

The Unified Field Theory of Psychedelic Integration and Portugal Style Decriminalization

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How non-profit psychedelic drug development harmonizes with efforts to decriminalize plant medicines and legalize psilocybin therapy for all; and how all support broad-based Portugal style decriminalization



BOTH THE LEADERS AND THE community of supporters involved in each strategy noted above are motivated by deep experiences of healing pain and trauma in themselves, their families and communities, and in deeply traumatized people from diverse walks of life: veterans, first responders, victims (and perpetrators) of rape and sexual violence, and victims (and perpetrators) of colonial and patriarchal racism, homophobia and sexism, whether overt violence is involved or not. (Often, perpetrators are themselves victims—and I reflect on my own process of seeing, owning, and renouncing my homophobic and sexist mindset that warped my own soul and inflicted pain by a thousand cuts on my then-partner.) Some degree of trauma affects pretty much everyone on Earth, and if we can all exorcise and heal the demons and trauma ricocheting down the generations, and reconnect ourselves to nature and our deeper selves, then we might have a real shot at peace on Earth, in sustainable relationship to the miraculous living natural world that we are one with. The vectors and dynamics involved in trauma, depression, and addiction are different, but psychedelic-assisted therapy and the intentional ceremonial use of plant medicines hold the keys to deep healing that traditional Western pharmaceutical and therapy approaches lack.

There are different important strategies to destigmatize and integrate these sacred medicines and therapies into the mainstream. Rick Doblin, Jedi founder and leader of MAPS, has the fires of the Holocaust behind him, informing his strategic vision to integrate psychedelics via the U.S. Food and Drug Administration (FDA) approval process, paving the way to a post-prohibition world generally. Sheri Eckert also shares the trauma of the Holocaust, and along with her husband Tom Eckert works closely with victims and perpetrators of domestic violence every day. As architects of Oregon's Psilocybin Service Initiative (PSI 2020), the Eckerts understand the healing power of psychedelic-assisted therapy for addressing the cycle of trauma and abuse. Carlos Plazola, Chair and co-founder of Decriminalize Nature, was able to heal and purge the colonial violence and trauma he and marginalized communities of color deal with every day, through self-medicating with a high dose healing mushroom journey, and disciplined integration work after.

Editor's Note: In this article MAPS Board Member David Bronner, Cosmic Engagement Officer (CEO) of Dr. Bronner's Magic Soaps, shares his views about how psychedelic policy reform initiatives such as Decriminalize Nature and Oregon's PSI 2020 support, rather than interfere, with efforts to make psychedelic-assisted therapies into FDA-approved treatments, and how all can harmonize with the broad-based Portugal-style decriminalization campaigns in Oregon and Washington this year.

Leading therapists involved in FDA-reviewed studies properly caution that high dose psychedelic sessions for psychedelically naïve people without a trained facilitator present can be like birthing a baby without any help. You want to be sure that your midwife or doctor knows what he or she is doing and can help navigate through to a successful outcome. Indeed, even I initially had an uninformed prejudice that the Decriminalize Nature movement was irresponsibly advocating the decriminalization of powerful fungi and plant medicines without guidance on best practices. I gained a better understanding after talking to Kevin Matthews of Decriminalize Denver and SPORE and Larry Norris of Decriminalize Nature and ERIE. I realized how central education and destigmatizing access for marginalized communities of color is to the

Decriminalize Nature project, with its emphasis on set and setting, sitting for each other, and integration work after. I think most people, like myself, had not bothered to read the Oakland Decriminalize Nature provision that passed City Council last June, and which informs other Decriminalize Nature campaigns across the country. It's eye-opening how thorough and deep in different dimensions it is, and I highly recommend reading it at decriminalizenature.org.

Carlos Plazola's critique of those who support medical uses of psychedelics but don't support the Decriminalize Nature movement is his observation that the position could be based on a hidden elitist mindset: that certain cultural (educated, affluent) elites can be trusted to safely and properly engage with psychedelic medicine space outside of strictly medical settings, but that other communities (i.e., people of color) can't. Western psychedelic therapeutic practice ultimately owes its existence to the underground therapeutic movement, which in turn was deeply influenced by the long lineage of indigenous ceremonial plant medicine traditions. Carlos points out that the traumatized populations most in need of treatment often can't afford the cost of therapy, but can grow their own medicine for themselves, their families, and communities; and can create the set and settings needed to facilitate safe, healing outcomes. We have an inalienable right to heal ourselves with the natural plants and fungi that grow in the ground (or for that matter with their chemical cousins that are produced in a laboratory). Communities like Denver which have decriminalized psychedelic mushrooms and like Oakland which have decriminalized all plant and fungus medicines, and other cities that are following the Decriminalize Nature model, are demonstrating (along with closely allied groups like ERIE and SPORE) that educating people about set, setting, preparation, and integration practices, is integral to the movement.

Chicago, New York City, and Washington, D.C. all have strong Decriminalize Nature campaigns that Dr. Bronner's is supporting, to one degree or another, with a special focus on D.C.: Dr. Bronner's DC-based social action team is helping lead and coordinate the campaign there, the same team that legalized cannabis in 2014 in D.C. in partnership with the Drug Policy Alliance (DPA). The Decriminalize Nature D.C. press release (available at decriminalizenaturedc.org) links to powerful written testimonies from: the main proposer Melissa Lavasani, who healed debilitating ante- and post-partum depression with an ayahuasca ceremony and microdosing mushrooms; veterans with PTSD healing their own and their comrades' trauma with ayahuasca, mushroom, and ibogaine therapy such as Marcus Capone (former Seal Team Six and co-founder of Veterans Exploring Treatment Solutions), Jesse Gould (former Army Ranger and founder of the Heroic Hearts Project), and Wylly Gray (former Marine and founder of Veterans of War); and Daniel Carcillo, the former NHL player and two-time Stanley Cup winner who leads the Decriminalize Chicago effort who healed his deep depression from repeated brain injury and childhood abuse with high-dose mushroom therapy, and is now helping heal fellow traumatized former professional athletes and first responders through his Chapter 5 Project.

Importantly, the Native American Church (NAC) has conveyed to the Decriminalize Nature movement the importance of understanding and respecting their historical indigenous prerogative to access peyote medicine, without increasing the demand from non-indigenous sources. The peyote gardens in Texas and Mexico are in a state of collapse, and the NAC has requested that peyote not be specified in any future Decriminalize Nature legislation, and for it to include instead a more general reference to mescaline-containing cacti (which would also cover San Pedro, the preferred mescaline-containing plant medicine for non-indigenous people to work with and heal themselves). Per the advice of the Decriminalize Nature leadership, the D.C. Decriminalize Nature campaign made sure to remove explicit mention of peyote.

As much as I appreciate and support what the FDA drug development track and



Decriminalize Nature movements are doing—and Dr. Bronner’s is financially and organizationally supporting both in a huge way—I am equally if not more invested in seeing a model like what Tom and Sheri Eckert of PSI 2020 are proposing. PSI 2020 proposes to organize a formal, licensed, state-regulated program that would, after a two-year program development period, allow access to psilocybin-assisted therapy in licensed facilities, under the supervision of practitioners specifically trained in psychedelic facilitation. Among its many careful provisions, PSI 2020 would ensure quality training of facilitators by setting minimum criteria for third-party therapist training programs. An example of a stellar training direction would be one laid out by Francoise Bourzat, author of the incredible *Consciousness Medicine*, who bridges traditional shamanic and modern western therapeutic approaches.

Excitingly, PSI 2020 has already convened a Training Program Advisory Board, co-chaired by Francoise Bourzat and Tom Eckert, that will be soliciting rock stars from both traditional and indigenous perspectives to join. Their mission is to advance appropriate criteria to the Oregon Health Authority for the eventual development, approval, and oversight of psilocybin facilitator training programs in the state of Oregon. The Board will represent a diversity of perspectives from experts who are qualified to clarify training standards for the provision of psychedelic services. Francoise, Tom, and the Board are defining detailed criteria for approving training programs, including experiential components and didactic education covering the history of plant medicines, contemporary research, philosophical foundations (indigenous and modern), risk assessment and contra-indication criteria, components of psychedelic therapy, facilitator skills and competencies, ethics and responsibilities, as well as legal, regulatory, and professional considerations. The board will also stipulate tiered training opportunities that yield certifications reflecting the needs of the client population, from the generally “healthy” to those suffering with significant mental illness or addictions. Finally, the Board will address issues like accessibility of services, community building, and other social imperatives.

PSI 2020 also has important regulations to prevent a “big cannabis” style takeover of psilocybin mushroom production and therapy. In this framework, no person or entity may have more than one license for a single grow operation, which would be limited in size to enable a good livelihood for a grower while preventing huge corporate grows. No branding or marketing of the medicine would be allowed. On the service center side, a single license holder/entity can have no more than five service centers/clinics where psilocybin therapy will be administered. So, no “chain clinics” delivering substandard care will be allowed. Carlos Plazola and Decriminalize Nature, for their part, are also building out regulations in Oakland to serve as a model of non-profit driven, community-based healing centers, with low barriers to entry enabling fair and equitable access, while still supporting and enabling a grow, gather and gift model.

The power of PSI 2020 is that it takes the spirit of rigor from the FDA clinical trials and applies it to a therapeutic setting which will broaden its treatment impact. A broad swath of the population, including my mom and most people’s moms, will be most helped and comfortable accessing psilocybin medicine in a professional therapeutic container (the Western analog to the indigenous ceremonial space), and won’t access it otherwise. But the FDA approval route, while resulting in the kind of medical access point we need, will not afford health insurance-covered access to anyone without a narrow qualifying diagnosis (though there is the possibility of self-pay covered off-label use, which would be expensive and only available for the privileged few). Almost every person on Earth can benefit from some deep healing from the struggles of life, and facilitate their personal healing and growth. PSI 2020 would allow affordable access to anyone who might safely benefit and is not contra-indicated (e.g. schizophrenic).

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culture to the point we are at now, with their impeccably designed studies and protocols optimizing the healing potential and outcomes of psychedelic-assisted therapy. But the culture is now primed and ready for the necessary next phase, which is what PSI 2020 proposes—alongside and complementary to Decriminalize Nature.

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I want to address briefly some clinical researchers' concerns about Decriminalize Nature and PSI 2020 potentially interfering with the FDA approval process. Some imagine worst-case scenarios, however implausible, of someone running out of a treatment center into the middle of traffic, jumping out of a building, or otherwise dying some kind of sensationalist death. They worry that if there are negative stories in the media about therapy sessions gone wrong, that will compromise the FDA approval route. This resonates with drug warrior D.A.R.E.-style paranoia, forgetting that it is prohibition itself and the cultural stigma it perpetuates which, by preventing education about set, setting, preparation, and integration, result in the kind of irresponsible and uninformed use of psychedelics which lead to bad outcomes. Decriminalize Nature is all about destigmatizing the cultural attitude towards these medicines, enabling real education to permeate the culture, much like in indigenous cultures. In the case of PSI 2020, no one can access the therapy except at a licensed and supervised facility, under the supervision of a trained and licensed facilitator who ensures proper preparation and integration as well as an optimized setting. While most underground therapists are competent, some are not, and PSI 2020 aims to bring the underground community aboveground and to minimize predatory or incompetent facilitators and facilitation. PSI 2020 also imposes a two-year program development period that is purposely timed to take effect alongside, not before, FDA approval of psilocybin-assisted therapy in 2023. Regardless, while a high-dose psychedelic session can go sideways, harm is much more likely under prohibition than under decriminalization and legalization.

Even more importantly, contradicting these concerns and frankly surprising me and many, for the past 20 years, the FDA approval process has been shown to be relatively immune from politicization. As study after study has been approved, Phase 3 trials greenlighted, Breakthrough Therapy Designation granted, and Expanded Access (“compassionate use”) approved, the cultural stigma that researchers used to face is rapidly decreasing. Even when stigma was much more of a factor 20 years ago, it still did not stop FDA from approving early studies. There is growing recognition that these medicines and therapies can help address great suffering, and researchers like Steve Ross of NYU have publicly communicated that FDA is bending over backward to facilitate MDMA and psilocybin therapy, and neither Decriminalize Nature nor PSI 2020 has been a factor at all with FDA. That said, of course, FDA is a bureaucracy and the risk of politicization is not zero; but lessening the cultural stigma is helpful not harmful via responsible Decriminalize Nature and PSI 2020-style efforts.

One final point here is the example of cannabis in our culture: drug warriors justified their opposition to medical cannabis in part by pointing to FDA approval of synthetic THC (Marinol) as the way we as a society should approve and integrate the medicine. The ongoing and successful effort to integrate cannabis in natural forms outside of FDA pharmaceutical regulation has, if anything, exerted pressure on FDA to approve the synthetic form of THC, which is exactly what is happening with pharmaceutical psilocybin.

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The other major fault line in the movement is the concern over whether Decriminalize Nature efforts may implicitly promote drug exceptionalism around psychedelics and reinforce the stigma associated with the use of other drugs, and whether

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they do in fact lay the groundwork for broader Portugal-style drug decriminalization. Carlos of Decriminalize Nature does not see a conflict between the two approaches. As he eloquently explains, Decriminalize Nature is about destigmatizing and enabling access to natural plant medicines for traumatized communities of color, and other traumatized populations, to heal the underlying trauma that in part drives the epidemic of addiction in the first place. My take is that Decriminalize Nature is making an incredibly important improvement that helps with the bigger picture. By the same logic of drug exceptionalism, the drug policy movement should cease all efforts to end cannabis prohibition in red states which will lead to ending cannabis prohibition at the federal level. Also by this logic, we should stop efforts to move psilocybin and MDMA through the FDA approval process as well, since focusing on integrating the “good drugs” that have incredible healing potential somehow compromises the effort of broad-based decriminalization and ending mass incarceration. In fact each of these crucial incremental steps help the overall project of moving us to a post-prohibition world. More importantly, we need to get psychedelic healing to as many people as possible, as fast as possible, not only to heal and save lives, but also to open them to considering and supporting more rational, compassionate, and sustainable policies across the globe—including ending the disastrous War on Drugs, which is continuing to traumatize people’s lives in communities worldwide, especially people of color.

An example of why a constructive dialogue between the leadership of the movements is so vital recently occurred in D.C., where the Decriminalize Nature campaign and local DPA office missed the opportunity to coordinate with each other about the Decriminalize Nature initiative before it went before the D.C. Board of Elections. The good result, though, is that both the D.C. and Oregon situations are precipitating a conversation between the leadership of the movements which will in turn inform the respective coalitions, and which I’ve been trying to facilitate as well. There are also examples of lack of awareness, support, and solidarity in the Decriminalize Nature and PSI 2020 movements regarding the broad-based decriminalization reform that DPA is championing. The idea that we should only decriminalize psychedelic medicines but not other drugs is just as short-sighted and off-base. Regardless of whether a controlled substance has medical value, addiction is not a crime, and we should get people the help they need without further ruining their and their families’ lives. The deep solidarity work at the national leadership level is well underway, and Carlos and Larry of Decriminalize Nature and Tom and Sheri of PSI 2020 already completely support broad-based decriminalization. Ellen Flenniken, DPA’s Managing Director of Development who has been a strategic ace helping the Drug Addiction, Treatment and Recovery Act (DATRA) effort in Oregon, has confirmed her solidarity with Decriminalize Nature as well as PSI 2020. But the leadership of all the efforts need to communicate effectively within their respective coalitions so they truly understand each other, can help each other, and not undermine each other. Integrating psychedelic therapy and medicine into our culture completely harmonizes with the project of decriminalizing the possession of all drugs, ending mass incarceration, and getting people the help they need, especially in the form of psychedelic-assisted therapy. The local leadership of the D.C. Decriminalize Nature effort along with myself have conveyed that we would love to work with DPA in D.C. in the next election cycle on broad-based reform there.

I believe we are reaching a tipping point in our cultural trajectory, where we can combine efforts in a single measure, and hope the result of this election convinces the different coalitions and funders that we should do so. Oregon is ground zero, with all campaigns and efforts in play. In solidarity with our allies at DPA, the PSI 2020 campaign removed the decriminalization of mushrooms from the PSI measure, given DATRA was moving forward in Oregon and would decriminalize not only mushrooms and plant medicines, but also all other psychedelic allies, along with all other drugs in a Portugal-style harm reduction model. This is a crucial approach, and we should all be in support of it. However, the cutoffs and allowances under DATRA for plant medicines and fungi

are far too low for home cultivation. Further, DATRA is not communicating at all with voters about using plant and psychedelic medicines to heal trauma and addiction, with proper attention to set, setting, preparation, and integration. Plus, DATRA is not guaranteed to win. For these reasons, I support Decriminalize Nature in Oregon as well as nationally, although prefer to win through city council process in 2020 in Portland, like in Oakland and Santa Cruz, even if we need to go to the ballot in Portland next year so that voters aren't confused by the two different decriminalization measures on the same ballot in November this year (although if that happens we'll still rock it).

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In summary, the FDA track, the PSI 2020 effort, and Decriminalize Nature are all about integrating life-saving medicines into our culture, are complementary, and do not interfere with each other. Each is making important progress and serving a different population and need. The broad-based Portugal style "treatment not jail" decriminalization efforts in Oregon and Washington which will end mass incarceration have their compelling logic that addiction is not a crime, and that the racist drug war that disproportionately targets people of color needs to end. But it's a big mistake to think these are separate efforts. We should work to integrate them in parallel, ideally in the same campaign, as there is no better treatment for addiction than psychedelic-assisted therapy. Integrating these medicines and therapy alongside efforts to secure broader access to treatment, health, and harm reduction associated with broad-based decriminalization campaigns makes perfect sense.

We at Dr. Bronner's are supporting all these efforts with substantial financial and organizational resources, and ideally we would like to see a future ballot measure combine broad-based DATRA-style decriminalization with higher cultivation cutoffs for plant and fungal entheogens, allowing for home cultivation and community healing per Decriminalize Nature, combined with a program for licensing therapist training programs per PSI 2020. Our hope is that victory across the board of the different efforts in this election cycle will pave the way to this combined measure in the next election cycle, so that we are efficiently spending movement resources and hitting multiple birds with one (non-lethal philosopher's) stone. And in turn as momentum builds state by state, this will inspire national and international policy changes. Right now, in this election cycle, our hope is we can inspire funders to support all of these incredible efforts with the firepower they need to effectively communicate their respective truths with voters and win. My article here is part of that process, and we're also putting our money where our mouth is: Dr. Bronner's has dedicated \$500,000 to PSI 2020 in Oregon; \$500,000 to DATRA and the parallel effort in Washington; and \$250,000 to Decriminalize Nature campaigns (especially Washington, D.C.) and allied organizations ERIE and SPORE. Decriminalize Nature/ERIE and SPORE, working closely with city officials, community leaders, and other stakeholders in Oakland and Denver respectively, are creating the model for responsible access and integration of entheogenic fungi and plant allies for other cities to follow (Sara Gael, Director of Harm Reduction of MAPS Zendo Project, is also a member of Denver's Psilocybin Mushroom Policy Review Panel). We've also dedicated \$1 million a year to MAPS for five years and \$100,000 a year to Usona for five years to move MDMA and psilocybin through the FDA approval process. Plus, we are giving another \$1 million this year to ending prohibition of cannabis in six red states, setting up the end game at the federal level next year. All these efforts need a lot more funding, and we'd love to see other funders recognize that we should power all these movements and cultural leverage points, not just the FDA approval route, and that all together they will get us sooner versus later to a responsible post-prohibition world, psychedelically healed and opened, and ready to enact collective policies and behavior change that truly can make a heaven on Earth. All-One!

David Bronner is the CEO (Cosmic Engagement Officer) of Dr. Bronner's, the family-owned top-selling natural brand of soap in North America. David along with other family execs cap their compensation at 5 times the lowest paid warehouse position, and donate all profits not needed for business development to the causes and charities they believe in. David graduated with a degree in Biology from Harvard in '95, and by end of that year graduated with a real degree from the school of psychedelic medicine in Amsterdam, heart and mind blown wide open, and dedicated his life to responsible integration of cannabis and entheogens into American and global culture. He joined the board of MAPS in 2015. He also serves on the board of the Regenerative Organic Alliance, which promotes regenerative organic agriculture and ethical dietary choice, to support a more humane, sustainable and fair farming system worldwide (www.regenerativeorganic.org).