope is for astronomy. These tools make it possible to study important processes that under normal circumstances are not available for direct observation. (p.12)

It has been over half a century since he made that statement, but the validity of it remains. Canada's current dominant mental health approaches, largely pharmacologic and interventionist therapies, are not ideal; they can create dependencies, can be expensive, and can be ineffective. The war on drugs approach is widely considered a massive failure. It is imperative to look beyond the current system for other approaches to augment practices in dealing with mental health and to encourage a larger conversation about the use of psychedelics.

## **0.6 Summary of the Introduction**

The recent widespread media coverage of psychedelic substances, from micro-dosing to psychedelic tourism, has amplified incorrect, widely held assumptions that they are panaceas for all kinds of problems. This thesis argues that is not the case.

Psychedelics are powerful and sometimes unstable substances that can be beneficial and have positive outcomes, but only given certain provisions. A safe supply must exist, intentions and expectations must be set for participants, and support systems must be in place to avoid the potential for a harmful experience. Misuse of psychotherapy, psychopharmacology and common substances like alcohol or cannabis can have negative

results. Psychedelics are manageable, and if brought into the mainstream, there is immense potential for providing positive and safe experiences. Education is key towards ensuring positive outcomes. More widely disseminated knowledge about the nature of psychedelics and their potential benefits can de-stigmatize their use and help people consume them safely, with better outcomes. If the medical claims play out as positively as argued in this work, psychedelics will have a social utility hereto unimagined in the mainstream.

The thesis examines the social, political, and historical aspects of stigma because, if we want to fight stigma, we need to understand where it comes from. Through examining protocols followed by participants, in order to identify best practices and benefits, the research is taking a mental health approach to the use of psychedelics, holding a critical academic lens to the field of self-improvement.

Thus, this thesis will begin with an examination of the theoretical and historical background of psychedelic use, in order to map out the cultural, historical, and political reasons why psychedelics have been held both as a panacea to social and personal problems, and as a political threat to social stability.

The thesis will next outline the methodology used in the study. Following that, the interviewees will be introduced, and the psychedelic drugs defined more thoroughly. The interviews will then be analyzed, and the content discussed through themes. The themes include first experiences with psychedelics and stigma, experiences/protocols in clinical/ceremonial/recreational settings, and advice on best practice and benefits, all as described by interviewees.

The thesis concludes by addressing some contemporary issues in relation to psychedelics such as capitalism, medicalization, commercialization, and the need for continuing education as to best practices when using psychedelics.

## **Chapter One: Theoretical and Historical Backdrop: Mapping Out the Themes**

This chapter outlines a critical-historical narrative/genealogical approach and conducts a social constructionist critique of the history of psychedelics, focusing on a few key figures and events. This chapter serves as a guide to a broad history of psychedelic use and how this history unfolded in the North American context. Within this context, the literature relevant to the thesis is examined. When conducting the literature review, the focus was on the cultural understanding of psychedelics, as the interest was with stigma attached to these activities and how that stigma and understanding has evolved in relation to the three settings outlined below. The only gap that was perceived in the ever-emerging abundance of publications on the topic of psychedelics, was that there seems to be less research on the recreational use of psychedelics and in how stigma plays into using psychedelic drugs in that setting.

In this chapter, references are made to the importance of ritual, the rise of medical and clinical discourse, recreational time, stigma, and the political and social context that both enabled and dampened the use of psychedelics in society. At the same time, this chapter provides a theoretical framework, borrowed largely from social anthropology and sociology, that will help to interpret the symbolic importance of the ceremonial, clinical, and recreational settings. These are the settings within which the seven interviewees, who volunteered for this study, were asked to discuss their experience with psychedelics. These settings are part of a symbolic order; they frame the ways in which the experience is reported and understood. Understanding some of historical, social, and psychological implications of these three settings is an important first step in the analysis.

## 1.1 Mapping the Origins of Ritualistic/Ceremonial Use

Psychedelics have been around since the beginning of recorded human history. We have evidence showing these substances being used in religious rites or as part of a ritualistic ceremony. Researchers (Fadiman, 2011; Hancock, 2015; Lee and Shlain, 1985; McKenna, 1993; Miller, 2017; Pollen, 2015; Ratch, 1998; Stevens, 1987) often refer to this rich visual and textual documentation as evidence of the great significance of psychedelic drugs in the lives of our human ancestors. Their ideas will be introduced and explored as the thesis is outlined. One of the earliest visual pieces of evidence of the ritualistic use of psychedelics dates back to 5,000 B.C.E. and was found, as a painting, in a cave on the Tassili plateau of southwestern Algeria. It is part of a series of frescoes of mushroom-holding shamans. Other frescoes, dating back to 4,000 B.C.E., have been found in a cave in Villar del Humo in Spain, showing what some believed to be psilocybin mushrooms (McKenna, 1992). Researchers also hypothesize that, around 2000 B.C.E., the ancient Greeks manufactured the potion Kykeon using ergot, the fungus from which lysergic acid diethylamide (LSD) is derived. This potion was to be used in the Eleusinian Mysteries, a secret religious rite of ancient Greece (Hancock, 2015). One of the most important non-European texts to mention psychedelics is the *Rig Veda*, an ancient collection of Sanskrit hymns originating in the Kashmiri region of India and detailing the use of a psychedelic drink called Soma (McKenna, 1991). In the Americas, evidence of the use of psychedelics dates to 3700 B.C.E., where Indigenous Peoples near the Mexico/Texas border in the Shumla Caves collected peyote buttons and built peyote sculptures, presumably for peyote ceremonies (McKenna, 1991). There were mushroom stones discovered in Guatemala that would indicate a sophisticated use of psilocybin in

ritualistic ceremony, dating back to 1500 B.C.E.. Another early indication of psychedelic use in the Americas is a stone carving of a deity with a San Pedro Cactus, discovered in Peru and dating back to 1300 B.C.E.. There are statues in central Mexico dating to 100 B.C.E., depicting mushrooms with gods coming from them, portraying religious use of the substance. There is evidence of ritualistic Peyote use throughout what is now Texas and Northern Mexico (Hancock, 2015). The wide range of ancient references to the use of psychedelics illustrates that the relationship between humans and mind-altering substances is long, substantial, and well-noted in early peoples' oral and written mythologies, as well as in historical, anthropological, and medical literature.

During the more modern period of European imperial expansion and the conquest of the Americas, roughly 1600-1900, interest in the ritual use of psychedelics intensified. Not surprisingly, representatives of the Catholic and Anglican Churches, who often accompanied explorers and naval armadas, were among the first to report on such ritual uses. In 1496, in the Haiti/Dominican Republic, Friar Ramon Pané recorded what some consider the first written documentation of the ceremonial use of Cohoba/Yopo, which contains the psychotropic chemical dimethyltryptamine (DMT) (Pané, 1494). The Spanish priest, Bernardino de Sahagun, wrote about the use of peyote by the Aztecs in the *Florentine Codex*, (McKenna,1992). Early accounts from missionaries were supplanted, a few centuries later, by the detailed reports of scientists. In 1785, English botanist Richard Spruce, while exploring the Amazon, observed the Tukano Indians of Brazil engaging in an ayahuasca ceremony. He drank some of the tea and brought samples home with him for analysis and it is claimed to be one of the first Western detailed records of an ayahuasca ceremony (Hancock, 2015).



Western interest in the ritual use of these substances involved a sustained exploration (and theft) of traditional Indigenous knowledge. European travelers, adventurers, medical practitioners, professional academics, and colonial administrators steadily contributed to the growing knowledge of the use of psychedelic drugs among Indigenous Peoples and reported about effects of such substances. The work of these early explorers was followed by a body of professionalized medical literature on psychedelics that established itself in the 18<sup>th</sup> and early 19<sup>th</sup> centuries, when western medical discourse became professionalized in modern institutions. Professional practitioners began to systematically study the use of psychedelic compounds when fueled by the scientific revolution so salient between 17-1900. The medical scholarship of the period was dominated by what the French historian and theorist, Michel Foucault, would call the *medical gaze* (Foucault, 1963, p.7). In his work, *The Birth of the Clinic: An Archeology of Medical Perception* (Foucault, 1963), he views the gaze as a conceptual rationalizing process, a way of understanding the human body as a discreet set of interacting organs. The medical gaze represents a mode of state-centric control over the human body by modern science. Knowledge of the mind, the self, and the body is filtered through the new lens of medicine. The state then uses the new medical technology to generate knowledge to subdue populations (Foucault, 1963, 1969, 1975). In *The Birth of the Clinic* (1963), Foucault shows how health and sickness, sanity and insanity, come to be constructed by regimes of knowledge through the new instrumental language of medical science. There exists a preference for finding cause and effect for conditions and the rationalization of scientific means to achieving moral ends. In this framework, the medicalization of traditional practices and substances, it is easy to lose

sight of the mystical and symbolic role these substances play as ritual and ceremonial elements of culture.

Rituals and ceremonies can be defined as actions performed in a customary way. For Durkheim (1912), rituals are traditionally organized around sacred objects as their focal point. When put in practice, rituals become the fundamental way in which individuals are integrated into a social order that provides them with meaning and acceptance into whatever community they may belong to. For Van Gennep (1909), rituals are understood as parts of rites of passage, which he breaks into three phases, separation, liminality, and incorporation. In the context of psychedelics, separation would be intention setting, liminality would be the experience, and incorporation would be the post-experience integration. These classic thinkers present ideas that prove how impossible it is to think of the use of psychedelics in purely instrumental or utilitarian ways. It is more complicated than the simple structural, functional, or symbolic leanings of classic anthropologists. In some ways, ritual and ceremony are best understood in terms of their dramaturgical and symbolic functions, (Durkheim, 1912; Goffman, 1974; Lévi-Strauss, 1962). Understanding ritual is perhaps the main focus of classical anthropology. Durkheim (1912) and Van Gennep (1909) focused their brilliant minds on rites of passage and collective experiences driven by shared ritual performances. In all these works, the functionality of human practices is examined for the mystical and concrete structural implications, but this analysis is set in motion by understanding the symbolic nature of ritual practices.

A review of some of the literature key to social and cultural anthropology and symbolic interactionist sociology can help to better understand this importance of

symbols and the symbolic value of ritualized use of psychedelics. This can be seen as a symbolic approach, since other ways of doing social and cultural anthropology emphasize other elements of culture, yet the symbolic forms most vividly contrast with the view that modern life is dominated by rational, calculated and morally balanced utilitarian behavior, rooted in post-enlightenment, post-Bentham views of society as dependent on rational culture and organizational and scientific principles (Weber, 1905; Simmel, 1908; Michels, 1915). This paradigm assumes there is always a gap between a manifested meaning immediately recognized and understood, and a latent meaning not readily apparent but perceptible.

Clifford Geertz gives an example and an analysis that makes this point clear. In his famous description of the Balinese cock fight, called *Deep Play* (1973), he suggests that there are many symbolic levels to the Balinese cock fight. On one level cockfighting is a gambling sport. On another level it is an enactment, a representation where the cocks are the men who own and bet on them and will be either victors or vanquished. On yet another level, it is a commentary on Balinese society and national character. In other words, cockfighting is a collectively sustained discourse, where something stands for something else and its meaning depends on context, motivation, intent, etc.

There is a polysemic, multi-vocal character to rituals and ceremonies, and how they are read. In later years, Robert K Merton (1976), a functionalist sociologist, spoke to the manifest and latent functions of institutions like religious practice, and cock fights, or bar mitzvahs. He argued that these rituals play key roles in the institutional performances necessary to sustain social worlds, because of both their intended and

unintended consequences. While the cock fight produces winnings of currency and prestige, it also, on a larger scale, reinforces the order of things.

Rituals and ceremonies have other characteristics that have been the subject of much sociological and anthropological discussion, especially in the work of Van Gennep (1909) and Victor Turner (1969). Both Turner and Van Gennep focus on transition points, situations when a person is literally in-between, in a limbo state with an ambiguous status. Such *liminal* states can be threatening to both the self and the group. In these transitional situations, the elements of empathy, bonding, and human connection gain importance. Van Gennep was very interested in the progression of members from antecedent statuses to more advanced social standings; hence his coining of the expression, *Les Rites Des Passages*, the title of his 1908 book. He was also interested in the spatial thresholds that required rituals or ceremonies to pass through, for example Jewish households with prayer boxes in their doorways. Great journeys, especially in ancient times, were marked by major ceremonies and religious blessings. Liminality, the state of unfinished transitions, therefore, required ritual practice to guarantee that the journey through identities or across spatial borders was successful. The concept of liminality had its roots in the nascent field of psychology in the late 1890's. As a way of discerning unfinished or developing states of mind, it found its way into anthropology. Ritual and ceremonies play a role in easing the transition from one mental state to the other, from one role to another. For Van Gennep (1909), these transitions are often linked to the biological life cycle; birth, puberty, procreation, death. People cannot pass through them on their own—there must be specialized members of the group who facilitate the transition; shamans, rabbis, chiefs, etc. Their roles are instrumental and symbolic. From a

Durkheimian perspective, what we might call a functionalist sociological position, the successful execution of progressive rituals relies on someone to guide the experience. Some ritual ceremonies are a form of degradation, where bad behaviour is punished, such as in a court case or an exile. Rituals symbolically reinforce the collective conscience of a group, honing the sense of shared belonging or solidarity because the member has been properly incorporated into a new role, or punished for violating another (Durkheim, 1912 & 1897). While communion has Christians eating wafers to symbolize the body of Christ, and wine to symbolize his blood, producing a mental state of commitment and satisfaction, psychedelics used in such ceremonies fulfill similar social functions, but with different medicinal and psychological impacts.

As stated earlier, there is evidence to suggest that ritual and ceremonial use of psychedelics has been important in various cultures for tens of thousands of years. The evidence suggests this use was social, occurring in events that link to larger collective meanings, even in ancient worlds. In many, these altered states are tied to transitions in roles and statuses. In fact, amongst some tribal groups in central Africa, puberty rites for young males still include several days of guided physical exertion, running through the veldt, unnourished and de-hydrated until reaching a state of psychosis, in lieu of taking a substance. That psychic shift and euphoria is both social and personal, and symbolically essential to the mechanical solidarity of the group. Some say this kind of fertility rite is barbaric or inhumane, so too, psychedelics are often involved in restrictive social contests seeking to prohibit, criminalize, and stigmatize their use for any reason. These too can be analyzed through symbolic frames.

In North America, the history and criminalization of psychedelics shows the racist origins of many of these prohibitions. Hart outlines this history in the book, *Drug Use for Grown-ups: Chasing Liberty in the Land of Fear* (2021). In countries with substantial Indigenous populations that were colonized, laws were put in place to regulate the legal rights of ritual use of psychedelics. The prohibition was in large part due to racism and the government's policies of gutting the ritual and religious cultures of Indigenous Peoples. The legality of the use of peyote by Indigenous Peoples such as the Tonkawa, the Mescalero and Lipan Apache, has been an issue in the United States, dating back to the passing of the food and drug act in 1906. This act made it illegal for peyote to be imported into the United States, though peyote grows both in regions of the southern states and northern Mexico. This act changed the terminology around the possession of peyote into the terms of smuggling, a word with much different connotations than possession. The use of the rhetoric of smuggling Peyote in from Mexico was a discursive strategy to racialize the plant, to convince federal law makers to enact a total prohibition of the plant (Karibo, 2020). The use of peyote by Indigenous Peoples was first protected by the *American Indian Religious Freedom Act* of 1978 and then again further protected in 1991 when *Peyote Way Church of God, Inc. v. Thornburgh* was passed into common law. The legality of peyote in the US remained in limbo until 1994 when the American ethnographer, James David Mooney, became an instructive figure in this story.

James Mooney lived several years among the Cherokees and was called *The Indian Man*. Though he accepted the policy of Indian assimilation into white American culture, Mooney was convinced that there was spiritual and religious value in the use of peyote. Mooney later helped write the charter of the Native American Church, giving

Indigenous Peoples the possibility to practice worship with peyote. Today, this is considered one of the first Western acknowledgements of the validity of these substances for ceremonial use. Yet, it was only in 1960 that such ceremonial use of psychedelics was recognized under American law, when Native Americans were guaranteed access to peyote under the 1<sup>st</sup> and 14<sup>th</sup> amendments (Rätsch, 1998). In Canada, mescaline is prohibited by the Controlled Drugs and Substances Act, yet peyote is specifically exempt for religious reasons (*Controlled Drugs and Substances Act (S.C. 1996, c. 19)*).

Prohibitions and criminalization bring into focus the symbolic roles that institutions, politics, and the state play in this equation. Foucault's (1975) seminal study on the rise of the modern prison discussed the ways in which modern punishment and imprisonment is a new form of control over the human body. The deviant and stigmatized character of the criminal is literally constructed through the symbolic language of the legal system. The drama and ritual of incarceration, legal defense and judgement help to define and stabilize meanings and to provide authoritative ways of seeing society, who is bad and who is good.

While ritual use of psychedelic drugs was granted to Indigenous Peoples in the 1960's, at the same time a new hallucinogen, LSD, entered the cultural scene. Psychedelics had become, by the 1960s, a popular fad, with interest in these drugs enabled by the rise of figures like Dr. Timothy Leary, the famed Harvard Psychologist. In 1966, he founded the *League for Spiritual Discovery*, declaring LSD as its holy sacrament. (Lee, Shlain, 1985). Leary would become the spiritual leader of a new generation, and he would take a principled stand against the growing stigma and eventual prohibition of psychedelics. If Native Americans were permitted to use peyote based on

religious freedom, Leary felt he was entitled to the same privilege. Yet the Leary example illustrates not the victory of the ritualistic use of hallucinogens but its defeat and criminalization. Leary's own story is a downward spiral to prison and pariah status, serving as an example of the power of the state and criminal system to redefine situations and claim an authoritative voice where issues of the use of psychedelics is concerned.

## **1.2 Mapping the History of Clinical Use**

The clinical use of psychedelics is closely tied to ritualistic use. Clinical use drew upon the observations and evaluations that western academics, priests, anthropologists, ethnologists, and scientists made of Indigenous Peoples using these substances. Much of the practical knowledge collected was then re-purposed for western medicine. The work of James Mooney, the ethnologist who help extend the rights of Indigenous Peoples to use peyote, has already been noted. He was also instrumental in sending 50 pounds of peyote buttons to the Smithsonian Institute, which would conduct some of the first large-scale scientific trials and experiments on this drug. The first published result of this study came out in 1895, when a 27-year-old ate three dried peyote buttons, under medical supervision (Bruhn & Holmstedt,1973). The 20<sup>th</sup> century is filled with examples of the advances in science's ability to isolate and synthesize psychotropic chemical compounds and the medical applications of the compounds for therapeutic ends. In 1912, 3,4-Methylenedioxy methamphetamine (MDMA) was first synthesized by Anton Kollisch for Merck Pharmaceuticals in Germany (Miller, 2017). The molecule MDMA would be used extensively in the 70's and 80's by psychotherapists, mostly in California, in counselling sessions. Practitioners would praise the ability of psychedelics to allow patients to open up about experiences that they previously had been too guarded to discuss in therapy.



The most celebrated moment in the history of psychedelics occurred in Basel, Switzerland, when Albert Hoffman first synthesized LSD-25 (Hoffman, 1979). Hoffman had no interest in LSD-25, but he was drawn back to the compound when he accidentally absorbed some of the chemical during work in 1943, an incident that sparked a new interest in the substance. That date, April 19, 1943, went on to be known as Bicycle Day and is celebrated, internationally, in some circles, to this day. On that day, Hoffman rode his bicycle home from his lab and wrote extensively, in his notes, about his experience. Hoffman's lab assistant, Susi Rammstein, became the second person and first woman to ingest the compound on June 12, 1943.

The story of the discovery and investigation of LSD deserves a closer look because it became a key drug, with storied political and cultural importance, towards our understanding of criminalization, stigma and promise in the clinical setting. In the mid-forties, Sandoz laboratories marketed LSD-25 under the name of Delysid, touting the drug as a treatment for a wide variety of psychiatric disorders (Lee & Shlain, 1985). Sandoz also stated that the drug would benefit psychiatrists because if they took it, they would gain a better understanding of the experience of being schizophrenic. Western medical experimentation with these substances gained momentum following the second world war, when the United States government conducted its own extensive research on how to weaponize LSD, mescaline, and other powerful drugs.

The United States government's infamous MK Ultra trials are now the subject of extensive literature (Balthazar, 2017; Beckner, Moore & Sampila, (2022); Kinzer, 2019), and are part of a familiar popular story of government experiments that gave citizens LSD without their knowledge, in questionable and unethical circumstances. However, if

there was research aimed at weaponizing psychedelics, there was also other research determined to channel interest into more therapeutic purposes. Boston psychiatrist Max Rinkel, in 1949, conducted the first North American LSD study, with 100 volunteers at the Boston Psychopathic Institute (Lee & Shlain, 1985), opening the possibility that LSD might be useful as an aid to psychotherapy. Psychedelics' integration into mainstream Western medicine was also evident in Canada, where Dr. Charles Savage, a physician with the National Institute of Mental Health, published the first study of LSD to treat depression (Savage, 1952). Dr. Humphrey Osmond and Dr. Abram Hoffer began treating alcoholics with LSD and mescaline at the Weyburn Hospital in Northern Saskatchewan. Their treatment approach involved one large dose of LSD, in combination with psychotherapy and one year later, they reported participants abstinence rates of over 50%. This is a staggering number compared to the success rate of the more dominant AA approach, which reports success rates of between five and eight percent (Pollan, 2018).

The early LSD clinical trials signaled the birth of contemporary psychedelic-assisted therapy, as more doctors and therapists became open to the use of psychedelics in their practice. Among the most noted is Dr. Timothy Leary, the Harvard psychologist and researcher who used LSD for therapeutic purposes on prisoners at the Concord State Prison, Massachusetts. His assistant on this research was Richard Alpert, who would go on to be known as Ram Dass and be an influential figure in the culture of psychedelics (Greenfield, 2006). Perceptions about the therapeutic usefulness of LSD started to turn by the early 60's. In May of 1963, both Richard Alpert and Timothy Leary were fired from Harvard, bringing an end to the legitimate study of psychedelics (Greenfield, 2006). Harvard, at the forefront of a trend in research in psychedelics, eventually withdrew its

support and the subject of psychedelics was banished from the hallowed halls of academia to the less respected world of the black market.

Protocols for the clinical use of psychedelics vary immensely, of course. The only clinical protocols in this study are those described in a clinical Ketamine program by one of the interviewees. A clinical setting is defined as a licensed office, with medical and therapeutic supervision and follow up (Cormier, 2021). This study is interested in how these protocols are defined and how benefit is measured and assessed. The protocols of a clinical setting are often bureaucratic, rule bound, and time specific. Nevertheless, it has its own symbolic rituals and its own language explaining the scientific use of these substances with trauma therapy, with these protocols being further explored in the interviews.

### **1.3 Mapping Recreational Use**

For the purpose of this study, recreational use can be defined as the use of psychedelics outside of ritualistic or scientific protocols. They are practices of everyday life, usually in a social space of relaxation, such as theatre, festivals, and personal experimentation. Recreational use has multiple links with modernity, capitalist production, urbanization, consumerism, and mental health. With the rise of industrial cities, living in fast-paced urban settings has led some people to feel they are floating in a turbulent current that they cannot control. Modern society is quick to redefine gender roles, job expectations, and social mobility. Faced with these feelings of disconnect, many urban dwellers have sought advice from doctors and psychologists. The historian T.J. Jackson Lears, in his book *The Culture of Consumption* (1983), refers to the period in the late 19<sup>th</sup> and early 20<sup>th</sup> century America as the start of what he calls, a *therapeutic*

*ethos* that was to influence much of American culture to this day. Due to changes in industrial urban America, neurasthenia, a nervous disorder, became a medical diagnosis frequently attached to people who complained about lack of autonomy in work, feelings of anxiety, or a sense of that life holds no purpose (The Diagnostic and Statistical Manual of Mental Disorders, (DSM- 5), 2022). The doctors and psychologists of the period began to prescribe rest cures and recreational activities to move these nervous Americans out of their mental funk. The therapeutic ethos, writes Lears, focused on personal growth and process as an end in themselves but this ethos would find an ally in mass consumption and marketing. Consumption was promoted as a form of self-development and a means of personal revitalization and recreation. Lears' ideas that marketing and consumption are entangled with modern notions of personal revitalization offer us a way to understand how psychedelic drugs have been promoted in the past and present.

After the Second World War, a psychotropic revolution gained momentum. When Aldous Huxley authored his famous book, *The Doors of Perceptions* (1954), he had taken mescaline under the supervision of Dr. Humphrey Osmond. In a letter to Huxley discussing the substance's use, Dr. Osmond wrote; "To fathom Hell or soar angelic, just take a pinch of psychedelic" (as cited in Pollan, 2018). Osmond had coined the term *psychedelic*, meaning mind-manifesting. The term stuck and spread through society, aided by a new generation of psychedelic enthusiasts. Among them would be the representatives of what came to be called the American Beat Generation; writers, poets, musicians, and artists, such as Allan Ginsberg, beat poet and author of *Howl* (1956), Ken Kesey, who wrote about the brutalizing effects of mental institutions on inmates in *One Flew Over the Cuckoo's Nest* (Kesey, 1962) and Jack Kerouac with *On the Road*

(Kerouac, 1957), a book about the longing and desires of the post-war American generation. These writers helped create the American counter-culture of the 1960's. However, it is almost impossible not to note how so few of the voices come from women or people of colour, who were not present in this storied literary movement. It seemed apparent the new popular discourse associated with psychedelic drug use was very much skewed towards a male, white perspective. The rise of psychedelic culture had its central characters. Among them was the writer, Ken Kesey, who in the early 1960's purchased a bus and toured with the band, *The Grateful Dead*. Kesey was part of a group known as *The Merry Pranksters*, who freely gave LSD to interested individuals as they crossed the country in their colourful bus (Stevens, 1987). The acid test celebrations associated with *The Merry Pranksters* and the media attention they attracted gave a massive promotional boost to psychedelics. The acid tests were chronicled in Thomas Wolfe's famous book, *The Electric Kool-Aid Acid Test* (Wolfe, 1968), further giving a new generation of young readers new narratives for understanding aspects of the psychedelic experience outside of a clinical setting. *Acid tests* became a popular term among some of the early cultural expressions of the recreational use of psychedelics, and the collective and festival setting of these events, along with private exploration of self-development and growth, marked the beginning of a modern psychedelic counter-culture.

Festivals are different from rituals and ceremonies because they involve large crowds around a fixed event. As Victor Turner (1969) explains, crowd behavior is more prominent in this setting as is the psychological urge to simultaneously co-exist with a large crowd of different people. The festival setting cuts across the hierarchies and divisions usually found in a large group of people and solidarity is fostered by the

performances, costumes, and music that can create a common experience as a community. The comradeship and communion that counter-culture produced was, no doubt fueled with a lot of psychedelics, but it could not negate the fact the tensions, conflicts and divisions of the United States had real economic and racist roots, which acid trips could neither dissolve nor eradicate.

The counter-culture arose out of an unusual set of circumstances that included the American civil rights movement, the growth of the Vietnam anti-war movement, the illegal production of the psychedelic drugs, as well as popular information about how to use these new drugs. In 1962, Congress passed drug safety regulations and designated LSD as an experimental drug, restricting its use. This new law, unintentionally, contributed to the black-market production and sales of the product, as is almost always the case with prohibition. A year after the reclassification of LSD, the drug was readily available through the black market on the streets, in the form of sugar cubes (Lee & Shlain, 1985). Recreational use, from this point on, flourished with the growth of the hippie and the anti-Vietnam war movement, but as these movements developed and gained traction, so did the governments reaction to its counter-cultural political values. The result was the passing of the *Controlled Substances Act* of October 27<sup>th</sup>, 1970, under the administration of President Richard Nixon. The Act signaled the start of the *war on drugs* and the massive criminalization of people that use them. The political use of this law had devastating implication for marginalized African Americans, Latinex and Indigenous populations. The intentions of the war on drugs, and the ideology that still drives it today, are based on suppression and racism and nowhere is this message better

revealed than in a chilling interview with John Ehrlichman, an assistant to President Nixon during his time in office. When interviewed in 1994, he said;

You want to know what this was really all about? The Nixon campaign in 1968, and the Nixon White House after that, had two enemies; the antiwar left and black people. You understand what I'm saying? We knew we couldn't make it illegal to be either against the war or blacks, but by getting the public to associate the hippies with marijuana and blacks with heroin, and then criminalizing both heavily, we could disrupt those communities. We could arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news. Did we know we were lying about the drugs? Of course we did. (as cited in Baum, 2016)

The civil rights movement had been met with much resistance throughout the American South and beyond, and with it came a resurgence of white racism and supremacy that heated up tension between white and African Americans. The Vietnam war had been a catalyst for a youth movement and had mobilized a considerable number of young people against the war and government policies. Law enforcement became entangled with the suppression of both the Civil Rights and the Vietnam anti-war movements and intervened, often in violent ways, to disrupt their political organization. Government leaders decided that to suppress these movements, they needed to criminalize those involved so that they would lose credibility in the public's eye. By criminalizing leaders in the movement, they could also restrict their movements and limit the spread of their thoughts and ideas. More importantly, the law-and-order, tough stance against drugs gave the public an expressive narrative about the legal and social order and where drug users stood within that world. The war on drugs was accompanied with a

large-scale public service advocacy campaign to *just say no* to drugs. The campaign sought to de-value the types of people associated with recreational drugs, to dehumanize them in the public eye. The stigmatizing discourses surrounding drug use were largely powered by a propaganda that was reminiscent of the *Reefer Madness*, which was an anti-marijuana propaganda film produced by the American government in 1934 to spread false narratives about the use of marijuana.

While psychedelics showed real promise in early clinical use, the dawn of prohibition created new doubts and criticisms. Albert Hoffman's book, *LSD: My Problem Child* (1979), is a good example of this shift. Hoffman makes the connection between parenting of a rebellious child and being the parent of a rebellious substance. It was his belief that LSD could be useful to society, but the substance had been hijacked and it was now spending more time than a parent would ever imagine on the wrong side of the tracks. The public perception of psychedelics and its growing stigma changed the way people viewed and used these substances and, in turn, the way they experienced them.

#### **1.4 The Psychedelic Renaissance and the New Therapeutic Ethos**

With the publication of Michael Pollen's book, *How to Change your Mind* (2018), we reached a period that some critics call a psychedelic renaissance, where psychedelics have moved from the margins of society back into the mainstream. Pollen's book was inspired by the success of his earlier article, *The Trip Treatment*, which was published in the magazine *The New Yorker* and which explored the use of psychedelics from a self-improvement perspective. The view Pollen presented in these pieces was far removed from the prevalent one that drugs are bad, as Pollan (2018) wanted to discuss how the recreational use of a psychedelic drug can contribute to well-being and can be a way of



healing. He argued that these drugs have much to offer us, but he also cautioned that we need to understand their risks and take the appropriate safeguards for their safe usage.

Today, the use of psychedelics is on the rise and attitudes towards them started to change in the 2010's. This is largely due to their promotion by media celebrities who have played an important role in their popularization. For example, podcast host Joe Rogan, publicly discussed his experiences with psychedelics, particularly DMT, during his podcast, thus introducing a younger generation to its alleged benefits. Another example would be when comedian Chelsea Handler participated in an ayahuasca ceremony on the show *Chelsea Does*, in 2015, exploring the idea of drug use as a way of healing and personal growth. Gwyneth Paltrow provided a further instance of this in her show *Goop*, where, with similar intentions, they documented a mushroom ceremony. References to ayahuasca have appeared in other movies, such as *Wanderlust*, with Jennifer Aniston and Paul Rudd (2012). Over time, references to psychedelics have become more prevalent in pop culture.

The relationship between pop culture and psychedelics has changed drastically, even since this research project began. More recently, public figures like Aaron Rodgers of the Green Bay Packers and Prince Harry have gone public with their experiences with psychedelics. In the world of television, psychedelics seemed to have crept their way into mainstream programming. The show *Dexter*, in 2021, involved a scene where the recreational use of ketamine was discussed. The Billy Bob Thornton show, *Goliath*, in 2019, had characters who were depicted ritually smoking a psychedelic that can be understood to be DMT, though they never actually name it. It would seem that through this type of exploration, the understanding of psychedelics has transitioned from viewing

them within a frame of being immoral and for partying to moving towards a health-based perspective, where they are perceived as virtuous, beneficial, and wholesome.

Hip hop has always had an interesting relationship with magic mushrooms. An example of this would be Xzibit, with his song *Shroomz* off his sophomore 1998 project, *40 Dayz and 40 Nightz*. Another artist would be Atmosphere with their song *Funny Colors in my Mushrooms Trails*, off the pre-Atmosphere Rhymesayers collective album *'Headshots'* (2005). Eminem had a song off his breakout *Slim Shady LP* called *My Fault*, which involved a narrative of him giving too many mushrooms to a girl at a party. More recently, artists like Flatbush Zombies, Asap Rocky and Chance the Rapper have frequently mentioned psychedelics in their music, with Chance the Rapper naming his album *Acid Rap*. Frank Ocean, on his album *Blonde*, spoke of using psychedelics for an emotional release in the song *Siegfried*, and mentioned taking acid in *Nikes*.

There have been a number of documentaries such as *Have a Good Trip* (2020), where celebrities describe experiences with psychedelics. Other examples include the film *Orange Sunshine* (2016), which details the adventures of outlaw chemists of the 60's and *Trip of Compassion* (2017), a documentary detailing the use of MDMA to treat PTSD in Israel. After years of propaganda and stigmatization that vilified the use of psychedelics, interest in them is now reaching a new high.

Along with the renewed popular interest in psychedelics, research in psychedelics has also experienced a turning point. In 1990, the scientist, Rick Strassman, got the first government approval, in 16 years, to use psychedelics in research. He started to experiment by giving volunteers DMT, intravenously, in New Mexico. His book, *The Spirit Molecule* (2000), was made into a documentary in 2012. Meanwhile, Roland

Griffiths (2006), a professor and researcher of psychiatry and behavioral sciences at John Hopkins, and Robin Carhartt Harris (2017), a neuroscience researcher of the Royal Imperial College of London, took up the reins left by Leary (1964), Grof (1975) and the like. Seeing the promise in the original research, they took up the task of exploring and researching the use of these substances in experimental settings. Roland Griffiths, in 1999, began studying the effects of psilocybin for the treatment of distress in terminal cancer patients, as well as smoking cessation and treatment of major depressive disorders. Robin Carhartt-Harris began using magnetic resonance imaging (MRI) to map the brain under the influence of psychedelics and, more recently, has been focused on the therapeutic capabilities of psilocybin for treatment of resistant depression.

The emergence of a legitimate investigation of psychedelics for therapeutic purposes, along with renewed interest in the recreational use of these drugs, coincides with the growing importance of yoga, meditation, and mindfulness, along with commercial health movements. The confluence of these forces is contributing to an aggressive commercialization of psychedelics and a new therapeutic ethos. Today, psychedelic journeys are promoted commercially, as ways for revitalizing creative energies depleted by the capitalist organization of work and the strains of modern life. Psychedelics have become a potentially profitable business for development and for investment. Psychedelic start-ups, backed by billionaires such as Peter Thiel, have seen a remarkable growth, (Aspa, 2022). Psychedelic therapy, as a business, has spread across North America. Even New Brunswick is feeling the pull of the therapeutic importance of psychedelics, with two ketamine therapy clinics opening in the city of Fredericton in 2021-2022. The combination of self-help, psychedelics and mass consumption has set the

scene for a new era of recreational and therapeutic use, one that needs to be approached and examined with much caution and attention.

### **1.5 The Clinical and Ceremonial Setting: Treating Psychic Trauma**

Modern medicine, since its inception, has been interested in the relationship between mind and consciousness, between the chemistry of the brain and its relationship to the sentient body. Anesthetics are a class of drugs that can disrupt consciousness but, because these drugs shut down consciousness completely, there is not much subjective reporting about these altered experiences. What is the relationship between what we know about the brain and what philosophers, psychologists, and social scientists call consciousness, that unshakable feeling that we are a self that has experiences? This question is at the center of contemporary debates. A whole knowledge industry, called *Consciousness Studies*, is dedicated to the exploration of the self and, within it, there is a large community of scientists and academics that think that consciousness should not be bound by a self. World conferences have been scheduled to engage in discussions about consciousness, with papers, videos, and various resources generated (*The Science of Consciousness Conference 2023*). Consciousness pervades the universe, and we can think of it in the same way that we view electromagnetism and gravity, as a field.

The idea of an individual, sovereign self dominates western conceptions of law, philosophy, psychiatry, and liberal politics but has its drawbacks and limitations. Psychologically, an excessive focus on the self can alienate us from others and from nature, and can lead to destructive forms of compulsive behavior and human unhappiness. Why this is so is the subject of research that involves using a neuroscientific model of the brain, examines how consciousness of the self is understood, and argues

how psychedelic drugs can help in de-patterning certain obsessive behaviors, such as eating disorders, anxiety, depression, and a host of other psychological conditions. Many of these ideas have been pioneered by researchers such as Carhart-Harris (2014) and Stanislav Grof (1975) and have recently been brought to popular attention by Michael Pollan (2018).

According to Carhart-Harris and Friston (2019), the brain is a hierarchical system. The highest-level parts were developed late in our evolution, are typically located in the cortex, and exert an inhibiting influence on the lower level, an older part of the brain that houses emotions and memories. During normal consciousness, the activities of the higher levels exert a top-down influence on other parts of the brain. Psychedelic drugs, along with psychological counselling, can help loosen the high-level thinking. This means that material that was unavailable during normal consciousness floats to the surface, including emotions, memories, and long buried traumas, which can then be processed with the help of a therapist. An explanatory model of the brain and its disorders was created by neuroscientists who also had a background in psychoanalysis. In the words of Carhart-Harris and Friston;

... psychedelics work to relax the precision of high-level priors or beliefs, thereby liberating bottom-up information flow. We assemble evidence for this model and show how it can explain a broad range of phenomena associated with the psychedelic experience. Regarding their potential therapeutic use, we propose that psychedelics work to relax the precision weighting of pathologically overweighted priors underpinning various expressions of mental illness. We propose that this process entails an increased sensitization of high-level priors to

bottom-up signaling (stemming from intrinsic sources), and that this heightened sensitivity enables the potential revision and de-weighting of overweighted priors. We end by discussing further implications of the model, such as that psychedelics can bring about the revision of other heavily weighted high-level priors, not directly related to mental health, such as those underlying partisan and/or overly confident political, religious, and/or philosophical perspectives. (Carhart-Harris & Friston, 2017, *Abstract*, p. 316)

The line between clinical and recreational use of psychedelics is clearly marked and policed by legalities. While there are many in the medical and psychiatric fields who want to confine psychedelics to the laboratory and tie them to firm protocols, there are others who want these drugs to find their own safe guidelines for use outside of the laboratory. A series of questions emerges for discussion; If these drugs are beneficial, why limit their use to those defined as the sick? Why should not everyone benefit? Why should medical or legal authorities control what people want to explore as to how these drugs impact their own cerebral cortex?

There continues to be an elitist and democratic struggle when it comes to how to use psychedelics. Recreational use of any substance is a term used in our messy democratic experiment, to relieve problematic dependencies on substances and to reduce behaviours like gambling, sometimes including engaging in fun and even receiving health benefits from recreational use of psychedelics (DSM 5, 2022). Recreational is a socially constructed and consensus-elusive concept. It is important not to demonize recreational use of psychedelics as something inherently threatening or frame it as a form of experiential tourism that opened cognitive territories previously explored only by a few

artists, religious mystics, and adventurers of the mind (Kerouac,1957; Leary,1964; Max,1971; Thompson,1971; Warhol,1967). Recreational use of psychedelics is a complex mix of expectations and opportunities, played out in a variety of settings. Some of these settings are dangerous and threatening, such as a prison, but most are reasonably safe spaces. They have the characteristics of liminal spaces, as Van Gennep (1909) and Victor Turner (1969) called them, sites for the invention of new protocols that parallel those in the clinical and ceremonial context.

Having briefly examined the ritual, clinical, and recreational setting of psychedelic drug use, as well as the socio-political-historical context of its prohibition and stigmatization, we will now turn to the interviews gathered from the volunteers, in order to explore their views and perceptions of these drugs when used in different settings. The theoretical framework that informs this investigation stresses that we focus on both the manifest and latent meanings in their language. For many of our interviewees, the drug experience and the performative dramas and feelings associated with them are ways of expressing and understanding their personal place in the world. They all believe they have received benefit from psychedelics because it allows them to explore the meaning of their personal experiences.

## **Chapter Two: Setting the Context for the Research**

### **2.1 Sample: Finding the Participants**

This research focuses on a population of individuals who have personally experienced hallucinogenic drugs across different settings and for different reasons. The participants were largely known to the researcher (convenience sample) and, in some cases, in some of the conversations leading up to the interviews, the participants highly recommended other possible participants who they felt could contribute in a meaningful way to the study (snowball sample). Thus, the approach being taken is a combination of a convenience/snowball sampling approach. Participants were recruited through a convenience/snowball approach, which entails having existing study subjects assisting in identifying other potential subjects through their social circles (Engel & Schutt, 2017).

To find subjects available for this research, it is relevant that that the researcher was raised in rural New Brunswick and had been involved in the local music and festival scenes throughout his life. He is familiar with psychedelic drugs and has made loose connections and close friendships with people who use them. As mentioned, this research is autoethnographic in that it concerns behaviour and people with which and with whom the researcher is closely affiliated. Drawing on friends and acquaintances through this sampling approach, seven people agreed to be interviewed for this research. The subjects had taken psychedelic journeys and were willing to share personal information regarding this to help understand these experiences.

The researcher believes the convenience/snowball approach was the easiest way to move through the portion of the population that uses psychedelics, through word of mouth and making connections with people. He recruited seven participants to interview,



making the scope of the project an appropriate size for a master's thesis. Three of the interviewees are childhood friends, and the remaining four are people that the researcher has known for a few years through music and festival events that, like magnets, attract members of the psychedelic drug culture in New Brunswick. The research is not designed to provide any sense of extrapolation to larger population, but to introduce themes and experiences common to this sample alone. The goal of the study was to promote conversation about the possible benefits of psychedelic use, to provide ideas for best practice in their use and to explore the concept of stigmas as it relates to an individual's experiences with psychedelics.

The data sample, like all convenience samples, is biased and not representative of a whole population, as it was not intended to satisfy that need. Nonetheless, it offers subjective data; descriptions, testimony, advice, and nuanced assessments about psychedelic experiences. The volunteers were willing to speak about their psychedelic experiences and evaluate the effect on their lives. All of the volunteers came from New Brunswick, from working and middle-class backgrounds. The local regional flavour of New Brunswick and the class background of our participants is revealed in the language, slang, tropes, metaphors, and commonalties used and shared. The participants are part of a generation in New Brunswick, now pushing their forties, who speak about psychedelics, filtered through their own shifting frames of references and understanding. Most had grown up in rural areas. Some experienced out-migration, another served in the military, some are currently working in the civil service, or involved in the helping professions. All had used psychedelics in their youth and experienced revisiting those experiences in adult life, with a different set of expectations and knowledge.

The regional subculture aspect of the study could be seen or interpreted as either a positive or negative feature. In a positive light, if one is looking at this study as having a focus on a sub-culture or niche culture in the ethnographic tradition, then the local flavour would be interpreted as a benefit to the study. The regional understandings and colloquialisms would be reflected in the quotations gathered during the interviews and they would add value to this aspect of the research. If one is looking at the local flavour in a negative light, then you might interpret the findings of the research as being less applicable to the greater population. It could be argued that the size of the study also contributes to this factor. The rural aspect of the location of the interviewees could be seen to make the findings less applicable to the residents of an urban center. However, as this study is narrative and qualitative in nature, it is concerned not only with what people say but how they are saying it with nuances and intonation. This, in fact, could be seen to add value to the study. This research was never concerned about being applicable to a larger population; it was always designed to be a small narrative study of individual's experiences using psychedelics during the time of the psychedelic renaissance, and the study just happened to be conducted in New Brunswick.

## **2.2 Interview Style: Designing the Interviews**

Researchers like Roland Griffiths (2006), Timothy Leary (1964), and Walter Pahnke (1963) have devised questionnaires such as the *Mystical Experience Questionnaire* to gauge psychedelic experiences and their profundity. These questionnaires consist of a standardized set of questions (30 in the *Mystical Experience Questionnaire*). Most inventories consist of a list of statements that participants rate, based on the degree to which they experienced the phenomena described in the

statements. This is a Likert scale, with a range between 0-5, with 0 indicating *not at all* and 5 indicating *extreme* (Engel & Schutt, 2017). The researcher referred to these pre-existing quantitative questionnaires in order to develop the set of qualitative questions that was used in the interviews. The questions in the current research were designed through analyzing pre-existing research to see what had not been examined and explored to date and to draw out points to explore further.

To get to the heart of why and how people engage with psychedelic substances, the researcher developed a set of questions for the interviews that helped him to identify several reasons why people seek out psychedelic experiences, why people have a specific interest in these substances, how and why they use them and to what end. The questions focused how and when participants began using these substances, the role of set and settings (to be further defined below) for the experiences, what users can identify as best practices for using psychedelics, and what benefits they perceived came from the experience. Participants were asked open-ended questions such as; “How have you used psychedelic drugs in the past?”, “How has your use of psychedelics changed over time?”, “What mobilizes or motivates you to use these substances?”, “What do you recommend as best practices for use of psychedelics?”. The social context and setting wherein people use these substances was of interest and specific questions about the setting were asked. These particular questions revolved around the value of using these drugs in a safe, monitored space, such as a traditional ceremony or in different therapeutic contexts. Psychedelic substances have been studied and used successfully for treatment of depression, addiction, and anxiety (Pollan, 2018). Subsequent to this, the study sought to

examine if therapeutic experiences are reported by those who take psychedelics recreationally.

One section of the questions focused more on how consumers of these substances negotiate with the dominant and often negative values that are associated with illegal drugs and how this impacts their own willingness to try them, despite those negative messages. Given that psychedelics have been demonized in the public eye and deemed immoral by conservative and religious elements of society, they have then been prohibited by the majority of nations around the world and have been framed by negative values imposed by society. The participants were asked if these negative values, or stigma, coloured how they experience psychedelic substances. The researcher was also interested in how participants approached their first experiences with psychedelics. It could be that they may have been drawn to trying the drugs because the deviant nature of the substances made them more interesting. On the other hand, it may be that they were hesitant to get involved with psychedelics because of the immorality attached to them (See Appendix A: Interview Questions).

In an effort to ensure that they felt safe and secure, the interviews were held, for each participant, at a location of their own choosing. Five of the interviews took place at the interviewee's home, while the other two were conducted at the researcher's home. Each interview was audio recorded and then transcribed using the closed caption document provided by *Zoom* and later edited using *Express Scribe* (transcription software). The interviews lasted from fifty minutes to two hours and the transcribed interviews ranged from twenty to forty pages in length. The study focused on the use of psychedelics in three different settings, ceremonial/ritual, clinical, and recreational.

The questions asked during the open-ended interviews evoked specific memories of place and time (e.g. “Can you talk about the first time you used psychedelics?” and “What were the circumstances?”). These questions elicited commentary about living in small communities, the sense of solitude that often comes with living within that environment, and the strong emotional bonds with nature and the outdoors that rural settings enabled. Several of the questions triggered reflective thoughts about the importance of set and setting.

### **2.3 Methodology: The Approach**

The researcher conducted semi-structured, conversational interviews, which allowed the interviewee to narrate their experiences with psychedelics in a free-flowing manner of their choosing. This approach has been used by various scholars such as Weissman (2012, 2014 & 2017), Roland & Wicks (2009), Church (1996), and Burgess, (1998). Often considered *forbidden narratives* (Church, 1996) or ethically challenged *storytelling* (Collins & Gallinat, 2010), psychedelic experiences are, by their nature, among the most spiritual, personal, and meaningful experiences a person can have in their life (Leary, 1964; McKenna, 1976; Wolfe, 1968; Thompson, 1971). This study is, therefore, of a qualitative nature, and the smallness in sample allowed for a richer and thicker description of intimate experience, or what Geertz (1973) has called *thick description*. Furthermore, to do this kind of work on a large sample set was far beyond the scope of this research, so the idea that this would be a quantitative method was never entertained.

In short, the researcher felt that only a qualitative approach could even begin to fully examine the complex psycho-spiritual nuances of these psychedelic experiences, as

“...positivistic science relies on verifiable avenues of information, subject to repeat analysis. And yet what evidence is there to support mystical experiences, peak experiences, and spiritual awakenings beyond one’s individual experience of them?” (Scharfetter, 2017, p. 60). As talking about psychedelics is inherently personal and colloquial at times, interviews of this nature are similar to anywhere individuals talk about personal matters. Narrative and conversational methods are used extensively in the fields of mental health (Woodhall-Melnick & Grogan, 2019; Weissman, 2012), in which abstract ideas like suffering, loneliness, stigma and dignity need to be excavated. Because of the abstract, symbolic, metaphorical, and personal nature of the psychedelic experience, a qualitative approach seems the best path towards gaining understanding about the interviewee’s use of the drugs. As stated by Crites (1971) and Carr (1991), the experience itself has a narrative quality. Although those authors were not referring to psychedelics specifically, their research relates extremely well to the psychedelic experience and the process that people go through when reflecting upon, reconstructing, and recounting their experiences with psychedelics. As stated, the researcher used a narrative approach when gathering information by conducting semi-structured, open format, narrative interviews.

Researchers such as Murray (1997) and Baumeister and Newman (1994) focus on the use of narrative to make sense of experience(s), as formulating experiences into shared stories facilitates deeper understanding of the experiences. Again, though these researchers were not considering psychedelics at the time, it is felt by the researcher that their approach worked well when applied to psychedelic experiences. The process of reconstructing and recollecting a psychedelic experience, in order to tell someone else

about it, allows for a person to try and understand their own experience through the narrative. Putting the experience together, as a story, helps the person telling that story to gain further and deeper understanding of it. This aspect is highlighted by the emerging field of Psychedelic Integration Counselling (Psychedelic Training, Fluence, 2022), which aims to help patients make sense of the psychedelic experience and to help them learn from it by incorporating insights from the experience into their everyday life.

It should be noted that the approach taken to facilitating the interviews was research led, rather than ground up. Through constant conversations with people who use psychedelics, the questionnaire was constructed, deconstructed, edited and re-edited. It was based on these former conversations, which helped to form a structure or foundation for the interviews, with the intent of drawing out the most information possible in a single interview. In other words, the interviews were framed by the questions that were created by the researcher and were not framed by the participants, although participants sometimes would engage in conversations that went beyond the questions asked.

When the interviews were completed, the recorded content of the interviews was explored using narrative and inductive thematic analysis. The analysis was done by hand, using hard copies of the transcripts. The process followed Braun and Clark's Six Step Guide of Thematic Analysis (2006). The first step, familiarization, involved reading the interviews multiple times and listening to them while completing the transcription. The second and third steps, which are coding and generating themes, involved cutting up quotes from the interviews, and arranging them into themes. The researcher making notes on the quotes, by hand, and then placed the quotes into the text in relation to the themes identified. For the fourth and fifth steps, reviewing and defining themes, the researcher

was looking at what the participants had to say about their experiences, in what way they said it; how they storied or narrated their experience. Through this method of thematic analysis, the researcher was able to identify recurring themes that arise for different people using psychedelics and, in this way, to identify patterns in the data, which is the point of thematic analysis. The sixth step, which is summarization, was conducted during the writing process, in putting the thesis together. A thematic approach applies well to this research, where the aim was to draw out similarities across three settings of the psychedelic experience. Overall, this research would be considered an example of a grounded theory approach, defined by Strauss and Corbin as follows; "...theory that was derived from data, systematically gathered and analyzed through the research process. The researcher begins with an area of study and allows the theory to emerge from the data" (as quoted in Chun Tie et al., 2019, p.3).

The fact that the researcher had personal connections with the interviewers and also his own personal experiences with psychedelics was not a factor in the analysis. He took care to remain objective, with an understanding of the ethical considerations of the study and did not want to jeopardize the outcome of the study through any previous knowledge as to the participants or the psychedelics.

Letting the empirical observations set the tone for theorizing makes sense because we still do not understand the psychedelic experience very well, nor have we theorized it effectively so as to apply a specific set of postulates to this research. The use of thematic analysis offered an in-depth look at the categories of personal experience that come through when someone undergoes a psychedelic experience. Thematic analysis is concerned with identifying and interpreting patterns of meaning presented as qualitative



data and these patterns serve as an undergrid for theoretical and practical postulation (Braun & Clarke, 2006). The conversations were analyzed as to the content and the clarity in which ideas were expressed. There was no attempt to provide equal distribution of comments to each of the participants. Some of the participants were more articulate and better able to describe their experiences. The idea behind the research was to gather common themes that could contribute to the on-going discussion about the use of psychedelics, not to make a quantitative comparison between what each of the participants contributed.

## **2.4 Ethics and Consent**

The Research Ethics Board Review (Appendix D) wanted to assess the risk of harm to the subjects and the researcher. Healing with the aid of psychedelics is typically associated with confronting pre-existing trauma. Support protocols were required by the University of New Brunswick's Ethics Board in case a negative emotional event was triggered during the interview. It was concluded that this project posed minimal risk because, as a counsellor, the researcher felt he was able to provide the support needed during or following the research, if the participants required it.

Another concern raised during the Research Ethics Board Application was the legality of the psychedelic experiences discussed. It was important, for this reason, that volunteers were granted anonymity. All volunteers were provided and signed an information form outlining the reasons for this study. They were given assurance that their identity would be protected through using assigned pseudonyms in all of the documents pertaining to this research and its analysis. A copy of the interview questions was made available to them prior to the interview (Appendix A). All participants were

given an information letter (Appendix B) detailing the study and, prior to the interview, all gave auditory consent to an informed consent form (Appendix C).

In considering ethics of representation, the author's own involvement with the participants and with psychedelics can be discussed. His presence with the interviewees and pre-existing familiarity with them enabled the full telling of their stories. They felt relaxed and confident to share their experiences and their ideas. The inclusion of the accounts of personal experiences with psychedelics provided a bridge between the accounts from the participants and the larger scholarly issues in relation to psychedelics, adding to the narrative structure of the thesis. In no way does the researcher's involvement interfere with the ethics of the thesis.

## **2.5 Entering the field: Identifying the Participants**

### ***The Family Man***

This is a male between the age of 35 and 40. He is a power engineer, a family man, and a musician. The researcher has known this individual since childhood, and they have remained friends throughout their lives. He used various types of psychedelics while young but has turned away from them as he got older. He does, however, value the experiences he had as a teenager with drugs. This individual identifies as a white straight cisgendered male. He will be referred to as The Family Man.

### ***The Vet***

This is a male, between the age of 35 and 40, who is a military veteran. After serving multiple tours overseas, he is currently transitioning into civilian life. He is a hobby photographer and an avid festival attendee. The researcher first met this volunteer at a festival through mutual friends and has known him for five years. His involvement

with drugs started shortly after he joined the military. His gateway into psychedelics was through a mentor, a well-informed individual who educated him on how to use them properly for the best effect and least harm. The veteran has used drugs recreationally in his adult life, but never as a teenager. He has been discharged from the military because he suffers from PTSD and, recently, he completed Ketamine Therapy through Fieldtrip, located in Lincoln, New Brunswick, a program only accessible to veterans and first responders. He is a white cisgendered male and for the rest of this paper he will be referred to as The Vet.

### ***The Meditator***

This is a male, between the age of 35 and 40. He is a technology start-up person by occupation and is in a long-term relationship. He is a dedicated practitioner of yoga and meditation and an enthusiastic festival-goer. The researcher has known this individual for a decade and originally met him through the local bar and music scene in Fredericton, New Brunswick. He has used substances, off and on, since he was a teenager. Music was his gateway to psychedelics and, in turn, led him to the use of meditation, yoga and other self-help practices that have become significant to him over the years. He identifies as a white cisgendered male and will be referred to as The Meditator.

### ***The Artist***

This is a female, between the ages of 35 and 40. She is a tattoo artist by trade and runs her own business. She is a traveling artist and an avid festival attendee. The researcher met her through mutual friends, seven years ago and we have attended multiple festivals together. She has used substances since her early twenties and sees the

value they have for creativity and connection to other people. This individual identifies as a white cisgendered female and will be referred to as The Artist.

### ***The Nurse***

This is a female, between the ages of 35 and 40. She is a nurse by occupation. The researcher has known her since middle school. They have not remained close over the years but ran into each other while both were working at a local hospital. She began using substances as a teenager but did not find her early experiences with psychedelics beneficial. Recently, she took part in a psilocybin mushroom ceremony with a local shaman, for self-improvement, and reported about the experience. This individual identifies as a white cisgendered female and will be referred to as The Nurse.

### ***The Civil Servant***

This is a male, between the ages of 40 and 45. He is a tech person. The researcher met him four years ago when both attended an Ayahuasca ceremony in New Brunswick, with a Shaman from Peru. He used drugs as a teenager but only recently has been open to the idea of using psychedelics as part of personally guided self-therapy and is actively investigating this approach. This individual identifies as a white cisgendered male and will be referred to as The Civil Servant.

### ***The Grower***

This is a male, between the ages of 35 and 40. He is a former construction worker who, in 2018, suffered a catastrophic motorcycle accident. He is now disabled. He has used and is using psychedelics as part of a healing therapy. The researcher met him seven years ago through mutual friends and they have remained close friends. He began using drugs in his teens. Most recently, he conducted multiple ketamine and psilocybin trips on

his own, to deal with the trauma related to his accident. This individual identifies as a white cisgendered male. He will be referred to as The Grower.

## **2.6 Identifying the Drugs of Choice**

When The Family Man was asked, at the beginning of the interview, to tell the researcher about his first experience with psychedelics, he responded; “Umm, ahh, what are we calling psychedelics here?”. It is important to specify what the term includes for the purposes of this research. I will briefly introduce, identify the properties, and share the legal status for the relevant psychedelic substances included in this study. The list could have been expanded to include a growing number of designer drugs such as 2C-B (4-Bromo-2,5-dimethoxyphenethylamine) and MDA (3,4-Methylenedioxyamphetamine), but the focus was on the local experiences of psychedelics and such designer drugs were not very common. Other substances, such as mescaline/peyote and salvia are considered psychedelics, but never came up in the interviews and so, therefore, they will not be mentioned. In essence, the study is limited to the popular psychedelics in common use by the local New Brunswick population. These are as follows:

### ***LSD***

LSD stands for Lysergic Acid Diethylamide and is derived from ergot, a fungus that grows on rye and other grains. It can affect the user by changing their senses, moods and thoughts, distorting perceptions of themselves and of the world around them, altering what they hear, taste, feel and smell (e.g., brighter colours, sharper sounds) and mixing up their senses, so that you 'hear' colours and 'see' sounds, according to Health Canada (2020). When ingested orally, as is the common route of administration, the effects of

LSD can manifest within 30 to 60 minutes of ingesting the substance. The effects peak between two to four hours after ingestion and can last somewhere between 10 to 12 hours. LSD is illegal in Canada and was initially prohibited in Canada in 1968 under the Food and Drug Act. LSD is now controlled under Schedule III of the *Controlled Drugs and Substances Act*. LSD can only be used legally in Canada when a section 56 exemption request is granted by Health Canada (2020).

### ***Psilocybin***

Psilocybin and psilocyn are the active ingredients in magic mushrooms. Documented worldwide, there are over 200 varieties of psilocybin containing mushrooms. Psilocybin containing mushrooms are reported as having very similar perceivable effects as LSD. Magic mushrooms have a shorter duration than LSD, with the effects lasting between six-eight hours. Magic mushrooms are illegal in Canada and were initially prohibited in Canada, in 1968, under the Food and Drug Act. They, also, are controlled under Schedule III of the *Controlled Drugs and Substances Act*. Currently, psilocybin is only accessible in Health Canada approved clinical trials, through Canada's *Special Access Program* and through an individual subsection 56(1) exemption from the CDSA (Health Canada, 2020).

### ***MDMA***

MDMA is short for Methylenedioxymethamphetamine. MDMA triggers the brain to release feel-good chemicals (serotonin and dopamine). The user may experience increased physical energy and confidence, feelings of pleasure and well-being (euphoria), sociability, friendliness, and closeness with others (empathy), according to Health Canada (2020). The perceivable effects last from three to six hours. MDMA was first

made illegal in Canada in 1968 when its primary metabolite MDA (3,4-Methylenedioxyamphetamine) was added to the Food and Drugs act. MDMA is illegal in Canada as a Schedule I Drug under the *Controlled Drugs and Substances Act*. MDMA can only be used legally in Canada when a section 56 exemption request is granted by Health Canada (2020).

### ***Ketamine***

Ketamine is a dissociative drug, producing a sense of mind from body separation (dissociation). It works by stopping the brain from getting nerve messages about pain. It also alters how you experience sight and sound. It can produce drunken, dizzy feelings, sleepiness, confusion and loss of coordination, sensations of weightlessness or inability to move, vivid dreams or hallucinations. Because it can produce a feeling as if the mind is separated from the body, disassociation is sometimes referred to as the K-hole. Ketamine takes effect almost immediately after administration and can last somewhere between 15 minutes to 90 minutes. Ketamine is illegal in Canada as a Schedule 1 Drug under the *Controlled Drugs and Substances Act*. However, Ketamine is approved for various medical uses in Canada and is regulated under the Narcotic Control Regulations (Health Canada, 2020). Ketamine is currently the only psychedelic substance permitted for therapeutic usage in Canada and The Vet, interviewed in this study, has been a participant in this relatively new therapy.

### ***DMT/Ayahuasca***

DMT is short for Dimethyltryptamine and is a powerful, naturally occurring hallucinogenic compound structurally related to LSD. DMT blocks the action of serotonin (a transmitter of nerve impulses) in brain tissue. The user may experience

feelings of euphoria, floating, vivid hallucinations, and an altered sense of time and depersonalization. DMT, when smoked or vaporized, takes effect in seconds, and can last from 15 to 90 minutes. DMT is also the main ingredient in the ayahuasca brew and, when ingested in this form, can take longer to take effect and last from two to six hours. DMT was included in the Canadian controlled drugs and substances act in 1996 and is considered a schedule III drug. In Canada there are currently five religious groups with exceptions to use the ayahuasca. Currently, 5meo-dmt, a molecular variation of DMT, is unregulated in Canada (Health Canada, 2020).



## Chapter Three: Theme Analysis and First Experiences with Psychedelics

### 3.1 Theory

Because much of this investigation is concerned with the phenomenology of social reality and unreality, the researcher was mindful of sociologist Ervin Goffman's (1974) discussion of *frame analysis*. Frame analysis is an approach to studying the construction of reality that emphasizes the importance of language and setting. Its central idea is that reality is a socially constructed phenomenon. The stable and durable definitions that people assign to a situation allow people to make sense of events and their significance. The constructed definitions operate as frames that organize and explain our understanding of the social and personal worlds.

The interviewees constructed frames to understand and report about their psychedelic experiences and these are rooted in biographical narratives. For most, the use of psychedelics started as a youthful experiment. As the participants aged, their frame of analysis and understanding changed and, correspondently, the evaluation of the psychedelic experience shifted. Psychedelics were used less as an experimental interlude in a busy work week and less as a gateway to a community of users. Over time, they were framed more as a purposeful session that required preparation, with attention to environment and dosing, and with psychological integration during and after the experience. This shift in frames gave the psychedelic experience a different meaning. When taking psychedelics, participants were now much more sensitive to subjective moods than before. Moreover, their understanding of these experiences became tied to psychological states as they reported feelings of improved relationships with others,

better social skills, making healthier and more rewarding choices and having intensified feelings of existential and spiritual well-being.

Psychedelics are often associated with an expansion of consciousness and, indeed, clinical studies attest to the ability of these drugs to widen cognitive functions. People taking psychedelics report that their thinking is less constricted by experience and more flexible, resulting in creative problem solving. Psychologist Alison Gopnik, in her book *The Philosophical Baby* (2010), links this type of expansive thinking with the cognitive process of children. In comparison to children, Gopnik describes the thinking of adults as more focused and attuned to finish tasks and referred to this form of awareness as *spotlight thinking*. She argued that the thinking processes of children are more divergent. Children manifest what she called *lantern consciousness*, a widely diffused form of thinking that absorbs information from everywhere in their field. The adult mind, Gopnik contends, directs the spotlight of its attention on any situation and then relies on experience to make sense of what it perceives. The young mind of the child has fewer preconceptions to guide it towards a predictable conclusion.

The lantern model of thinking, as discussed by Gopnik, may account for the frame shift that our volunteers reported. As adults, they came to view the psychedelic experience as something that requires focus and a goal. As teenagers, they were enthralled by the sensations and excited by the arousal they felt, but had little guidance or knowledge of how to process and make sense of those experiences. Some found the experience pleasant and continued to explore. Others did not, and returned to psychedelics later in life, usually with better knowledge and with a desire to use

psychedelics as an aid to their creative personal development or as a way to heal a trauma.

The verbal descriptions of psychedelic experiences are always limited. They sound cliched, familiar, predictable, even banal. On the other hand, the emotional impact these drugs had on the volunteers was profound and some of them identified it as a life-changing event. Language, when it comes to psychedelics, seems to fail to capture both the ideas and feelings of the volunteers. The words they need to convey the experience are not there. That feeling of, what the psychologist William James (1902) called, the *ineffability of language* is a strong hallmark of both the psychedelic experience and of religious mysticism. It is not surprising that psychedelic drugs are used as a sacrament in some religious ceremonies.

James, who studied the varieties of religious experience as forms of mystical belief, pointed out another factor about mystical thinking familiar to anyone who has taken psychedelics. There is a sense that what has been revealed to you, in these psychologically altered states, is profound, even divine; a deep secret about the universe has been revealed. There is also a conviction that this revealed truth should be passed on to others. The ineffability of language and the conviction to believe the importance of the revealed message are, according to James, key to the mystical experience. Michael Pollan (2018) has argued that these two factors, are also the hallmark of the modern psychedelic experience. Many of the figures who shaped the modern psychedelic consciousness, discussed in Pollan's book, were themselves convinced that language alone cannot capture the meaning of the experience. Furthermore, they also had the conviction that the experience was so beneficial that they wanted to turn on the whole wide world to it. Our

volunteers reported that whatever revelations they had on psychedelics were important but seemed to be fleeting in duration. However, they did not proselytize or advocate that this is an experience that everyone should have. They pointed to the risks inherent in taking these drugs and recognized that psychedelics may not be for everybody. It was expressed that anyone who wishes to experiment with them should have a right to do so in a safe environment and with full knowledge of the consequences.

### **3.2 Initial Themes from the Interviews: Reasons for Initial Psychedelic Use**

All the interviewees had stories about their first experiences with psychedelics. When describing these first experiences, a pattern emerged. Except for one of the volunteers, The Vet, all had taken psychedelics when young and were piqued by the experience. As the participants aged and gained more knowledge of psychedelics, they saw psychedelics in a different light. The point of interest here is in the shift in language and meaning reported, as the participants moved from using drugs recreationally to using drugs as a form of self-therapy and personal exploration.

An example of early views is evidenced by The Family Man who, when asked why he used psychedelics for the first time, admitted; “because it something that was around, and available at the time, and it was an exciting new thing to do”. The Artist made this statement about her reasons for trying psychedelics;

My husband ... said it was fun. So, I was, like, well let's try it out, sounds cheaper than drinking. Yeah, it was way more fun than drinking. I kept it up.... Anyway, we got the giggles, we laughed at nothing for hours. It was like a bonding experience. Yeah, just us, alone in the living room at our house. Laughing our asses off at nothing.

The Nurse spoke of her first experience in the following way;

I was 14 years old. ... It was outside at night in a field with friends... Yeah, we just got really high, and it wasn't anything. I mean it was fun but the sickness wasn't fun. Yeah, we actually picked them (the mushrooms) out of horseshit. Yeah, it was just for having fun. That was it. I love experiences. It was just fun. Nothing spiritual, no learning, just fun... as a teenager I knew nothing about it. It was just more like your friends are doing it. It seemed like fun, you know, just about seeing colors and listening to good music.

She admits that she knew nothing about mushrooms and tried them because everybody else was doing it. She elaborated later; “When I did in high school, I wasn't in any control. It was just more of an intoxicating experience”.

Most of the volunteers spoke to the first experience using words and phrases such as “partying”, “fun”, “a bonding experience”, “having the giggles”, “exciting”, “something to try”, “an intoxicating experience”, “seeing colours”. The experience was mostly described as novel and as an end in itself, not something that had a more meaningful purpose. The same users reflected upon their psychedelic usage in completely different ways when discussing their more recent trips, using words such as “healing”, “working through”, “therapeutic” and “self-improvement”. Changes in language mark a shift in the analytic frame. The mind-set had shifted, likely because of exposure, research, knowledge. and education, all of which changed the meaning and purpose of the psychedelic experience for the participants.

### **3.3 Reasons for Early Use Contrasted with Reasons for Later Use**

The Grower commented that using recreationally when one is young is; "... more of like an escape thing, right?". In his case, it was to "...get away from the reality of growing up in a single parent home and being a little bit of an outcast in high school". Drug culture, he added; "... brings you into like a family in a sort, a community setting". He tied recreational use, for many young people, to stressful life challenges, such as family situations or social inadequacies. His thought was that psychedelic use can provide you with an instant community and with acceptance from your fellow users.

As an adult, recreational use meant something different to The Grower. As he noted, it was; "... mainly Music Festival based". He explained that psychedelic experiences were used to enhance the collective experience of the musical event;

One of the most profound experiences I've ever had on LSD . . . was at a festival. I'd been up for like two days, and just sort of wandered off on my own and I got like seven, eight, nine, ten hits of acid, deep wandering round by myself and I remember having like euphoric epiphanies, like everything is all right. You can walk like that if you want to, you can dance like that if you want to. The vibrance of the whole thing, the energy of it, that was amazing. That was one of the most beautiful experiences I've ever had with any drug. That key moment still sticks with me.

To summarize, when The Grower first started using, he viewed the experience as an escape and a way to connect to his peers. Later, recreational use was connected to Music festivals, where he had "euphoric epiphanies" and heightened connection to others and to nature. The Grower later had an extreme life changing event, a motorcycle accident, that left him severely injured. His recreational use, after the accident, led to his perception of,

what he identifies as, the potential positive benefits of psychedelic drugs. Further quotes in this paper will illustrate how he now uses psychedelics on his own, recreationally, to deal with his trauma and to focus on healing. What is notable here is the shift in perspective that occurs, over time, as to the relationship that people have had and are having with their psychedelic use, thereby illustrating the shifting frames of analysis discussed earlier.

Another example of an adult perspective came from The Civil Servant, who viewed psychedelics as a useful tool for what he calls, “personal development”, which he defined as a balance between body, mind, and spirit; “I guess, personal development, is a pretty broad term but, personal development, ya know. Body, mind, and spirit; do your exercise, ya know, do your little bit of reading, and spirit is either meditating or maybe psychedelics, to keep that balance of body, mind, spirit”. This is in great contrast to how he talked about his youthful experience with psychedelics. At a young age, The Civil Servant linked psychedelics with music festivals and collective bonding. Describing his experiences at a Metallica concert, he noted that; “[psychedelics]. . . kept me more alert than just drinking alone, ya know I was kind of a little buzzed, and yeah, I was in a state, you’d say, excited. . . . stimulated state I guess (laughs) you could say”. That aroused state gave him the confidence or foolhardiness, to wade through the crowd and reach “...the front row, the very front of the Metallica concert”. He recounted that, while the arousal and stimulation were present, there was “no spiritual aspect there at all”. Similar to what happened with The Grower, The Civil Servant's attitude changed over time, to the point where he now sees psychedelic use as; “trying to figure out how to leverage that state [the psychedelic arousal] . . . to have some kind of personal growth”. Where the language of

“buzzed, stimulated and excited” framed The Civil Servant's early understanding of psychedelics, the language of “personal development and balance” framed his later or current relationship to psychedelics. The change in language here is evidence of the shifting frames of analysis taking place in regard to the use of psychedelics.

### **3.4 Set and Setting as a Factor in Early Use**

This section will explore the role of set and setting in early experiences with psychedelics, including the awareness that the participants had in considering the location, environmental conditions, and time frame in which to undergo their psychedelic use. The Grower described his first experience in a way that turns set and setting into a farcical teenage movie;

[It was] ...grade eight [or] grade 9 in the summer between them. Me and a few boys had gone out and we got two hits each. And we had this like preconceived notion that if we drove to the highest point in Kings County, which was the tallest pile at the cuts, literally drove the car right up on top of it, there we're like overlooking the whole county. Then we're the highest that we could get, physically, off the ground right now, so this is the perfect place to get the highest on the acid, and each ate two hits straight up. And then we went to this house party, because the girl's parents were supposedly away and then it gets busted by her parents.

His first experience of consuming LSD at a party that ends up getting busted by someone's parents is most definitely not the best setting to have for your initial experience with LSD.

The Vet reflected on his first psychedelic experience;



Okay. So, it was me and my partner at the time and two other couples. We had bought enough that we're each gonna take 3.5 grams, and we're in a ... like a shack room or a PMQ in Petawawa. My girlfriend at the time, put all the mushrooms on a tray . . . in like separate piles. Yeah, and we had dimmed down the lights in the living room. We had put this like trance music on and we decided whatever time it was, like eight o'clock whatever, to start eating them.

In contrast to the other volunteers and their first experiences, The Vet had been a late bloomer to psychedelics. He was in his 20's when he had his first psychedelic experience and was operating with a different cognitive frame than described by the other participants. He was aware of the amount he was taking and the time it occurred. There was a ceremonial aspect to the experience, separating the piles on the tray, playing “trance” music in the background, dimming the lights and being aware of the duration of the journey. He shared later in the interview that;

There was like the guy that guided us through it. I guess he was he was aware of the protocols of the set and setting. He made sure that the house was clean and there was a place to relax and go. . .if it [the experience] gets out of control.... and just like whatever happens like go with it and stuff like that. . . That's that was one of the big reasons why I decided to do it at that time, because I felt safe.

These two examples of first experiences provide a contrast in consideration of the set and setting. One factor may be that The Vet was an adult and, in the military, when he had his first experience, whereas The Grower was in High School.

### **3.5 The Effects of Stigma**

First experiences with psychedelics are framed through the user's pre-existing knowledge about the substances. In contemporary western society, there has been a large amount of stigma associated with drug use. Aside from the fact that the drugs are illegal, and one runs a risk in using them, there is an imposed moral component that is faced by users. This stigma, which grew from the war on drugs ideology prevalent in the latter half of the 20th century, has a huge effect on how users perceive their experiences with drugs. In the following section, the interviewees' thoughts in relation to stigma will be discussed.

When replying to the question, “Would stigma just naturally decrease if these substances were decriminalized or legalized?”, The Vet stated that;

...yeah, you know, because like as when you're growing up, as you're like going through adolescence and growing up, like you're gonna hear whispers of these different things and stuff. And it's not going to be a bad thing. It's gonna be a good potential, like just like alcohol. People don't say alcohol's bad. The culture or your mindset of it is going to be positive, not negative. The same goes for smoking. So, like everybody knows smoking is bad. Well nicotine is good, but the way we consume it, since 1900, till like 1980, everybody was like smoking great, and doctors would smoke and (there were) kids toys that look like cigarettes. And now you, we know smoking is bad, so we don't. There are fewer and fewer people taking it up, right? So now we gotta reverse engineer. Where psychedelics are not bad, but good. But like with anything, there's risks and you have to do it with responsibility, right? ..... Yeah. So, education, awareness, advocacy. So, like do the opposite of what we did with smoking and do it with psychedelics.

To paraphrase this point, for years society has said smoking was positive and now it is seen as negative. Society, for years, has said psychedelics were bad and now they might be seen as potentially beneficial.

As the above comment speaks to progression with a plan to dismantle the stigma that surrounds psychedelic substances, this is a good place to start the discussion around stigma and its effects. The Vet went on to state the following about the effects of stigma;

[We are] ... in a cultural like shift or change I guess, where it's (using psychedelics) progressively started to be, not this bad thing to do? You know there are methods to doing it so, I think that that's the thing... like if the mindset, the cultural like, the global consciousness around it, was the same thing that was like 30 years ago, I don't think I would have... like, my good experiences and my progression with psychedelics wouldn't have benefited me as much because, again, just the fear of being like, if you get caught with drugs, it fucks your whole life, and there's nothing else except for murder that affects your whole life. You... like a lot of people do them...I mean... like drugs are put in the same category as killing somebody.

Speaking further to the determination of the existing stigma, The Vet stated that, in the current dichotomous understanding of psychedelics, one is prohibited from doing the work, making progress or being successful. There is a blockage created by the negative connotation that what one is doing is understood through two lenses that are polar opposites of the same spectrum. In his words; "You can't think what you are doing is bad or that it is illegal.... and that it can have benefits.... That just doesn't work.... You can't

be told that this is bad for you, but it does good things. Like that doesn't (compute)... it's impossible'.

This paradox is at the forefront of the psychedelic renaissance. To paraphrase Slavoj Žižek (1989), we cannot escape the ideology we were born into. The idea that we were born or taught to think about something a certain way is something we can never escape. This is also akin to Castoriadis' (1986) social and symbolic imaginaries. Early influences imposed by society will forever imprint our understanding of that certain thing. The participants in this study grew up in the era of programs like *D.A.R.E. (Drugs Awareness Resistance Education)* and with messages like *Just say no*. This type of socialization makes it much harder for people to alter their understanding and see psychedelic drug use as beneficial or as a way of healing. The Vet spoke to this point by saying that; "[w]e are brainwashed to think drugs are bad. We are born into this ideology and the ideology affects the way we see it; cause we know medicines aren't drugs". He highlighted the difference between the terms *drugs* and *medicine*. *Medicine*, in Western culture, is understood as something good, something potentially prescribed by a doctor, which is beneficial to your health. In this same culture, we understand the word *drugs* in relation to the *war on drugs*, where drugs are bad and are not to be understood as something that would be beneficial to your health. In fact, drugs are often seen as something detrimental to your health.

In his interview, The Meditator referred to the *drugs are bad* propaganda that he was raised with. One of main components of this philosophy was that drugs make you stupid. He spoke of using drugs as a youth and remembered his thoughts following the experience; "You feel so stupid the next day, but you just think you feel stupid. You are

actually experiencing neurogenesis, your brain re-wiring itself... You only feel stupid because society is telling you that the drugs are making you stupid". The concept of the brain re-wiring itself has been proven with current research (Carhart-Harris, 2015). The Mediator's statement shows that the propaganda from his era is doing exactly what it set out to. Years later and, after having been exposed to scientific studies showing the opposite, the thoughts that you had early in life about drug use may still lie dormant in your thinking. These latent thought patterns may shape your interaction with the psychedelic drugs and influence the experience that you are having.

The Mediator elaborated on this by stating that, because of prohibition, these experiences take place "...behind closed doors, forcing you into the dungeon to go do this stuff... whereas if these things were a little bit more normalized, then we could... (see) more people being open to it, using it.... and not being judged". The Nurse, in her interview, discussed that the attitudinal transition that is hoped for, the normalization, is currently happening;

It's being brought in the media now and with nurses that I work with, like they know about it, you know what I mean? where they would have never before, they would have never ...it's really being brought up a lot more and I know more patients that are micro-dosing. It just seems, it seems to be a little more normalized than it once was.

These quotes illustrate two points to be made about the topic of stigma in relation to psychedelic drugs. The first point is for the need to advocate for an approach to destigmatize the use of psychedelic substances, so that people could use them to their greatest benefit. The second point is the need to lessen the effects of the existing stigma

on a person's ability to fully benefit and heal from their experiences through psychedelic substances. The quotes also point to the need to use psychedelics with due care, with best practices in place, which is an intricate part of the conversation to be generated by this thesis.

In regard to the personal internalization of stigma surrounding these substances, the interview with The Grower provides an example. After his accident, ketamine was offered to him as an anesthetic. The Grower stated that, when the doctor asked him if he had heard of ketamine, he replied "no". This was because he knew of the stigma in the system and, if he had told the doctor he had experimented recreationally with ketamine, he would have been denied it. Although ketamine would have been medically beneficial to him, it would not have been administered because he had used it previously, outside of a clinical setting. The point to be made for this research is that his denial for ketamine would have had nothing to do with the drug itself but is about the individual's experience, which is an offshoot of the idea of criminalization of the person. Another example of this comes from The Vet. When doing the initial interviewing for his ketamine therapy and when asked about his previous drug use, he stated that he underestimated his usage because of; "...paranoia of drugs and like the [idea of being] an addict, I didn't want to talk myself out of it".

### **3.6 Accessibility**

This last quote also serves to open a concern about accessibility. A large majority of the interviewees spoke to the issue of accessibility during their interviews. The majority, having grown up in rural New Brunswick, referred to this. Two spoke to the cultural practice of picking mushrooms for ingestion from a cow field.

This strongly suggests an issue of accessibility, as there were little to no psilocybin mushrooms for sale in the province at the time when the interviewees were growing up. By way of this, the only way to access them was to pick them by hand. This type of obtaining psychedelics can be dated back to the 70's, when Terrence McKenna and his brother Dennis published a book (via pseudonyms) called *How to Grow Mushrooms* (1976). This book led to a flourish of information regarding identifying mushrooms species in the wild. Some variation of this movement, cultivated in the US, made its way into rural New Brunswick in the following decade after the book's publishing and into the mentality of New Brunswick's teenagers in the late 90's or early 2000's. Whereas there were no black-market or professionally grown mushrooms available, people would make do with what they could find or produce themselves. This also speaks to the safety part of accessibility. It would seem that even a black-market product, from a familiar and well-informed source, would be better than sending teens off into the woods with the hope to correctly identify mushrooms species. In the 20 or so years that have passed since the interviewees were teenagers experimenting with mushrooms, things have changed drastically in the local scene. Now, in Fredericton, at the marijuana dispensaries in the First Nation community of St. Mary's, you can buy psilocybin containing mushrooms by the strain. This is something that would not have been imagined in the teenage years of the interviewees.

Another aspect of accessibility touched on in the interviews is access to opportunities to try these substances. Of the interviewees, only one person was able to obtain legal access to psychedelics and this is only because of his history with the military. All of the others had psychedelic experiences that were possible because they

obtained substances through black market sources or were introduced to a black-market, illegal shaman/ceremonial type experience through someone they knew. To be open to such an experience takes a different type of personality than someone who would be open to a legal and medical type experience. Even with all the progress we have made, psychedelic experiences are still not going to be fully accessible and/or safe until the substances are decriminalized.

The Grower made the following statement on the topic;

They are coming (recreational and therapeutic) but it's also, it's not like I have the option of going to do it clinically... so what other route, other than recreational experimentation, is the common person exposed to right now? Like veterans can get in for a psychedelic therapy. And I think we've got like under 10 people in Canada that have legal access... to magic mushrooms. So, your average citizen has no route to have a clinical experience. So, I think that's a result of prohibition and of the stigma that drives it to that source... Right? What other options are there?

To sum up this section about the impact of stigma on psychedelic drug use, the researcher would share a well-articulated quote from *The Vet*, where he speaks to the long-lasting effects of the stigma from the war on drugs;

Just with society like 20 years ago, the only, the only acceptable drugs were really caffeine and alcohol. Right? And everybody's like been demonizing all these different substances. But they don't, majority of the time, they've never even had the substance. So, they don't, like it's just, it's like that theory with like you got a monkey in a room, or whatever, and the monkey gets zapped for eating the



food... so he teaches the next monkey don't push that button or else you're gonna get zapped. Then all of a sudden, they like remove the original monkey that got zapped and they're still all that training that they (the monkeys) still know, or whatever, and they still think they are gonna get zapped. So, they're just like these generational things like the 60's. They originally found these psychedelics and they're like people... Tim Leary and all those people... they're like finding all these benefits from it. But then, they had the prohibition of it. So, there's been like 60 years of generational like, trauma of like, this is, like bad. And, and until you had the experience of it not being bad... like I'm sure like I've never been arrested or caught while being high... but I'm sure if earlier on like, if something bad like that had happened, it would've like ruined my potential for the thought process of it being beneficial. So, but like I think, even with social media or like in movies... and it's like, they're just they're slowly integrating like acceptance of doing drugs into culture. It's a cultural change, right?

In this section we have discussed the first experience of the interviewees and their thoughts about stigma. It seems that this stigma hindered the user's ability to gain the most benefit from their early experiences. There were some comments indicating that the interviewees were seeing a slight shift in the cultural understanding of psychedelics since they first tried these substances. This cultural change came about through stigmatized users having their experiences and sharing the knowledge they gained through these experiences. This sharing has developed some protocols or best practices that are recommended for psychedelic users to follow when using psychedelics recreationally. These protocols are detailed in books, such as *The Psychedelic Explorer's Guide*

(Fadiman, 2011) and the *Tibetan Book of the Dead* (Leary, 1964). The next section will discuss the interviewee's recollection of the protocols that guided their experiences with clinical and ceremonial use and their own recommendations for best practices to be followed when using psychedelics recreationally.

## Chapter Four: Set and Setting, Protocols and Best Practices

### 4.1 A Brief History of Set and Setting

Much of the psychedelic experience is based on both the inner (*set*) and outer (*setting*) environment in which interaction with the drug takes place (Leary, 1964). The expectations and mind-set that a person brings to the experience is the *set*, while *setting* is the outward circumstances in which the event takes place. Three of the participants had participated in experiences that occurred in ceremonial and clinical settings. All participants were initiated in their drug taking in a setting which is identified, loosely, as recreational. They brought to this setting a mind-set eager for experimentation, often ill-informed about the importance of preparation, dosage, and the effects of the ambient environment. When one does not have a steady set of rules governing the use of the powerful drugs, or the liminal personae that Turner (1969) and others talk about it, then the effects can be dangerous, and many acknowledged their own lack of preparation for the first time they used these drugs. This research examines the importance of establishing protocols for best practices in the use of psychedelic drugs, as identified by the interviewees.

There is scant literature on best practices for psychedelic drugs and it is wise to apply some of the knowledge and experiences that have been passed down regarding the use of these substances. The idea of best practices regarding psychedelic use most likely was born out of ceremonial rituals, where these substances were consumed as a part of the ceremony itself. These rituals are, in many ways, simple. There is a guide who has a shamanistic function and authority. The guide measures the appropriate dose and facilitates the use of the drug for the experience. This includes preparation and focused

attention on the purpose for the ceremony, the procedure for taking the drug and, finally, a ceremony to explain aspects of the experience and integrate the individual back into the group or their regular life. Some of these ceremonial practices continue to be part of modern guidelines for guided psychedelic trips and can be found in various sources by those wanting some ideas for engaging with psychedelics.

The concept of liminality, as purposed by Turner (1969), provides for us an interesting lens to view psychedelic use through. It uses a variety of terms and subconcepts, such as the term *liminal personae*, which Turner defines as a name for members occupying spaces of liminality, like festivals or ritualistic processes. A *limen* is a threshold one must cross on the way to somewhere else. The wording is even reminiscent of the language of 60's psychedelia. The word *liminal*, itself, indicates a state of limbo and *liminal spaces* are places of de-stabilization. Psychedelic experiences are seen as a state of limbo and are de-stabilizing experiences. Psychedelic and liminal experiences both offer a change in perception or a psychic shift. Transitional experiences are liminal events. Psychedelic experiences can be both of these as they are both lived experiences. Liminal, like psychedelic spaces, are;

... dark and suspicious, ambiguous, and very often the source of fear and anxiety.

People stuck in liminal phases (or undergoing it) were and are seen as unclear, impure, and not-yet-characterized as being successful; the reason is that their transition to expected roles and status is incomplete. (Weissman, 2017, p.24)

The term *liminality* applies to us all as we experience our own rites of passage in life. Rites of passage are about establishing identities. Van Gennep (1909) describes rites of passage as transitional stages in which an individual lives, when they are removed

from the antecedent social contexts and roles on their way to achieving new ones. That equates to the experience of undergoing a psychedelic trip. A passage, in a physical sense, is marked by signposts and milestones but, in the ritualistic sense, those things are not clearly evident and the need for a spiritual guide is indicated, as passages can be understood in the social, spiritual, and physical sense.

In addition to Turner (1969) and Van Gennep (1909), Foucault (1966) contributed another framework that is useful in looking at the psychedelic experience. He referred to *heterotopias* as temporary sites of counter conduct and resistance, a notion of abstract space, a mental as well as a physical space. Heterotopias and liminal spaces both provide a space and the opportunity to create knowledge and to gain experience in order to grow. Foucault saw this type of mental growth as having the potential to lay the foundation for an examination of broader social forms of resistance. This can be seen in the strong connection between use of LSD and the 60's counter-culture movement against the Vietnam war. Foucault stated that resistance is a way to question how we are governed and, in the war on drugs, psychedelic use was a form of resistance. "Heterotopias offer alternative versions of order, not anti- order" (Weissman, 2017, p.274) which speaks to psychedelics and advocacy for social change. "The very effectiveness of heterotopias rests in the fact that they are not utopias. As an unreal space, utopias exist as fantasy worlds outside of extant power and systems of order" (Weissman, 2017, p. 273). This corresponds to the reality of psychedelics trips, as they are, by definition not real; they are hallucinations or fantasies. They are places where users can explore alternative forms of order and identity. A foundational part of your identity can be found in a mirror and Foucault elaborates on this concept with the following metaphor;

In the mirror, I see myself there where I am not, in an unreal, virtual space that opens up behind the surface; I am over there, there, where I am no, a sort of shadow that gives my own visibility to myself, that enables me to see myself there where I am absent: such is the utopia of the mirror. But it is also heterotopia in so far as the mirror does exist in reality, where it exerts a sort of counter-action on the position I occupy. (Foucault & Miskowiec, 1986, p.24)

Moving from the theoretical context to the scientific application, some of the early experimental uses of psychedelics, in a clinical setting, were done in Saskatchewan, Canada in the early 1950's by the English-born doctor, Humphry Osmond. Osmond is only now being recognized as a trailblazer in the clinical use of LSD for the treatment of alcoholism. He is also being acknowledged for developing early best practices for the use of psychedelics in a clinical setting. Osmond was a friend of the writer, Aldous Huxley. In 1953, he agreed to give Huxley mescaline and guide him through his psychedelic journey. Huxley wrote about it the following year in his pathbreaking book, *The Doors of Perceptions* (1954). In an exchange of letters with Huxley in 1957, Osmond first used the term *Psychedelic* in reference to the drug's *mind-expanding* capabilities. (Pollan, 2018, pp.160-163). The term stuck and for this reason, the idea of *psychedelics* and *best practices* has a strong Canadian connection.

Through treating alcoholics with LSD, it was realized by Osmond and his research partner, Jan Hooper, that the psychedelic experience itself, rather than the isolated chemical, was the key reason why patients improved when given LSD. In other words, the more intense and pleasurable the LSD experience, the better the results in treating alcoholism. Accordingly, Osmond and Hooper worked to optimize the effect of

the experience by changing the environment. At first, they administered LSD to patients in a hospital setting, with little regard to the pleasantness of the setting. Later, they added soft lights, music, and some guiding thoughts to focus the attention of the participants. With these changes came better results in reduction of symptoms. That the effects of drugs can be altered by changing the physical environment is by no means an earth-shattering revelation, but LSD is remarkably sensitive to these environmental cues. What accounts for good or bad trips are often due to the environment or setting. This research is one of the first indications of the importance of what later was referred to as *set and setting* (Pollan, 2018, pp 148-52).

Around the same time that Osmond was experimenting with the environmental shifts in setting, the sociologist, Howard Becker, published a now famous paper that explored the social aspects of drug effects. Becker's classic paper, *Becoming a Marijuana User* (1953), examined the learning process by which a novice marijuana smoker comes to interpret the effects of the drug through the prism provided by their peer group, learning to recognize marijuana-induced sensations as pleasant and desirable. For Becker, the peer group and the culture of the peer group impacted the experience of the drug effects. This took place when users would share their experiences, through discussions, with other users. These discussions would then influence, with the potential of altering, the user's perception of their own experience, as well as the perception each had about the experiences of others in the group. The idea that the cultural, social, and political environments could have their own effect as to how a drug is perceived was of great interest to both anthropologists and sociologists. Given that LSD was first associated with a state of ego disintegration, madness, and hallucinations, a new interest

was sparked as to why Western medicine and various Indigenous cultures, such as the Mazatec and the Shipibo, deal with hallucinations so differently. The work of the anthropologist, Anthony F.C. Wallace, is relevant in this regard. In *Cultural Determinants of Response to Hallucinatory Experience* (1959), Wallace noted a great discrepancy in the perception of hallucinations between Western psychiatry and Indigenous societies. In Western psychiatry, hallucinations are considered a prime indicator of mental illness and their occurrence often leads to intervention by medical or law enforcement agencies. Not only are such negative value judgments absent in ancient societies but, as Wallace noted; “In such societies hallucinations are often cherished and regarded as potentially valuable for the individual and the culture. The difference in the perception and interpretation of hallucinogenic drug experiences, he suggested, was responsible for differences between how these manifest themselves in various societies” (Wallace as cited in Hartogosohn, 2017, p.7).

The idea that social setting contributed to how drug experiences are evaluated was certainly well established by the 1960's and conversations became further focused on the political and social setting of drug use. Becker warned that society's notions of deviance and its pathologization of drug experiences would carry consequences for drug users by shaping their experiences negatively. He pointed to the importance in drug cultures of mitigating drug harm by providing relevant support, knowledge and skills that can make the experience safer. If such support were available, he argued, “...the number of LSD psychoses would diminish in conjunction with the development of an LSD culture, as has earlier been the case with marijuana psychoses” (Becker as cited in Hartogosohn, 2017, p.8).



In the history of psychedelics, credit for establishing safe protocols often gets assigned to Timothy Leary who, throughout the 60's, argued that the set and setting is the most important determinant of the contents and values of psychedelic experiences. In the early 60's, Dr. Timothy Leary used *The Tibetan Book of the Dead* as a template for his book *The Psychedelic Experience* (1964). The book explored many aspects of set and setting, including environmental factors relating to music and light, the use of food, the comfort level of the participants, the expectations of people going into the psychedelic experience, the time of day for the drug use, the timeframe before and after the event, and much more. Leary recommended what we might term *best practices* for having the best possible psychedelic experience. *Set* is understood as anything related to the internal state of a person, including personality, preparation for the experience, intention, as well as ...mood, expectations, fears, [and] wishes. *Setting* is anything related to the environment in which the experience takes place, including the physical environment, the emotional/social environment, and finally the cultural environment—the ideas and beliefs which are prevalent in the society regarding drug effects and the world in general (Hartogsohn, 2017, pp.2-3).

The war on drugs dampened much of the enthusiasm and interest in exploring the importance of set and setting. Nevertheless, relevant work continued to be written. *The Mushroom Growers Guide* (McKenna, 1974), written under aliases by Terrence McKenna and his brother Dennis, and *The Bufo Alvarius 5-meo DMT Pamphlet* (Most, 1983) are two examples of the underground culture that developed as a result of prohibition. Later, with the birth of the internet, forums emerged where people could anonymously discuss their experiences with psychedelics and share the best practice they

used to get the best effects. Websites such as *Erowid* (1995) advertised best practices that could be shared and archived. *Erowid* has given way to larger forums such as *Reddit*, with sub-reddits that are dedicated to topics such as DMT, ketamine, ayahuasca and magic mushrooms. On these forums, users can share, compare, and contrast their experiences. Perhaps the most important recent text that discusses safe practices is James Fadiman's *The Psychedelic Explorers Guide* (2011). In many ways, this text marks the birth of the Psychedelic Renaissance, as it was the first of its kind to be published in decades. Today, there are legions of books and websites concerned with set and setting and with the techniques and approaches for having the best possible experience. Fadiman highlighted six primary factors that most affect the nature and value of these experiences – set (expectations of the voyager and guide), setting, substance and quantity (dose), sitter and guide, session (time for voyage, between six-12 hours), and situation (post experience integration) (Fadiman, 2011).

#### **4.2 Interviewees' Accounts of Protocol in Varying Settings**

##### **Protocols in a Clinical Setting**

When The Vet discussed his Ketamine experience in a clinical setting, he noted that, in preparation for his treatment, he was asked by the counsellor to familiarize himself with the effects of psychedelics on the brain. He was also given an audio version of Michael Pollen's *How to Change your Mind*, which has an excellent chapter on the neuroscience of psychedelics.

The Vet was admitted to Ketamine Assisted Therapy in Lincoln, New Brunswick, at a place to be termed *The Clinic* in this paper. He had been seeing psychologists since he was a child and was knowledgeable as to the ins and outs of therapy. He developed a

method, when he becomes uncomfortable, of disarming the attending psychologist. He stated;

I'll get defensive, I'll find a chink in the therapist's personality and I'll just psychoanalyze them, in order to not have to talk about my own shit. And one psychologist ...she's like, she didn't outright say it was going to be a waste of time, but she pretty much said... in 10 years you are not gonna progress. In a year, there's this ketamine clinic that's gonna open up next door and I highly recommend you try that.

After being referred to The Clinic, The Vet filled the necessary federal paper-work. He first met with the therapist from the clinic via Zoom. She asked him basic questions about his trauma and previous therapy and gave him what he described as a "bunch of homework" designed to focus on the trauma. Included for homework was an audio recording of Michael Pollan's, *How to Change your Mind*, (2018), which The Vet had already listened to. "I don't read," said The Vet, "but I had listened to the audiobook a year earlier and... that book is just beneficial for anybody who is curious or wants to know the history of psychedelics".

Two weeks later, he met the therapist for the first time at the clinic. He described the clinic as "a nice spa, with calm music playing, and all this greenery" and as "being very nicely lit". He described going into a room with natural light, featuring a gravity chair which allows the client to lay on their back in an unnatural but comfortable way. The first meeting lasted two hours. The therapist asked him; "What do you want to get out of this?". She described the treatments and laid out the expectations so that he knew what to anticipate.

The next meeting was a dry run or test run, the purpose of which was to establish and to rehearse the protocols that would be followed during the treatment. The dry-run involved The Vet laying down in the gravity chair, while being covered with a weighted blanket and putting on a blindfold. The therapist explained how, in treatments, she would administer the ketamine orally, as that was the most cost effective. She explained that to administer ketamine intramuscularly would require a doctor to be on-site but, when given orally, this is not required. A nurse practitioner brought in the ketamine in a lozenge form that was presented to him in a golden cup. The golden cup is an idea borrowed from traditional ceremonial settings where the psychedelic substance is given a ritual status of importance and significance. This shamanist ritual has now been incorporated in the modern clinical setting for the same symbolic reasons, to mark the drug as part of a significant ceremony. He was told to put it in his mouth and swish it around. Since this was a dry run, the lozenge was not consumed. After putting on noise cancelling headphones, he was then asked what kind of music he liked. In the actual treatment, the music played was in accordance with his preferences and was a John Hopkins curated psychedelic playlist, widely available on YouTube and multiple streaming services.

The Vet's heart rate was monitored through a monitor attached to a finger and then viewed by a nurse in another room. The role of the nurse practitioner was to come in once the experience was complete, give the client a once over physical and provide them with a "bag of goodies" which contained a journal and some tinctures. At the end of the session, he was allowed to stay if he wanted to discuss what he experienced but he was required to come in the next day for an integration session. To summarize the initial protocol, prior to being given the ketamine, The Vet had to meet with the therapist via

Zoom, have a two hour in-person session with the therapist, then do the dry run, followed by another hour-long session.

The Vet, through the course of the interview, detailed the further protocol arrangements in place at The Clinic. After meeting for those initial four sessions, the client is then given the option to take the medicine, exactly as presented in the dry run. Following the experience, clients are advised that they need to have arranged a drive home, as it is not recommended you drive until 24 hours after the session. After having the first experience, clients are required to have an integration session before the next time they take the drug. For every subsequent session, clients are given the option to increase or decrease the dose. They are given 5 opportunities to have a psychedelic experience, all separated by one integration session. Ideally these sessions are supposed to take place over eight weeks, from dry run to the fourth exposure to the medicine. It is then required that a client comes back two times a week for the next month, followed by a check at two months and then a further check in six months.

The Vet made a comment; “I was doing three therapeutic sessions a week and it’s an effort for me to like leave the house for the one thing that I have to do, so it was almost like training me to be able to leave the house more than I am comfortable with normally”. The Vet was hereby identifying an unexpected benefit that he perceived to the clinical approach; it was enabling him to deal with his reluctance to leave his home. This structured exposure to guided therapy and to ketamine was helpful in other ways. During one of the ketamine sessions, The Vet's finger monitor came off and the nurse practitioner came into the room to readjust it. He described the event;

My monitor had like come off and the nurse practitioner came in and she kind of startled me out of the trip, but I was still high enough that I find when you're on ketamine and you're talking, it's kinda like a truth serum, like you'll be saying shit and you can like see yourself saying it, and you can't stop yourself from saying it... I just kind of like sensed her [the therapist's] disappointment cause like the nurse had fucked up... so, she pressed the talking instead of the other stuff... so, then we ended up talking about a bunch of stuff that I wasn't able to talk about before.

The therapist, knowing her client and how that disturbance would affect his experience, quickly changed her therapeutic approach. She had a client whose experience with the drug was shortened and the knowledge that he would only have four complete sessions on Ketamine. She switched from a large dose experience protocol, where there is minimal interaction between the client and the therapist, to the psychoanalytic approach which involves smaller doses and conversation between the therapist and patient. This underlines the benefit of being able to take these substances in a clinical setting. Having a fully trained therapist on hand, with the ability to make these kinds of psychologically informed decisions on the fly, could be immeasurably beneficial to the experience and the patient's ability to heal.

Further thoughts about the benefits of this protocol would highlight the importance of consistency. Multiple sessions with the same person ensure that the same protocol is in place each time, and also helps to develop the feeling of being cared about. It would seem that multiple sessions with the same person, every week for two months, would be the most advantageous approach to the clinical setting when using

psychedelics. Neither the therapy alone, nor the psychedelic on its own, will ensure that the clinical use of psychedelics will be successful. The combination of the two makes success more likely. The protocol outlined by this particular clinical experience makes the therapy more intense and involving. However, from a practical point of view, it also makes the therapy more expensive, due to the number of guided sessions, and there are always financial pressures to cut corners and costs.

During the research period, two ketamine clinics opened in the Fredericton area, one in Lincoln in 2021, which works closely with veterans from the base at Gagetown and another in a strip mall off the Hanwell Road, in the summer of 2022, available to any clients who desire the service and can pay.

### **Protocols in a Ceremonial Setting: Mushroom Ceremony**

The Nurse provided an example of her experiences with guides, dosage, and protocols in a mushroom ceremonial setting in New Brunswick. The ceremony she attended is, technically, in an indeterminate grey zone. While there are protocols and guides, the protocols are not always fully adhered to, nor is there reasonable and open accountability for the knowledge and experience of the guides. These types of ceremonies thrive underground because they remain on the wrong side of the law. The grey market mushroom ceremonies have been proliferating for years but have recently appeared more in New Brunswick and the Maritimes in general. Prior to the pandemic, and to the researcher's knowledge, there were at least four practitioners conducting such ceremonies in New Brunswick. These grey market ceremonies have no regulatory body to oversee the conduct of the practitioners. The people who facilitate these ceremonies are self-appointed leaders or guides and this can be extremely problematic. Many people

participating in these ceremonies would typically be struggling in some aspect of their lives and are participating in hopes of improving their mental health. This fact alone makes this population vulnerable. They are entrusting their mental well-being to psychedelic drugs and to someone not officially certified, a potential recipe for disaster. The idea that anybody can become a psychedelic healer and put on their own ceremony is troubling, to say the least.

An illustration of these dangers and fault-lines was recounted by The Nurse. She had used mushrooms and other psychedelics as a teenager but had not recently ingested any. A friend of hers told her about a local mushroom ceremony she had recently attended, which sparked a renewed interest from The Nurse in psychedelic use for therapeutic purposes. She told her friend that she would like to participate in a ceremony. The friend relayed this to the shaman or facilitator of the ceremony, who then contacted The Nurse. She put it like this;

Okay so, so now my friend had ... her experience on numerous times... probably 25 times before. She was kind of a regular, like on a monthly visit to him. I chose, you did get to choose your time, and I did choose a setting when I was going to have my first experience. It was just going to be women. It was on a Friday night. It was going to be a full moon. I was talking to him ... He recommended...he would actually not accept you, if you took any like mental health meds. Yeah, he did ask a little bit about my history, so he could base the amount of mushrooms he's gonna give you... so he did ask me, 'Have you ever tried this before?' and I explained to him, 'You know, 15 years ago'.



The idea of an all women experience appealed to her and whatever concerns she had about a male guide were lessened by the fact that a friend had recommended this particular guide and that there was a sustained focus on women's experiences. The ceremony took place out in the woods in what she described as a tin hut. She outlined the procedure in the following way;

The idea is actually that we were going to go there as a group of women... to work on ourselves, and also to be part of what he called a tribe, you know, you're going to be accepted, you're going to experience things together. He was going to guide us through a meditation. He would be the facilitator of the meditation. I guess it would be our own experience, of course, but he would guide us through the journey of receiving and this is again what he says, receiving like the spiritual healing... and ... he did explain to me about like the ancestors, how we have like so many family, family members in the past and they could come in and along with this meditation we do... go in with intent, and we work that, we work through that intent.

She was instructed to bring an intent into the ceremony. The ceremony itself commenced with a rapé tobacco snuff, which she described as "soothing", and sangra eye drops from the Amazon, intended to allow the user to see the visions more clearly. When the ceremony was about to commence, the shaman; "...separated my friend and I because he said like he didn't want our energies together. He told me where to go sit". The ceremony itself consisted of the participants laying down in sleeping bags and being silent, while the facilitator and co-facilitator (another female) played a variety of instruments and songs, as they burned sage and provided, as needed, one-on-one attention

to participants. She made the following statement about the conclusion of the ceremony; “Usually what happens is then everybody gets together, and you bring like food for a potluck, and then he brings you down to the river and then you like give something to the ancestors”.

In the next year, she attended five ceremonies, before having an extremely difficult experience which made her decide not to continue attending. The sixth time she participated in a ceremony, the shaman asked; “Do you guys want to go deeper? And I said ‘yes’. He did tell me what he was giving me, but that time [he gave me] 10 grams of penis envy<sup>1</sup>”. She stated that for this experience; “I did not go into any deep meditative state. I was extremely trapped, trapped in my own mind and in my body, and I was very scared”. She relayed that, after the ceremony concluded, the shaman; “felt that he gave me maybe too much”. This speaks to the trust that one grants a shaman when one is using psychedelics ceremonially. It is the same kind of trust that is given to a clinician, when one is using psychedelics under their care. However, in the clinic, the use of psychedelics is dictated by a governing body that regulates the protocols surrounding the administration of the substances. This is in contrast to the ceremonial setting, where the use of psychedelics is under the guidance of a single individual with no credentials. A further difference would be that the protocols for the clinical setting are based on a scientific or medical model, while the protocols for the ceremonial setting are derived from a framework of ritual.

### **Researcher's Account of His Experience and the Protocols of the Ayahuasca Ceremony**

---

<sup>1</sup> Penis envy: a specific strain of psilocybin mushroom

To complement The Nurse's experience with a magic mushroom ceremony and to contrast with The Vet's ketamine therapy, the researcher will discuss his experience participating in an ayahuasca ceremony and outline the protocols. He first participated in an ayahuasca ceremony in the spring of 2016. A close friend had participated in one in the fall of 2015 and suggested he sign up for the coming spring session. He was interested and his friend said he would cover the fee for him to have the experience. The researcher had not done psychedelics since his teenage years, but his friend described the purpose and nature of the ayahuasca and introduced him to a new way to look at the use of psychedelics, as a form of self-therapy. It was primarily within this conceptual framework and set of therapeutic expectations that he willingly entered the ayahuasca journey.

The phenomena of the ayahuasca ceremony began to surface in the early 2000's and has continued to gain momentum ever since. A *Hollywood Reporter* article in 2015 stated that you could; "...throw a stone 10 miles anywhere in L.A. and hit an aya ceremony". It further claimed that; "On any given L.A. night, there are 50 to 100 circles being conducted" (Ginsberg, 2015). The popularity of these ceremonies appears to line up with the Western world's wide-spread acceptance of non-Western practices, such as yoga, mindfulness, and meditation. Ceremonies using ayahuasca seemed to be the next step on this road. The ceremonies themselves were and are of interest, as they are believed to have a healing property and people claim that they can be transformed by the experience.

During the fall of 2015 and spring of 2016, the media coverage surrounding ayahuasca ceremonies picked up, with comedian Chelsea Handler participating in a

ceremony on her show *Chelsea Does* (Handler, 2016). In addition, the potential therapeutic benefits of ayahuasca were being discussed in mental health circles. This was pre-psychedelic renaissance and that summer Michael Pollan had published his article, *The Trip Treatment* (2015), in *The New Yorker*. The interest generated by this article led him to write the book *How to Change Your Mind* (2018) and, more recently, to release a documentary (2022) of the same name on Netflix. During this period, the researcher chose not to read any of the news reports and coverage of ayahuasca ceremonies because he did not want other people's interpretations of it to cloud his own experience. He remembers wanting to have a pure experience, but obviously he was prepared to enter some kind of social psychological investigation of his own mind. The following account outlines the protocols taken for the ayahuasca ceremony, as experienced by the researcher;

The first step in the ceremony was recommendation from the Shaman that participants partake in a *dieta* for a month prior to the ceremony and two weeks after the ceremony. The *dieta* consisted of not eating any red meat or pork, no spicy food, no dairy, no food that is overly hot or cold, no caffeine, no smoking, no drugs, no sex, and no masturbation, all suggestions which I did follow. The ceremonies took place in a small town outside of Montreal, in the woods, in a cabin that was rented for that purpose. The shaman was flown in from Peru with his two apprentices. My friend and I arrived on Thursday evening. There were eight people there, other than the shaman and his apprentices, 12 people in total. The ceremonies took place at 8pm, three evenings in a row and you were required to attend the full three evenings of ceremonies to participate at all.

The ceremonies took place in the basement of the cabin, where the 12 people equally spread out, set up their stations against the four walls. The shaman and his apprentices set up on the far wall, away from the stairs. The stations consisted of some sort of pad or pillows to sit on for the evening, a water bottle, toilet paper and a bucket for vomiting in. The ceremony commenced. Each individual walked up to the shaman and was blessed by mapacho smoke and then offered a shot of the ayahuasca brew. After the shot was ingested, the individual walked back to their station and waited for everyone to finish partaking in the sacrament. This was serious business and had the solemnity of a religious ceremony. After everybody had finished, the shaman and his apprentices played a series of *icaros*, traditional indigenous Amazonian songs that are performed as accompaniment to sacred plant healing ceremonies. The participants remained silent while the *icaros* were played. The shaman came around and individually blessed each participant. With the blessing completed, the shaman spoke the first words being heard in the room, after several hours of quiet, by saying; “¿un poco mas?” or “a little more?”. The participants were offered another shot of the brew. The second shot was not mandatory. For the duration of the ceremony, the participants remained silent until the apprentices turned on a dull light and started to play music off a curated playlist. This indicated that the ceremony had officially concluded and, shortly afterwards, people started to exit the basement and congregated up in the kitchen where they were offered tea, breads and a homemade vegetable soup, which they digested while discussing their

experiences. This procedure was repeated for three days in a row and then everyone said their goodbyes.

My first experience participating in an ayahuasca ceremony was not as intense as I thought it might be. The experience was very gentle, and I felt it only gave me what I needed and nothing more. On the first night after ingesting the first shot, I sat down and waited for the blessing of the shaman accompanied by mapacho smoke. After the smokey blessing, he took his seat and the icaros began to play. I sat still, with my back against the wall and attempted to go into a meditative state. I did not feel I had got to where I needed to go and, when the shaman offered the second shot about half-way through the ceremony, I took it. A short while after the second dose, I began to feel the presence of someone or something. I do not know how to describe it but the presence, which had a feminine aura about it, communicated with me... not by using words or any form of communication I had previously experienced or am I able to describe in words. The presence, *Mother Ayahuasca* as some refer to it, introduced themselves in a non-verbal way and the message was something along the lines of; “you don’t know me, but I know you, as I’ve always been here. It’s nice to finally meet you”. Keep in mind that this interaction was completely non-verbal and an internal feeling I was having, but the interaction with this entity had the effect of being comforting to me. It was like meeting a part of yourself that you have never met and have been longing to meet for your whole life, but without knowing it. It was a calming experience and it left me with the understanding that one should accept

whatever happens and whatever one cannot change. This is not passivity but a resilient acceptance.

When the ceremony concluded, I left the basement and was drawn to a pen and paper that I always carry in my back pocket, and I wrote down the following statement; “Every step (and miss-step) you’ve ever taken in your life has led you to exactly where your feet are planted... and it was always supposed to be this way”. The statement embodied a sense of personal acceptance and had an extremely cathartic effect on me. I feel this epiphany to this day and the understanding I drew from the experience has freed me from feelings of regrets or the thoughts that I was not where he was supposed to be in my life cycle.

This take-away was meaningful to me, as I have never felt I had a clear purpose in life. I have always had lingering feelings of anxiety as to the paths I chose, always wondering whether I should have made other choices that would have led me to different places. This one experience, at an ayahuasca ceremony, provided me with clarity. Now, seven years later, I still use this moment of clarity to ground myself, especially when feeling overwhelmed or aimless in life. The ayahuasca experience provided me with a basic belief that I have carried forward in life, that everything is happening as it is supposed to. This, of course, may seem like a banal intellectual message but the emotional impact of the feeling was palpable and durable and has had a very positive impact on my bearings.

The second night of ceremony was as gentle as the first and played out similarly to the first night until after the second shot, which I again ingested. A slight amount of time after the second shot, my father, who had died two years

earlier from cancer, came to me not in a vision but as a feeling that my father was present. My father's presence then communicated to me, again in a non-verbal, indescribable way; "you worry too much, you are doing great, I am proud of you".

The statement was very meaningful to me, as I was raised solely by my father since the age of 12 and had deep and unique bonds with him. Nine months before my father's passing, I became a father myself and I had graduated from my undergrad program days prior to my father's death. The last thing my father ever said to me was to stay together with my son's mother so I could have a good relationship with my son. However, I was unable to do this, and I always felt great guilt about it. My father's presence with the message that I was doing great and not to worry, was very relieving. Participating in the ayahuasca ceremony with an open mind, I felt the experience of my father's visit and, surprisingly, it has freed me from feelings of regret, inadequacy, remorse and grief. It also provided a feeling of reassurance that I have made the right decisions, a feeling I still maintain to this day.

I think this is a good point to step back and address the idea that presence is an intrinsic quality. I say in this story that I was affected by my father's presence. I understand that this was not his actual presence that was there with me during this experience, as presence is only as important as the person experiencing it. In this situation it was the drugs and the memories I had of my father that facilitated me to experience his presence in an altered state of consciousness, allowing me to address some of the things that were affecting my



life in a negative way. The drugs released my self-doubt, but these thoughts had their origin in the mundane, not the spiritual.

This is really the benefit of having a psychedelic experience as the altered state of mind it facilitates provides you the opportunity to interact with your memories and emotions in a hallucinogenic state. You can have these experiences and perceive them in a different way, with the end result being they have a different effect on you. In relation to my experience, my understanding of my father's presence was brought on by a combination of memories and the substance I ingested. This allowed me to have a cathartic and healing experience with that part of my life.

The memories of the third ceremony that weekend had much less of an impact on me than the first two and seemed to gently provide a space for me to contemplate the previous two evenings. This goes along with my earlier observation that ayahuasca only gives you what you need or can handle at the time. This was my first experience with an ayahuasca ceremony and the first using psychedelics in a cathartic or therapeutic way. I continued to attend these ceremonies in the fall and spring until the pandemic hit and brought international travel and local travel to a halt in the spring of 2020. The protocols followed in my ceremonial experience provided a structure that was evident and added to the overall experience.

### **4.3 Summary of Protocols Described**

<b>Protocols for the clinical ketamine setting</b>
The client was asked to become familiar with the effects of psychedelics on the brain prior to the experience, through readings and videos.
An initial meeting was held with the therapist via Zoom.
Pre-experience homework was given to focus the attention of the client on the trauma they had experienced.
A second meeting was held with the therapist at the clinic prior to the experience.
A therapist discussed the intention of the client as to "What do you want to get out of this?".
A therapist outlined the treatments and expectations as to the procedure.
A dry run was held of the experience.
The first experience was held.
An integration session was held between each session.
Subsequent sessions allowed for the client to increase or decrease dosage.
Five sessions were included in total, over an eight-week period from dry run to final exposure.
The client was required to return to the clinic two times a week for the next month, followed by a check in two months and a further check in six months.
<b>Protocols for a ceremonial setting: the mushroom ceremony</b>
Prior to the ceremony, the participant was screened as to medication history. If mental health meds were being used, acceptance would be denied.
A history in relation to previous experience was taken, with the purpose of determining the amount of mushroom that would be given.
The facilitator outlined the basic structure of the ceremony, where he was going to guide a group of participants through a meditation. The participant was advised to bring an intent into the ceremony.
The ceremony began with a Rapé tobacco snuff and Sangra eye drops.

The facilitator physically separated people to separate their energies. Participants were told where to sit.
The participants lay in sleeping bags, being silent, while the facilitator and co-facilitator played a variety of instruments and songs. The facilitators burned sage and provided, as needed, one-on-one attention to participants.
At the conclusion, the facilitator brought participants to the river, and they gave an offering to the ancestors, followed by a potluck.
<b>Protocols for a ceremonial setting: ayahuasca</b>
Participants partake in a ‘dieta’ for a month prior to the ceremony and two weeks after the ceremony.
There were eight people there, other than the shaman and his apprentices, 12 people in total.
The ceremonies took place at 8pm, three evenings in a row and you were required to attend the full three evenings of ceremonies to participate at all.
People were equally spread out. Each person set up their station along one of the four walls. The shaman and his apprentices set up on the far wall, away from the stairs. The stations consisted of some sort of pad or pillows to sit on for the evening, a water bottle, toilet paper and a bucket for vomiting it.
Each individual walked up to the shaman and was blessed by mapacho smoke and then offered a shot of the ayahuasca brew. After the shot was ingested, the individual walked back to their station and waited for everyone to finish partaking in the sacrament.
The apprentices played a series of icaros. The participants remained silent.
The shaman came around and individually blessed each participant.
With the blessing completed, the shaman spoke the first words being heard in the room, after several hours of quiet, by saying “a little more?” The participants were offered another shot of the brew. The second shot was not mandatory. For the duration of the ceremony, the participants remained silent until the apprentices turned on a dull light and started to play music off of a curated playlist.
This indicated that the ceremony had officially concluded and, shortly afterwards, people started to exit the basement and congregated up in the kitchen where they were offered tea, breads and a homemade vegetable soup, while engaging in discussion about the experience.

Development of both set and setting and protocols was derived with the intent of ensuring that individuals have the best possible experience when using psychedelics. In recent years, there has been a resurgence of interest in psychedelics, more specifically, psychedelics for mental health purposes. With the resurgence of interest for this purpose, it would seem apparent that best practices would be more important than ever. In the

above section, experiences were shared by two of the interviewees who participated in more structured formal psychedelic use, where protocols were established in advance. The experience of the researcher with ceremonial use was also used to demonstrate the inclusion of protocols for his experience. To follow that section, there will now be a discussion of what the interviewees identified as best practices to be followed when using psychedelics, in order to have the best experience when using them outside of the two more formal settings. These best practices become a form of protocols to be followed, or guidelines recommended for psychedelic use in a recreational setting, based on the personal experiences of the interviewees.

#### **4.4 The Interviewees and Their Advice on Best Practices**

The interviewees in this study are, for the most part, expressing similar ideas to what professionals are saying about the importance of set and setting, but they add personal and local experiences to the mix. The interviewees remembered their early exposure to psychedelics as curiosity based. These drugs offered new experiences and they wanted to explore what all the hype was about. Psychedelics had been stigmatized as dangerous by the media, perpetuating war on drugs propaganda but reports from friends and acquaintances suggested that they had strange powers to change the user's perceptions. They were also fun and different. All the interviewees conceptualized their early drug use as experimental but, as time went on and, as the participants aged and took on more responsibilities in life, their conceptualization changed from a curious and unstructured pursuit of new experiences to an experience filled with therapeutic potential, something that should be used with purpose and preparation. Clearly something had changed in the way they approached and used these drugs.

Many ideas emerged from the interviews providing some common advice, from users, as to best practices. They are presented here and separated by numbers for clarity. There is no order of importance or priority. As simple and limited as this advice is, it can serve to help prevent negative effects and raise the probability of a positive psychedelic experience.

***Number One: Consider what food and drink you consume prior to and during an experience.***

During his interview, The Vet was adamant on the following key point and provided good reason for making this a best practice protocol. He stated that you should never use psychedelics in combination with alcohol. Some people may not even think this needs to be addressed. However, psychedelic use often starts during adolescence, when young people are experimenting with a variety of drugs. Because of the abstinence and moral approach taken by the larger society, it is likely that adolescents are ill informed on how to use the drugs and the dangers of mixing drugs or mixing drugs with alcohol. Both The Artist and The Vet speak to the importance of not using psychedelics in combination with alcohol.

From The Vet; “I think most people that have, like, bad trips is because they mixed alcohol and because they’re high and then they’re drunk”. Being drunk is especially dangerous when on LSD, he added, because; “...with LSD you get into those loops right and you're stuck in it and you're drunk. So, you continue like and then you got multiple loops going on right?”. In support of this, The Artist stated; “If you are gonna get drunk, get drunk and if you are going to get high on a psychedelic, do that... have a

pure experience”. The advice is to abstain from combining psychedelics with alcohol, in order to gain the most benefit from the drug experience.

Further suggestions from the interviews referred to being conscious of your choice of food before and during the experience. Almost everyone that was interviewed agreed not to follow the Terrance McKenna (1993) model of ingesting 5 dried grams of psilocybin mushrooms on an empty stomach. People suggested being comfortably full before ingesting the substance, unless you are an experienced user who is familiar with the territory and looking for that *heroic dose* experience which McKenna was advocating. As psychedelics can give you varying degrees of nausea, fruits and nuts are recommended because they are easier on your stomach than such things as a fast-food hamburger. The Artist made the following statement on the topic; “Make sure you eat, like healthy snacks. I found, like processed foods suck, when you're, when you're high. I don't like to eat McDonald's burgers when I'm high. They have a weird texture”. In *The Psychedelic Explorers Guide of 2011*, James Fadiman points to the importance of food before, during and after the experience, arguing that the aim is to not have any food digesting in your stomach. First, it is better if your body isn't expending any energy on the digestive process during the trip. Secondly, the feelings of digestion can be heightened, and this can be uncomfortable.

An interesting sidenote is that mushrooms are a food and the sharing of food, or eating of food, is a culturally relevant practice. A psychedelic experience is also a culturally relevant experience. While mushrooms are a food, they are also a psychedelic, therefore representing both culturally relevant practices.

***Number Two: Consider your expectations in going into a psychedelic experience.***

Multiple interviewees suggested entering the experience without any pre-conceived notions. The Grower recommended entering the journey with; "...an openness to an experience and where it's gonna take the consumer. Preconceived notions can lead to disappointment, or an unsatisfactory feeling of what just happened, how you perceived it".

One of the important guidebooks to managing the psychedelic experience is James Fadiman's *The Psychedelic Explorers Guide* (2011). He suggests that you be prepared and positive for a coming session, eat lightly or not at all before the session and let go of expectations and personal concerns. The advice of being open to experience, of not letting pre-conceived notions or other people's opinions impose themselves onto your interpretations, is a recurrent one in many popular guidelines. The psychedelic experience is a very personal experience. Therefore, the perceptions and interpretations of the personal experiences of other users could greatly impact the user's perception of their own experience, making it less personal. This could lead to the experience being less meaningful.

Other interviewees had a different opinion as to approaching a psychedelic experience and recommended such things as preparing a list of questions, with having an intent or purpose in mind. The Meditator stated the following;

Have the list of questions to ask. Beforehand, like those are life changing questions that I kind of got answers to. So, the other thing is, I think that is something that is good in life in general is having that intention, so it's going to help one way or another, like depends on what you want to get out of it. If there's

something in particular, I think it has the ability to elevate your consciousness to deal with whatever's happening if you choose to pinpoint that.

The Family Man shared the following;

Know what you're looking to gain. So, I feel like you almost would have to experience a psychedelic first before you can know what you're wanting to get from it. Because, before you experience it, you have no idea, but you would have no idea what to expect, though. ... you don't know what you don't know. It's like opening up a whole new world. You almost have to experience at least once.

Reflect, to know that you, what you would like to know, what you can accomplish from it... That you can use it, use it for. But, yeah. The purpose. Your purpose.

We can have a good time, having a great old day having some laughs with the boys, you know, having a good time. Your experience could be working out some shit. Yeah, which I know that's the same with like ceremony, or like clinical.

James Fadiman (2011) suggested that, like people going on a voyage, write out what you hope to learn, experience, understand or resolve before the voyage. This observation speaks to mindset, which is going into the experience with an intent or an idea of what you would like to explore during the experience. The Family Man made the link between the mindset of a clinical or ceremonial experience, integrating that into recreational usage.

At first glance, these two mindsets seem to contradict each other but they are both the same in their concern with mental preparation for the experience. One approach is advocating going into the experience with no pre-conceived notions as to what one will experience, in order to have the purest experience one can possibly have. The other



approach is speaking about going into the experience with an intent, in the form of questions you want answered. Although the vantage point differs, both are discussing in what way a person should prepare themselves with a mental mindset, one set being to clear your mind and the other set being to focus your mind to a particular purpose.

***Number Three: Use psychedelics in a stimulating environment.***

A third best practice protocol is to use these substances in a well-lit or colourful environment. The Grower stated; “Psychedelics aren’t made for dark, shadowy environments. If you want to have a bright, beautiful and colourful trip, starting off in the middle of the night is not the way to go about it”. This would seem to be common sense, but most trips the interviewees described, especially during their early usage, took place at night. This is likely influenced by the structure of society as daytime is meant for work, and the night, at least for those who are not shift workers, allows for personal exploration, giving one the freedom to have an adventure. For the participants in this study, nighttime, in a rural environment, is typically much darker, thus their comments recommended not taking psychedelics at night.

On the other hand, night has a different connotation for urban areas. Cities have lots of light at night and one may be surrounded by the bright, beautiful colours. Though the advice from the interviewees was worded as to use these drugs during the day, the overall tip may be that to have the best experience, whether in day or in night, the participant needs to be immersed in an environment that is accessible to light and colour. This exemplifies, once again, the importance of setting.

***Number Four: Have sufficient time to recuperate and integrate after an experience.***

“I think, in my experience,” said The Grower, “the most important part is a period of rest and reflection afterwards. It’s almost like when you top a marijuana plant, that trauma leads to double the growth”. He elaborated further; “So, the intense experience of the psychedelic is that it sort of cuts you open to let the healing happen and then, that period of rest and relaxation afterwards is where the actual growth takes place”.<sup>2</sup> A fourth point for best practices was to establish a period, after the experience, for rest and contemplation.

The Vet suggested that, following the trip, you should keep a written record; “I find at that stage (the end) I just lay down and I wish, I mean, I always think I should be writing this down or recording this, because like you solve the world’s problems, and you are solving your own problems and then you ‘wakeup’ and can’t remember that you solved it”. The Vet continued; “...you have to be prepared that because, like for there’s like a weird, like thing, like for every high. The higher you get, you’re gonna be the full opposite down for a period of time. And just remember that when you are down that the reason why you are down is because you had such a high and that will become level again”.

The point is that you need to be prepared for the lows that follow the highs. Understanding this and expecting it may reduce the negative aspect of this part of the experience.

The Grower emphasized the importance of processing the experience on your own, without the undue influence of others;

---

<sup>2</sup>

*Topping a marijuana plant* is the process of cutting off the main stalk of the plant to force it to grow more branches resulting in more flower at harvest time.

If you don't take that time to sit with it afterwards, and actually like review your experience alone, without other people influencing your ideas and stuff, until you put it into concrete memory to what you actually just experienced because, if you don't, other people will play into your influences to it...so that buffer, after the therapeutic experience, I think is a very important thing.

The Grower's recommendation reflects the thinking of Becker and other sociologists. For Becker (1953) and some symbolically oriented sociologists, drug-induced sensations are filtered through other people's reports and experiences. To lessen this influence, it is suggested to take time for oneself to reflect, think and write about the process you experienced, without external interference.

Reflection and recollection seem to make the psychedelic experience more relevant and meaningful. James Fadiman (2011) suggested having a three-day process for the voyage; Day One to be quiet and unhurried, Day Two for the voyage, and Day Three to take time to integrate the experience and record your discoveries and insights. The Artist spoke to this by explaining;

You need to be able to sit down and like, you're not gonna be able to sit down and process the entire trip. You're not going to remember everything that happened right after, but like, I don't know, be like, yeah, that was a good day... I love, I love all of you like, you know, this sort of thing. Um, and then I think, well, sleep... reset is really important. Just for, you know, get rid of the cobwebs, feeling you know like the kind of groggy like, yeah, I always feel kind of like almost like a veil is over you afterwards. Everything's a little like, I'm slow to respond to things. But after I sleep, I'm fine.

She elaborated further:

I mean the intensity of the experience is what spurs new growth. If you're going to stay a good plant in a pot and then you get hit with a big dose of fertilizer, it grows after the initial experience of the fertilizer. Like the psychedelic experience is that jolt, that jumpstart, that shock that gets you into the period where you can grow but I, from my experience, all the growth happens in that reflection period. Afterwards.

***Number Five: Keep an awareness of the time frame surrounding the experience.***

A fifth idea was given by The Vet, who discussed the need to keep an awareness of the time frame surrounding the experience, in case feelings of discomfort arise during your trip. As he put it;

...or you're not happy with, trying to get away from being high, that's why, I always like to know what time I start. And then be like, 'Okay. So, I started, took this at eight at night yeah, they're gonna be high until eight am for acid or like with mushrooms like if they take this at eight, at midnight. Your trip should be over like within four hours. ... within that time, just remember you're high. Because if you forget that you're high, that's when I find people get on bad trips because ... you're not thinking or doing things you normally do. So then, you're like 'Oh, I just did that... Why are you acting this way? Oh, yeah, I'm high, so I can.... it's okay to act this way or think this way.

Being aware of the time frame is suggested as a way of reducing the feelings of being overwhelmed by the experience, by way of reminding yourself that the experience is temporary and allowing yourself an allotted timeframe to have it. The idea of keeping

track of time, as suggested above, will also permit one to have the experience and act in ways they would not usually act while sober, thus reducing feelings of self-consciousness and anxiety. This best practice speaks, once again, to the aspect of mindset.

***Number Six: Only use psychedelics when you are in the right mental and physical state.***

All the interviewees agreed that the individual taking the drugs need to be in the right headspace for using psychedelics. Participation is not to be forced and a person should not partake in these experiences if the person is not drawn to them. Psychedelic substances are intensifiers, so if you are not fully in the mood for the experience, taking the substance will enhance your negative mood. The Artist stated;

You can't be in a bad place and going through a lot of trauma and stuff and still have a good like enriching trip... you have to be able to... like you have to accept things, you have to be able to observe and accept. And if you can't do either of those things, it's not going to benefit you. You're going to - you're going to get overwhelmed with your own thoughts.

Being conscious that the timing for the psychedelic experience is not optimal would mean deferring the experience until the time is more conducive to a positive experience.

Along with a positive mental state, some interviewees considered the physical state. The Artist referred to the physical state and recommended that one should ensure that they are comfortable. In her words; “Make sure, like if you're outside, make sure your socks are dry and you have spare pair of dry socks. I like dry clothes, like, especially Music Festival where it rains. Like, you don't want to be uncomfortable in the trip”.

Considering the mental and physical state can also be seen as a ritual preparation for the experience. Being prepared for the experience, in the consumer's own mind, can enhance the probability of benefiting from the experience, similar to the suggested diet prior to participating in an ayahuasca ceremony. It seems evident that, by following some of the guidelines that originate in ritualistic ceremonies, this would also contribute to a more positive experience outside of the ceremonial setting.

***Number Seven: Stay with the people you began the experience with.***

New people bringing different energy into the setting can have a detrimental effect. This idea was explored by The Nurse when she stated; "If you are going to be with people, be with people that you like but don't go to the mall". The seventh idea regarding best practices is, when using drugs recreationally, stay with the people you originally started your journey with.

The Grower reflected upon this in the following way; "The worst thing you can do is lose your buddy when you are doing psychedelics. If you're doing it as a group, you don't want to lose anybody, you don't want someone new to come into the group, which again speaks to the connectivity right?"

Underlying this advice is the central idea of the connectivity or connection one can experience during a psychedelic trip, being comfortable with the people you are engaging in the experience with and controlling those factors to the best degree you can. The company that the users are with during the experience is part of the setting for the experience. The Artist put it this way; "...like somebody new coming into the fold, or not in the friend bubble or whatever like you kind of have your defenses up you're like, I'm trying to be like weird with my friends, yeah stranger danger, what the fuck!"

What this emphasizes is the importance of the personal aspect of the psychedelic experience. To gain the most benefit from the experience, it is suggested psychedelics be used with supportive people. This is advised whether it be with friends, when used recreationally, or with a group that came together with a shared purpose, when using ceremonially. The Vet bluntly stated; “If you are gonna do ketamine, you have to be comfortable enough with whoever is around, to be comfortable enough to shit yourself. You’re not going to shit yourself but be comfortable enough that, if you were to shit yourself, the people around you would be cool with that”.

***Number Eight: Establish a regimen of mediation and yoga during the experience.***

Further recommendations came during the interview with The Meditator. He suggested to establish a regimen of mediation and yoga during the experience. When asked, “*What are 10 things you would tell someone to have the best experience possible?*”, he replied; “Have a good playlist ready. Be ready to close your eyes and sit, have good meditation practices already. And maybe have a friend that is willing to just be quiet and be there for you and hold space for you if you want to talk about things”.

*Hold space for you* is a New Age adage of being present and being non-judgmental towards others. The Mediator followed this up with a quite profound statement; to do these things so that one is; “... bringing the clinic or the ceremony to your house and into the comfort of your own home”. This observation is significant in terms of this research because The Meditator is uniting the three settings discussed in the thesis, outlining his ritual approach and explaining how it blends with the clinical and recreational settings. Having someone to hold space for you is to have someone who, traditionally, would have played a shamanistic role, or someone with clinical authority.

Here that person is replaced with “a friend willing to be quiet and be there for you and hold your hand”.

Later in the interview, the Mediator stressed the importance of breathing;

I would definitely do some breathing exercises before, to really make sure that I was in a really like heightened state beforehand, like some Kundalini like rapid fire breathing and then, you know, come out of it, maybe do some more yoga, just kind of feeling your body... feel your body and you feel the aches and pains, a lot more go into it, you're - I feel like whatever it is, you can feel the life force inside a lot better.

He went on to further elaborate; “I had like the best meditation that really helped me advance my meditation practice...by meditating with the mushrooms, I was getting, basically letting go”.

This suggestion for best practice underscores the importance of intent going into and during the experience. It is focused on the set for the experience, engaging in the rituals to have the fullest experience. In his view, the rituals are used to prepare the participant for the best experience possible and he compares that to a clinical experience, while actually engaged in a recreational use of drugs.

***Number Nine: Use LSD socially and psilocybin as an internal experience.***

The Meditator was the only one of the participants to address this thought, but it is worthy of consideration. He would; “rather do LSD with friends...Yeah, mushrooms, oh no I don't think mushrooms are meant to be used with people”. He compares LSD with mushrooms through the following observations;



I think that it's (LSD) is just more of a social drug, like it's like that I think a lot of it does have to do with the effects, that the physiological effect also just like the side effects of, like, gut rot and stuff that happens with mushrooms, like that it's like, I'd rather be at home...if I need to go to the washroom can or take a shower. But, uh, yeah. Also, it's also the way that the drugs interact. It's (mushrooms) like really intense, in a soft, gentle way but with (LSD) is like... it's like hey... I have something to tell you. And you really want to sit down, listen to that. I think, in where LSD is kind of like 'let's party'. ..They're, they're (mushrooms) definitely supposed to be for spiritual realizations and working towards you know, enhancing your mind and your spirit and that's I mean that's my perspective.

An interesting thing to note in regard to this is that LSD is a product of science while mushrooms are a product of nature. This best practice speaks to the mindset the user will have going into the experience and advocates that the user identifies their purpose in taking the drugs, to “party” (LSD) or to “seek enhancement of mind and spirit” (psilocybin).

***Number Ten: Start with a small dose.***

A theme for best practices, heard multiple times during the interviews, was about dosage, the tenth idea. The advice given is to make sure one starts with a small dose. There is no reason to start out with a large dose, as the user can always work themselves up from a smaller dose. The best way to move oneself up to a larger dose is through experience and not just any experience, but positive experiences. If the individual takes a smaller dose and has a positive experience, they are more prepared to have a positive experience with a higher dose. The Family Man recalled an LSD trip he had later in life;

“Anyway I was presented with some acid. So as there was four of us that took a hit and I took half of one, so by this time, well I knew that if everyone takes one, I take half. And it was just a perfect, a perfect day”. He spoke further to this later in the interview saying;

I've also kind of realized, as I've gotten older, that maybe my tolerance is lower than people that I generally would take acid with or do mushrooms with like, you know, somebody might eat a handful of mushrooms where I just need a little pinch. And that gets me to where I think I need to be, so I think maybe a problem that I've had in having bad experiences has been overdosing myself basically or just taking more than what is required for what I want to happen.

This best practice refers to the setting of the experience as, by being knowledgeable and respectful of the substance, you are preparing for a positive experience.

***Number Eleven: Being aware of choice of circumstance/situation in which the psychedelic is consumed.***

The eleventh idea to emerge for best practices is focused on timing, specifically to be aware of the choice of time as to when to use these substances. As described by The Family Man;

(Be aware of) ... doing things like taking it at the wrong time and place, like it's two o'clock morning, bars closing, oh we're doing acid. All right, I'm going to do some too and go off to some fucking party in the middle of nowhere with a bunch of people that I don't know, and not have a good time.... Generally, if I'm, if my inhibitions are down enough to want to eat some, it means that I am already drinking, which means that my judgment is off, and I'll probably wind up eating more than I should.

The Artist reflected on the same idea in the following way;

I don't know I think I've done psychedelics at a time when I'm like grieving or like going through trauma and it's been a good thing, but I don't, but there's certain times where I was grieving and going through trauma, I felt like it wasn't the right time to do it. Like, all that shit that happened to me, just recently, I didn't feel like doing it until now. Like, I didn't want to do it when I was going through the shit but now, through the shit, I feel like I can do it, and then have a moment to pause and think about it and process it through my trip.

This best practice speaks to setting and making sure you don't partake in a psychedelic in the wrong setting, as that will greatly contribute to the chances of you having an unenjoyable experience.

***Number Twelve: Have something tactile.***

*The Family Man* added one more idea for best practices when he spoke to the importance of bringing a toy. He stated; “Bring a toy, bring some action figures... just having something tactile in your hands. Something to fidget with, something to look at and feel”.

This best practice may only relate to recreational use. The point of bringing a toy on the trip is multi-purpose. It could be used as a fidget toy, as psychedelics are intensifiers and, therefore, can intensify feelings of anxiety and discomfort. Having something tactile in your hands, to focus on, may be helpful to ground an individual. A toy may also add value to the experience by contributing to the experience in a humorous way. When you are under the influence of psychedelics, the toy may work its way into conversation in a humorous way.

Another way to look at this suggestion would be that the toy is a talismanic object to bring good luck to the experience. An example of this would be something like the spinning top Leonardo DiCaprio used in the Christopher Nolan film *Inception* (2010), to ground him during his dream travels. A tactile object could also be seen as a memento of the experience and used for the purpose of recalling the experience afterwards.

In considering the twelve best practices described above, many of the responses from these interviews can be linked to what researchers have been discussing in relation to set and setting for these experiences. The set of the experience, referring to the internal world of the participant, was touched on by interviewees when they spoke of bringing intent to the experience, having a list of questions, of being in the right head space, and of being open to the experience. The setting of the experience, referring to the environment, was discussed with such tips as relating to use of food, time of day, time-frame before and after the experience, comfort level, and the use of music. The social/emotional setting would relate to staying with people you are comfortable with. One of the ritual connections would be the suggestion relating to the use of meditation and yoga throughout the experience.

The best practices/protocols also touch on the therapeutic use of psychedelics, as they are linked to how the set and the setting contribute to a positive outcome. The interviewees were able to identify best practices for the use of psychedelics and clearly outlined what they felt was important to consider prior to engaging in their use. This is an important process towards the potential use of psychedelics for therapeutic purposes.

Learning to create positive set and setting conditions is an urgently needed skill in a drug suffused world—both for individuals, as well as for society as a whole.

The science of how to use drugs responsibly and effectively should be made accessible by educating the public on the principles of set and setting, a shared body of knowledge on the do's and don'ts of responsible and effective drug use in a world where drug harms cannot be nullified but can doubtlessly be minimized. (Hartogosohn, 2017, p.14.)

**Summary of Best Practices as recommended by interviewees:**

1. Consider what food and drink you consume prior to and during an experience.
2. Consider your expectations in going into a psychedelic experience.
3. Use psychedelics in a stimulating environment.
4. Have sufficient time to recuperate and integrate after an experience.
5. Keep an awareness of the time frame surrounding the experience.
6. Only use psychedelics when you are in the right mental and physical state.
7. Stay with the people you began the experience with.
8. Establish a regimen of mediation and yoga during the experience.
9. Use LSD socially and psilocybin as an internal experience.
10. Start with a small dose.
11. Be aware of choice of circumstance/situation in which you take a psychedelic.
12. Have something tactile with you.

## Chapter Five: Perceived Benefits of Psychedelic Use

### 5.1 Interviewees' Reflections on the Benefits of Their Psychedelic Experiences

This section examines the content of the interviews and focuses on the language and opinions that the small group used to explain what benefits they gained from their experience with psychedelics. For some of the interviewees, psychedelics recalibrate the brain and push a reset-button that brings to them a resolution from the negative mood or deep anxiety that bothered them. For others, psychedelics enabled them to go past personal fears and confront emotions they previously were unwilling to face. The latter was certainly true for The Nurse who reflected; “So how do you become okay with how you live your life? Right.” Psychedelics, according to her, helped shift negative emotions so one can become okay with the choices and decisions one makes in life. She felt the experience benefited her because it brought her;

...to a place I had never been. . . I remember allowing myself to go there and I remember being scared. I was on a roller coaster, and it was the most amazing thing. I'm awake, I'm aware. I'm listening to the music. but I was on this roller coaster though, and I was going through these depths of time like I... was dreaming and everything was just coming up and then, I got to this point that it was like, you can allow yourself to go down there. And then I remember trying to pull myself back and not wanting to go there because I didn't want to delve into those emotions. But then I was like you have to let yourself go, and I went. It was hard. Yes, but a benefit above all costs. Absolutely.

She refers to the idea of “letting go”, a concept that is very common in the world of psychedelics. She is describing the fact that the drugs enabled her to go past her fears,

and to confront emotions that she had previously been unwilling to deal with, giving testimony to the therapeutic nature of the experience. The idea of letting go can be described as the ability to;

Trust your own innate wisdom, that you have the skills and natural ability to make it through this experience. Trust the safe space that has been provided and the people around you to help if you need it. Let go of expectations about what should or shouldn't be happening. Let go of concerns and judgments, as well as the inevitable feelings of wanting to control the experience in a particular way. Open yourself to the amazing events that are unfolding, even (especially) the difficult and scary parts. Stay open to the fundamental truth that everything that is happening is completely and utterly OK.

(MacLean, 2014, p. 37.)

All of this can be more concisely expressed in a Grateful Dead lyric; "Once in a while you get shown the light ...in the strangest of places if you look at it right" (1974, *Scarlet Begonias*, [Recorded by the Grateful Dead], On *From the Mars Hotel*. CBS).

The Artist equated her experience with psychedelics with both her professional artwork and tackling the personal issues that hindered her creative development;

It is sort of like medicine. Native Americans smoking peyote or whatever. It's a part of the ceremony like doing Ayahuasca. They use it as a medicine. I want to do it so I can process .... it helps me sit down and process and like, get through some thoughts that I had blocked before. Like, I don't want to think about that right now. I don't want to get sad. You know what I mean. But if I'm on acid and then I will think about it. And because I have that kind of set, I'm going to use it

in that way, like I know I'm gonna cry. I know what I think about it... I'm going to get through it, but it will be over at the end of this trip. You know what I mean”.

The comparison she is making is that taking the psychedelics is equivalent to taking medicine. In her summation; “Do it for a reason and get better”. This is a powerful statement that certainly supports the idea that the experience, for her, is therapeutic.

The Vet suffers from obsessive memories and flashbacks from his war experience. While he has gone through clinical ketamine treatments, he has also used the drug on his own, outside of the clinical setting, prior to his experience at the clinic, to deal with flashbacks and the retrieval of traumatic memories. When asked if his most beneficial experience with psychedelics was in the clinic, he responded that this was not the case and that his most beneficial experience was not in the clinic. He reported that when he was accepted into the clinical ketamine program, there was a six month wait period during which he researched the clinical use of psychedelics for therapy. He stated that being exposed to this way of thinking about the psychedelic experience gave him a new perspective, which he was able to channel in his recreational use. The outside of the clinic experience was, nonetheless, informed by much of what he learned about the therapeutic approach to psychedelics; “I still get like certain intrusive memories or flashback type things,” he recounted, “but now, instead of having a panic, feeling anger or guilt, I’ve been able to move beyond it”. He told the following story that is worth quoting at length;

I was at a festival, and I wasn't prepared for the strobe lights. It caused a big flashback to an event that happened overseas. And I was, like, okay. I’m gonna do some ketamine and try and work through this. . . . The flashback triggered me. I



was super tense, and I didn't want to like hang out with anybody. You're at a festival and there are people everywhere and so I went up on like a hammock that's like, you can lay down. I was to the right of the stage, and I did it, and I did like a pretty big line, and just like laid there, and then let it take in. And then the flashback. I forced myself to go back. I remember parts that I haven't been able to remember. Like, ah! Like, a firefight. I couldn't remember certain key parts of who shot who, or what happened. I was able to retrieve information from a firefight in 2006. It was very flashy. I remembered because of the ketamine. I was in 'quote unquote' in the k-hole, or whatever you want to call it. I couldn't get out of the memory. I was laying down and like you're anesthetized. And so, I was able to go from the beginning of the incident to the end of it in one go, and just it's like "Let it go". My intention was to see whether I had, in fact, done everything I could do. Or not? The guilt was just like the biggest thing that was troubling me. I was engaging the enemy. And then, like moments later, I was trying to save this guy's life. . . . In the same scenario, a motorcycle had come across and my second gunner had done a warning shot and accidentally hit the bike and the bike fell over and, what we thought were two fighting age males, ended up being two kids that were on the bike. And I just like, like that fucked with me because I wasn't there to fucking shoot kids. And for the longest time, every time I thought about that type of stuff, I wouldn't be able to like talk. I would just like shut down, or not be able to talk about it. So, like after that experience, now, I've been able to move on past that. . . . cause my problem was that there were so many blank spots in the hour-long traumatic event, that I wasn't sure what I did... and that caused

me discomfort. Why, after like 10 years, right, every other day do I think about this scenario?

The use of ketamine in this instance allowed for The Vet to fill in memory gaps and, once he could restore the missing information, he was able to "move on past that" and to "talk about it". For The Vet, the ketamine experiences, both inside and outside the clinic, also helped him to manage small, but meaningful, changes to his everyday life. He explained;

Up until like a few weeks ago, I was like, no, ketamine didn't do anything, like I'm the same, but then people have noticed a change in me, and even today I was able to get my truck inspection done. And then I went in, booked another appointment for tomorrow, and now I'm here. Six months ago, you wouldn't have got me here. I would've come up with different excuses not to come here or be just too depressed to leave the house. So, I've changed. I don't like to admit it to a lot of people, because again, this is another like paranoid thing. . . I got kicked out of the military for PTSD and I'm on disability. I'm never gonna go back in the military and I'm 38, 39 years old. They determined that I was disabled, or whatever, and I don't have to worry about getting a job, but they want me to have a purpose. . . That's why I'm getting more into video-ing.

While The Vet's stories are testaments to the therapeutic value of ketamine by someone who has had experiences working through trauma, many of the interviewees were interested in exploring the value or benefit of psychedelics to enhance feelings of personal flourishing, such as those usually associated with happiness, life satisfaction, meaning, purpose, and close social relationships. The Nurse spoke of how, after several of the mushroom ceremonies, she began using mushrooms with her husband;

Once a month we'll do like maybe two grams. It's usually in capsule form. It's just to connect better together. .... We're usually outside; usually watching stars. We like nature. Or we're having wine, and listening to music, and it's usually Friday nights. Like, last Friday because we are both off. I mean, you have kids, we live day to day, we work Monday to Friday. We work, and sometimes you know, when you come home you don't talk, because you're rushing bringing kids to sports. It is like 'alright, I gotta go'. And then this is just fun. Friday night, like I said, and we don't need that for connection, but it does enhance it.

The shared experience of taking mushrooms, in familiar natural surroundings, is a benefit to their relationship as a couple. It provides them with a recreational outlet that belongs to them alone, without the children. The use of psychedelics without the focused self-reflection that therapy demands is recognized as liberating, for her and her husband. Their ritual recreational event has been framed as a way of de-stressing from their busy family life, with its constant demands of work and child-rearing. As she says; "it's for fun". There is no expectation to work through negative thoughts that may arise. The experience is marked and understood as different from the ceremonial use of mushrooms that she previously described, where one is asked to focus on an intent for using. Nevertheless, the importance of set and setting is still acknowledged. It's a Friday night and all the domestic chores are done. The kids are off to sports or in bed. This is "our time", and the setting involves, nature, music, personal connection, and making new meaningful memories.

The Family Man added to this discussion and reflected upon the value of his early psychedelic usage in this way; "Well, my experiences have not been anything but

recreational, not clinical or ceremonial, so every one of my experiences have been recreational. But I still think that care needs to be taken too. There has to be a certain amount of respect. Things could turn sour on you if you're not in the right headspace". For The Family Man, the importance of psychedelics is strongly tied to the type of memories one can create out of the journey one has taken. The feelings and experiences, as he described; ". . . will stay with you. I am very fond of those memories. Some were very terrible but I feel well, I did that. Yeah, I do feel there is value to recreational use. . . even with the negative experiences. You learn things about yourself. And, you know, it's all, it's all eye opening". He compared psychedelic trips to having a real-world travel experience to another places. Both kinds of trips provide you with memories. He values the memories created on his psychedelic trips and feels they will be "long lasting". Also, like a tangible journey, there are things to be learned as one travels. During the trip and after the trip, one may not be conscious of or able to articulate what they have learned in their travels but there is the feeling that one has in fact learned something. The Family Man continued; "Maybe I did learn things from it... You learn things about yourself". Recreational use, like travelling, has a value if one is attentive and attuned to the changes one is witnessing and there are potential benefits in this process.

While recreation may stand on its own as a benefit for using psychedelics, it is possible that during that recreational experience, there may also be a potential for some therapeutic benefit. The Family Man shared;

There's no reason to demonize psychedelics. I think that they should be treated maybe less as, not less but not solely as, a recreational thing, but people do work. I know people do work with, under the influence of psychedelics and I believe

that being said, I feel like I've done some myself just, you know, in little ways, little ways... the experiences that I had had that were good for me outside of the experience itself.

He also stated the following later in the interview; "I feel like every good time that I've had has been therapeutic. You know, I, myself, like, Yeah, I feel that every, every good time has been therapeutic. For me playing guitars is therapeutic.....it's, it's this release that makes you feel good and I don't know....". These statements give support to the feeling that, when the experience is "good", as he describes, "then it is good outside of the experience itself". To compare this with playing a musical instrument, as therapy, is a strong link. He sees both types of experiences as therapeutic.

The Grower articulated a nuanced distinction between recreational and therapeutic, irrespective of whether the therapeutic is used in a clinical or ceremonial setting. He noted that the wall between recreation and therapeutic use is not that solid. Although it is policed and enforced by law and professional medical authorities, there are plenty of informational exchanges that go on between the two spheres. A great deal of recreational use has a therapeutic payoff, whether one is aware of it or not. He stated declaratively that;

People that seek out drugs are typically either consciously or subconsciously self-medicating, whether in the recreational setting, or whether they're in a clinical setting, like you know what I mean. . . people learn through recreational experiences to use marijuana and open up socially. People are buying like street pills to dog themselves down, knock themselves out, [they] take them for escapism, to avoid everything that's in their life, because they perceive it to be so

bad and so unrecoverable that they would just rather escape than deal with anything. There's still some positive therapeutic kickback benefit to them through that experience, whether they acknowledge and realize it or not, right.....So, I don't know if there's a distinct line between the two. But you can have a more beneficial experience by applying therapeutic technique to it.

The Grower continued that, for him, the critical distinction between the therapeutic and the recreational is that, in the therapeutic setting, one is more conscious of the intent and the protocols/procedures that accompany use; "...yeah, like the intent will increase the benefit". However, for the recreational user, the intent is not fully articulated. As he explains;

I guess people are getting their therapeutic benefit subconsciously, but I don't believe they will get the same intensity of the results as someone that applies the intent and the procedure. So, you can be using recreationally to self-medicate and not even realizing it, and still get some benefit some positive kickback from it. But when you apply the intent, the setting, the mindset, the digesting your experience afterwards, when you start to apply these to the experience, that's what would bridge the difference, in my mind, between the recreational and the therapeutic use. . . . When I was maybe 16, taking drugs was just a useful experiment. Yeah. and then the motorcycle accident led me to psychedelics to deal with the PTSD from that trauma. Got me to start thinking. I mean I've been doing recreational psychedelics my entire life but, for the therapeutic side, the self-improvement side has all been post-accident.

Another benefit that many of the interviewees spoke to was that the psychedelic experiences provided a social, empathetic, and emotional connection to other people that often surprised them. A recent article by Frostmann et.al., refers to the idea that psychedelics may have positive effects on mood and feelings of social connectedness. In the article they say;

Our findings validate recent reports of mood enhancing effects of psychedelic substances in laboratory settings and suggest that these effects manifest at least in part through changes in the experience of social relationships. Past research suggests that the use of psychedelic substances such as LSD or psilocybin may have positive effects on mood and the feeling of social connectedness.

(Frostmann, Yudkin, Prosser, Heller, Crockett, 2020, p. 2338).

Many of the interviewees supported this finding. The Family Man recounted one specific canoeing episode he had on LSD;

I don't know, it was just everything was right. Yeah, the weather, you know, it was beautiful. . . people were all on the same wavelength for a period of time. Suddenly, one person went over. You can say that strengthened the rest of us because then we had to, we had to be a unit. . . connection. We had, we had to look after each other. And so, two guys dumped their canoe. Me and the guy in my canoe scooted down river and started picking up all their shit. Anyway, it was just, it was like, we're all. we're all there together. There's no judgment. There's no judgment there, you know. It's like we were all in it together. There was no nobody on the outside... everybody on the inside.

The Artist spoke to how she felt psychedelics facilitated a deeper connection to others that are sharing the experience. In her words, she saw psychedelics;

...like, as a bonding kind of thing right like you get a big group of people together, like say you're isolated you're camping or somewhere. And you're all taking or dropping at the same time. You're, you're like going and doing the same thing as you're watching the same shows / And you're, you're, you're having an experience together, like you're laughing, and I don't know... it's a memory you're creating with other human beings that you're connected to on a different level because you're all experiencing the same trip.”

She went on later in the interview to state; “Sometimes it is very humbling, because you realize that, you know everybody is essentially the same down to their very core science. Yeah, we're all fucking carbon and whatever, atoms and molecules and all that other bullshit. And we're all just having a human experience. And not everybody gets the same experience, but we're all going through it”.

The Grower commented on connection that goes beyond your friends to the broader community;

Because every class, background, ethnicity come together over drugs, you know what I mean? You can sit down with anybody at a music festival, jump in the circle, smoke a joint, pass the plate around and fucking have an experience with people that you've never met before. But you all know the shared common interest as soon as you're in that setting... so that goes back to that connection and community, right? It overlooks other potentially social barriers. They will draw you together with people that you've never been exposed to, like I've done Drugs



with fucking millionaires, with people that live on the street. Like, so there's that huge vast segment of society, that gets pulled together under one common denominator, which is psychedelics or drugs... and that's beautiful.

The Grower further describes his feelings of connectivity;

I remember the first time and there was definitely an intense fear, like a fear and anxiety to dropping those first two hits... standing on top of that cliff and out in the middle of the woods in rural New Brunswick and like we were afraid man like, we were afraid man. And we shared that and I think that the four of us, I think for the first time, all went together, all did it together and we stayed together like for the whole time.

He further elaborated later in the following way;

It's everybody together for the same intent, everybody, moving together with like the beat of the music, right? It's an interconnectedness on its own, even without the drugs...just to some music. You can get lost in it right? The bass and just a communal action of everybody's dancing together. You hit on the same vibe and the music's good, right? You can see a fluidity through the community and a connectivity between everyone engaging in that experience. It's that interconnectivity, right? like the spider web network model linear one... if you are connected to the people around you and those people with the people around them and you can see that fluidity in movement through the crowd. So, and even in that instance, not everybody is experimenting with drugs or using drugs recreationally.

The use of the term *interconnectivity* puts, in one word, the value that The Grower sees as a prime benefit of the use of the psychedelics.

How these substances can serve as tools for connection was also referred to by *The Artist*; “Growing up isolated, yeah, like I didn't have a lot of friends... so like me and my dog ...wandering around in the woods most of the time. So, connecting to other humans was always difficult for me growing up until I got into psychedelics”. This is a strong statement as to how psychedelics helped her to develop social skills and also provided opportunities to practice those skills. It implies an underlying benefit of providing, not only the feeling of connectivity, but the mindset that encourages individuals to explore the opportunity to connect with others. This could replace types of psychopharmacology and psychotherapy or be used in conjunction with them.

The Family Man looked at connectivity from a different viewpoint, through discussing a negative experience where he did not connect with others;

I feel like my negative experiences. Maybe. Maybe they were trying to teach me shit that I wasn't open up to, like, like, like, yeah, you're not gonna have a good time because you're not where you're supposed to be right? You're not having the time, because I know you are sitting alone in your basement and ate a bunch of molly and know you're all by yourself and going for a wander and it's not fun at all. You know, I think my negative experiences didn't necessarily teach, teach me anything other than how not to have a negative experience..... it is (positive) and probably, I will say that maybe that, I don't know, with introspection, was like we go into places that I didn't want to go to... And maybe I still have new places, you know, maybe those places still need to be worked out. I don't know.

The fact that he is equating the negative experiences with being alone provides counter-proof to what has been said about the value of psychedelics in promoting connectiveness

between people. All of the preceding statements speak to the idea that you feel a bond or sense of community with others participating in the psychedelic experience with you. The interviewees see this as a benefit in terms of how they are able to perceive others in a cooperative and supportive way.

One of the benefits described by The Artist was the use of psychedelics as a catalyst for creativity. This has been referred to in some of the research;

We emphasize that creative generation, in particular, is best regarded as a product of multiple varying mental states, rather than being a singular mental state in and of itself. We also propose that the psychedelic state is a mental state with high potential for facilitating creative generation and updating the dynamic framework of thought to incorporate this state." (Girn, Mills, Roseman, Carhart-Harris, Christoff, 2020, p. 1).

In the words of The Artist, "I find it's ( using psychedelics) is good for inspiration purposes too, as an artist...like seeing different color palettes and, like, a lot of my paintings are pretty wildly psychedelic. Yeah, but mostly influenced by seeing those like weird rainbow repeating patterns".

Developing this idea further, two of the interviewees reported that the creative process, in and of itself, was a therapeutic process. The use of psychedelics not only unleashed the creative forces but, through experience, allowed them to work through trauma. Two of the respondents had similar experiences of painting through trauma, which they reported during their interviews. *The Artist* described her experience as follows; "I have that time to sit and take myself out of the past and the future and just process, things like I would go in to xxxx's place and just paint. Like, that big phoenix

painting I did. It took me four acid trips. I feel it did help me like I went there, one time, to work on that specific painting”. The Civil Servant described his similar experience;

You know one night I had to paint my apartment so I took three or four hits of acid while I painted my apartment. I figured it would give me some energy to do it and as I was painting, I felt like I was painting my life. It’s very... metaphoric... the painting was a metaphor to other things going on in my life. As I was painting, I was kind of doing some kind of, on some kind of level, I was working through stuff with the painting. It was kind of an interesting experience, um, I haven’t had, I guess a few maybe hallucin.....ations with it but not much, maybe just slight bending and of the physical universe. I guess my perception of bending and maybe ahhh a slight warpedness of things you’re looking at, ummm, where to go next ahhh, yeah... as I was doing the brush strokes I somehow.... This sort of, I can’t, it’s a re... faded memory now but... I remember telling people that I felt like I was painting my life somehow, or doing some kind of... ahhh active.... working through something, or it’s ahhh it’s ahh hard to put my finger on it, exactly what that means, but yeah, the sort of working on the non-physical level, this kind of sub-consciously working through issues you had or thinking about old relationships, or doing, kind of working through, working through issues...not really totally consciously but I could see the stuff or you know... I don’t know if see is the right word but .... ahhh ... feel like I was going through the event again, sort of relive the event and sort work through it from a different perspective, I guess, maybe. Would be a good description of what was kind of going on.

Both these descriptions speak to the benefit that psychedelics can have in unleashing creative powers, along with the therapeutic burst of energy that comes with the release of creative processes and, in the case of *The Civil Servant*, some possible therapy in working through issues.

One of the interviewees had an interesting way of framing how psychedelic use can be beneficial. He spoke about using psychedelics as a tool, as a means to an end and not the end itself. The Meditator expressed this idea;

It's not about the experiences, it's about, I've been brought to understand it this way, it's like, if you're going to, say you're going to New York, you gotta fly there. It's an experience to get there. Right? So, like you're driving to the airport, get on the plane, then you're in New York. Do you just keep going back to that plane ride? That's the psychedelic adventure. We romanticize about them, but they're actually not the main part. It's like some people be like, “ Oh, we had a psychedelic trip and we're enlightened”. I mean, they're fun, and really interesting and teach you a lot. But you get to a point where you're like, you don't really need the experiences. It's like what you want to get is to enlightenment and that's where people get those twisted. It's like experiences and enlightenment are not the same thing. Experiences are what gets you to the enlightened stage. Right?.

Some people who use psychedelics may see this as a process for exploring or reaching “enlightenment”. Those people would perceive that the benefit would be the use of those psychedelics as a tool in order to reach a higher level of consciousness. This research has explored the use of psychedelics in different settings; ritual, clinical and recreational. Exploring the idea of enlightenment ventures into the ritual setting, where

the use of psychedelics is tied into the idea of religion and the secular sacred. This has been noted by others;

Psychedelics appear to be able to temporarily remove *filters* in the mind, allowing a state of high global brain integration to occur, which can be associated with the experience of ego dissolution... and may eventually lead to a state of permanent high global brain integration. This permanent state is claimed to be a state of enlightenment. Psychedelics appear to give us a glimpse of enlightenment. (Steinberg, Post, July 1, 2022)

Another benefit that has been described by the interviewees is the fact that psychedelics bring a heightened awareness of the world around them and appreciation of their place in it. The Artist made the following reflection;

Like a certain song will hit me the right way at a festival and it just like brings tears to your eyes, kind of, you know, or you see, like, people experiencing joy around you, like it, just notice it. It allows you to absorb it better, gives you a deeper appreciation. It does, it really does like it just what allows you to observe it better, like I feel like when you're not high...and like, you're not observing. or like, what are you going to do tomorrow or like, what's on your brain during day to day but like, when your pilot is psychedelics, you are present in the moment like, you're actually there, experiencing it. You're not thinking ahead. You're not caught up in the past, you're there, but it's, it kind of removes that distraction from either side.

In other words, the use of the psychedelics enhances the perceptions of the user. Things are brighter, more beautiful, more intense, and it allows you to dwell in the now, rather

than focus on the past or future. This shift of ordinary perception was seen by some as a benefit to using psychedelics.

The Meditator spoke of his perception that the psychedelics seem to "recalibrate the brain" and the analogy is that, like a computer, a re-boot can fix a number of problems; "But the more I found that I would, meditate and be on my game... I just noticed how much more successful I became. And it kind of led me to work that I don't know how, but it just made me realize that I have trauma. And then I need to deal with my trauma". He went on to further reflect;

I know, it still felt like kind of like the same things as getting after the high school, like it was never getting these really profound effects on mushrooms. It was always kind of like... make you feel all clammy and nervous and like... kind of scare you kind of thing, but and sometimes you'd be like oh you come out of it and you feel like more intelligent, but you didn't really realize that time, like why that was this is kind of like recalibrate your brain, reset the default mode network... but really had these profound effects because I was stressed about life and just things that happened in my life and that's where, even at that point, I didn't realize how therapeutic it was. So, you know I'd gone two more years, three years in total, where I done MDMA each year. And it just kept taking all this, like afterwards, you'd be pretty depressed, but it kept giving me these really therapeutic breakthroughs. Now I'm like, wow, this is just really bizarre and so, you just feel like, so like, things are just so easy like all the stress that you have in your life, it just melts...it melted all away, and you have to carry it on with you. So, yeah, and I think that's pretty common for most people that anything that

happened to me from a trauma perspective. Yeah, it had gone away, and I was like wow, I'm feeling better.

Robin Carhart-Harris has developed an analogy to describe this transition;

He argues that our brain is like a ski slope; as we ski down, grooves develop in the slope. These grooves are analogous to the connections we form in our brains. As behavioral patterns emerge, these grooves deepen, making it more difficult to ski down the slope in a different direction... psychedelics can 'shake the snow globe' of your mind. As the system is shaken up, a fresh layer of snow can settle on the ski slope, allowing new grooves to form, and potentially abolishing old pathological ones. (Post by Lewis-Healey, October 26, 2020).

To this point, the research has discussed some of the major threads that emerged from the interviews in response to the question; "Have you experienced any benefits from a psychedelic experience?". Some interviewees focused on specific benefits while some also spoke to broader benefits that were outside of the threads previously described. In fact, some responded by identifying an overall benefit in relation to their usage of psychedelics, over time. The following excerpts are ones where the interviewee chose to discuss an overall benefit. The Meditator reflected; "I think it's unloaded a lot of trauma, just all the trauma that's happened to me in my lifetime. It's really been good for burying the hatchet with friends with things that have happened to me... like you just feel like weight lifted off of you know and then you really quite feel, it, it, it's almost like you have all this baggage and you're throwing it in the dump".

The Grower related the idea of overall benefits of his usage in the following statement;



One of my biggest things with it was letting go of self-blame and I worked on that for 15 months with a psychologist. And I don't think I got as much positive benefit from the psychologist as I did from these six ketamine trips..... anxiety reduction, less emotional intensity, episodes from the PTSD really didn't happen. But yeah, like, mental and emotional stability would have been what I would say the biggest positive benefit from that. And I think that stemmed from the comfort and acceptance and also a letting go of the self-blame. Just that accidents can happen, variables do exist in the world. We can't control everything so therefore you can't really blame yourself directly either, right?

He further elaborated;

When I got into the therapeutic side of it, it was like a reduction in anxiety and reduction in depression, a reduction in like the emotional control issues that stemmed from my PTSD, which was very involved with perceived confinement and isolation, when I spent 30 days in a Quebec hospital and I don't speak French. So, my PTSD didn't stem from the accident. It stems from that... especially when I was in that temporary prosthetic leg or hamstring crutch system or whatever terminology. I would get experiences of feeling like trapped in that. And I always have this idea in my head now that I can't run, so I have to fight. What the ketamine really started was the first initial step, the first big move towards getting back into my life where I didn't feel the need to... my fight or flight response wasn't as intense and hyper vigilant like all the time the fighter. And it was the, it was my attempts at therapeutic ketamine at home that were the first substantial reduction in that aspect of PTSD.

Speaking to the overall benefit of her usage, The Artist reflected;

It's again to that perspective thing like and allows me to be like, step outside of myself a little bit, I guess. I'm better with that than I was before I started doing psychedelics, I don't know what's from growing up, or using psychedelics for years but... Yeah, it's kind of like trying to be present in the moment, like not thinking about something shitty that happened last week. You're concentrating, focused on talking to this one particular client standing in front of you. That's it.

The Nurse also spoke to the overall benefits in the following way,

I would say that the benefits... I can feel them for three months. It's just makes me maybe be more like connected, even to my family's feelings and even people around me's feelings, and that's the... that's the benefit that I've received And I think that Yeah, just to be open to listening to people a little bit better and trying to actually listen, and not just listen, trying to feel what they're saying, trying to take that and it's benefited my daughter and I's relationship that has always been a nice relationship.

It should be noted that a psychedelic experience can provide more than one benefit and may, in fact, combine several of the benefits identified to this point. The following statement from The Artist brings together many of the benefits mentioned so far and describes how one experience might encompass all benefits;

I'll use it to paint. Like there's one time I painted xxxx's whole garage fucking wall and didn't realize I painted the whole thing of my left hand until I was like at the top of this fucking 20-foot ladder. Like, what the fuck or you could like just use a little bit of it, like socialize a little more... like you know the same level as

the other people who are really tripping or, like you could use it therapeutically like there's a lot of different purposes for it... And not all of them are just to have trip.

She is seeing the way in which an experience can be used in many ways, from recreational , " just to have a trip" to "therapeutically" to being an opportunity to "paint a whole garage wall" to "socialize more”.

An interesting premise that came through conducting the interviews was the idea that there is a therapeutic purpose in discussing your psychedelic experiences with others. In asking the interviewees to discuss their experiences with psychedelics, several of them reported that they received therapeutic benefit in participating in these interviews. They appreciated the opportunity to share their ideas, beliefs, and feelings about psychedelics in this way. The Family Man reflected during the interview; “Well, this is the most I've ever shared about anything probably, Yeah and it feels good. This is, in fact, I would call this therapeutic”. He added, at another point in the interview; “And maybe I still have new places, you know, maybe those places still need work out. I don't know, It all seems, it seems scary. Yeah, I don't know I like I feel like this for me personally, I feel like we're getting into a place where we're doing therapy now”.

The Artist spoke on the same idea in the following way during her interview; “The interview is even kind of like framing my relationship with psychedelics differently. Like it, like understanding a little more why I use it, and for what purposes. Yeah, which I hadn't really given a whole lot of thought before. Yeah, so that yeah, it's brought me some clarity”. As with all opportunities for reflection, the benefit with the interview

process was in having the time and focus to analyze an experience and to determine its value.

Further speaking to this point, The Meditator made the following statement during his interview; “Feels good. Yeah, I was having a lot of laughs and it gets insightful, especially talking to somebody that you know has a background”. The reference to gaining "insights" through the discussion is also key as to how the interviews were seen as beneficial by the participants. The Grower made some of the same observations;

I probably got hundreds of them I do have, maybe have thousands of acid trips underneath my belt... I still couldn't explain it to somebody that never experienced it. But somebody that's had one, you can sit down and discuss it. You know what I mean. But the paint the picture with an acid, like artists try it all the time. All the time, but to paint that picture, either with verbal imagery, or fucking real imagery, like pictures and stuff, you can't... but the second that somebody has come through one and came through the other side in a positive light, you can sit down and discuss it with them for hours... so that's almost that shared community sense where one drop will sort of explain the whole bucket. But they won't take you to the bottom of the bucket.

The participants described the interview experience itself as therapeutic. The Grower commented in the following way; “I don't know, I don't want to say that the discussion steers the experience but it does allow or allowed me to go deeper into stuff that I really haven't, I'd say subconsciously didn't want to go into, cause of those mental blocks”.

Following the interviews, each one of the participants individually contacted the researcher. Each stated that the experience of being interviewed about their psychedelic

use and talking about it in that way, a way they were not accustomed to, with someone who was interested in how they experienced the psychedelics, was therapeutic in itself.

These comments, stating that the experience of being interviewed was, in itself, therapeutic, were not solicited in any way. They were offered by the interviewees in a social conversational way, based on the fact that the researcher casually socializes with the individuals interviewed. It should be stated that the interviews were not designed as therapy. There was no intent to provide therapy. The interviewees, without prompting, made statements as to how they felt during the interviews. The opportunity for talking over their psychedelic experience might have opened the idea that the participants might benefit from therapy, which would be their own realization and not suggested by the researcher.

In terms of the work itself, these kinds of statements are provided freely, validating the nature of this approach to the research. There was a trust established that would not be possible in more formal types of research, where participants might be more guarded. In another light, the goal of this paper is to de-stigmatize psychedelic use. The fact that people felt that talking about psychedelic experiences was therapeutic speaks to the importance of de-stigmatizing the experience. In that way, these types of conversations can be held and can lead to people being able to get the best benefit they can in terms of using psychedelics for working through trauma and other personal issues.

This further validated the thought that exploring one's psychedelic experiences, through conversation with like-minded individuals, can increase the benefit of using psychedelics. Relaying these thoughts to those who do not share that point of view, in a work like this, can transform opposition to the use of psychedelics.

## 5.2 Summary List of Benefits Identified Through the Interviews

Through analyzing the interviews conducted during this study, the researcher feels that there is sufficient testimony given to the fact that psychedelics have value in several different ways that can have a positive effect on people's lives. These potential benefits include learning to let go of concerns, lessening judgment and desire for control, healing from trauma, tackling personal issues, helping to establish connections to others, enhancing creativity, deepening appreciation of the world and one's place in it, and becoming more empathetic to others. Some saw there was value in re-setting the brain, which may lead to improved mental health, decreasing anxiety and depression. Others described the use of psychedelics as a way to create memorable experiences that will be carried throughout the user's life, contributing to shaping their view of the world in a positive way.

**Below is a summary list of benefits identified through the interviews.**

**Psychedelic experiences can:**

**Provide therapeutic benefits**

Create a reduction of negative emotional states

- Bring a resolution from the negative mood or deep anxiety that bothered participants
- Help shift negative emotions so one can become " 'okay' with the choices and decisions one makes in life
- Enhance feelings of personal flourishing, such as those usually associated with happiness, life satisfaction, meaning, purpose, and close social relationships
- Help with "de-stressing"
- Have "positive effects on mood and the feeling of social connectedness"
- Allow one to "let go of self-blame"
- Promote "anxiety reduction, less emotional intensity, episodes from the PTSD"
- Promote "mental and emotional stability"
- Provide "a reduction in anxiety and reduction in depression, a reduction in like the emotional control issues that stemmed from my PTSD"
- Help to control anxiety; "My fight or flight response wasn't as intense and hyper vigilant"

- Allow one to realize that they are "sub-consciously working through issues you had or thinking about old relationships"
- Provide a good feeling during and after the experience; "I feel like every good time that I've had has been therapeutic"

#### Allow users to move past trauma:

- Enable you to "go past personal fears and confront emotions they, previously, were unwilling to face"
- Encourage 'letting go'
- Help with "tackling the personal issues"
- Enable you to "move on past that" and to "talk about it"
- Lead to "giving me these really therapeutic breakthroughs"
- Provide a way to "unload a lot of trauma"
- Provide relief from personal feelings of stress in relation to problem areas; "You just feel like weight lifted off. "
- Provide "possible therapy in working through issues".

#### **Change patterns of thought**

- Enable one to move past blockages in thinking: "helps me sit down and process and like, get through some thoughts that I had blocked before"
- "Recalibrates your brain, resets the default mode network"
- Helps you to focus; "[y]ou're concentrating"

#### Change perspectives:

- Provide a new way of looking at things; it brought her; "to a place I had never been"
- Allow thinking past former patterns; "Instead of having a panic, feeling anger or guilt, I've been able to move beyond it to work through stuff"
- Allow for re-examination of past events; "relive the event and sort work through it from a different perspective"
- Provide heightened perception; "enhances the perceptions of the user"
- Allow focus on 'the now'; "You're not thinking ahead. You're not caught up in the past, you're there, but it's, it kind of removes that distraction from either side"
- Allow one to; "step outside of myself a little bit"

#### Elicit memory retrieval

- Unlock memories that were suppressed; "to deal with flashbacks and the retrieval of traumatic memories". "I remember parts that I haven't been able to remember"
- Help to "fill in memory gaps"

#### **Promote life changes**

- Provide a way to reach new realizations; using psychedelics as a tool, as a means to an end and not the end itself
- Transfer beyond the experience to impact daily life; "helped him to manage small, but meaningful, changes to his everyday life"
- Provide a process for exploring or reaching "enlightenment"
- Stimulate life-long learning; "You learn things about yourself "
- Provide one with memories, like going on an actual trip in the physical world

- Lead to "self-improvement"
- Boost of energy level; "give me some energy"
- Brings a heightened awareness of the world around one and appreciation of their place in it. "allows you to absorb it better, gives you a deeper appreciation. It does, it really does like it just what allows you to observe it better"
- Contribute to shaping your view of the world in a positive way

### **Improve connections and relationships with others**

- "It's just to connect better together"
- Provide benefit to their relationship as a couple
- Make a "personal connection, and making new meaningful memories"
- Help develop a "social, empathetic, and emotional connection to other people"
- Promote changes in the experience of social relationships
- Find common ground; "People were all on the same wavelength for a period of time"
- Makes one feel connected to others; "strengthened the rest of us because then we had to, we had to be a unit.... connection"
- Create a space where "there's no judgment"
- Facilitate "a deeper connection to others that are sharing the experience"
- Help to remove class barriers; "vast segment of society, that gets pulled together under one common denominator, which is psychedelics or drugs"
- Build a feeling of "interconnectedness"; "You feel a bond or sense of community with others participating in the psychedelic experience with you."
- Help develop social skills and also provide opportunities to practice those skills
- Support the mindset that encourages individuals to explore the opportunity to connect with others; "Be more like connected"
- Help develop empathy for others; "even to my family's feelings and even people around me's feelings"
- Develop listening skills; "open to listening to people a little bit better and trying to actually listen" "trying to feel what they're saying"
- Improve family dynamics;" It's benefited my daughter and I's relationship"
- Encourages one to "socialize a little more"

### **Provide recreational benefits**

- Provide a "recreational outlet"; "it's for fun"
- Provide "an interesting experience"
- "They're fun, and really interesting and teach you a lot"

### **Develop creativity**

- Serve as a "catalyst for creativity; " I find it's ( using psychedelics) is good for inspiration purposes
- Unleash the creative forces but, through the experience, allow them to work through trauma
- Give a "therapeutic burst of energy"
- Release the creative processes



## Conclusion

### 6.1 Where We Are Now

As this paper concludes, the researcher would add one further personal experience as he describes the last psychedelic trip he has had, to date. This experience happened a year ago from the time of writing the thesis.

The year of 2022 had just begun, and I had been studying psychedelics for over two and a half years. It had been five and a half years since I had first participated in an ayahuasca ceremony and two and a half years since the mushroom experience described in the intro. The pandemic had arrived, and the lack of international travel put an end to the ayahuasca ceremonies I had attended yearly. It had been over two years since I had had the opportunity to participate in ceremonial use. Since then, I had used done DMT a few times the year before and some other psychedelics at festivals. The previous spring, I had attended an on-line weekly meet up of ketamine therapists in the US, for research purposes. The fall that had just passed, I was able to procure 3.5 grams of some extremely high-quality RS combination esketamine and arketamine type of ketamine. I had tried it a few times and saw great potential for healing in it, but was cautious of the dosing.

It was January 9th and I had just passed a good holiday season. The semester hadn't started, and I felt like it was the perfect time to go deeper into a psychedelic experience. I had a friend over and I set the scene as previously but did double the amount I had done before and went and laid down on my bed, with

the lights off. Ketamine takes a minute to fully kick in and, as it begins to take hold, a warm fuzzy feeling takes over all of your senses. As this feeling flooded through my entire body, my spatial perception became distorted. I live on the top of a hill and the drug made me very conscious of that fact. Just as quickly as I became aware, I began to perceive my position becoming higher and everything else in the world being lower than me, not only physically and spatially but in the sense of being above others in the context of a hierarchical class system. As I lay there, I literally had the feeling that I was on top of the world or the center of the world. Abruptly there was a pressure change, like a coming storm. Just as quickly as I had risen to my high position, everything from the bottom overcame me as I plunged down. Just when I felt I was down in a hole, with the whole world looking down on me, I felt the pressure change again and everything, the whole world with everyone and everything in it, came down on top of me, like a wave. It didn't just come down on top of me, it went through me and, as it went through, I became one with it. I became one with everything else in the world and together we rose back to the top of my perceived spatial understanding. At that moment I felt free, free of worry and anxiety, free of judgement and critique. I felt at one and at peace with everything and every decision and interaction I'd ever had in my life and then, quicker than it began, it concluded. That's the thing about ketamine. I feel there is a distinct beginning and end to the experience, more so than any drug I've ever tried. I've always equated it to something like getting on and off of a roller coaster.

However, I feel the benefit from that experience is still with me as I write this a year later. I feel it allowed me to shed emotional baggage, just as it was with the mushroom experience I described in the intro and the ayahuasca experience I described in the protocol section. I don't know the mechanism of action or can't put into words the message I received, but I know that having these experiences added value to my life. I feel that my ability to gain benefits from any of the experiences I've had with psychedelics has grown with each experience. At one point in my youth, I saw psychedelics as party drugs and then that journey came to an end. I began, in my late 20's, to see the therapeutic aspect of them and thus began that journey. I am still on the journey and feel I have benefited from my experiences. I feel I have only allowed myself to experience the psychedelics that I could handle and, in all honesty, I have had no desire to use psychedelics in the last year. I find this to be a suitable place to be as I conclude writing and researching this topic.

This research designed interviews and collected data where people reported benefits from their use of psychedelic drugs. Through the research, the interviewees clearly identified numerous benefits to the use of psychedelics (Chapter Five), from dealing with trauma, to unlocking significant memories, to forming connections, to perceiving the world with expanded consciousness that unlocks creative and problem-solving processes, to providing support for mental health and personal development. The research further indicated that the benefits are greater if there is guidance during the psychedelic experience in the form of protocols. It has been discussed that protocols are more formally present in clinics so that when people are using the drugs recreationally,

they need to find their own protocols or best practices. The study examined protocols across clinical and ceremonial use and merged protocols with recreational use.

The research that was undertaken has analyzed the interviews to get sense of people's use and relationship with psychedelic drugs. The relationship, as was learned, is complex. It is subject to biographic and conceptual changes and, even more so, subject to the influence of set and setting. The mind-set one brings to a psychedelic experience, one's expectations, personal beliefs and presuppositions, acts as a filter and is an essential component to the way the experience is understood; but this alone is not sufficient; one needs to pay attention to the physical settings with the surrounding ambient contexts of sights and sounds, all of which contribute to the mood and feeling of the experience.

One should also have a rudimentary understanding of the drugs themselves and how they affect the brain and your body. We have discussed how psychedelics are often associated with an expansion of consciousness and how people report that their thinking is less constricted during the experience, and how that flexibility results in creative problem solving. Gopnik's (2010) model, referred to previously in Chapter Three, compares this kind of thinking to that shown by children, a type of thinking that casts a wide net over many areas rather than attempting to focus previous experience to interpret what is perceived. The psychedelic experience would seem to allow adults to use what she terms *lantern consciousness*, in order to widen one's interpretation of what is perceived, thus expanding creativity and the ability to problem solve.

Nobody really knows, with certainty, how psychedelics work on the brain. However, a useful way to think about it may be that lantern consciousness can be disorienting and unfocussed. While the psychedelic experience can widen the vision, the

person using the drugs may be unable to apply the expanded thinking due to this disorientation. It may be that we need to periodically prod the brain to stay focused and for this a guide is essential. We have discussed the role that guides play in making the psychedelic experience part of a therapeutic process, where you are asked to focus on personal issues and are guided by agreed upon protocols. The guide can be a therapist or a shaman, but the role is the same; to guide the experience so that the user can make the best use of the drugs in combination with expanded consciousness.

Set and setting is very important but today, the author feels this research has demonstrated that having psychedelic experiences, with a knowledgeable guide, is the safest way to engage in these activities. The role of guides is as important, if not more important, than strictly defined protocols. The choice of person acting as a guide can range from a psychologist or doctor to a trusted shaman or to a friend with experience. Informed guides should be seen as a form of harm reduction. Just as naloxone training is a form of harm reduction associated with opiate use, a knowledgeable guide should be seen as a form of harm reduction associated with psychedelics.

Guides hold a wealth of knowledge. Psychedelic experiences can be seen as rites of passage and traditionally, cultural rites of passage involve and require guides. The thing with psychedelic experiences is that the ritual of these experiences is essential to them. Rituals are eternal and could go through changes over time, just as the guides to these rites of passage will change, as will their protocols. According to Becker (1953), people learn to use drugs through a learning process with a friend group. The friend group serves as a form of guide. The situation is similar with psychedelics, only the consequences and intensity of the experience could be seen as greater.

Most of the interviewees began their journey with psychedelic drugs early, through a recreational setting and discussed their early experiences, as young people, with these drugs. They admitted that reliable information about drugs and their effects was often lacking. They had little knowledge of the importance of dosing or of set and setting. Though intrigued by the effects of these drugs on their perceptions and how they enhanced experiences, they seldom, if ever, thought of it as a kind of therapy.

Understanding of these early experiences was based on a recreational conceptual language and not a therapeutic one. These were new experiences to be consumed and novelties to explore. As they became older and gathered more lived experience, their approach to psychedelics changed. Many of them saw the therapeutic values of these drugs and used them to self-medicate and deal with their anxieties, regrets, or traumas. A different interpretive frame of analysis moved them away from recreation and entertainment towards a more focused therapeutic process. They, over time, came to the same conclusion as the earlier researchers in seeing the value of the psychedelic experience beyond recreation.

Today, we view the resurgence of psychedelics in contemporary culture as a *Psychedelic Renaissance*. Two of the leading researchers in the field, separated by decades, Carhart-Harris (2017) and Stanislav Grof (1975), suggest psychedelics loosen the inhibitions imposed by that part of the brain that is connected to the notions of ego and the self. This new emergent discourse constitutes the medical and clinical frames that explain why psychedelics, in conjunction with therapy, can be useful. This is the way that The Vet explained his experience with ketamine;

It lifts the veil. It removes the ego and your defense mechanisms, so that therapists can go in there and fix and prod at things and you are not shutting down. I could have done six weeks of therapy and, without the ketamine, I would have progressed barely at all, especially because of repressed memories...(they) would never have come because they are locked down.

In a clinical setting, the guides are those such as scientists, clinicians and psychotherapists, whose dominant frame of analysis uses the conceptual language of ego repression, with the weakening of ego defenses so that memories are not “locked down,” as The Vet put it.

The clinical lab is now a major site for experimental uses. The lab has strict protocols it follows, as was noted with The Vet’s ketamine sessions. So, while the protocols of places, such as *The Clinic*, are rigorous, it appears that the closer one can get to *The Clinic* protocols, the better the experience and outcomes would be. Also, not everyone is able to benefit from these clinical approaches to the use of psychedelics. However, many (mostly scientists) fear that these protocols are escaping the lab and entering recreational use. *Recreational self-therapy* is probably an adequate term for this process of adaptation. Recreational self-therapy borrows some of the strategies found in clinical settings and brings them back home for private use.

Whatever the power of psychedelics, scientists now recognize that they offer the brain new pathways and new ways of gathering information. This knowledge about the power of psychedelics is finding a wider audience, both within traditional ceremonial uses and with recreational self-therapy. Ayahuasca ceremonies and psilocybin ceremonies are both forms of recreational self-therapy. Nevertheless, there is a large

disparity between the clinical and recreational settings and therein lies the problem. As has been argued, the more attention to the experience and the higher degree of care given by the guider of the experience, the better the outcome gained by the participant. This kind of support is provided more in the clinical setting and somewhat in the ceremonial settings, with the difficulty that there are issues of accessibility and cost which limit the involvement of participants in the more formal settings.

Because of cost and accessibility, new markets have emerged to cater to a group that is excluded from the clinical setting. The Nurse's experience with grey market mushroom ceremonies suggests some of the dangers of embracing these alternatives. The Nurse was not aware of the qualifications of the practitioner who guided the experience. The shaman that oversaw the ayahuasca ceremonies that the researcher participated in, unlike the facilitator of the mushroom ceremonies, had tradition and a storehouse of local knowledge that allowed him to conduct these ceremonies. There can be inconsistencies in protocols and in qualifications of those conducting ceremonial use of drugs. In any event, both ceremonial and clinical use rely on a leader to organize the experience and, by implication, that is a hierarchical structure. In contrast, there is little hierarchical structure in recreational use. The closest thing to protocols for recreational settings are for users to find sources of information regarding the use of psychedelics, such as James Fadiman's *The Psychedelic Explorers Guide (2011)*, online forums such as *Erowid (1995)*, and documentaries that have been created about the use of psychedelics. These sources, as well as knowledge passed down conversationally from fellow psychedelic explorers, provide the user with a form of best practices to be followed when using psychedelics recreationally.



## 6.2 Looking to the Future

In the final analysis, framework and protocols lead to a better chance in obtaining a positive benefit for the use of psychedelics, regardless of setting. The reality is that mental health issues are on the rise. At the same time, media coverage is increasingly presenting psychedelics as a potential cure for mental health issues. The combination of these two factors leads to the conclusion that more people are going to be trying psychedelics for therapeutic purposes. As the resurgence of psychedelics through society continues to grow, the only way for this to be addressed is through advocacy and education around safe usage. The reasonable way to deal with this reality is through education on how to properly use these substances, which means developing suggested protocols or best practices.

Some of the interviewees talk about how psychedelics are now being incorporated into their daily life, as a matter of dealing with trauma, for personal development, for mental health purposes or as part of a unique personal experience that has intrinsic value. The psychedelic experience is a kind of commodity that can be bought and sold for these purposes; one can buy it and use it as a tool. Some of the interviewees were critical of this new approach to marketing the drugs. They know that the clinical route may not be open to them, so they use the recreational setting in a similar way to how clinical settings use it. The main difference is that they realize that they must rely on their own research and their own efforts to understand how these drugs work and how to use them within what context.

In this time of the psychedelic renaissance, it is important that we look to the future to identify areas of concern in relation to the growing interest with psychedelics.

With this interest also comes the potential for legitimized financial investments that seek to bring returns from the field of psychedelics. At this crossroads in time, it seems that the groundwork has been laid so that psychedelics, which occupied the black-market sub-culture landscape, can now make the leap into the legitimate field of Western medicine. Such a drastic about face, in terms of how the substance is viewed by society, is concerning. The following section will share how one of the interviewees spoke on the topic.

The Grower made the following statement, when he was asked about the potential medicalization of the world of psychedelics;

The psychedelic incorporation into Western society, on like a global scale, I don't know that a psychedelic renaissance is necessarily the best thing. I think that basically describes reincorporation back in Western society after the war on drugs... And we have that pre-Nixon time. Yeah, so LSD was used in psychological experimentation... maybe not the most ethical sense from nowadays views. They were torturing some people. So, I was there before the rebirth... there might a psychedelic rebirth back into Western medicine. But I think you're always going to see the dichotomous system. Now I don't think you're ever going to go to the hospital and get a psychedelic... like I don't think that's the thing. It's going to be like that... because stigma comes from like dichotomy when one group says about another group that there's a great class of difference between the two. So, with incorporation... that might lead to a better acceptance in society, right? Better than incorporation, rather than just having ketamine therapy clinics, like one person getting help and another person getting help. What your problem is

shouldn't distinguish the socially acceptable level of the help you are getting, you know what I mean? If you're mentally destroyed from PTSD or you have fucking cancer. You should not be judged any differently for seeking help... also people should never be told by the doctor you need to take mushrooms. People just need to be curious about it, drawn to it on their own terms, rather than it being prescribed, I mean. isn't it weird where but the same way that we need to incorporate them (drugs) into the medical system is we wanted to be... we need to incorporate them into that, man.

In this statement The Grower identified several concerns he had looking to the future in reference to the idea of the medicalization of psychedelics. To him, it seems strange that the drugs are now being legitimized by the same system that vilified them for so long and can the system be trusted to incorporate them.

With the wide spread acceptance of psychedelics that is growing and the potential profits to be made, we must be wary in finding the path forward. When one starts incorporating things concerned with mental health into a capitalistic system, profit over people is the bottom line. This means that one is going to have some problems, as these things just do not line up. The Grower referred to the dangers of capitalism in the following statement;

All the media stuff from my perspective, all that I've been exposed to this point, is all like the capitalistic gains that are going to come from it... is how profitable the system is going to be... that's right off the hop is not the place that we should be starting but that's what I see... like people talking about how like psychedelic therapy is supposed to grow by like, the industry is supposed to grow by 60%

compounded seven years straight over the next decade, right? Like that's what I'm getting exposure to, you don't, you don't see a lot of, you know, there's no front-page success stories that say John Smith is at the ketamine clinic and he's fucking doing great... You don't see that; I hear about it in the communities I'm in... people that are having these personal experience and stuff. But I don't, you don't see that stuff published. Maybe there is an academia, I'm not sure. I'm not in that game... I don't know what's going on there. But what I see we've got on the CBC global and stuff like that... they're looking at what this is going to do for the capitalist machine.

Though at this stage we need to be wary of the medicalization, capitalization and consumerization of psychedelics, there is another side of this. Psychedelics are now being more and more accepted by researchers and doctors. Their use is being reported in academic journals at the same time as the topic of psychedelics is being proliferated through pop culture and media. The overall impact is contributing to de-stigmatizing the use of these substances in the eyes of society at large. This thesis examined stigma through a sociological lens in order to both understand the issue and contextualize it, for the purpose of informing the academic discussion around de-stigmatization.

This research has put together a draft of best practices, as described by the interviewees, aggregated through interviewing people who had experiences across the three settings. This may contribute to the conversation around best practice across all settings, containing some valid suggestions for managing the popular use of psychedelics. The role of education, in this regard, is vitally important. Drug users who are better informed as to best practices will experience the most benefit from the substances.

The research also examined the fact that societal attitudes are shifting towards psychedelics. The presence of stigma, following the war on drugs, has been discussed. This research has examined stigma, where it came from, its purpose and how it effects people's experiences with drugs. With the growing acceptance of psychedelic use for personal growth and therapy, the stigma associated with their use is beginning to lessen. However, there is a hovering presence of capitalism to see the potential for profit in this to treat mental health concerns. The research points to the idea that education and advocacy for safe use of psychedelics is an important factor to consider in the psychedelic renaissance that we are now in.

In sum, the ritual or ceremonial use of psychedelics comes from an innate human use of substances for spiritual experiences that serve as elements of all cultures and hold significant weight in traditional places; their use helps to confirm forms of solidarity, connections to the mystical and spiritual realms and therefore, fulfills a sacred function. At another level, these are chemical compounds and have therapeutic uses that may or may not be understood the same way in some cultures but certainly have those impacts. In Western medicine, the potential for science to integrate with the medical benefits of these sacred practices is high. However, the use of these substances, under a medical secular model, is inherently and deliberately non-sacred. In fact, the medical community takes great pains to control the use to limit such results. These limits often appear as prohibitions and as over-regulation. Recreational use, in the West at least, was born as a reaction to criminalization, resistance to regimes of biopower and moral entrepreneurship, especially in the form of prohibition and, while leading users to sacred experiences, was done so in the pursuit of unconventional experiences.

Being associated with this leisure meant that recreational use has often been *trivialized* as otherwise insignificant. Through recent years, recreational use has morphed by taking elements from both ceremonial and clinical settings. Currently, personal recreational use has been re-invented as some form of ceremonial use while eliminating the shaman, as the ceremony and shaman are seen as being metaphors for religious organizations. It would seem that a lot of current recreational use is for the same purpose as ceremonial use, which is basically spiritual development or self-improvement, but has been separated from the traditional ceremonial aspect of the experience. In the same sort of way, contemporary recreational use has adopted purposes and protocols from the clinic and those aspects have now moved into the world outside of the clinic, but with the same therapeutic purposes.

Modern recreational use, over time, has developed within an industrial, capitalist, media saturated society and can now be seen to be used for a variety of purposes including traditional, medical, non-secular, personal development, individualistic and others, depending on the market. The list of recreational uses is open-ended, constantly being influenced by the other two settings and the ever-evolving re-purposing of recreational use over time. Therefore, recreational use of psychedelics, as we understand it, is not a static concept. It is constantly changing and, at this moment in time, it is going through more of a change in our understanding than it ever has in the past.

The war on drugs created a political framework for stigma to become attached to the use of psychedelics. Society now seems to be moving past this ideological stance. Looking to the future, this new societal adoption of psychedelics will create a new economic framework for the psychedelic experience to be sold as a commercial

experience, the drug experience to be viewed as a commodity, as a product to be bought and sold. This has its own army of issues to be concerned about. The use of psychedelics is a complicated issue. Along with potential economic benefits, how people view their purpose is also undergoing a major change, as people begin to view drugs as a potential way of healing. We, as a society, are moving away from the war on drugs approach in which drugs are viewed as being totally bad. This creates a problem for those who draft policies and those who have promoted anti-drug forms of education programs. They will see it as sending the wrong message if one says some substances are harmful when used unwisely but also can very beneficial, useful and healing when used in a different way. The message becomes more complicated than just saying “all drugs are bad”, and how are we, as a society, going to work out that conundrum? How do we transition from saying that drugs are harmful to saying that psychedelic drugs can have benefits? Suddenly, everything is not dichotomous, but is arranging itself in a way that is much less clear.

When looking at the use of psychedelics in any of the settings, we cannot forget that the reason people want to use these substances is because they feel there is some benefit to themselves. The question becomes, would it not be much better to legally regulate these substances, take them out of the hands of criminals and put them into the hands of educated government systems where their uses can be monitored? These substances have been proven to benefit people who have been suffering for years from trauma, who, in a single use, have gained some insight with that trauma. Psychedelics do not need to be used in the clinical or ceremonial setting but, when used recreationally, should be used in a positive and therapeutic way by following some form of standards or

protocols to access the healing benefits of them. While these substances can also be used for purposes other than healing, it is important to note that, over time, most users report decline in use for those other purposes. They begin to understand psychedelic usefulness as a healing modality. These substances have shown promise in the field of recontextualizing memories as well as in identity formation. It seems just like language in which we attach meaning to words, our brain attaches meaning to different situations and this can become harmful, especially when one experiences trauma. When using psychedelics, we can detach these meanings from situations and scenarios and clean the slate of accumulated fear and worry.

The contemporary understanding of the purposeful use of psychedelics has grown to include healing, spiritual growth, personal growth, self-improvement, enlightenment, enhanced relationships, attention development, increased creativity, and elevation of mood. When using these substances, they come with a language that helps us form concepts to allow us to understand the experience. The language can be of a medical psychological understanding of trauma and this can be leveraged to gain benefit from the experience. The increase of importance in the intent seems to be directly linked to the increase in the output of benefit. How the experience is framed is going to influence the experience and, thus, the importance in framing the experience cannot be overstated. It seems from analyzing the data, the small sample seems to point to the idea that this framing changes over time, age and repeated uses. The interviewees explained that they used the substances for fun when they were young but, as they had experiences, they began to understand the experiences in different ways which gave them different outcomes. It is clear that having a purpose for using psychedelics is important, followed



by the need to have protocols in place that provide best practices for their use, regardless of the setting. When used for healing purposes, advice relating to psychedelic use is grey, not black and white. The process of psychedelic integration is an interdisciplinary process and does not begin or end with the *trip*. At this point there is a growing body of knowledge and advice and the ongoing dialogue about best practices is vital.

As Terrence McKenna said;

...The psychedelics experience... is simply a compressed instance of what we call understanding, so that living psychedelically is trying to live in an atmosphere of continuous unfolding of understanding, so that every day you know more and see into the things with greater depth than you did before. This is a process of education. (McKenna, 1987, Audio @54.33)

Going forward, this needs to include education as to the potential benefits to be derived from the purposeful use of psychedelics, education towards using the best protocols that have been documented by their use in ceremonial, clinical and recreational settings and education about the need to continue to de-stigmatize drug use and drug users. We need to hold open conversations around psychedelics about their use in order for society to transition from seeing them as inherently bad.

## **Bibliography**

- Alduhishy, M. (2018). The over prescription of antidepressants and its impact on the elderly in Australia. *Trends in Psychiatry and Psychotherapy*, 40(3), 241–243. [https://doi.org/ 10.1590/2237-6089-2016-0077](https://doi.org/10.1590/2237-6089-2016-0077)
- American Psychiatric Association Publishing. (2022). *Diagnostic and statistical manual of mental disorders: Dsm-5-Tr*.
- Ashmall, L. (2016, October 19). The extreme side effects of anti-depressants. *B.B.C. News*.
- Aspa, J. (2022, April 19). Why this psychedelics investment opportunity is focused on palliative Care. *Stockhouse*.  
<https://stockhouse.com/news/newswire/2022/04/19/why-this-psychedelics-investment-opportunity-focused-on-palliative-care>
- Balthazar, Alex. ( 2017). *Project MK-Ultra and Mind Control Technology: A Compilation of Patents and Reports*. Adventures Unlimited Press.
- Baum, D. (2016) Legalize it All: How to win the war on drugs. *Harper's Magazine*, April, 2016, 24-34. <https://harpers.org/archive/2016/04/legalize-it-all/>
- Baumeister, R. F., & Newman, L. S. (1994). How stories make sense of personal experiences: Motives that shape autobiographical narratives. *Personality and Social Psychology Bulletin*, 20(6), 676–690.  
<https://doi.org/10.1177/0146167294206006>
- Becker, H. S. (1953). Becoming a marihuana user. *American Journal of Sociology*, 59(3), 235–242. <https://doi.org/10.1086/221326>
- Becker, B., Moore, S. & Sampila, S. (2022). *Project MK- Ultra: Sex, Drugs and the CIA*. Clover Press.
- Bourgois, P. (2009). Theory, Method, and Power in Drug and HIV-Prevention Research: A Participant-Observer's Critique, *Substance Use & Misuse*, 34:14, 2155-2172. DOI: [10.3109/10826089909039443](https://doi.org/10.3109/10826089909039443)

- Brande, E. (1800). On a poisonous species of Agaric. *The London Medical and Physical Journal*, 3, 41–44.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- Bruhn, J. G., & Holmstedt, B. (1973). Early peyote research an interdisciplinary study. *Economic Botany*, 28(4), 353–390. <https://doi.org/10.1007/bf02862854>
- Burgess-limerick, T. & Burgess-limerick R. (1998). Conversational interviews and multiple-case research in psychology, *Australian Journal of Psychology*, 50:2, 63-70 , DOI: [10.1080/00049539808257535](https://doi.org/10.1080/00049539808257535)
- Burroughs, W., & Ginsberg, A. (1963). *Yage letters*. City Lights Bks.
- Busch, A. K., & Johnson, W. C. (1950). L.S.D. 25 as an aid in psychotherapy; preliminary report of a new drug. . *Diseases of the Nervous System*, (11), 241–243.
- Carhart-Harris, R. L., Erritzoe, D., Williams, T., Stone, J. M., Reed, L. J., Colasanti, A., Tyacke, R. J., Leech, R., Malizia, A. L., Murphy, K., Hobden, P., Evans, J., Feilding, A., Wise, R. G., & Nutt, D. J. (2012). Neural correlates of the psychedelic state as determined by fmri studies with psilocybin. *Proceedings of the National Academy of Sciences*, 109(6), 2138–2143. <https://doi.org/10.1073/pnas.1119598109>
- Carhart-Harris, R. L., Leech, R., Hellyer, P. J., Shanahan, M., Feilding, A., Tagliazucchi, E., Chialvo, D. R., & Nutt, D. (2014). The Entropic Brain: A Theory of conscious states informed by neuroimaging research with psychedelic drugs. *Frontiers in Human Neuroscience*, 8. <https://doi.org/10.3389/fnhum.2014.00020>
- Carhart-Harris, R. L. & Nutt, D. J. (2014). How Do Hallucinogens Work on the Brain? *Psychologist*, (27), 662–65.
- Carhart-Harris, R. L., Bolstridge, M., Rucker, J., Day, C. M., Erritzoe, D., Kaelen, M., Bloomfield, M., Rickard, J. A., Forbes, B., Feilding, A., Taylor, D., Pilling, S., Curran, V. H., & Nutt, D. J. (2016). Psilocybin with psychological support for treatment-resistant depression: An open-label Feasibility Study. *The Lancet Psychiatry*, 3(7), 619–627. [https://doi.org/10.1016/s2215-0366\(16\)30065-7](https://doi.org/10.1016/s2215-0366(16)30065-7)
- Carhart-Harris, R. L., & Goodwin, G. M. (2017). The therapeutic potential of psychedelic drugs: Past, present, and future. *Neuropsychopharmacology*, 42(11), 2105–2113. <https://doi.org/10.1038/npp.2017.84>

- Carhart-Harris, R. L., & Friston, K. J. (2019). Rebus and the anarchic brain: Toward a unified model of the brain action of psychedelics. *Pharmacological Reviews*, 71(3), 316–344. <https://doi.org/10.1124/pr.118.017160>
- Carr, D. (1991). *Time, narrative, and history*. Indiana Univ. Press.
- Castoriadis, C. (1986). *Carrefour du Labyrinthe, t.02: Domaines de l'homme*. Seuil.
- Chun Tie, Y., Birks, M. & Francis, K. (2019) . Grounded theory research: A design framework for novice researchers. *Sage Open Medicine*, V7: 1-8. <https://journals.sagepub.com/doi/pdf/10.1177/2050312118822927>
- Church, K. (1996). *Forbidden Narratives: Critical Autobiography as Social Science*. Routledge
- Cohen, S., & Ditman, K. S. (1962). Complications associated with lysergic acid diethylamide (LSD-25). *JAMA: The Journal of the American Medical Association*, 181(2), 161-162. <https://doi.org/10.1001/jama.1962.03050280091013b>
- Cohen, S., & Ditman, K. S. (1963). Prolonged adverse reactions to lysergic acid diethylamide. *Archives of General Psychiatry*, 8(5), 475–480. <https://doi.org/10.1001/archpsyc.1963.01720110051006>
- Cohen, S. (1964) *The Beyond Within: The LSD Story*. Atheneum.
- Cohen, S. (1965) LSD and the Anguish of Dying. *Harper's Magazine*, 231:1384, 69–78. <https://www.google.com/search?client=safari&rls=en&q=LSD+and+the+anguish+of+dying&ie=UTF-8&oe=UTF-8>
- Cohen, S. (1966). A classification of LSD complications. *Psychosomatics*, 7(3), 182–186. [https://doi.org/10.1016/s0033-3182\(66\)72149-5](https://doi.org/10.1016/s0033-3182(66)72149-5)
- Collins, P. & Gallinat, A. (2010). *The Ethnographic Self as Resource: Writing Memory and Experience into Ethnography*. Berghahn Books. Thompson
- Controlled Drugs and Substances Act (S.C. 1996, c. 19) (1996). <https://laws-lois.justice.gc.ca/eng/acts/C-38.8/page-1.html#h-94341>
- Cormier, Z. (2021, April 15). *Psilocybin therapy may work as well as common antidepressant*. Scientific American. <https://www.scientificamerican.com/article/psilocybin-therapy-may-work-as-well-as-common-antidepressant/>
- Crites, S. (1971). The narrative quality of experience. *Journal of the American Academy of Religion*, 39(3), 291–311. <https://doi.org/10.1093/jaarel/xxxix.3.291>

- Denzin, N.K. (1995). Messy Methods for Communication Research. *Journal of Communication*, 45(2), 177-184. <https://doi.org/10.1111/j.1460-2466.1995.tb00735.x>
- Doblin, R. E., Christiansen, M., Jerome, L., & Burge, B. (2019). The past and future of psychedelic science: An introduction to this issue. *Journal of Psychoactive Drugs*, 51(2), 93–97. <https://doi.org/10.1080/02791072.2019.1606472>
- Durkheim, E. (1897) *Suicide: A Study in Sociology*. Ancienne Librairie Germer Bailliere.
- Durkheim, E. (1912). *The Elementary Forms of the Religious Life*. George Allen & Unwin Ltd.
- Engel, R. & Schutt, R. (2017). *The Practice of Research in Social Work* (4<sup>th</sup> Ed.). Thousand Oaks, CA: Sage.
- Fadiman, J. (2011). *The Psychedelic Explorer's Guide: Safe, Therapeutic, and sacred journeys*. Park Street Press.
- Farber, David. (2021, June 17). The War on Drugs Turns 50; Today, it's time to make peace. *The Washington Post*. <https://www.washingtonpost.com/outlook/2021/06/17/war-drugs-turns-50-today-its-time-make-peace/>
- Forstmann, M., Yudkin, D. A., Prosser, A. M., Heller, S. M., & Crockett, M.J.(2020). Transformative experience and social connectedness mediate the mood-enhancing effects of psychedelic use in naturalistic settings. *Proceedings of the National Academy of Sciences*, 117(5), 2338–2346. <https://www.pnas.org/doi/epdf/10.1073/pnas.1918477117>
- Foucault, M. (1963). *The Birth of the Clinic: An Archaeology of Medical Perception*. Vintage Books.
- Foucault, M. (1966). *The Order of Things: An Archaeology of the Human Sciences*. Gallimard.
- Foucault, M. (1969). *The Archaeology of Knowledge*. Gallimard.
- Foucault, M. (1975). *Discipline and punish: The birth of the prison*. Gallimard.
- Foucault, M., & Miskowiec, J. (1986). Of Other Spaces. *Diacritics*, 16(1), 22–27. <https://doi.org/10.2307/464648>
- Fox, R. W., & Lears, J. T. .J. (1983). *The culture of consumption: Critical essays in American History, 1880-1980*. Patheon Books.

- Geertz, C. (1973). *Deep Play: Notes on the Balinese Cockfight in The Interpretation of Cultures*. Basic Books.
- Geertz, C. (1973). *Thick Description: Towards an Interpretive Theory of Culture in The Interpretation of Cultures*. Basic Books.
- Ginsberg, A. (1956) *Howl and Other Poems*. City Light Books.
- Ginsberg, Merle. (2015, Oct.2). Ayahuasca Hollywood's Hip, Heavy Hallucinogen: It's hardly what you call Partying. *Hollywood Reporter*.  
<https://www.hollywoodreporter.com/lifestyle/lifestyle-news/ayahuasca-hollywoods-hip-heavy-hallucinogen-825957/>
- Girn, M., Mills, C., Roseman, L., Carhart-Harris, R. L., & Christoff, K. (2020). Updating the dynamic framework of thought: Creativity and psychedelics. *NeuroImage*, 213, 116726. <https://doi.org/10.1016/j.neuroimage.2020.116726>
- Goffman, E. (1974). *Frame analysis: An essay on the Organization of Experience*. Northeastern University Press.
- Gopnik, A. (2010). *The philosophical baby: What children's minds tell us about truth, love, and the meaning of life*. Picador, Farrar, Straus and Giroux.
- Greenfield, R. (2006). *Timothy Leary: A biography*. Harcourt, Inc.
- Griffiths, R. R., Richards, W. A., McCann, U., & Jesse, R. (2006). Psilocybin can occasion mystical-type experiences having substantial and sustained personal meaning and spiritual significance. *Psychopharmacology*, 187(3), 268–283. <https://doi.org/10.1007/s00213-006-0457-5>
- Grof, S. (1975). *Realms of the human unconscious: Observations from LSD research*. Viking Adult.
- Grof, S. (1980). *LSD Psychotherapy*. Multidisciplinary Association for Psychedelic Studies.
- Grof, S. (2009). *LSD: Doorway to the Numinous: The groundbreaking psychedelic research into realms of the human unconscious*. Park Street Press.
- Hancock, G. (2015). *Magicians of the gods: The forgotten wisdom of earth's lost civilization*. Coronet.
- Handler, C. (2016). *Chelsea Does*. Season 1, Episode 4.
- Hart, C. L. (2021). *Drug use for grown-ups: Chasing liberty in the land of fear*. Penguin Random House.

- Hartogsohn, I. (2017). Constructing drug effects: A history of set and setting. *Drug Science, Policy and Law*, 3, 205032451668332. <https://doi.org/10.1177/2050324516683325>
- Health Canada. (2020, April 3). Illegal and Controlled Substances. <https://www.canada.ca/en/health-canada/services/health-concerns/controlled-substances-precursor-chemicals/drug-analysis-service/2020-analyzed-drug-report-q2.html>
- Hofmann, A. (1979). *LSD: My problem child*. McGraw Hill.
- Hunter, R. (1974) *Scarlet Begonias*. From the Mars Hotel. Grateful Dead Records.
- Huxley, A. (1954). *The doors of perception*. Harper & Row.
- James, W. (1902). *The Varieties of Religious Experience: A Study in Human Nature*. Longmans, Green, and Co.
- Jay, M. (2019). *Mescaline: A global history of the first psychedelic*. Yale University Press.
- Karibo, H. M., & Díaz, G. T. (2020). *Border policing a history of enforcement and evasion in North America*. University of Texas Press.
- Kerouac, J. (1957). *On the road*. The Viking Press.
- Kesey, K. (1962). *One flew over the cuckoo's nest*. Viking Press.
- Kinzer, S. (2019). *Poisoner in Chief: Sidney Gottlieb and the CIA Search for Mind Control*. Macmillan.
- Koch, C., Chalmers, D., Byrne, A., & Hameroff, S. (2023). The Science of Consciousness Conference. In *The Center for Consciousness Studies*. The University of Arizona. <https://consciousness.arizona.edu>.
- Lears, J. T. J. (1995). *Fables of abundance: A cultural history of advertising in America*. Basicbooks.
- Leary, T., Metzner, R., & Alpert, R. (1964). *The psychedelic experience: A Manual based on the Tibetan Book of the Dead*. University Books.
- Lee, M. A., & Shlain, B. (1985). *Acid Dreams: The Cia, LSD, and the Sixties Rebellion*. Grove Press.
- Lévi-Strauss, C. (1962). *The Savage Mind*. Librairie Pion.

- Lewis-Healey, E. (2020, October 26). *Psychedelics and neuroplasticity: Molding a new way of thinking*. Psychedelic Spotlight. <https://psychedelicspotlight.com/psychedelics-and-neuroplasticity-molding-a-new-way-of-thinking/>
- MacLean, K. (2014). Trust, Let Go, Be Open: Psychedelic Harm Reduction in the Desert and Beyond. Maps Bulletin Annual Report, Winter. [https://maps.org/news-letters/v24n3/v24n3\\_p34-38.pdf](https://maps.org/news-letters/v24n3/v24n3_p34-38.pdf)
- Mate, G. (2010). *In the realm of hungry ghosts: Close Encounters with Addiction*. North Atlantic Books.
- Max, P. (1971). Peter Max Superposter Book. Crown.
- McKenna, D. J., McKenna, T. T., Oss (pseud.), O. T., & Oeric (pseud.), O. N. (1976). *Psilocybin, magic mushroom grower's guide: A handbook for psilocybin enthusiasts*. And/Or Press.
- McKenna, T. (1987, September 12). *Nature is the Center of the Mandala*. Audio. Presented at the Shared Visions bookstore. 1:27:56. <https://www.organism.earth/library/document/nature-is-the-center-of-the-mandala>
- McKenna, T. (1993). *Food of the Gods: The Search for the Original Tree of Knowledge. A Radical History of Plants, Drugs, and Human Evolution*. Bantam Books.
- Merton, R.K. (1976). *Sociological Ambivalence and Other Essays*. Simon and Schuster.
- Michels, R. (1915). *Political Parties: A Sociological Study of the Oligarchical Tendencies of Modern Democracy*. Hearst's International Library Co.
- Miller, R. L. (2017). *Psychedelic medicine: The healing powers of LSD, MDMA, psilocybin, and ayahuasca*. Park Street.
- Most, A. (1984). *Bufo alvarius: The psychedelic toad of the Sonoran Desert*. Venom Press.
- Murray, M. (1997). A narrative approach to health psychology. *Journal of Health Psychology*, 2(1), 9–20. <https://doi.org/10.1177/135910539700200102>
- Nolan, C. (2010) *Inception*.(film) Warner Bros
- Pahnke, W. N. (1963). *Drugs and mysticism; an analysis of the relationship between psychedelic drugs and the mystical consciousness*. Harvard University.
- Pahnke, W. N. (1969). *Psychedelic drugs and mystical experience*. International psychiatry clinics. <https://pubmed.ncbi.nlm.nih.gov/4892137/>



- Pané, R. (c1494) An Account of the Antiquities of the Indian: Chronicles of the New Encounter. in. Dubois, L. et al.( Ed.), *The Haiti Reader*,(pp.8-12). Duke University Press, 2020. <https://www.jstor.org/stable/j.ctv1220qc0.5>
- Pollan, M. (2015, February 2). The Trip Treatment. *The New Yorker*. <https://www.newyorker.com/magazine/2015/02/09/trip-treatment>.
- Pollan, M. (2018). *How to change your mind: What the New Science of Psychedelics Teaches Us About Consciousness, Dying, Addiction, Depression, and Transcendence* . Penguin Press.
- Porter, R. (1997). *The greatest benefit to mankind: A medical history of humanity*. W. W. Norton.
- Psychedelic training*. Fluence. (2022, October 5). <https://www.fluencetraining.com/>
- Rätsch, C. (1998). *The encyclopedia of psychoactive plants: Ethnopharmacology and its applications*. Park Street Press.
- Robison, J. (2022, November 15). *Decades of drug use: Data from the '60s and '70s*. Gallup.com. <https://news.gallup.com/poll/6331/Decades-Drug-Use-Data-From-60s-70s.aspx>
- Roland, D. & Wicks, D. (2009). A Conversational Model for Qualitative Research: A Case Study of Clergy and Religious Knowledge, *Australian Academic & Research Libraries*, 40:4, 252-265, DOI: 10.1080/00048623.2009.10721416
- Savage, C. (1952). Lysergic acid diethylamide (LSD-25): A Clinical-Psychological Study. *American Journal of Psychiatry*, 108(12), 896–900. <https://doi.org/10.1176/ajp.108.12.896>
- Scharfetter, A. (2017). *Athena Awakening: A theoretical exploration of cathartic integration within psychedelic-assisted psychotherapy for post-traumatic stress disorder* (dissertation, California Institute of Integral Studies). ProQuest Dissertation Publishing. <https://www.proquest.com/openview/1f39f4987eee07d57b0fe8b779af9406/1?pq-origsite=gscholar&cbl=18750&diss=y>
- Shroder, Tom. (2014). *Acid Test: LSD, Ecstasy, and the Power to Heal*. Blue Rider Press.
- Simmel, G. (1908). *Sociology: Investigations on the Forms of Sociation*. Duncker & Humblot.
- Steinberg, A. J. (2022, July 1). *Psychology Today*. <https://www.psychologytoday.com/au/blog/the-meditating-mind/202207/psychedelics-give-glimpse-enlightenment>.

- Stevens, Jay. (1987) *Storming Heaven: LSD and the American Dream*. Atlantic Monthly Press.
- Strassman, Rick. (2000) *DMT: The Spirit Molecule*. Park Street Press.
- Thompson, H.S. (1971) *Fear and Loathing in Las Vegas: A Savage Journey to the Heart of the American Dream*. Popular Library.
- Turner, V. (1969) *The Ritual Process: Structure and Anti-Structure*. Aldine De Gruyter.
- U.S. Customs and Border Protection. *Did You Know... 'Psychedelic' signage Welcomed Visitors at U.S. Border Crossings?* <https://www.cbp.gov/about/history/did-you-know/peter-max>
- Van Gennep, A. (1909) *The Rites of Passage*. Émile Nourry.
- Wallace, A.F. (1959). Cultural determinants of response to hallucinatory experience. *Archives of General Psychiatry*, 1(1), 58. <https://doi.org/10.1001/archpsyc.1959.03590010074009>
- Warhol, A. (1967) *Exploding Plastic Inevitable*. Film. <https://www.youtube.com/watch?v=HsR4ghMfq0U>
- Wasson, V. P., & Wasson, R. G. (1957). *Mushrooms, Russia, and history*. Pantheon Books.
- Weber, M. (1905). *The Protestant Ethic and the Spirit of Capitalism*. Unwin Yyman, London & Boston, 1930. <https://www.marxists.org/reference/archive/weber/protestant-ethic/index.htm>
- Weissman, E. (2012). *Dignity in exile – stories of struggle and hope from a modern American shantytown*. Mount Forest: Exile Publications
- Weissman, E.P. (2014). *Spaces, Places and States of Mind: a pragmatic ethnography of liminal critique* (Doctoral thesis). Concordia University.
- Weissman, E. (2017). Spaces, places and states of mind: A study of two homeless communities. In Tepperman, L., Albanese P. and Emily Alexander Eds., *Reading sociology: Canadian perspectives, 3rd edition*. Toronto: Oxford University Press.
- Weissman, E. (2017). *Tranquility on the razor's edge: changing narratives of inevitability*. Toronto: Rock's Mills Press
- Wolfe, T. (1968). *The Electric Kool-Aid Acid Test*. Farrar Straus Giroux.
- Woodhall-Melnik, J. & Grogan, C. (2019). Perceptions of Mental Health and Wellbeing Following Residential Displacement and Damage from the 2018 St. John River

Flood. *International Journal of Environmental Research & Public Health*, 16(21), 4174-4188.

Yionna, T. C., Birks, M., & Francis, K. (2019, January 2). *Grounded Theory Research: A design framework for novice researchers*. <https://journals.sagepub.com/doi/full/10.1177/2050312118822927>

Zizek, Slavoj. (1989). *The Sublime Object of Ideology*. Verso Books.

## **APPENDICES**

### **Appendix A**

#### **Interview Questions**

Why did you decide to participate in this research?

What led you to psychedelics? Why did you try psychedelics? Was it a difficult decision?

What psychedelics have you used in your life? Could you tell me about your experiences with each different one?

Could you tell me what you perceived as different with each one?

What was your first experience with psychedelics? What was that experience like?

Do you feel that your pre-existing beliefs, opinions, and experiences have influenced your experiences with psychedelics? What was your opinion on psychedelics before trying them? Did it change?

Could you tell me about other experiences?

Could you tell me about your last experience?

Tell me about how your experiences with psychedelics have affected your life outside of the experience itself

Have you used psychedelics in a ceremonial setting? Clinical setting? Recreational setting?

Could you tell me about your experiences with each setting?

Could you tell me about the context/setting of the most meaningful psychedelic experience you've had? What made it so special?

Have you experienced any benefits or negative effects from a psychedelic experience?

How much do you feel the context/setting of your experience with psychedelics has affected the experience itself?

Some people talk about the "psychedelic renaissance." What does that mean to you? How do you think it will influence current and/or future perceptions/understandings of psychedelics your or future generations perception/ understanding of psychedelics?

Do you feel that the cultural understanding/perception of psychedelic use has influenced your experiences with them? If yes, how so?

Do you discuss or share your experiences with psychedelics with your social circle? If so, how do you feel this sharing influences your understanding of your experiences? Would you withhold your experience with psychedelics from anyone? If so, who and why?


Who would or are you comfortable using or discussing your use of psychedelics with? Who would you not be comfortable using or sharing with? Thinking of people in your life or society in general, who do you think should experience psychedelics? Who do you think should not experience them?

What are the factors that you think would contribute to a beneficial psychedelic experience? Whether it be in a clinic, as part of a ceremony or outside of a clinic?

Is there anything that you would like to share with other people about your experiences with psychedelics?

Is there anything else we haven't touched upon that you think would be of particular importance to this research?

## Appendix B: Information Letter

 <b>UNB</b> <b>Title of Project:</b>	<b>Value and Values in relation to Psychedelic Substances and Experiences</b>
<b>Principal Investigator (PI):</b>	Jeremy Foss, Interdisciplinary Graduate Student University of New Brunswick, (506) 343-6766, <a href="mailto:m5592@unb.ca">m5592@unb.ca</a>
<b>Purpose:</b>	To investigate why people engage in psychedelic experiences and investigate their experiences across different settings for the experiences (i.e.: Ceremonial, recreational and clinical) The researcher is also interested in the value or lack of value you perceived from participating in these experiences, with particular reference to mental health.
<b>Background:</b>	You have previously engaged in a psychedelic experience. You heard of this study via word of mouth. You are invited to participate in an interview regarding your experiences.
<b>Expectations:</b>	<p>The researcher, Jeremy Foss will interview you by either in person or by telephone.</p> <p>He will ask you about your experiences taking psychedelics through a semi structured interview.</p> <p>Each interview will take one to two hours. It will be audio recorded and transcribed by Jeremy.</p> <p>All personal information such as names and places will be removed. Only the researcher will hear the audio interview.</p> <p>If you consent to receiving it, we will send you a copy of your written interview. The text in the subject heading of any emails to you will read “Information” You will choose your password during the first interview.</p> <p>The transcript of your interview will be provided to you if you so choose. The transcript will be emailed with the subject line “Info” and can be opened with the password agreed upon during the interview</p> <p>In addition, if you prefer you will be providing a summary of all of the information provided by all the participants.</p>

<p><b>Benefit:</b></p>	<p>While your participation may contribute to ongoing research and understanding regarding the value and values associated with the use of psychedelics, there will be no direct benefit to you. Though the experience of participating in the interview may be an opportunity to share your perception of your experiences and potentially gain further insights as to your personal experiences.</p>
<p><b>Risks:</b></p>	<p>There are no expected risks in your participation. In talking about your experiences you may possibly relive some unpleasant associations. The researcher is a trained Social Worker and will provide adequate and sensitive care throughout the interview and as well could provide additional resources need be.</p> <p>If at any time you become upset during the interview, you can stop. If you wish to continue after a break that is totally acceptable and if you wish to not participate at any time, that is also acceptable</p>

## Appendix C Informed Consent

**\*This will be provided to the participant before the interview. The information will be discussed with participant prior to commencing the interview in order to ensure their comprehension and willingness to continue with the interview. This consultation will all be audio recorded.**

The researcher Jeremy Foss will interview people regarding their experiences with psychedelics

1. I understand that this is a voluntary interview and that I will be one of about 8-10 people interviewed.
2. There be will no compensation of any kind for participation and I can withdraw from the study at any point.
3. Each recorded interview will be approximately 2 hours. The interviews will be recorded on TEAMS to achieve a transcribable video clip. The video and audio will be downloaded immediately to a secure drive, erased off the server and never seen by anyone but the researcher. If I do not want to be recorded, the interview will not proceed.
4. I can choose not to answer any question. I also have the right to end the interview at any time.
5. Only the researcher will know my identity. My name and any identifying information will not will be included the research findings. The researcher will keep information that identifies me in a password-protected document. This document will include my consent, interview recordings and password for opening any files the researcher sends me. If I choose to receive feedback from the interview, I will be provided with access to the document via a password protected email containing the subject line "Info".
6. I acknowledge that if I articulate a threat to the health, life, or safety of myself or someone else, the researcher is obligated to report this information to appropriate authorities.
7. I know the Research Ethics Board at UNB Fredericton has reviewed this research study and has it on file as REB 2022-079.

If I have concerns or questions, I may contact:

- UNB Office of Research Services (506) 648-5908

I have been informed of the purpose of the study.

No \_\_\_ Yes \_\_\_



I have been informed on how data will be collected and analyzed.

No \_\_\_ Yes \_\_\_

I was informed about the ways the findings will be made known to participants and the public.

No \_\_\_ Yes \_\_\_

All my questions were answered to my satisfaction.

No \_\_\_ Yes \_\_\_

I voluntarily agree to participate in this study.

No \_\_\_ Yes \_\_\_

I have read this consent form.

No \_\_\_ Yes \_\_\_

I wish to receive a copy of my interview transcript.

No \_\_\_ Yes \_\_\_ (Email: \_\_\_\_\_)

I wish to receive a summary of the findings.

No \_\_\_ Yes \_\_\_ (Email: \_\_\_\_\_)

I wish to be invited to any presentation of findings

No \_\_\_ Yes \_\_\_ (Email: \_\_\_\_\_)

I understand that if I withdraw my consent, the researcher will remove my data from the password-protected file and the study.

No \_\_\_ Yes \_\_\_

By adding my name, I give my consent to be interviewed

\_\_\_\_\_  
My Name Date \_\_\_\_\_

-----  
The participant read the consent and information forms. I explained the consent and answered any questions before consent was given. The participant has knowledge of the research project and appears to understand it.

\_\_\_\_\_  
Name of Interviewer Date and time \_\_\_\_\_

*Research Team:*

Jeremy Foss, Sociology, University of New Brunswick, (506) 343-6766,  
[m5592@unb.ca](mailto:m5592@unb.ca)

## Appendix D

### Research Ethics Board Approval

**From:** David John Coleman <dcoleman@unb.ca>  
**Sent:** May 19, 2022 10:46 AM  
**To:** Jeremy Scott Foss <jeremy.foss@unb.ca>  
**Cc:** Ethics, Department of <ethics@unb.ca>; Elizabeth Harrison <eli.harr@unb.ca>; Joseph Galbo <jgalbo@unb.ca>; [baldwin@stu.ca](mailto:baldwin@stu.ca) <baldwin@stu.ca>  
**Subject:** REB 2022-079

Jeremy Foss, Graduate Student  
Faculty of Interdisciplinary Studies  
University of New Brunswick Fredericton

To Jeremy Foss:

As Chair of the Research Ethics Board (REB), I have reviewed your ethics application for the project entitled "Value and Values in relation to Psychedelic Experiences" which has been assigned the file number REB #2022-079. On the basis of the review, I consider your project to be eligible for delegated review, since any risk to participants that might exist appears not to exceed the "minimal risk" outlined in the Tri-Council Policy Statement, 2nd edition (TCPS2). I am also pleased to inform you that, in my opinion, your project is in compliance with TCPS2 and the University Policy on Research Involving Humans (UPRIH). **Accordingly, please consider this E-mail to represent official notification of REB approval of your project. This REB approval is in effect from May 18th, 2022 to May 18th, 2025.**

**CONDITION 1:** All Interdisciplinary Studies applications are processed through the UNB School of Graduate Studies GAU which is based at UNB Fredericton. For that reason, you should use contact information for REB staff at UNB Fredericton rather than at UNB Saint John.

With that in mind, in the "Additional Contact Information" section of your Information Letter, would you please replace the information in that box with the following text:

"This project has been reviewed by the UNB Research Ethics Board and is on file as REB 2022-079. If you have any concerns about any aspect of this study, contact the following person who is not directly involved: Dr. David Coleman, Chair of Research Ethics Board, UNB Fredericton, Tel. (506) 453-5189, email: [ethics@unb.ca](mailto:ethics@unb.ca)."

Similarly, for Item 7 of your Informed Consent Form, would you please change the text to the following: "I know the Research Ethics Board at UNB Fredericton has reviewed this research study and has it on file as REB 2022-079."

***Then, would you please email to me (cc to <[ethics@unb.ca](mailto:ethics@unb.ca)>) a copy of each of those modified documents for our records?*** There is no need to send a revised version of the whole application.

Please note that, in the future, if you find that you must make any changes to your protocol, those changes must be considered and approved by the REB before they are implemented. Please submit the REB Case Modification Request form, available online through the Research Ethics page of the Office of the VP (Research).

Annual Reports for this project are due on the 15th of January each year, provided that this date is at least six months after the date of project approval. Final reports are due 90 days after project completion. Form templates for both of these reports can be found on our website at <https://www.unb.ca/research/vp/ethics.html>.

Best wishes for the successful completion of your research project.

— David

---

**David Coleman**

Chair • Research Ethics Board  
Professor Emeritus • UNB Fredericton  
T 506 453-5189 E [dcoleman@unb.ca](mailto:dcoleman@unb.ca)

**UNB campuses are open with strict adherence to New Brunswick Public Health requirements. Our priority continues to be the health and safety of our community. The Office of the Vice President (Research) and the Office of Research Services continue to work remotely with minimal staffing in the office. Access to these offices is by appointment ONLY. To contact our staff, visit our website at <https://www.unb.ca/research/contact.html>. Some delays may occur. We appreciate your patience.**

## **CURRICULUM VITAE**

Candidate's full name: Jeremy Scott Foss

Universities attended :

University of New Brunswick, Saint John. Bachelor of Arts, Sociology,  
St. Thomas University, Fredericton. Bachelor of Social Work, 2018.

Publications: None

Conference Presentations: None