

THE EFFECTS OF CONSCIOUSNESS-EXPANDING DRUGS ON PRISONER REHABILITATION

Timothy Leary

The first of two articles describing the Harvard-Concord Prison Project, in which the author's own version is flanked by official reports and newspaper accounts of the same story.

During the Fall and the Winter of 1960, much of my time and energy was going into the study of the effects of the psychedelic mushrooms. I was also carrying on an active program of lecturing, teaching, and field work in Clinical Psychology in the Harvard Graduate School. I had been brought to Harvard in 1959 in order to introduce existential-transactional methods for behavior change. After 15 years practicing psychotherapy and about 10 years of doing research on psychotherapy, I had come to the conclusion that there was very little that one person called a doctor could do for another person called a patient by talking to him across a desk, or listening to him as he lay on a couch.

I developed a lot of theories and a lot of methods on how behavior change could be brought about in ways more effective than the standard clinical interview method. There are two main points to the theories I developed; first, (transactional) I was convinced that the doctor had to throw away his role and status as a doctor, had to join the other person actively and collaboratively in figuring out the solution to his problem. As much as possible, the doctor had to turn over the responsibility to the man who knew most about the problem at hand, namely, the patient. I developed many techniques for getting patients to help each other.

The second point in my theory (existential) was that the doctor has to leave the safety of his consulting room and get out there in the field where the so-called patient is having his unique problems and where he is going to solve his problems. I saw the role

These articles by Dr. Timothy Leary are part of his book "High Priest," published 1968, New American Library. Reprinted by permission.

Second Annual Report:

Psilocybin Rehabilitation Project

*All the professional work on this project was volunteer. The expenses for clerical assistance and salaries for ex-inmate workers were covered by generous donations from the Uris Brothers Foundation, New York, Eileen Garrett, President.

Applications to three offices of the U.S. Public Health Service requesting support for continuing this project were refused.

Exactly two years ago the Harvard psilocybin project initiated a research program at Massachusetts Correctional Institution, Concord, designed to test the effects of consciousness-expanding drugs on prisoner rehabilitation.

The project was designed as a pilot study—necessarily exploratory—since little was known about the long range application of the substances.

The key issue was the use of a consciousness-expanding drug; but equally important was the philosophy underlying the research, which emphasized:

of the doctor as that of a coach in a game in which the patient was the star player. The coach can help, can point out mistakes, can share his wisdom, but in the last analysis, the guy who does the job is the guy out there in the field, the so-called patient.

I was enthusiastic about these theories because they worked, and because there is no joy in teaching that can equal that thrill which comes when you watch someone who's been hung up, and blocked, and confused, and making a mess of things suddenly learn how. All this had started happening before I got involved in the drug research, and I had already become a controversial figure around the Boston area, because everything that I was saying made a tremendous amount of sense to patients, but the doctors, the psychiatrists, the social workers, the psychologists, were not so quick to accept these theories. You see, I was asking them to give up the status and the omniscient position which they felt their training entitled them to. I asked them to turn over the authority and the star role in the game to the patient.

I was taking one day off a week to drive down to New Bedford, Massachusetts with two or three graduate students where we were working in an orphanage teaching social workers and nuns to set up groups in which older kids would help younger kids, and in which children at every age level were encouraged to take more responsibility for running the school and planning their lives.

We set up another project in a slum housing district in a Boston suburb. Here were hundreds of people who were bogged down socially and psychologically. They couldn't afford psychiatric help and there was none available for them. With another group of graduate students, I used to go down there one night a week with tape recorders and blackboards. We set up headquarters in one of the slum apartments and started teaching groups of the neighbors how they could help each other and become psychiatrists for each other and develop some facility for solving their own problems.

All this, of course, was very déclassé at Harvard. Universities are supposed to be

Democratic Collaboration:

Inmates were given responsibility for planning and evaluating the work. This was seen as preparation for assuming roles as responsible citizens in a democratic society.

Sharing of Information:

The inmates were given all information relevant to their treatment. This was seen as a necessary step in increasing trust and self-respect.

Spiritual Insight:

The transcendental experience provided by the drugs propels the subject beyond space, time, ego, culture, etc. The implications of this visionary experience were utilized in the program.

Interpersonal Trust and Closeness:

Evidence shows that when subjects share an ego-shattering experience together they develop strong positive emotional bonds.

Self-help and Mutual Help:

The most successful rehabilitation methods (A.A., Synanon, Group Dynamic "T" Groups, etc.) seem to those which turn over responsibility to the subjects themselves and which stimulate them to help each other. The drug experience facilitates this tendency.

Emotional and Practical Support:

The model used was not doctor-patient or expert-client but that of human beings who believe in each other and want to help each other.

The project developed the model of friends who are available to help group members stay out of trouble and maintain a responsible role in society.

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research institutes and if you get too involved in service functions or helping people, you're considered a bleeding heart. I was able to justify the work in the orphanage, the work with alcoholics, the work in the slum projects, by using the phrase methodology. We weren't really trying to help these people. No sir, not us. We were trying to develop new techniques and scientific methods for changing psychotherapeutic theory. Of course, if people enjoyed it and got help, that was an interesting by-product which supported the method and the theory. It was all experimental, you see. It became a tradition in the center where I worked that any time they got a call from a do-good social service agency requesting Harvard's help in curing any sort of social disease, the request was likely to get bucked to me because they knew that this was my vice and my eccentricity.

One day I got a note in my box saying that two men from the Department of Legal Medicine were interested in enlisting Harvard's help in the psychological rehabilitation of prisoners. Now prison work is considered to be the least interesting, lowest status work you can do in the field of psychology, psychiatry, and sociology. The problems are hopeless. Criminals never change. The atmosphere is dreary and the academic rewards are slim. But when I found this little piece of paper in my box requesting an appointment from two officials from the Department of Legal Medicine, I let out a big grin and chuckled all the way to my office because this was just the chance I was looking for.

By this time, we had given the psychedelic mushrooms to about 100 people in a wide variety of circumstances and we had learned a lot about the process. In spite of the bungling, and the confusion, and our ignorance, we still hadn't caused any damage to anyone and there were a lot of mistakes that we'd never make again. By this time, we had learned a few things about how to run the sessions. About 90 percent of the people who were taking the magic mushrooms were reporting the most ecstatic and educational experience of their lives. The problem was, there was no way to get any measurement as to how much good we were

In our research we helped inmates get jobs, purchase union cards, made small loans and spent hours in friendly advising interaction.

Procedures

Since its initiation, the project has operated under the medical and psychiatric supervision of Dr. W. Madison Presnell.

Inmates received on the average four doses of psilocybin. Dosage ran from 20 mg. in early sessions to 70 mg. Now we employ 30 mg. as a standard, moderate dose.

Inmates were given personality tests before and six months after the program began. Significant decreases in hostility, cynicism, social delinquency and irresponsibility were registered.

There seems to be general agreement that the effects of the program in-the-institution were quite dramatic. The behavior and attitude of the project members became more mature and social.

The post-release events, however, involved a different set of factors and required several revisions in the program.

Post-Release Program:

The main conclusion of our two year pilot study is that institutional programs, however effective, count for little after the ex-convict reaches the street. The social pressures faced are so overwhelming as to make change very difficult.

We recognized very early in our work

doing. There was no way to keep score.

That of course, is the main problem in the field of psychotherapy. You can develop a completely effective method of treating people's psychological problems and there is no way you can prove it. You can work with 1,000 people and help every one of them change their way of thinking and their way of acting, but there are no statistics like hits, runs, and errors to tabulate your score. The problem is that half the people you help are going to get better jobs, and half of them are going to quit the jobs they have. Half of them may increase the intimacy and closeness and meaning in their marriages, but the other half may leave their wives. Changing a person's psyche is one thing, but measuring results in an observable way is another thing. Because who's to say which behavior reflects growth and change.

Here's where the prison came in. The prison is the ideal place to do a study in psychotherapy behavior change because when you try to rehabilitate prisoners you've got an iron-clad statistic you can work against. It's called the recidivism rate. When you are working with people outside, they may quit their job and join the Peace Corps, or they may quit their job and join the ministry, or they may quit the ministry and take up guitar, and you know about the growth of this person, but who else will believe it? But when you work with prisoners and you think you've helped them change, grow, and become more effective people, there's an easy way to tell. Where are they a year after you've finished with them? Are they back in jail, or are they making it on the outside. Prisoner rehabilitation presents the most effective check for someone who claims he can bring about change in behavior. In the prisons of Massachusetts the recidivism is about 70 percent. Seven out of every ten men who leave prison, return. If you develop a new and sure-fire way of changing man's mind, the prison presents the toughest and cleanest test of your effectiveness. Can you keep him out of jail? That's why I wanted to get into the prison.

Now, the reason why the prison psychologists wanted to get into Harvard is because

the advantages of a post-release program.

Our philosophic and theoretical orientation led us to encourage inmates to plan and execute their own program.

We fondly hoped for a halfway house run by ex-inmates along the lines of the successful Synanon program.

In June 1961 a non-profit organization, Freedom Center, was set up to administer the post-release program. Our hopes for a convict-run halfway house did not materialize.

We had too few men in the Boston area and they were too caught up in the desperate struggle to survive, to spare time to help others.

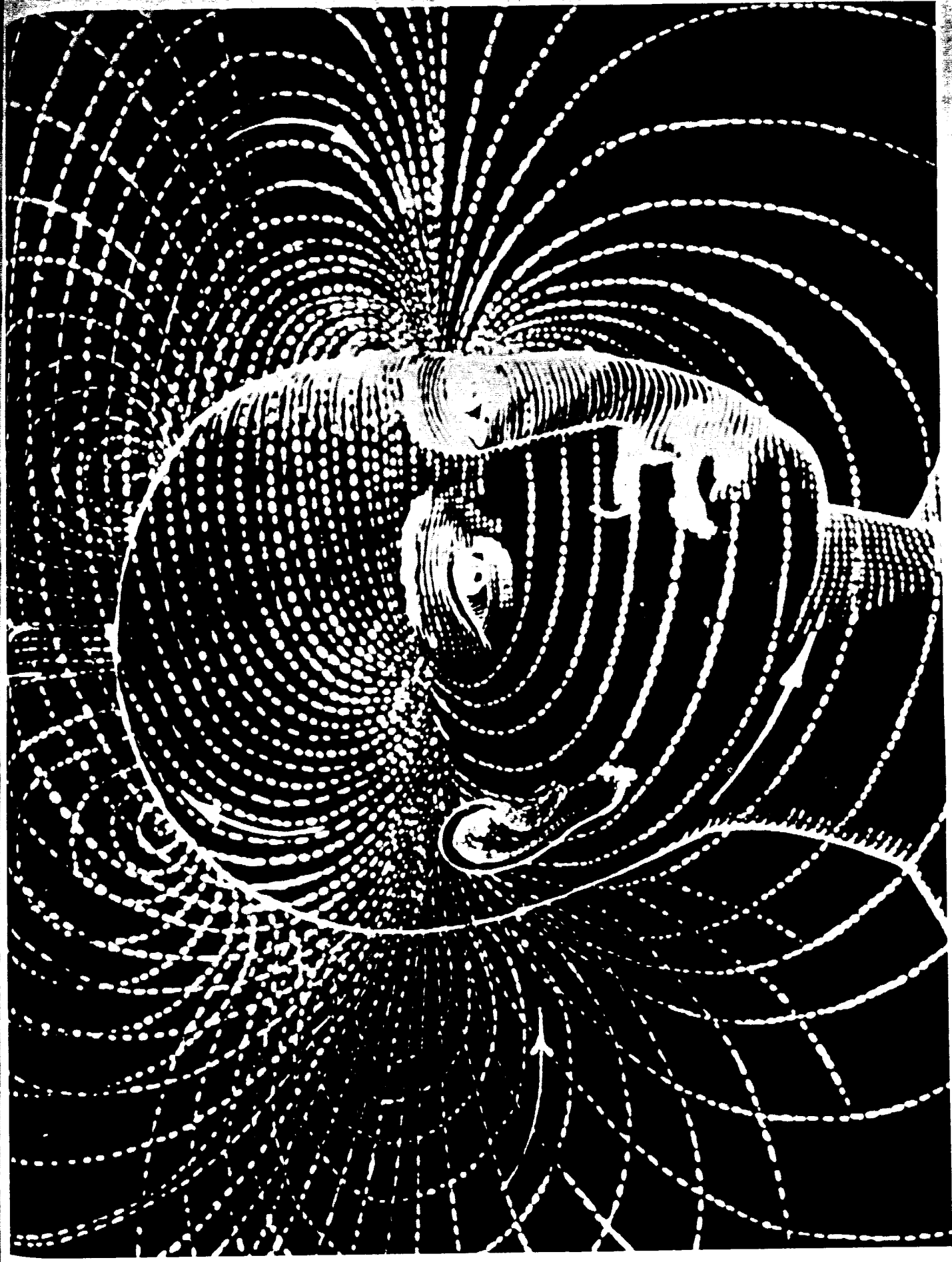
In 1961 as a beginning step towards a halfway house, we began "Project Contact." The purpose of this project was to keep in regular contact with all group members.

By these means we were able to reach ninety-one percent of ex-inmates living in Massachusetts.

A newsletter and personal letters also kept up contact and seemed to be effective in helping the rehabilitation spirit stay alive.

But increased contact only strengthened our convictions that an A.A. type organization of ex-convicts is necessary.

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everyone in any academic or professional activity in the Boston area has one way of measuring his success. Can he get on the Harvard payroll? The word Harvard in the Boston area is a powerful status symbol that operates at every level of society. There are several thousand janitors around the Boston area, but if you are a janitor at Harvard, you're a prince among custodians. The same with a cook, a gardener, and a psychologist.

A week later, I found myself host at a corner table in the Harvard Faculty Club with two officials from the Massachusetts Prison System. What they wanted was simple. They wanted to have Harvard graduate students assigned to the prisons as psychology interns with a possible long-range hope of getting themselves clinical professorships at Harvard. And what I wanted was to get Harvard graduate students into the prisons because that's where I felt that all embryonic psychologists should be-out in the field, dealing with real people and real problems. But there was something else I wanted—and that was the chance to show that we could rehabilitate criminals by using the sacred mushrooms. And so the deal was made. I agreed to get Harvard approval to send graduate students to internships in the prison and they agreed that if I could get the approval of the warden and the prison psychiatrists, I could give psychedelic mushrooms to prisoners.

About a week later I drove out to the prison. I wore my Harvard tweed suit and my button-down shirt. The warden was impressed and pleased. It wasn't often that Harvard professors came out to the prison proposing to do research and training with Harvard graduate students. But the whole thing hinged on the approval of the psychiatrists, because the sacred mushrooms were DRUGS and to work with DRUGS you had to have the medical O.K. So, we walked down the hallway to the metal cage that let us into the prison. We opened up the first steel door and we stood in the anteroom. Then we rang a bell, a slot opened, and a guard looked at us and opened up the second metal door. We walked into the middle of the guard room, across the prison yard to the hospital where we rang the bell and

The initial step of finding the small nucleus of men who are ready to make the dedication needed has not yet taken.

As a possible solution we hope to be able to send two ex-inmates to spend a month living at Synanon House, Santa Monica.

The director of Synanon, Mr. Chuck Dederich has expressed interest in this project.

The next step of selecting two ex-inmates to make the trip is waiting to be taken.

Upon their return, Freedom Center is prepared to offer its resources to support a local self-help residence program.

Results:

Plans and hopes are one thing but the actual score card of accomplishments provides the crucial evidence. What are the available results?

Psilocybin is safe:

Thirty-five inmates and ten Harvard staff members have had group Psilocybin experiences at Concord.

There were 131 inmate ingestions and 37 staff ingestions, a total of 168 experiences. There were no episodes of violence, lasting disturbances or negative after-effects.

Physically and psychologically there is clear cut evidence that in a supportive environment the drug effect is safe and positive.

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got peered at through the slot, heard the metal hinges creak, and walked into the prison hospital. We walked down the corridor to the psychiatrist's office and knocked on the door.

After a minute, out walked one of the most entertaining and interesting men in American psychiatry. The first thing that struck me about the prison psychiatrist was that he was the best-dressed man I had ever seen. He was short, graceful, like a ballet dancer. The first negro psychiatrist I had ever met. I spent an hour talking with Dr. Madison Presnell. He was no intellectual; he mispronounced some of the polysyllabic words, but he had a light in his eye and a wise, cool way of looking at you which told you he was a man who had seen a lot, and suffered a lot, and was still looking for the funniest and wisest part of everyone he came in contact with.

In sizing up Dr. Presnell, I could say to myself a word which I had heard used quite often in recent months. He was "hip." It was obvious too, that he had had some experience with psychedelic drugs. Which ones he didn't make clear. He could have had LSD in medical school, or mescaline in psychiatric research, or maybe pot in the Village, but he knew what I was talking about.

A few days later Dr. Presnell came over to Harvard to meet some of my bosses, and the following Sunday, he brought his beautiful and intelligent wife and his two lovely children over to my house for cocktails. It was on a Sunday afternoon. We had a straightforward and honest discussion. He sat down on a chair in my study, thought for a minute and said, The plan you propose to get the psychedelic drug to prisoners is the best idea I've ever heard for dealing with an impossible problem. If you're smart enough and dedicated enough to know how to do it, this could be the best plan for the treatment of prisoners I've heard proposed. There's one chance in a hundred you can pull it off, but if you do, you will have accomplished more for American society and for prisoners rehabilitation than has been done in the last four thousand years since the code of Hammurabi. But, it's risky business. You're bound to run into trouble.

Those interested in using psilocybin for research or therapy purposes can proceed with confidence if their program is open, supportive, collaborative.

Psilocybin produces temporary states of spiritual conversion, interpersonal closeness and psychological insight.

Forty-five percent of the entire inmate group clearly underwent a mystical, transcendent, death-rebirth experience.

This figure should be modified, however. The results for running sessions improved so that 100% of our recent groups were undergoing transcendent experiences.

The life changing therapeutic effects of the psilocybin experience do not last for more than 72 hours unless the subject is in a situation which encourages him to maintain his emotional and spiritual insights.

Therefore, psilocybin must be used in on-going programs of therapy or self-help. When employed in such programs psilocybin is a dramatically useful, educational and rehabilitative instrument.

If the subject shares time and space subsequently with those who have had the experience his chances of maintaining the insights are increased.

As a matter of fact, the more successful you are, the more trouble you're going to stir up. Because one thing I've learned as a prison psychiatrist is that society doesn't want the prisoner rehabilitated and as soon as you start changing prisoners so that they've discovered beauty and wisdom, God, you're going to stir up the biggest mess that Boston has seen since the Boston Tea Party. I'll give you medical coverage and I'll be glad to serve as psychiatric consultant and I'll back you up all the way with the wardens, with the guards, with the mental health department, but sooner or later as soon as they see the thing you do working, they're going to come down on you—the newspaper reporters, the bureaucrats, and the officials. Harvard gives drugs to prisoners! And you're going to have to do the impossible—you're going to have to cure prisoners with your left hand, and that's something that's never been done before and you're going to have to hold off the entire bureaucracy of the state of Massachusetts with your right hand and that's never been done before, not even by Kennedy. So, I'll back you all the way, until you make a mistake, and when you make that mistake, and they all start coming down at you, exactly at that point, I'm going to walk out because I'm not you. I'm not the new Freud and I have no ambitions to play that game. I'm a Negro from the South with a degree from a second-class medical school, with a wife and two kids whom I'm trying to support and educate in an insane society, and I'll help you all the way to win, but I'm not going to lose with you.

And so it was settled. Dr. Presnell would line up volunteers in the prisoner population for the sacred mushroom project and I would go back to Harvard and get graduate students who would volunteer their time and energy and their nervous systems to take drugs with maximum security prisoners at the penitentiary.

A few days later, I was in my office when a knock came on the door, and I was visited by a graduate student named Ralph Metzner. Metzner had a reputation for being one of the smartest students in the department. He was a graduate of Oxford, an experimentalist, a precise, objective, and apparently very academic young man. He said he had heard

The actual score board is difficult to interpret. The aims of this project were: 1) to help keep men on the street and 2) to help them in constructive contact with each other.

Result Percentages:

January 15, 1963

Percentage of men released who are now on street 73

Percentage of men now back for technical parole violation 19

Percentage of men now back for new crimes 8

If ex-convicts who have had a psilocybin experience in a supportive environment meet regularly after release (these statistics suggest once a month) the chances of their remaining on the street will be dramatically improved.

The Harvard staff members—Dr. Ralph Metzner, Gunther Weil, Dr. Ralph Schwitzgebel, Johnathan Clark, David Kolb, Michael Hollingshead, Kathy Harris, Dr. Timothy Leary—who contributed several thousands of hours each to this work cared deeply and suffered keen disappointments as they witnessed the failures.

But the results summarized in this report offer some consolation that the time shared in psilocybin experiences, and the meetings in and out of Concord were educational and somewhat effective.

about the prison project and he wanted to work with me on it. My first reactions were that Metzner was too academic, too dainty-British, too bookish, too ivory tower, to walk into a prison and roll up his sleeves, and take drugs that would put him out of his mind, with rough and tumble prisoners. Metzner said he wanted to learn how. Then I said, Before you can give drugs and take drugs with anyone else, you have to have some experiences yourself. Are you ready to take mushrooms? He was ready. As a matter of fact, that's exactly what he wanted to do, to have a session.

And so it happened that on March 12, 1961, at my home in Newton, Massachusetts, I ran a session for Dr. Presnell and his beautiful wife, for Ralph Metzner and his girl friend, another graduate student, and Gunther Weil and his wife, Karen. This was the 52nd time I had taken psilocybin with other people. The notes on the session say, This training session was designed to introduce several new subjects to the sacred mushroom experience under supportive circumstances.

The session took place in my study. Since this was an exploratory training session, I told the participants that they should relax, have a good time, be entertained, and learn what they could. Dr. Presnell was the dominating factor in this session. His joking and warm attitude created a benign atmosphere. Each new subject had his spouse or a trusted friend present. After a long period of happy relaxed giggling, the joking became more and more philosophic. Members of the group would leave the room periodically to be by themselves or to talk in pairs, but my study operated as the center for the session. There were no discordant notes, no anxiety, depression, or friction. We were finally getting to the point where we knew how to set up a pleasant session. Each member of this six-person group reported a deep ecstatic, educational experience.

A few days after this session, Ralph Metzner, Gunther Weil, and I drove out to the concrete prison and met with the six volunteers who had been selected by Dr. Presnell. Sitting around a table in a dreary hospital room, with grey walls, black asphalt floor, bars in the windows, we told six sceptical

Summary

Thirty-one inmates of MCI Concord participated in a rehabilitation program combining:

----Psilocybin administered in a supportive setting, and----volunteer contact of inmates after release.

The evidence after two years of operation suggests that the drug is safe, that the experience temporarily provides personal and spiritual insight, and has some effect in keeping inmates out of prison.

A listing of the major mistakes and improvements in method will be found in two publications, one in press and one in preparation.

Convicts gains cited by study.

Insight drugs called boon.

IFIF is the Internal Federation for Internal Freedom, a non-profit organization involving the use of consciousness-expanding drugs.

The supply of the drug has, temporarily at least, been cut off because the medical supervision required by Federal regulation in the administration of drugs for research has been withdrawn.

and suspicious men about an experience that could change their lives.

The first psychedelic session in the prison was well-planned. The first thing we did was to tell the prisoners as much as we could about the psychedelic experience. We brought in books for them to read, reports by other subjects, articles that described both the terrors, as well as the ecstasies of the experience. We spent most of the time describing our own experiences and answering groping questions. We made it very clear to the prisoners that this was nothing we were doing to them. There was no doctor-patient game going here. We would take the drugs with them. We were doing nothing to them that we wouldn't willingly, happily have done to us.

We also made a research contract with the prisoners. We said something like this, "We want to find out how and how much you change during this experience. For this reason, we want you to take a battery of psychological tests before you eat the mushrooms. Then, after three or four sessions with the sacred mushrooms, we'll give you the tests again. The aim here is to find out how you change, like you weigh yourself on a scale before and after you go on a diet. But, after you've taken the tests before and after the sessions, we'll give you the results. We'll go over the tests with you and explain how you were before and how you changed. Nothing in this project is going to be a secret. We've told you everything we know about the drugs before you take them and we'll tell you everything we know about you after you finish your sessions." That sounded like a good deal to them and the following week, each prisoner was administered a long and complicated battery of psychological tests.

And so it happened that on March 27, 1961, in the large ward room in the prison infirmary in Concord, Massachusetts, five prisoners and three Harvard psychologists met for a trip. In the morning I would turn-on with three convicts and the two other prisoners and the two graduate students would act as observers. Then in the afternoon, Gunther Weil and Ralph Metzner from Harvard and the two observing prison-

Backing withers.

But troubles or no, IFIF and the zealous psychologists dedicated to the proposition that widespread use of drugs such as psilocybin will pretty much cure the intellectual ills of mankind are news.

And the group has been asked to vacate the medical building in Charles River Park for lack of medical affiliation.

In addition, the supportive backing at the academic level, principally at Harvard, has been withering.

The latest concerns a study made on the religious impact the drug ingestion made on some 33 convicts at the Concord Reformatory in which eight Harvard psychologists worked on the pilot program.

Dr. Timothy Leary, one of the co-founders of IFIF, wrote the report on the pilot program which began in mid-March of 1961 and continued for almost two years.

Beginning with six convicts a senior investigator and two graduate students, the study came to include 33 convicts and eight psychologists. All participated in the drug ingestion.

In Dr. Leary's opinion, the experiment was an unqualified success. Ingestion

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ers were to take the drug and the rest of us were to act as guides.

We brought a record player, tape recorder, and some books of classical art with us. Otherwise the room was bleak in decor with four couches, a large table, and a few chairs. At 9:35 in the morning the bowl of pills was placed in the center of the table. I was the first one to turn-on in the prison project. I reached over, took fourteen milligrams of psilocybin. Then I handed the bowl to the prisoner next to me and he took twenty milligrams and passed it on to the guy next to him who took twenty and the next man. Then we pushed the pills into the middle of the table and sat back to see what would happen.

I'll never forget that morning. After about half an hour, I could feel the effect coming up, the loosening of symbolic reality, the feeling of humming pressure and space voyage inside my head, the sharp, brilliant, brutal intensification of all the senses. Every cell and every sense organ was humming with charged electricity. I felt terrible. What a place to be on a gray morning! In a dingy room, in a grim penitentiary, out of my mind. I looked over at the man next to me, a Polish embezzler from Worcester, Massachusetts. I could see him so clearly. I could see every pore in his face, every blemish, the hairs in his nose, the incredible green-yellow enamel of the decay in his teeth, the wet glistening of his frightened eyes. I could see every hair in his head, as though each was as big as an oak tree. What a confrontation! What am I doing here, out of my mind, with this strange mosaic-celled animal, prisoner, criminal?

I said to him, with a weak grin, How are you doing, John? He said, I feel fine. Then he paused for a minute, and asked, How are you doing, Doc? I was about to say in a reassuring psychological tone that I felt fine, but I couldn't, so I said, I feel lousy. John drew back his purple pink lips, showed his green-yellow teeth in a sickly grin and said, What's the matter, Doc? Why you feel lousy? I looked with my two microscopic retina lenses into his eyes. I could see every line, yellow spider webs, red network of veins gleaming out at me. I said, John, I'm

of the drugs produced "sudden insight that one has been living in a narrow space-time-self context."

"It's all a game, Doc, cops and robbers—we're such tough guys," he quotes one convict as saying. "We take it all so seriously as though that's all there is to life."

He reports also of frequent mystical insight among the convicts, particularly the death-rebirth experience.

"I felt helpless and wanted to murder you guys who did it to me; then I realized it was my own mind doing it; it's always been my own mind imagining troubles and enemies," he quotes one convict.

Return rate drops.

Over half the hardbitten convicts displayed a sudden swing towards increased religious understanding and need, according to the study report.

More important, perhaps, in the long run is the fact that the recidivism rate among the convicts who have been discharged dropped sharply.

"Seventy-five percent are holding their own against stiff winds and treacherous currents," Dr. Leary says.

The expected return rate of ex-con-



"Three Cows" by Diane Bolton

afraid of you. His eyes got bigger, then he began to laugh. I could look inside his mouth, swollen red tissues, gums, tongue, throat. I was prepared to be swallowed. Then I heard him say, Well that's funny Doc, 'cause I'm afraid of you. We were both smiling at this point, leaning forward. Doc, he said, why are you afraid of me? I said, I'm afraid of you, John, because you're a criminal. He nodded. I said, John, why are you afraid of me? He said, I'm afraid of you Doc because you're a mad scientist. Then our retinas locked and I slid down into the tunnel of his eyes, and I could feel him walking around in my skull and we both began to laugh. And there it was, that dark moment of fear and distrust, which could have changed in a second to become hatred, terror. We'd made the love connection. The flicker in the dark. Suddenly, the sun came out in the room and I felt great and I knew he did too.

We had passed that moment of crisis, but as the minutes slowly ticked on, the grimness of our situation kept coming back in microscopic clarity. There were the four of us turned-on, every sense vibrating, pulsating with messages, two billion years of cellular wisdom, but what could we do trapped within the four walls of a gray hospital room, barred inside a maximum security prison? Then one of the great lessons in my psychedelic training took place. One of the four of us was a Negro from Texas, jazz saxophone player, heroin addict. He looked around with two huge balls of ocular white, shook his head, staggered over to the record player, put on a record. It was a Sonny Rollins record which he'd especially asked us to bring. Then he lay down on the cot and closed his eyes. The rest of us sat by the table while metal air from the yellow saxophone, spinning across copper electric wires bounced off the walls of the room. There was a long silence. Then we heard Willy moaning softly, and moving restlessly on the couch. I turned and looked at him, and said, Willy, are you all right? There was apprehension in my voice. Everyone in the room swung their heads anxiously to look and listen for the answer. Willy lifted his head, gave a big grin, and said, Man, am I all right? I'm in heaven and I can't believe it! Here I am in heaven man, and I'm stoned out of my mind, and I'm swinging like I've

victs to the Concord Reformatory would be between 50 and 70 percent.

But even in his claimed success among the convicts, Dr. Leary runs up against a Doubting Thomas in the Reformatory Superintendent Edward Grennan.

Control questioned.

Grennan feels that study was done without a control and was therefore unscientific.

"These men received an extremely high degree of personal attention," he said. "The psychologists even set up a kind of criminal AA for the paroled prisoners in Cambridge. They made themselves available to them around the clock."

"I feel that the same rate of recidivism might have been achieved if the same concentration and attention were given to any parolee by highly-placed members in any community."

Commenting on the religious aspects of the survey, Prof. Walter Houston Clark of the Andover-Newton Theological Seminary had this to say:

"The student of religious behavior who studies phenomena such as those described in the study cannot but be struck by the similarities to intense religious groups of an evangelistic nature."

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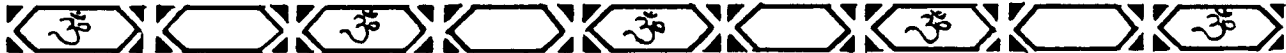
their car and drove back to Cambridge and I got in my car and drove to Newton.

As I rode along the highway, the tension and the drama of the day suddenly snapped off and I could look back and see what we had done. Nothing, you see, is secret in a prison, and the eight of us who had assembled to take drugs together in a prison were under the gaze of every convict in the prison and every guard, and within hours the word would have fanned through the invisible network to every other prison in the state. Grim Walpole penitentiary. Grey, sullen-walled Norfolk.

Did you hear? Some Harvard professors gave a new drug to some guys at Concord. They had a ball. It was great. It's a grand thing. It's something new. Hope. Maybe. Hope. Perhaps. Something new. We sure need something new. Hope.

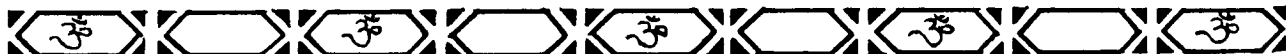
experiences of a few convicts. But enough has been done to suggest creative possibilities in the drugs, the most constructive seemingly to lie in the field of religion and moral regeneration. The use of the substance, however, is very much in the experimental stage, and must have medical and scientific psychological supervision. But its results cannot be ignored by scholars, theologians or leaders of organization.

Such, then, is the latest triumph of the IFIF oriented group. Or are the nay-sayers correct in holding to their deep doubts?



In the evaluation of the dominant moods of any historical period it is important to hold fast to the fact that there are always islands of self-sufficient order — on farms and in castles, in homes, studies and cloisters — where sensible people manage to live relatively lusty and decent lives: as moral as they must be, as free as they may be and as masterly as they can be. If we only knew it, this elusive arrangement is happiness. But men, especially in periods of change, are swayed by alternating world moods which seem to be artificially created by the monopolists and manipulators of an era's opinions, and yet could not exist without the highly exploitable mood cycles inherent in man's psychological structure. The two most basic alternating moods are those of carnival and atonement: the first gives license and leeway to sensual enjoyment, to relief and release at all cost; the second surrenders to the negative conscience which constricts, depresses, and enjoins man for what he has left unsolved, uncared for, unatoned. Especially in a seemingly rational and informed period like our own, it is obvious how blithely such moods overshadow universally available sets of information, finding support for luxurious thoughtlessness at one time, for panicky self-criticism at another. Thus we may say that beside and beyond a period's verifiable facts and official doctrines, the world image "breathes". It tends to expand and contract in its perspectives, and to gain or lose solidity and coherence.

Erik Erikson



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' never been before and it's all happening in prison, and you ask me man, am I all right. What a laugh! And then he laughed, and we all laughed, and suddenly we were all high and happy and chuckling at what we had done, bringing music, and love, and beauty, and serenity, and fun, and the seed of life into that grim and dreary prison.

' The session went on. There were high points and low points, ecstasies and terrors. My friend John, the Polish man, got sick and vomited. We all got pretty thoughtful. Why are there prisons? Why do some men put the warm cellular envelopes of their fellowmen in metal cages? What were we doing here? Then after a few hours, Ralph and Gunther and the two other convicts turned on. Gunther was silly and acting like a hipster and Ralph fell down on the bed and experienced visions of Blakean terror. Two prisoners came and held his hand and guided him through. Dr. Presnell would check in every now and then, walk around the room like a dainty, graceful cat, not saying much, but taking it all in. And the guards came in bringing metal trays of food which we all looked at with disbelief, the way you'd look at a plate of worms or a pot of sawdust served up to you on a plate, and someone said, Man, do they call that food? Since we Harvard people weren't allowed to eat prison food at the expense of the state. Dr. Presnell went out and got milkshakes and sandwiches which we all shared and never tasted food so good.

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Then at 5:00, there was a bang on the door, and we opened it and the guards came in and said, Time is up men. Back to the prison ward. Ralph, Gunther, and I went with the five prisoners back to lock-up part of the hospital and sat there on beds, and smoked, and laughed, and compared notes on what we'd seen, and where we'd been. Then it was time for us to go. We shook hands, said we'd be back tomorrow, and Ralph and Gunther and I walked out of the prison, across the dark yard, rang the bell, and waited until the iron doors opened to get into the guard room, and then across the guard room, through the two metal doors, and down the metal stairs, past the clanking, steaming, old-fashioned radiators, and then we were outside. Ralph and Gunther got into

"As with them, the experience tends to be dramatic; individuals are changed as to their life goals and the experience tends to be individualized, for while some are greatly helped, there are others on whom the experience seems to have very little permanent effect."

Similarities noted.

"However, it may not be without significance that 62 percent of one group, as indicated in the study, reported their lives were changed for the better; for studies have indicated that roughly the same percentage find help in MRA and AA."

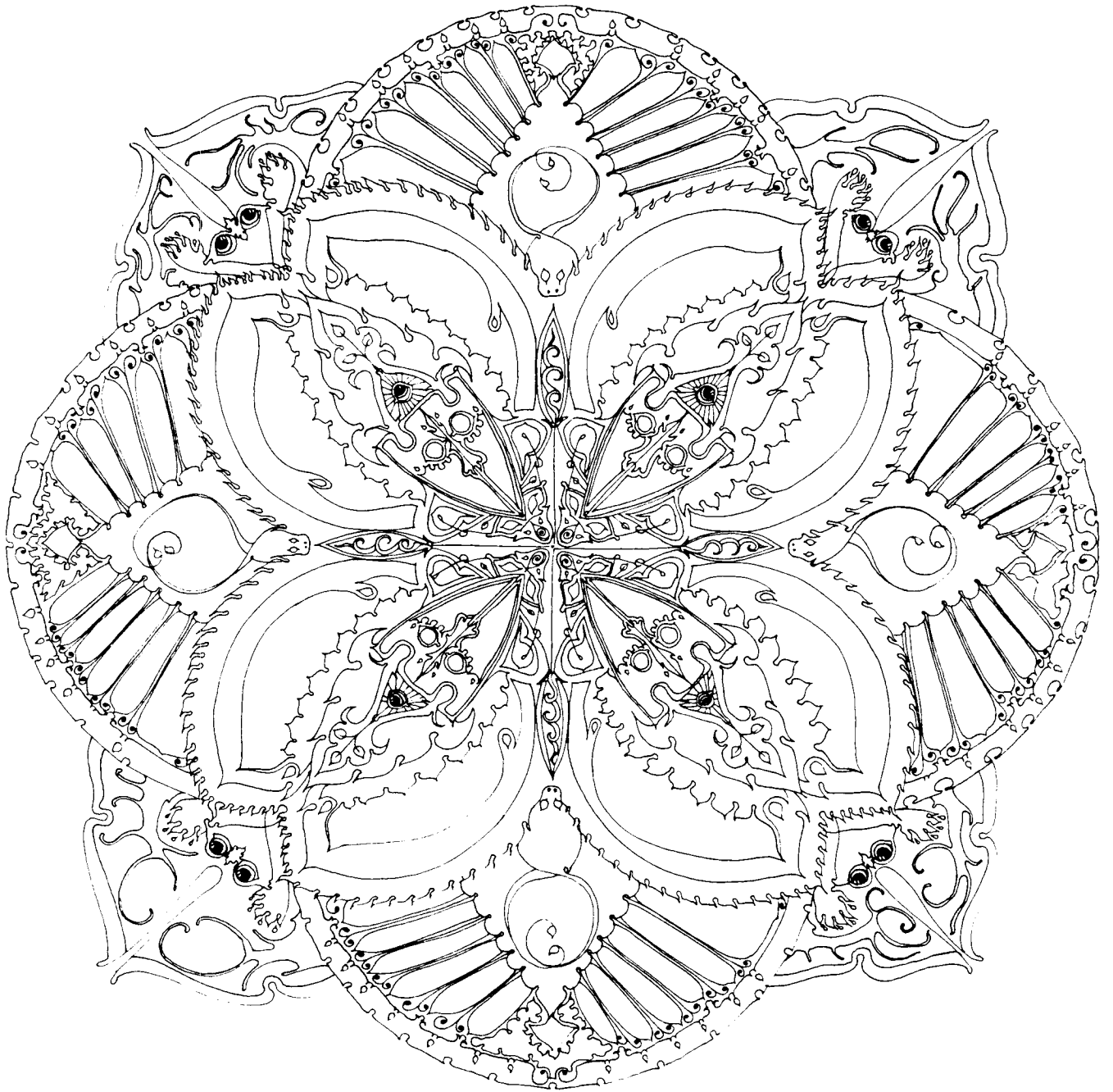
On the basis of the study report, Prof. Clark finds the psilocybin experience to be mystical in nature. As such, and administered with proper setting and preparation, he feels it may release latent religious sensitivities to make possible an experience closely akin to a truly religious experience with a profound change in attitudes and values resulting.

He sees the drugs as useful also in the reform and rehabilitation of convicts (and all others) to more wholesome life aims, a factor which religion could not ignore. But he ends on a note of caution.

"We have been speculating quite freely, basing our speculations largely on the

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Mandala Drawing by Susan Frahm

