anything has the potential to alter the grievous state of mental health and well-being and move us toward “visionary, transformative and liberatory realms of possibility,” it is the psychedelic renaissance we are on the cusp of today. The prospects for individual mental health and the transmutation of trauma alone are encouraging, but it is the potential for rebirth that keeps me engaged in and inspired by this work: the promise of our ego dissolving into its rightful place as steward of the soul; increased awareness of both our interconnection to one another and this planet, and thus the emergence of a more responsible, respectful, and reciprocal society; and expanded access to the creativity needed for systems change and eco-innovation. Psychedelic and plant medicines, some of which have been used in ceremonial contexts for thousands of years to transform consciousness, may be one of the only viable tools we have available that can properly awaken us from the illusions we currently occupy, keeping us stuck in the patriarchal, capitalistic, supremacist paradigms that govern our experience of life on this planet. Understanding and learning from plant-based or synthetic psychedelics is a quest to understand consciousness, the mystery of the universe, and our place within it.
Psychedelic and plant medicines, some of which have been used in ceremonial contexts for thousands of years to transform consciousness, may be one of the only viable tools we have available that can properly awaken us from the illusions we currently occupy, keeping us stuck in the patriarchal, capitalistic, supremacist paradigms that govern our experience of life on this planet.
I began my training with the Multidisciplinary Association for Psychedelic Studies (MAPS) in MDMA-assisted therapy for post-traumatic stress disorder (PTSD), in 2018. MAPS, a pioneer in the field of psychedelic psychotherapy, conducts extensive research in the United States, Canada, and Israel; is engaged in drug policy reform; trains diverse cohorts of therapists; prioritizes health equity; and privileges public benefit over profit. Most important, MAPS is steadily moving the work forward using evidence-based research to establish the safest and most ethical legal “container” possible for working with expanded states of consciousness.

My training, the final elements of which require FDA approval, opened the door to a world of possibility and hope once diminished by the mental health system. I have spent the three years since my initial training with MAPS ended continuing my studies with various educators and elders in the field—working to integrate and balance Indigenous wisdoms with the latest science, and learning and practicing in legal contexts to develop my skills as a psychedelic guide.

THE MUSHROOM AS A MIRROR

While there are a variety of molecules in the psychedelic category currently being researched in the laboratory, including but not limited to MDMA, Ibogaine, Ketamine, and 5-MeO-DMT, the psilocybin mushroom beautifully illuminates the potency of this work. A wise teacher of mine describes the various principles of the mushroom as a mirror. Mushrooms are the fruit of a large subterranean organism, their underground growth reflecting the unconscious shadow material we are unearthing each time we ingest their medicine. As a forthright advocate for the safe use of psychedelics, and psychedelic psychotherapy in particular, my hope is that we can reintroduce these healing modalities to society, with great care—making sure to avoid the usual profit-driven pitfalls that ravage our mental healthcare system and make “wellness” accessible to few. For health justice to succeed, we need to heal the past and step intentionally and attentively into new models and standards of care. This medicine space, like most other spaces that humans engage with, is ripe with opportunities for exploitation, misuse, and abuse, and it would be remiss not to address this fact. The greatest harm caused rests on the shoulders of the policy-makers who relegated this work to the shadows in the first place, criminalizing the use of psychedelics, incarcerating countless humans (mostly people of color), suppressing research, peddling misinformation, and all but guaranteeing that much of this work would be conducted in secret, where unsafe usage and abuses of power run amok. Few people question that the war on drugs has been a disaster of epic proportions, and it is our collective opportunity to encourage decriminalization, medicalization, and legalization of psychedelic and plant medicines, so that appropriate safeguards can be established.

It is important for me to name at the outset that I am not a member of one of the many Indigenous communities that hold great wisdom on the topic of plant medicine; nor am I one of the experienced and revolutionary psychedelic guides who have been courageously practicing this form of healing underground for the last half century. I am a white-bodied, cisgender, transpersonal psychotherapist and trauma specialist with extensive experience in community and private mental-health practice. Though I was once optimistic about our human potential to survive adverse experiences and thrive beyond them, my years of treating trauma within the confines of a limited and limiting mental healthcare system—combined with the increasing collective distress brought on by political unrest, gross inequality, climate crisis, and pandemic disease—have challenged my confidence. Despite mounting frustration, I hold out hope; and my commitment to finding creative solutions to the problems I see plaguing us has led me to psychedelic psychotherapy.
Preparation is the practice of preparing the journeyer (client) and establishing trust between journeyer and guide (therapist). The guide starts with a thorough intake and client history, assessing for potential contraindications. Once it is determined that a client can safely move forward with the journey, the client’s mental, emotional, physical, spiritual, and environmental situation is explored, and the guide shares details of what to expect within the journey space. It is important that the client be of sound mind and have sufficient ego strength to enter an expanded state. They must be capable of creating space inside themselves for the journey and for the process that follows.

Set and Setting refers to both the mindset of the journeyer and the container within which the journey itself takes place. Insofar as mindset is concerned, the journeyer must be prepared to surrender to the experience. While nervousness is inevitable, excessive fear and anxiety about the journey itself may interfere with a client’s capacity to loosen their grip and give way to the process. If conditions have changed and an acute crisis or life challenge has emerged between the prep sessions and the intended journey date, a person’s mindset may be compromised. Ensuring the client is stable and resourced enough to enter the journey space is essential, and will be evaluated in preparatory sessions and on the day of the journey.

It is the guide’s responsibility to establish a safe container and to communicate what that entails. The therapist or therapists (the MAPS protocol calls for two) communicate standard rules and steps for the journey, prepare music, control environment, temperature, and other such details, and monitor client needs throughout the process. Most important, the guide will have two feet in this dimension of reality, creating a safe space for the client to surrender to the effects of the medicine and retreat into the unconscious. If the therapist or client emerges from a particular lineage/culture and/or wishes to include a ceremonial- or ritual-based practice in the session, space is made to honor whatever spiritual or earth-based wisdom tradition that calls to be honored.

In addition to establishing trust with the guide and being of sound mind, the environment is an exceptionally important aspect of creating a safe container for the work taking place.
We have all the necessary instruments at our disposal for a radical shift in human consciousness and the cultivation of a more harmonious human family.

Journey spaces and treatment rooms should be tranquil, calm, and inviting—safe sanctuaries with limited outside interference. Natural environments can also provide a deeply healing and supportive cocoon for this work. In many cases, access to nature is limited, and some studies are incorporating digital content as a way of simulating an experience of the natural world. According to renowned cinematographer and *Fantastic Fungi* director Louie Schwartzberg, a current study being conducted at the Pacific Neuroscience Institute on the use of psilocybin for alcohol abuse is incorporating elements of his *Moving Art* nature cinematography in sessions with subjects.9

And lastly, there is integration. By far the most important aspect of this work, integration is the key to ensuring that a psychedelic journey leads to meaningful change. Integration is the process of both embodying and “actionizing” the insights derived from a journey. It is one thing to adventure off to a supernatural world that defies the boundaries of this dimension of reality, and quite another to make use of that experience in a way that enhances the quality of our lives and benefits those around us.

Because psychedelic experiences often reveal information symbolically and have the potential to open difficult doors, it’s important that a competent and well-trained therapist provide a solid container of love and compassion as the client works to interpret the content of their journey after the fact and heal whatever material may have surfaced in the journey space.

As a therapist, I know all too well how slow the healing process can be, especially as we contend with increasingly complex trauma and an overmedicated and underresourced population. Psychedelic therapy cuts through many of the interpersonal and neurobiological self-protective mechanisms established in response to injurious experience. Those default modes are barriers to our healing and often need a powerful interruption to initiate change.10 Inducing a non-ordinary experience can speed the healing and life transformation process along, producing insights within hours that might otherwise take years to access in traditional psychotherapeutic models. In that way, a journey is like a wormhole, or passage through space and time. The insights and experiences clients emerge with then require attentive exploration in service of organization and integration.11 Integration grounds us back into our bodies and physicalizes the spiritual or ethereal wisdom we touch. Without integration, a psychedelic experience is just that: an experience—and the degree to which it is useful is up for debate. Integrating a psychedelic experience with psychotherapy or other mindfulness-based integrative modalities helps us to lay new cable and create healthier connections in the brain and extended nervous system, and in our relationships.12 This work, if done intentionally and integrated effectively, is extremely powerful and fast acting. It can liberate a person from pain and restore vitality, creativity, and a sense of meaning.13

As this work travels from its Indigenous birthplaces to the Wild West underground to the laboratory to the therapy room, it continues to evolve—and so, too, does our understanding of how to best be in a responsible and respectful relationship with these modalities. Recognition that traditional mental health models continue to fail our most vulnerable populations helps to build momentum and support for alternative approaches like psychedelic psychotherapy. Many questions remain unanswered around how this work can be conducted safely, cost-effectively, and at a scale that provides the greatest benefit for all. However, with the second phase 3 clinical trial for MDMA-assisted psychotherapy in process (MAPP1 is complete; the second trial, MAPP2, is underway) and studies being conducted all over the world at leading research institutions, it is only a matter of time before this is an accessible treatment option and self-actualization tool.14 Psychedelic medicines will not work for everyone, but we can do better where whole health is concerned. We have all the necessary instruments at our disposal for a radical shift in human consciousness and the cultivation of a more harmonious human family. I continue to look to organizations like MAPS that are learning from the past and leading the way with intention to a future where visions of equitable access to mass mental health are realized, and health justice prevails.
FURTHER READING


KASEY CROWN, MA, LMFT, is a transpersonal psychotherapist, clinical supervisor, consultant, wellness educator, and activist. Her work challenges old mental health paradigms and suggests instead that true well-being lies in our ability to balance scientific and spiritual perspectives. For more than a decade, she has served as a facilitator of the healing process for adult individuals, couples, and groups, working to upend trauma, transform emotional injury, repair relationships, and unlock vital wisdom to connect people with who they truly are. Crown holds an undergraduate degree in philosophy from the University of San Diego and a master’s degree in spiritual and counseling psychology from the University of Santa Monica. She has completed postgraduate advanced clinical trainings in relational studies, interpersonal neurobiology, culturally competent trauma-informed care, and harm reduction, and is a California-licensed marriage and family therapist, trauma educator, and embodied mindfulness facilitator. Crown is a 2020 to 2022 Garrison Institute Fellow, working with a diverse cohort of scholars, artists, and activists to blaze a new trail in the field of collective healing, drawing upon and engaging with the science of interconnection, generative action, and awareness-based contemplative wisdom. To learn more about Crown, visit www.kaseycrown.com.
NOTES


6. “Psychedelic Research for Mass Mental Health,” MAPS, maps.org; and see “Take a Trip Down Memory Lane,” About, MAPS, accessed November 26, 2021, maps.org/about-maps/.


8. Author unknown.


14. See Mitchell et al., “MDMA-assisted therapy for severe PTSD”; Imperial College London, Centre for Psychedelic Research, www.imperial.ac.uk/psychedelic-research-centre; Johns Hopkins Medicine, Psychedelic Research and Psilocybin Therapy, www.hopkinsmedicine.org/psychiatry/research/psilocybin-research.html; Massachusetts General Hospital, Center for the Neuroscience of Psychedelics, www.massgeneral.org/psychiatry/treatments-and-services/center-for-the-neuroscience-of-psychedelics; and “Meet Our Team,” Icahn School of Medicine at Mount Sinai, The Center for Psychedelic Psychotherapy and Trauma Research, icahn.mssm.edu/research/center-psychedelic-psychotherapy-trauma-research/team.

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