



**Circadian
Labs**

Psychedelic Listening Project

Circadian Labs

About Circadian Labs

Circadian Labs is a values-driven strategic consultancy and experience lab that builds scalable, transformational projects across the digital and social landscape, founded by Jeff Leifer. Circadian works with a network of formidable allies committed to building engaged, resilient communities and presenting powerful voices in the fields of regenerative practices, anti-supremacy, and organizational transformation.

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Project team

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Foreword

Dear friends,

These are challenging, inspiring times for those of us interested in psychedelic medicines.

The long wait has finally come to pass as we strive to bring about the profound personal and community healing found within these powerful medicines. We stand on the shoulders of a long lineage of elders, activists, practitioners and champions – dedicated stewards of this important work.

After decades of repression and the harmful “war on drugs”, new resources, attention and policy change are entering into the psychedelic space with potential for significant growth and healing. This new attention has also raised alarm bells in some quarters, with long-time practitioners and Indigenous communities alike concerned that unbalanced growth could result in inequitable outcomes and corporate consolidation.

As we approach this key inflection point, we have an opportunity to first listen, in order to best embed principles of fairness, access, equity and inclusivity into this rapidly scaling movement from the outset. Funders have an important and valuable role to play in rebalancing these power dynamics in service to both relationships of deeper respect and greater philanthropic impact.

With this Listening Project, we aim to intervene in the conversation by foregrounding the voices of advocates and experts across a wide range of perspectives and disciplines. Ultimately, our goal is to offer an investment approach to funders in the psychedelic space built on principles of respect, understanding and balance.

This project – which represents part one of an ongoing initiative – would be impossible without the support of Justin Rosenstein, whose generosity and clear-eyed commitment to principled psychedelic philanthropy has been a vital force for positive change. We also acknowledge the expertise and thought leadership of the team at One Project Foundation, whose work on new economic models and tools for collective action continue to inform our frameworks and ideas for future direction.

Our team at Circadian is honored to have spent time in conversation with underground activists, ethical funders, and Indigenous medicine workers throughout this project and we extend our gracious thanks for their time, wisdom and honesty. We have deep respect for their hard-won perspective and wisdom on what we stand to gain – and risk losing – from the expansion of the psychedelic ecosystem.

Please join us: there is much to learn, and much to do. If we are to succeed, collective wisdom will be needed.

In gratitude, Jeff Leifer, Circadian Labs



About this report





Scope & audience

This report documents and highlights diverse views on the current and future state of the psychedelic ecosystem. It is written for a broad audience but specifically with funders and philanthropists in mind, in order to inform future best practices for those looking to support or invest in the space at this pivotal moment. It identifies gaps in the current landscape and opportunities to make an outsized impact by investing in catalytic initiatives, replicable models, and sustaining communities. It also offers a provocative call to action that invites funders to move beyond the constraints of traditional philanthropy to prioritize models that encourage human flourishing and shared decision-making.

Our goal is to highlight perspectives that are not always included in the mainstream conversation, and surface a set of guidelines and suggestions that represent key aspects of how to steward an emergent ecosystem with integrity. For some readers these will be reminders, while for others this information will be new.

This report is not intended as a thorough overview of the psychedelic landscape, and there are many other important issues in the space that this report does not address. For those looking for additional contextual information on key issues around expanding legal access and delivering care, and the broader psychedelic healing ecosystem, we recommend the 2021 Psychedelic Landscape Report from the Psychedelic Science Funders Collaborative.¹ It is our understanding that PSFC is currently undertaking a comprehensive mapping project which is due to be released in Fall 2024.

¹ *Psychedelic Science Funders Collaborative, Psychedelic Landscape Report. November 2021. Retrieved from: <https://psfc.co/landscape-report>*



Our listening approach

The findings in this report are based on a series of 26 interviews with practitioners, providers, scholars, scientists, thought leaders, and elders in the psychedelics space and adjacent fields. Our goal was to center the voices of people who are doing the work and thinking deeply about the ecosystem, with a focus on relationality and reciprocity.

The list of interviewees is drawn from people who we either knew personally; learned about through conferences, symposia, or professional organizations; were connected with us through our professional or social networks; and who were recommended by the people we spoke with. Some of these people are prominent voices in the psychedelic ecosystem – well-known people that are respected and often called on as experts. However, we placed equal weight on speaking to people who are not the “usual suspects”. This includes a range of people in communities (of various kinds) that are well-respected by their colleagues and social networks for their dedicated work over the many years that preceded the recent widespread intensification of interest in psychedelics.

Given our intention to support funders and potential funders looking to engage in the space ethically and effectively, we also included interviewees who have experience as philanthropic funders or investors of psychedelic initiatives. We also included interviews with people outside the core psychedelic space whose main focus is on alternative economic models and the cultural power of narrative – essential considerations for the future we are hoping to co-create.

The findings that comprise the main section of this report are almost entirely drawn from the interviews, with a combination of synthesis and quotations. As listeners and interlocutors, we lean heavily on direct quotes, both to tell a story and to ensure the wisdom of the people we spoke with is front and center. As researchers and synthesizers we don’t claim to speak on behalf of the people whose decades-long work and collective wisdom have laid the foundation for the work we do today.



Interviewees

Ismail Lourido Ali, JD, is the Director of Policy & Advocacy at the Multidisciplinary Association of Psychedelic Studies (MAPS). Ismail advocates to eliminate barriers to psychedelic therapy and research, develops and implements legal and policy strategy, and supports MAPS' strategy, organizational development, and ethics work. He co-founded the Psychedelic Bar Association and has served in advisory or leadership positions in organizations across the drug policy ecosystem.

Brian Anderson, MD, MSc, is an Assistant Professor of Psychiatry at UCSF School of Medicine and a cofounder of the Sacred Plant Alliance, an interfaith association of churches that offer plant medicine sacraments. He has conducted observational and clinical research on the effects of psychedelics and other drugs for over a decade. His research focuses on the development of novel treatments for psychological distress in patients with serious medical illness.

Susan Beaulieu (Anishinaabe and an enrolled member of the Red Lake Nation) is the Healing Justice Director at the NDN Collective. Her primary focus for the last 7 years has been helping communities, organizations, and individuals understand the impacts of unresolved trauma, and to develop strategies to support healing. Beaulieu was a 2016 Bush Leadership Fellow, is an ACE Interface Master Trainer, and a certified Mind-Body Medicine Facilitator.

David Bronner is the CEO of Dr. Bronner's Magic Soaps, a funder of and advocate for the therapeutic use of psychedelic medicine, and a board member of MAPS and the Regenerative Organic Alliance. He directs Dr. Bronner's resources to support animal advocacy, wage equality, and drug policy reform. He is dedicated to the responsible integration of cannabis and psychedelic medicine into American and global culture.

Osiris Garcia Cerqueda, PhD, is a Mazatec sociologist and historian, dedicated to the study of the history of the Mazatec people and sacred mushrooms. He is the author of the 2014 book *Huautla, tierra de magia, de hongos... y hippies* and has participated in international congresses defending the vindication of traditional medicine, ancestral knowledge and Mazatec territory. His recent work has been supported by the Indigenous Medicine Conservation Fund (IMCF).

Erik Davis, PhD, is an author, journalist, and teacher. His work focuses on the intersection of alternative religion, media, and the popular imagination. Davis has taught courses at UC Berkeley, UC Davis, Rice University, Pacifica, and CIIS. He is the author of *High Weirdness: Drugs, Esoterica, and Visionary Experience in the Seventies* (2019), and *TechGnosis: Myth, Magic, and Mysticism in the Age of Information* (1998) among others. He is the co-founder of the Berkeley Alembic, a center for meditation, movement, and visionary culture.

Ric Escobedo, LCSW, is a clinical social worker who provides services to migrant farmworkers, BIPOC, and veterans in Washington State. He is a Strategy Consultant focused on visionary leadership, healing trauma, environmental and climate justice, as well as Indigenous-led conservation initiatives. Escobedo is a descendant of the Wixárika people of Mexico and the co-Founder of KIERI Healing Sanctuary.

Yarelix Estrada, MSPH, is a drug policy and harm reduction researcher, and community outreach worker. She is the Special Projects Coordinator at NYC Department of Health and Mental Hygiene. Her work is currently largely focused on implementation of the first drug checking research study in New York City with local syringe service programs and overdose prevention centers.

Miguel Evanjuanoy is a human and indigenous rights leader of the Inga people from Putumayo, Colombia. He is an environmental engineer and follower of yagé medicine. Evanjuanoy is a member of the Union of traditional Yagé Medics of the Colombian Amazon (UMIYAC). His work includes building bridges between knowledge systems to strengthen the territorial and political autonomy of Amazonian indigenous peoples.

Oleg Gorelik is a scientist and entrepreneur, with a focus on initiating and supporting projects that are likely to contribute to the evolution and transformation of consciousness. He is the President and Co-founder of Evolve Foundation, which pursues direct philanthropic initiatives and makes philanthropic grants to initiatives that support the evolution of consciousness.

Joe Green is a social entrepreneur and investor who addresses significant challenges by marrying technology with community organizing. He is the co-founder and President of the Psychedelic Science Funders Collaborative (PSFC), a community of philanthropists that supports research on and clinical trials of psychedelic medicines, as well as patient access to treatments. Green and PSFC have collaborated closely with MAPS, including through the \$30 million Capstone Campaign in 2020.

Tom Insel, M.D., is an American neuroscientist, psychiatrist, entrepreneur, and author. He formerly served as Director of the National Institute of Mental Health (NIMH). Prior to becoming Director of NIMH, he was the founding Director of the Center for Behavioral Neuroscience at Emory University. Insel has founded or worked with a number of behavioral and mental health companies. Most recently, he is the co-founder and Executive Chair of Vanna Health, a company dedicated to optimizing recovery for people with serious mental illness.

Sandor Iron Rope Sandor Iron Rope represents the Tetonwan Lakota Oyate and is an enrolled member of the Oglala Lakota Oyate (AKA Oglala Lakota Sioux Tribe) from Pine Ridge South Dakota. He is a peyote ceremonial practitioner and serves as President of the Native American Church of South Dakota and former chair of Native American Church of North America. He is a member of the Board of Directors of the Indigenous Peyote Conservation Initiative at the Indigenous Medicine Conservation Fund (IMCF).

Patricia James is a traditionally trained Cheyenne Pipe Carrier and Priest, informed by mentorship and initiation in multiple indigenous spiritual traditions and healing modalities. She is a teacher, mentor and consultant for the California Institute of Integral Studies (CIIS) Certificate Program in Psychedelic Therapy and Research. Patricia is a Board member of the Women's Visionary Congress and a board member for the American Psychedelic Practitioners Association.

Genevieve Jurvetson is Chair of the Psychedelic Science Funders Collaborative ("PSFC") Founders Circle and also serves as a board member of PSFC. She leads giving for The Jurvetson Foundation, which supports organizations addressing the global mental health crisis. Previously, Genevieve was co-founder and CMO of Fetcher, an AI-powered recruiting startup, and ran marketing for Apartment List, the fastest-growing online rental marketplace in the U.S. She spent the first 8 years of her career in investment banking and investment management, most recently at Goldman Sachs.

Bia Labate, PhD, is a cultural anthropologist and the Executive Director of the Chacruna Institute for Psychedelic Plant Medicines. She also serves as Public Education and Culture Specialist at the Multidisciplinary Association for Psychedelic Studies (MAPS), and is a Visiting Scholar at the Graduate Theological Union in Berkeley. Additionally, she is advisor for the Veteran Mental Health Leadership Coalition and the Soltara Healing Center. Labate has published 28 books about psychedelic plant medicines, shamanism, religion, ritual, drug policy and social justice.

Alnoor Ladha is the co-director of Transition Resource Circle, Council Chair for Culture Hack Labs and co-author of *Post Capitalist Philanthropy: The healing of wealth in the time of crisis*. Ladha's work focuses on the intersection of political organizing, systems thinking, structural change and narrative work. He was the co-founder and Executive Director of The Rules, a global network of activists, organizers, designers, coders, researchers, writers and others focused on changing the rules that create inequality, poverty and climate change.

Benjamin de Loenen is the founder and executive director of the International Center for Ethnobotanical Education, Research & Service (ICEERS), a charitable non-profit organization with United Nations consultative status. ICEERS currently has offices in Barcelona, Spain and Montevideo, Uruguay, and is involved in scientific research into ayahuasca, iboga and cannabis, policy reform activities, educational activities and services related to risk reduction and legal support. De Loenen is also co-director of the Indigenous Medicine Conservation Fund.

Maria Mangini, PhD, is a family nurse practitioner, respected elder in the psychedelics community, and co-founding member of the Women's Visionary Congress. She has written extensively on the impact of psychedelic experiences in shaping the lives of her contemporaries. Mangini was in primary care practice with Frank Lucido MD, one of the pioneers of the medical cannabis movement, for 24 years. Their practice was one of the first to implement the California Compassionate Use Act of 1996, the first state medical cannabis initiative.

Julie Megler, MSN, NP-BC is a psychiatric and family nurse practitioner and co-founder of the Sage Integrative Health, a clinic offering integration of altered states of consciousness and ketamine assisted therapy. In addition to her private practice, she has worked as a nurse practitioner in both an emergency room setting and for the VA. Over the past 10+ years, Megler has taught and written about psychedelic assisted therapy and integration in various academic, international conference settings, and local community outreach settings.

Christiana Musk is the founder of Flourish Trust, a philanthropic organization dedicated to catalyzing the healing and regeneration of humanity and our planet. She serves as Chairwoman of Unreasonable Group and host of the BBC podcast Unreasonable Impact: Food Solutions. Her background spans environmental and social entrepreneurship, investment, nonprofit and foundation leadership. She co-founded Zaadz.com and Green Mountain Energy.

David Nassim is a Chinese medicine practitioner while also being a Co-director of Blessings of the Forest, a Gabonese NGO that supports Indigenous communities committed to the preservation and sustainable development of Gabon's natural and cultural heritage - including the preservation of iboga. Blessings of the Forest also works alongside the Gabonese Ministry of Forests to distribute the plant sustainably. This collaboration is the first worldwide that would adhere to the Nagoya Protocol in the export and sale of a psychedelic substance.

Douglas Rushkoff is a media theorist, writer, lecturer, and documentarian. He is the author of twenty books on media, technology and culture. He is known for his work as a member of the early cyberpunk community, and his thinking at the intersection of technology, society and culture. Rushkoff has taught at the New School and NYU's Tisch School of the Arts, and is currently a Professor of Media Theory and Digital Economics at CUNY Queens College.

Riccardo Vitale, Ph.D., is an anthropologist, ethnographer, and indigenous rights expert with a focus on human rights, rural and indigenous communities in conflict areas, internal forced migrations, resilience and climate change. Vitale is a former adviser of Oxfam America, the UNHCR, NRC, ICG and GIZ, amongst others. Since 2016, he has served as an adviser for the Union of Indigenous Yage Doctors of the Colombian Amazon (UMIYAC).

Hanifa Nayo Washington is an influential leader committed to developing infrastructure for equitable access to legal, safe, and effective psychedelic-assisted healing and wellness for marginalized communities. She serves as Co-Lead Investigator of the national Psychedelic Health Equity Initiative (PHEI) and lead facilitator of the Psilocybin Equity Project with Oregon Psilocybin Services. As a founding team member of Fireside Project, a nonprofit aimed at creating systemic change in the psychedelics field, Hanifa played a crucial role in launching the Psychedelic Peer Support Line, focusing on safety, diversity, and equitable access.

Courtney Watson, PhD, is a LMFT and AASECT Certified Sex Therapist. She is the founder of Doorway Therapeutics, a group practice that provides psychedelic assisted therapy for Queer People of Color, BIPOC, and Queer folks provided by predominantly Queer, all BIPOC clinicians. Watson has trained with MAPS to provide MDMA Assisted Psychotherapy, CIIS to provide Psychedelic Assisted Therapy and Polaris Insight Center to provide Ketamine Assisted Psychotherapy.





Executive Summary



A pivotal moment

The psychedelic ecosystem is at a crossroads. Psychedelic medicine has the potential to accelerate planetary well-being and alleviate the profound anguish of many people suffering from mental illness. The opportunities for broader access to and availability of psychedelic medicines are exciting and potentially transformative. However, without careful stewardship and purpose-driven investment the trajectory of psychedelic medicine could end up reproducing the multi-level problematic outcomes embedded in our current healthcare and economic systems.

More resources are needed in the space, but not just any resources. There is an urgent need for advocates and funders who can imagine a more equitable future for psychedelics, and have the courage to co-create a radically inclusive model. Major initiatives to conduct therapeutic trials and push through changes to state and federal legislation are important parts of the puzzle, and it is vital that this work continues to receive significant funding. However, the challenge at hand is multidimensional. We also need to ensure smaller initiatives and community-based practices are supported and strengthened.

The issues facing the psychedelics ecosystem are embedded in a larger historical, social, economic, and political context that is not specific to psychedelics. This includes settler colonialism, racial capitalism, and dispossession. These histories have determined our present, but they do not have to determine our futures if we take responsibility for the immense political, economic, and health disparities that are their legacy.

Building a better, more equitable future for the psychedelics ecosystem must begin with careful listening to the people who are already serving as community leaders and experts in the space, both from the position of established “above-ground” institutions and respected “below-ground” or community-based organizations. That is the central goal of this report. This includes highlighting voices of people who are highly affected by the world of psychedelics, namely Indigenous peoples fighting to protect their autonomy, protect the land, and honor their ancestors.



Conclusions and guidance for funders

This report aims to help minimize potentially destructive economic and financial practices that might damage or undermine the psychedelic ecosystem and prevent it from reaching its potential for widespread healing and transformation. It also has ambitions to inspire funders and philanthropists to be imaginative about the possibilities of what a post-capitalist philanthropy approach can do in the psychedelic space. The core principles below provide guidance for brave and imaginative funders looking to play a part in developing a more equitable psychedelic system.

Don't reinvent the wheel

Listen to communities, observe and respect what well-established and respected organizations have been doing. Unintended consequences are a real risk: we can do harm if we don't proceed from a space of humility and openness, or take our time to develop best practices before acting. Be aware that a lot of great work is already happening, and funders can catalyze and support this work. Breaking down silos and sharing best practices will support better decisions and better giving.

Consider the power dynamic between donor and recipient

Understand existing imbalances. Strive for balance and symmetry by building a working relationship and respecting the autonomy of people and organizations. Balance accountability with an acknowledgement that producing reports and providing metrics is labor intensive. This approach is not only more fair, it is also more effective.

Consider areas for outsized impact

By identifying and supporting areas where resources will have outsized impact, funders can have catalytic or outsize impact and accelerate positive change in the system. Investing in a diverse portfolio of smaller initiatives along with more established organizations can support the preservation of knowledge and community practice. This includes 'bottom-up' or community-based projects that grow from the community's needs and are rooted in specific contexts.



Key interview findings

The range of topics covered in conversations with interviewees was extensive. From this broad set of insights, a number of key themes and findings emerged. These themes and findings were collated into the high-level conclusions and guidance for funders presented above.

Narratives and storytelling are powerful

Narrative and storytelling are the approaches we use to infuse meaning into our daily lives, disseminate information, and shape a shared understanding. The broad public narrative about psychedelics has shifted from fear-inducing Drug War propaganda to more recent optimistic interest in their immense healing potential. Their journey to public acceptance, policy, and widespread use is a saga in itself, replete with heroes and villains, romances and tragedies.

There are many concerns over the public discourses about psychedelics, sacred plant medicines, psychedelic medicine, integration, legalization, decriminalization, and related domains. The hyperbolic tone of much current discourse has been received with concern in many spheres. However, narratives can be reshaped and new stories can be shared. There is a potential to intentionally craft responsible narratives about psychedelics, and to collectively co-create new stories that would better serve the ecosystem.

Scale is necessary and has risks

Many practitioners, funders, educators and advocates have been watching the recent interest in psychedelic medicine with both excitement and caution. For people who have spent years working with small groups or one-on-one with students or clients, there are concerns that scaling psychedelic medicine through medicalization and commercialization could result in a decline in quality of care, loss of connection to spiritual traditions, or appropriation of community resources.

For others, the opportunity to scale these medicines presents a tremendous and unmissable opportunity to provide potentially-effective treatment to thousands of people experiencing mental health challenges, or even to effect positive individual and social change.

Scaling appropriately is difficult but essential. The way forward might include identifying medicines or therapies that can be scaled judiciously and effectively through targeted efforts and resources. It should also include acknowledgement that some medicines and projects may never scale in a conventional manner, but might still have unexpected catalytic effects.

Indigenous Traditional Ecological Knowledge must be stewarded and respected

The recent revival of interest in psychedelics in the West (and specifically the United States) has led to a specific set of frames for understanding psychedelics – for example as healing tools, as medicines, or as routes to self-discovery. However, many Indigenous communities have centuries-long traditions incorporating plant medicines, which don't always map cleanly onto Western paradigms.

There is a need to respect, integrate, and support the knowledge and wisdom of Indigenous practitioners and communities. This includes integrating, where possible, Indigenous values into contemporary work in the psychedelic space, and recognizing that protecting plant medicines is just one part of supporting and protecting Indigenous knowledge, land and communities. Philanthropists have the opportunity to play a significant role in improving Indigenous access to resources that facilitate their autonomy and wellbeing.

Elders and their wisdom should be supported and centered

Recognizing and honoring our respective cultural histories includes paying attention to the genealogy and original context of different medicines, but it also includes looking to the accumulated wisdom and learnings from non-Indigenous traditions. This ranges from the remarkable discoveries and explorations made during the 1960s psychedelic movement, and the work of the many community practitioners, old-heads, and therapists with lived experience and deep knowledge of the pre-legalization landscape.

However, many elders in the psychedelics space are somewhat reluctant to participate in the commercialization of psychedelics, which borrows from the work they pioneered but without benefiting them or honoring their contribution. Elders have wisdom and embodied knowledge, and have a lot to teach young practitioners. However, there aren't sufficient systems of apprenticeship and knowledge transfer to enable this teaching to happen. There is a need to more effectively support elders (structurally and financially) in a way that acknowledges our responsibility to them for bringing psychedelic practices to this point.

Medicalization and clinical science are only one part of the picture

The benefits of medicalization are clear: replicable and quality-controlled molecules, oversight of providers, safe supply, more safety for immunocompromised or co-morbid patients, regulated quality control of care, and data protection. However, these benefits often come with certain ideologies, including that medical use is the safest type of use and the most important kind of use to foreground and support. This can result in a sense of "solutionism" – that is, the idea that psychedelics are a "plug and play" solution for many kinds of mental health problems.

Medicalization can overshadow other kinds of practice including those that happen in community, over long periods of time, and in a less formalized setting. These other practices are equally important and may have equal or more success in promoting systemic and long-term change for participants and communities.

Non-medical models of care are vital

To employ psychedelics effectively for healing and therapy requires more than the medicine alone. Conversation, integration, group practices and more can ensure that people receive more benefits and have better experiences. The appeal of group processes is manifold. Along with enabling potentially more effective healing and keeping costs lower, group and community-centered processes also push against the individualized model of care that delivers medicine in isolation and treats people as atomized individuals.

True healing is only possible in a context where people have strong social bonds, secure housing, sufficient resources, and resilient communities. So, an effective approach to building the psychedelics space will have to work in conjunction with initiatives to support whole-community wellbeing.

Bottom-up, community-based investments and partnerships have outsized impact

Community-based initiatives like churches, groups, and harm-reduction communities are doing some of the most effective, holistic work in the psychedelics space. These initiatives often have outsized impacts despite their small size and limited resources. However, they often struggle to find funding and support from philanthropists or investors.

Bottom-up projects enable communities to define their own outcomes and shape work that best serves their own needs. Funders looking at the space from the outside can have a hard time understanding the work of these organizations – community-based work is harder to “see” in comparison to more discrete projects like clinical research. But there are exciting examples of successful community-based funding and investments that can be models for future work.

Training and education opportunities should be expanded and ongoing

As psychedelic therapy is increasingly popular and legalized, training and education pathways for therapists and practitioners will need to expand and scale. However, training in psychedelic modalities requires a lot of personal maturation, community development, and understanding about relationships of reciprocity. These values can be hard to capture in a short-form or one-off training course.

Extended programs of mentorship and apprenticeship offer effective ways to properly integrate training and ensure practitioners are experienced and well-rounded. Training and education also needs to support and uplift Black, Indigenous, and other marginalized students and teachers. Effective training should ensure the innovations and intellectual property of people from these marginalized communities are recognized so they can be safe sharing knowledge and information.

Balanced relationships between funders and recipients are essential

Effective funding requires philanthropists to engage in reciprocal, long-term relationships with grantees. It requires learning and a commitment to building mutual respect. This work is not easy, but for potential funders open to the slow work of building trust and undertaking necessary processes with communities, respectful and effective relationships and giving are possible.

There are many existing initiatives that are “easier” to fund, for example where there is a long history and robust infrastructure already in place (such as university research). However, for funders interested in supporting more complex and nascent initiatives, there are a different set of dynamics at play and an opportunity to invest in relationships.

Funders have diverse interests and priorities – there is room for everyone

Funders we spoke to expressed a range of interests and priorities including sharing best practices, magnetizing allies to the psychedelic space, building sensitivity to ethical issues, and deploying catalytic capital.

Philanthropic support can do a lot in the psychedelic ecosystem, but it also pales in comparison to the federal and state dollars that strategic philanthropy can unlock if funders and allies can mobilize effectively. There is an opportunity for the philanthropic community to get more organized and communicative in order to more effectively mobilize dollars.

What's next

This report is just the beginning. The excitement about psychedelic medicine and its potential to aid healing and support human flourishing is warranted. However, this urgency must not be wielded as a cudgel to accelerate commercialization and medicalization without thoughtfulness, care and intentionality.

In addition to funding existing initiatives, more work is needed in the space to build strategies for scale that are ethical and less extractive, tell better stories, and develop best practices. Work is also needed to connect relevant organizations and community-based groups to facilitate conversations around the sharing of best practices, common ground, and opportunities for regional, program-based, or strategy-based partnerships.



Introduction





A tipping point for psychedelics

Psychedelic medicine has the potential to accelerate planetary well-being and alleviate the profound anguish of many people suffering from mental illness. In clinical trials, initial results of psilocybin intervention in severely depressed patients with cancer showed a reduction of symptoms in 80 percent of participants.² Dramatic results have also been seen in other trials, including on the use of MDMA to treat PTSD. We recognize the urgent need for interventions that can effectively respond to the overlapping crises of our time.

Right now, substantial capital and legacy philanthropic models are rapidly determining the winners and losers associated with these critically important medicines. Well-funded initiatives are doing impressive work to verify and quantify the effectiveness and safety of many therapeutic treatments, and push for legalization. Venture capital firms and other large funders are making bets on companies and projects they think have the potential to scale and provide high return on investment, and investments made now are informing the shape of a post-prohibition future.

The opportunities for broader access to and availability of psychedelic medicines are exciting and potentially transformative. However, without careful stewardship and purpose-driven investment the trajectory of psychedelic medicine could end up reproducing the multi-level problematic outcomes embedded in our current healthcare and economic systems. The US healthcare system is not equitable and is unaffordable for many Americans, and privatization and consolidation mean that people pay high co-pays for life-saving medicine. Along with affordability issues, options for treatment and healing that fall outside the Western frameworks of individualized and medicalized care are difficult to access and not often supported by providers or insurers. People of color, Indigenous people, and LGBTQ+ people often feel excluded from or harmed by mainstream medical institutions.

More resources are needed in the space, but not just any resources. There is an urgent need for advocates and funders who can imagine a more equitable future for psychedelics, and have the courage to co-create a radically inclusive model. Careful deployment of capital grounded in relationships and reciprocity can help grow the ecosystem and accelerate good work. Even more importantly, support for community-based initiatives and Indigenous medicine stewards can strengthen these vital aspects of the ecosystem and ensure that growth doesn't come at the expense of the people and cultures that have stewarded the knowledge and developed the protocols on which today's burgeoning psychedelics industry rely.

² Roland R Griffiths et al., "Psilocybin produces substantial and sustained decreases in depression and anxiety in patients with life-threatening cancer: A randomized double-blind trial", in *Journal of Psychopharmacology*. December 2016. Retrieved from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5367557/>

Enabling psychedelic medicine to thrive while avoiding the pitfalls of the modern healthcare system is a big lift. Major initiatives to conduct therapeutic trials and push through changes to state and federal legislation are important parts of the puzzle, and it is vital that this work continues to receive significant funding. However, the challenge at hand is multidimensional. We need to ensure smaller initiatives and community-based practices are also supported and strengthened – venues like psychedelic churches, community circles, and elders councils are places where people find healing and integration and wisdom is passed down. In a disparate ecosystem with stakeholders who often have differing agendas, finding leverage points and investing in areas with outsize impact will be essential. This will help build resilience, strengthen the architecture of the space, and enable aspects of the system to scale with integrity. Systems transformation and system stewardship requires work and resources on a number of levels – we all have a part to play.

As we began this project, it was clear that building a better, more equitable future for the psychedelics ecosystem could only happen through careful listening to the people who are already serving as community leaders and experts in the space, both from the position of established “above-ground” institutions and respected “below-ground” or community-based organizations. As such, we structured this report around a series of interviews with leaders and advocates from different areas of the psychedelic ecosystem, many of whom are not heard enough in funding circles. The body of the report highlights the main themes that emerged in our conversations. We welcome you to read sequentially, or to dive into sections that are most immediately relevant to your work.



A basic premise

We begin this report with a clear acknowledgement that the issues discussed here are embedded in a larger historical, social, economic, and political context that is not specific to psychedelics. The history and ongoing process of colonization and racial capitalism shapes the space from which we write. These structures have ongoing harmful impacts that affect many of the people we spoke with, and their communities. There is a need to recognize how these histories have determined our present. They do not have to determine our futures – if we commit to working collectively to address historic inequities and transform our systems.

The interviews we conducted for this report reflect the expertise of a variety of actors who are in one way or another part of the psychedelic ecosystem. Some are advocates, some are investors, others are philanthropists supporting different causes. We also spoke with researchers, above-ground practitioners, underground practitioners, and policy experts. Importantly, we highlight voices of people who are highly affected by the world of so-called psychedelics, namely Indigenous peoples fighting to protect their autonomy, protect the land, and honor the sacred. While many Indigenous peoples are also advocates of psychedelic science and medicine, there are others who oppose its mainstreaming for a variety of reasons, not least because “psychedelics”, as they are generally understood in a Western context, may pose an existential threat to certain peoples by undermining relationships to land, to plant-relatives, to ceremony, to pilgrimages, and to ancestors.

Given the topic of this report, it is important to set some groundwork around the distinctions between research, science, and medicine. These are often conflated, but we note that medicine as a practice may cover a plurality of activities and above all is something that is practiced “in the wild”, so to speak. That is, the practices of medicine do not have the same standardization or oversight that clinical research does, and vary widely between practitioners, clinics, and hospitals. Research can also cover a range of practices. It often follows a scientific method in that it (a) follows an established method of inquiry (b) is subject to rigorous peer-review and debate, and (c) is replicable. However, not all research fits these criteria. This does not mean it is not rigorous, and certainly does not mean the knowledge it yields is less legitimate or valid – especially when it comes to research concerning very specific populations. We suggest encouraging an expansive and pluralistic approach to building knowledge and understanding that draws on a variety of modes of inquiry and disparate epistemologies. This will paint a fuller picture of what it means to be inter-beings, what it means to be ill and to heal, what it means to be a healer, what it means to be in community, and what it means to be a steward of knowledge.



Emergent themes

An extensive range of themes emerged in our interviews, as would be expected from conversations with 26 people with a broad variety of expertise. They included concerns over accessibility, practitioner/facilitator training, education, problems with scale, underfunded areas, areas for outside impact, integration, grassroots and community-led initiatives, regulation, coloniality and healing, the roles of elders, medicalization, cultural appropriation, reciprocity and relationship-building. In conversations about philanthropy, themes emerged around relationships between donors and recipients, funder concerns, recipient concerns, ethical issues in philanthropy, pitfalls of philanthropy, the promises of philanthropy, alternative economic models, and process vs profits.

We note that while the conversations were wide ranging, they were not exhaustive. For example, opportunities for integrating psychedelics into end of life care and support for early-career researchers are both important topics our interviews did not cover substantially, but which warrant further investigation.

To organize the wealth of insights that were shared, we grouped these insights into a set of overarching themes that highlight what we consider key considerations and concerns for funders, philanthropists, and others looking to participate in the space.



Core principles

Throughout our interviews, a few high-level principles surfaced over and over. We consider these to be useful general guidance to funders and others looking to engage in the space. They relate to the approach funders can bring to the space to ensure they are operating effectively and with integrity.

Avoid reinventing the wheel

The psychedelic space is not new. Many people, communities and organizations have been working for years or decades to develop initiatives, relationships and practices. When entering the space as a potential funder or participant, begin by listening to communities. Observe and respect what well-established and respected organizations have been doing.

Note that unintended consequences are a real risk: we can do harm if we don't take our time and develop best practices before acting from a space of humility and openness.

A lot of great work is already happening. Funders can catalyze and support existing work rather than developing new programs from scratch, which may inadvertently replicate existing work. Breaking down silos in the funding space and sharing best practices will support better decisions and better giving.

Consider the power dynamic between donor and recipient

Relationships between funders and recipients are vital, but often have a significant power imbalance that can overburden recipients or reduce funders' ability to truly understand and respond to recipients' needs. Funders can work to understand existing imbalances. Strive for balance and symmetry by building a working relationship, respect the autonomy and sovereignty of people and organizations, and balance accountability with an acknowledgement of the labor of producing reports and providing metrics.

This approach is not only more fair, it is also more effective. Funders putting money in the space have good intentions – building a more balanced relationship helps ensure that philanthropy is effective and helps contribute to a robust and sustainable space. Many funders already understand this, and want more of a relationship with the groups they're funding.

Consider areas for outside impact

Funders and philanthropists have an opportunity to identify and fill gaps in the psychedelic ecosystem, strengthening important initiatives and catalyzing new approaches. By identifying and supporting areas where resources will have outside impact, funders can accelerate positive change in the system.

This involves assessing how organizations spend their money and what their relative impact is. Investing in smaller organizations can support the preservation of knowledge and community practice. Smaller organizations may also have lower operational expenses, with a higher proportion of their budget going to directly support their mission.

Funding for student research scholarships, rigorous facilitator training, and public education can be extremely impactful and support safe and sustainable growth in the space. Funding “bottom-up” or community-based projects that grow from the community’s needs and are rooted in specific contexts can also be a high-impact opportunity.

There is still an important role for larger organizations, and an ongoing need to fund larger organizations. This can be done as part of a diversified portfolio that also includes a commitment to smaller scale, high impact work. It’s all about finding leverage points that can prompt or accelerate systems change.



Why focus on philanthropy?

The philanthropic sector represents a nimble space where individuals and organizations can deploy resources based on their values and beliefs. Private philanthropy is largely responsible for much of the early research and policy directions concerning psychedelics, and has facilitated leaps forward that would have been impossible with only conventional institutional funding (e.g., government or academic institutions). However, while philanthropists have made life-changing impacts on the world, the institution of philanthropy carries fraught social implications – not least because it is made possible and necessary by extreme wealth inequality. Dr. Martin Luther King Jr. famously pointed to this issue, saying “Philanthropy is commendable, but it must not cause the philanthropist to overlook the circumstances of economic injustice which make philanthropy necessary.”

In the emergent psychedelic ecosystem, philanthropists and donors have an opportunity to recognize the power of community resources and transform modes of engagement toward more relational, community-oriented projects. Philanthropists have flexibility in the way they can engage with and exert influence in a space, which has both benefits and pitfalls. The benefits are evident: if a philanthropist wants to support research and science concerning psychedelics, they can become directly involved. If an initiative needs money or other resources, they can provide it. The pitfalls are often less obvious: people with immense resources are able to set their own agendas, and impose their own priorities on a space. Alnoor Ladha, co-director of Transition Resource Circle and co-author of *Post Capitalist Philanthropy*, remarked in our interview:

“A few people have amassed so much wealth that they're making the decisions for civil society (...) philanthropy is where the agendas and the decisions are being made. It's important that we disrupt the assumptions of that space.”

– Alnoor Ladha

Author and scholar of visionary culture Erik Davis expresses his misgivings about the power philanthropists can wield just by giving money to one initiative over another:

“So if I'm someone who has money, I can go in and I can put my thumb on the scale of the argument? (...) Most people are perfectly happy – joyous – to just push their money to force some complicated social issue in a certain direction because they think they're right. And for me, it's complicated, it's really complicated. There are a lot of issues.”

– Erik Davis

The risks in assuming that philanthropy is inherently a public good is articulated further by Ladha and co-author Lyn Murphy in *Post Capitalist Philanthropy*. They note philanthropy has become an outlet for a small class of high-resource people to give back to society, while also becoming a Trojan horse to

wield capital to push ideologies and political agendas both globally and domestically. While there are abundant examples of philanthropists engaging very intentionally with communities and organizations they wish to support, Ladha and Murphy observe that modern philanthropy is in general “incentivised to create a relational structure of dependency and co-optation to increase its mandate of control, ostensibly for public good”.³

Even as it is embedded in the economic structures that deepen inequalities and contribute to the ballooning social and environmental crises, Ladha and Murphy argue that philanthropy can be a “territory of transition” for “rebalancing wealth, knowledge, and power”.⁴ For wealth to be reappropriated for public good, philanthropy and individual philanthropists must recognize the potential of philanthropy as a tool for social and ecological change.

Modern institutional philanthropy should be recognized as an outgrowth of market capitalism and privatization, economic systems that inherently generate wealth inequality. In this context, philanthropy is increasingly relied on to support the growing needs of the many as resources are concentrated in the hands of the few. Ladha and Murphy propose the concept of post-capitalist philanthropy as a response to the current moment. In our conversation, Ladha expanded on philanthropy’s current context, saying:

“We have to be informed by the current context, right? And the current context of late-stage capitalism rewards a certain type of behavior in a certain type of relationship, largely top-down, hierarchical, command, control, extractive, commodifying, non-relational.”

– Alnoor Ladha

However, until the social and economic structures of society are transformed, we have little choice but to engage with institutional philanthropy as a nimble way to shift money and resources. While waiting for federal and state governments to unlock funds, philanthropy must continue to play an outsized role. As Ladha explains:

“We have to find ways to use this philanthropic capital to change the very rules of the system itself.”

– Alnoor Ladha

Ladha and Murphy’s vision, which we support, is to wield the resources and creativity of the wealthy in the pursuit of a philanthropy with the potential to usher in transformation and collective flourishing. Rather than replicate extractive and colonial structures of the trickle-down charity model as it exists today, we can apply the knowledge of the moment to engage in philanthropy that addresses the root causes and upstream factors contributing to social and ecological problems.

To dismantle the mechanisms that protect the most extractive and harmful parts of the existing systems, there is a need to shift the way we approach the challenges at hand. This shift – in the way we see the world, and the way we are in relationship with others and with the land – can set us on a path towards more relational, equitable ways of being.

“The manner by which we approach is more important than the thing we think we’re approaching. Because the thing we think we’re approaching is a reflection of our inner structures, our belief systems, our socialization, our conditioning. If we see the world through the lens of rationalism, materialism and separation, which is kind of the unholy trinity of capitalist modernity, then everything is a problem to be solved in a mechanistic way.”

– Alnoor Ladha

³ Alnoor Ladha and Lynn Murphy, “Wealth as Territory of Transition”, in Culture Hack Labs. 19 September, 2022. Retrieved from: <https://www.culturehack.io/issues/issue-02-territories-of-transition/wealth-as-territory-of-transition/#note13>

⁴ *ibid*

4

Main
themes





The power of narratives & storytelling

Narrative and storytelling are the strategies we use to disseminate information, shape a shared understanding, and infuse meaning into our daily lives. There are many narratives, stories, myths, and legends that have circulated about psychedelics, with a shift over the past two decades from fear-inducing Drug War propaganda to optimistic interest in their immense healing potential. Their journey to public acceptance, policy, and widespread use is a saga in itself, replete with heroes and villains, romances and tragedies.

Many people have reservations about the public discourses around psychedelics, sacred plant medicines, psychedelic medicine, integration, legalization, decriminalization, and related domains. The hyperbolic tone of much current discourse has been received with concern in many spheres. Recent publications by journalists, researchers, practitioners, and research centers have urged caution and a more nuanced public conversation around psychedelics, and discuss the implications of a bursting of the so-called psychedelic hype bubble.

These concerns were echoed by a number of our interviewees, who expressed interest in the role of storytelling and narrative-building in the psychedelic movement, along with concern over some of the current public narratives, myths, and ideologies. They also talked about the potential of intentionally crafting responsible narratives, and of collectively co-creating new stories that would better serve the ecosystem.

Douglas Rushkoff, media theorist and writer, spoke extensively about the power of storytelling for creating ethical cultures and promoting literacy around drug use, mental health, and policy with respect to psychedelics. His insights are informed by his time spent at the nexus of the early internet and rave culture, when exciting cultural narratives about emancipation and personal freedom sometimes obscured the economic realities of the time and enabled the increasingly libertarian and, later, corporate consolidation of the internet. Rushkoff draws a comparison between the early internet narratives and today's psychedelic narratives, where stories of spiritual growth and transformative healing can obscure the financial and material politics of the moment.



The narratives change the public frame, which then changes the demand and what people want from the [psychedelic].”

– Douglas Rushkoff

"I'm primarily a storyteller, right? I write books. I tell stories, nonfiction stories, but stories nonetheless. And when I look back on the Internet and rave culture, I realize we did not tell a forceful enough story about what was happening. (...) In the early [days of the] Internet we did not realize that we had an implicit ideology in what we were doing (...) I would say likewise, the narratives that we have about psychedelics are still confused and contradictory, and one of the best things we can do, I think, to secure psychedelics' rightful place as a folk-controlled plant medicine is to tell a more rigorous story."

– Douglas Rushkoff

Tropes about psychedelic revolutions and blockbuster drugs are often repeated by advocates in the well-meaning quest for legitimacy. But legitimacy comes at a high cost if it means the cultural narrative around psychedelics becomes untethered from the broader issues and context, such as the ongoing "wars" on drugs and terror, climate crisis and its refugees, and a market-driven healthcare system in which quality health services are increasingly only accessible through out-of-pocket, boutique services for the highly resourced.

Part of the narrative-building process requires an awareness of what ideologies guide the moment, how they intersect and conflict, and how some may be more consonant with each other than others. While the notion of how to "tell a forceful story" might sound nebulous, this is a skillset that many who identify with psychedelic movement or who are affected by the psychedelic ecosystem (e.g., Indigenous and traditional peoples) have honed to an art.

To counter popular but hyperbolic narratives about "miracle drugs", "the next best thing since prozac", or "the revolution in psychiatry", interviewees spoke to the importance of investing in health literacy and education – different kinds of storytelling that can build robust discourse and increase public safety.

"You know, it feels to me like public education, reduction of public fear, and a rigorous explanation of what the true benefits are, could give people some guardrails against not going down the wrong pathway."

– Douglas Rushkoff

Yarelix Estrada, an interviewee who works for the NYC Department of Health and Mental Hygiene advocates for shifting to a narrative that foregrounds meeting basic needs before attempting to heal with psychedelics:

"Especially now, there's this narrative around healing and helping people through psychedelics. I don't think that people can heal unless they have their basic needs met. If people don't have housing and healthcare and healthy food and some level of stability, telling someone that they're going to do mushrooms and heal is really insulting."

– Yarelix Estrada

Many of both the proponents and the critics of psychedelics are in agreement that the substances in isolation are not going to change the world. Rushkoff points out the need to be skeptical of the narrative that psychedelics alone will enable a massive consciousness shift and induce influential or powerful people to become more collectively-minded or shift their political allegiances.

“[When we see privileged people] going to South America, having an intense experience, and then immediately trying to get patents on molecules or to create analogs that can be patented and then scaled, and then own the regulatory bodies so that the normal, more accessible plant medicines are somehow illegal or inaccessible (...) it's scary to me when I see that.”

– Douglas Rushkoff

Telling a better story, a fuller story, and including the multiplicity of possible stories, would enable the expansion of possibilities for improved social engagement, better legislation and regulation.

“That would be where I would put philanthropy money – into storytelling, and doing it in a rigorous way. (...) If we had realized what the real story of the Internet was in the late 80s and early 90s, we as a society wouldn't have so easily surrendered it.”

– Douglas Rushkoff

What follows in the subsequent sections are conversations that reflect different aspects of the stories that populate our lives, both within and beyond the psychedelic ecosystem.



The promise & peril of scale

Scale – the opportunities it presents, and the risks it opens up – was a topic of great interest to many of our interviews. Many of the practitioners, funders, educators and advocates we spoke with have been watching the recent interest in psychedelic medicine with both excitement and caution. For people who have spent years working with small groups or one-on-one with students or clients, there are concerns that scaling psychedelic medicine through medicalization and commercialization could result in a decline in quality of care, loss of connection to spiritual traditions, or appropriation of community resources. For others, the opportunity to scale these medicines presents a tremendous and unmissable opportunity to provide potentially-effective treatment to thousands of people experiencing mental health challenges, or even to effect positive individual and social change.

With interviewees, we discussed a number of key issues we suggest are relevant to funders and other people looking to participate ethically and effectively in the space, including:

- What motivates the impulse to scale interventions and businesses?
- How can we be thoughtful about when to scale, and consider the impact of growth on the quality of a product (e.g., a therapy, a policy, a substance, a business)?
- How can we be thoughtful about the impact of scale on different communities and stakeholders, and ensure scale happens in a way that centers affirmative models of community, contextualization, and intentionality?

The promise

The opportunities of scale are clear. Scaling psychedelic medicine could result in expanding access to interventions, increasing profits, and creating widespread standards of practice. Hanifa Nayo Washington, advocate for psychedelic-assisted healing and wellness for marginalized communities, and Genevieve Jurvetson, chair of the Psychedelic Science Funders Collaborative, both discussed opportunities for scale:

“What are the best practices and how can that be scaled? Because if a particular pilot works, and the methodologies work, we could reach millions of people over time in a revolutionary, wildly innovative path.”

– Hanifa Nayo Washington

“I went through the MAPS therapist training program not to become a therapist, but to experience their training program firsthand and explore ways we could help them scale up.”

– Genevieve Jurvetson

Nevertheless, there are tensions and disagreements even within conversations about scaling socially beneficial interventions like SSRIs and other pharmaceutical treatments which stand to reduce the suffering of a significant number of people. Within the fields of mental health and psychedelics, some researchers are dubious that scaling up production and market demand for substances and attendant therapies will have a meaningful impact on the growing prevalence of mental health disorders, such as anxiety and depression.

However, many people – including a number of our interviewees – have experienced healing and relief from trauma and depression after using psychedelics in a range of settings. Currently, psychedelics are most available to people with the resources to secure boutique therapies, or people who have sought out underground communities or networks. After experiencing positive effects, the opportunity to expand the accessibility of psychedelic medicine to a broader population can seem just and necessary.

David Nassim, of Iboga preservation organization Blessings of the Forest, isn't an advocate for scaling traditional medicines, but recognizes the need to anticipate massive potential demand from people seeking treatment or relief:

“I'm not for scaling. What I am is about saying scaling is [that it's] inevitable. This world is sick. And if you've got a tidal wave of people who have massive depression and anxiety problems, all kinds of traumas, everything like that, [their demand for Iboga] will totally and utterly swamp the Indigenous population in a second.”

– David Nassim

Nassim goes on to discuss that synthetics present an opportunity to expand the availability of Iboga-derived medicines without further enabling the poaching and over-extraction of Iboga from Gabon. Scalable synthetics also offer a way to appropriately bring Iboga's properties into a Western medicalized context, rather than the traditional ceremonial context in which Iboga is used in Gabon. While some people will continue to seek out Iboga in its original context and will have the dedication to build relationships with traditional practitioners, this kind of intensive engagement is not scalable, whereas the use of synthesized Ibogaine (or other synthetics) is.

The peril

Overall, our interviewees had a strong awareness of the potential perils and tradeoffs that can come when a medicine or modality is scaled. Many were wary of the mindset that scale is the best and only way to expand psychedelic therapy.

"It's the economic model – scale itself is the enemy. Since the British East India Trading Company: scale is the whole thing. Scale is the problem."

- Douglas Rushkoff

As Rushkoff suggests, it is possible that a drive to scale is one of the forces that led to today's inequitable economic and medical system. The imperative to scale drives companies to seek profits above all else, leading to the wealth inequality and environmental degradation that affect the lives and health – including mental health – of people around the world.

Building an ecosystem by scaling up a few select businesses, intervention styles, or corporate entities to achieve market domination is likely to raise challenges in the case of psychedelics. As has been the case in the mainstream medical system, large-scale corporate monopolies can create more problems than solutions in the lives of individuals and communities they purport to help, while benefits are directed towards executives and shareholders. The effective expansion of psychedelic therapy will require a broad range of modalities, medicines, and economic models in order to grow safely and intentionally.

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"What is it that we really want? Do we want to put a bandage on? That's scalable. But is it sustainable?"

– Patricia James

"You've got to go to economic models like distributism and subsidiarity. With distributism (...) it's basically worker-owned co-ops, and subsidiarity means no business grows larger than it needs to in order to do its function. So you don't do a national franchise of psychedelic services. You do a distributed network of thousands of them – it's like a lot of bed-and-breakfasts instead of two or three Hiltons."

- Douglas Rushkoff

As Rushkoff suggests, models like distributism and subsidiarity offer ways for psychedelic therapy to expand in a networked way. Of course, a "bed-and-breakfast" model or a cottage industry model has its own challenges: how to ensure high standards of practice; how to ensure geographic and economic accessibility; how to ensure cultural and religious sensitivity?

With greater diffusion and expansion of psychedelic treatments comes heightened risks of safety and charlatanism as more small practitioners proliferate. Conversely, a scaled corporate model may offer more accreditation and consistency but there are attendant concerns about mass-produced telehealth- or app-based therapies that offer little or no human contact.

Widespread standards become important with medicalized services at scale, and accreditation programs are necessary to ensure quality. However, as Rushkoff noted, accreditation is an issue for small care providers, as it "usually favors the large player". Medicalization and standardized accreditation can diminish the role of community self-regulation – the model of community networks who vet practitioners and organizations is difficult to achieve at scale, especially if the industry comes to rely exclusively on top-down regulatory oversight in the form of certificates, accreditations, and other schemas for gaining legitimacy.

Seeking balance

Erik Davis, a prominent writer and theorist of technology, spirituality, and psychedelics, underscored the fragility that may come with scale. He identifies some key tensions for funders and philanthropists seeking to aid the expansion of psychedelic therapies while remaining attuned to the risks of hasty or incautious scaling:

“The problem of scale seems to be one of the biggest elephants in the room, [as] the logic of scale seems to almost inevitably destroy a lot of the valuable juice of a lot of these practices. And yet, if you're not looking at it in terms of scale, what are you really doing?”

– Erik Davis

Davis notes that there are compelling arguments for urgency in expanding the scale of psychedelic medicines in order to reduce mental suffering – if there is a crisis of mental health, we must respond in kind. However, he cautions that this crisis can then be invoked to justify rushing to scale before accounting for the potential unintended consequences:

“It justifies cutting corners. It justifies saying, well, we might not really have time for a full therapeutic session – let's just get him the ketamine or whatever. It justifies the loss of quality.”

– Erik Davis

Davis also acknowledges his positionality as a proponent of the mystical aspects of psychedelics, which may be incompatible with scale and complete medicalization.

“Because I believe that the healing and the power and the value lie precisely in these unquantifiable elements that have to do with synchronicity, that have to do with intimate relationships, that have to do with the challenge of travel, with the long apprenticeship required to actually engage these traditions intellectually, interpersonally.”

– Erik Davis

Davis's words were echoed in various forms by a number of interviewees who have had deep and long apprenticeships in the space, or have dedicated themselves to deep and extended community-based work. These practices are difficult to scale, but if we abandon them we risk diminishing the field and ignoring our responsibilities to each other and the traditional stewards of these medicines.

In a talk at Psychedelic Science 2023, Jamie Wheal discussed the risk that, in an effort to cut corners and quickly scale up psychedelics, we will see the rise of telehealth, A.I. services, and other cost-and-time saving approaches from monopolistic companies that could undermine the potential benefits of psychedelics in mainstream healthcare and wellness. Experienced practitioners or underground guides with attention to quality and care will be out-priced by these scalable services that offer little or no in-person attention, are offered by practitioners with minimal training in working with altered states of consciousness, and perhaps leave the therapy or integration to an AI-generated interlocutor accessible through an app.

“**When we try to do any of this work at scale, all of our solutions prove much more brittle. The more we do it in a distributed, local fashion, through networks of people who know each other and personal recommendations, the more resilient the entire system is.”**

– Erik Davis

If psychedelics teach us anything, it is to slow down, be present in the moment, and reflect on the lessons made explicit when our thought patterns and behaviors are perceived from a radically different state of consciousness. If we act with urgency while in a state of crisis, we are likely to come up with short-sighted solutions. Instead, we might pause to consider thinking beyond short-term achievements and toward the kind of social context we want psychedelics to be offered in. As Alnoor Ladha summarizes:

"I'm not against solutions, but solutions as the reactions to the [current] context are always going to create more problems. Whereas alternatives rooted in deep inquiry and awareness of the limitations of the shadow of the current operating system can liberate us to live and be outside of the dominant culture."

– Alnoor Ladha

The way forward will likely include medicines or therapies that can be scaled judiciously and effectively through targeted efforts and resources. It should also include alternatives, some of which may never scale but might have unexpected catalytic effects.

"It's almost like I don't fucking care about scale. I want to support good people who are doing really good work. That may have an impact directly, it may have an impact indirectly, it may have an impact in the world of the spirits. It may have an impact in some unpredictable future – a mutated social framework where tiny little pockets of genuine value somehow magnify in unpredictable ways."

– Erik Davis

In the psychedelic space, the rush to scale has significant risks: scale can disrupt tradition, prevent reciprocity, and ignore local needs. It also presents a major opportunity to expand access to important medicines if undertaken carefully, respectfully, and appropriately.



Stewarding Indigenous Traditional Ecological Knowledge

This section considers how philanthropists and funders can support Indigenous communities and the stewarding of Indigenous Traditional Ecological Knowledge. In our interviews with Indigenous leaders and practitioners, we heard two things clearly. First, that the knowledge that comes from ritual and ceremony is much more than the substances that may facilitate altered states. Second, that stewarding Indigenous knowledge and supporting Indigenous peoples and their connections with the land are one and the same. If approached with care and openness, philanthropists have the opportunity to play a significant role in improving Indigenous access to resources that facilitate their autonomy and wellbeing.

Integrating plants, lands, histories and practices

The recent revival of interest in psychedelics in the West (and specifically the United States) has led to a specific set of frames for understanding psychedelics – for example as healing tools, as medicines, or as routes to self-discovery. However, many Indigenous communities have centuries-long traditions incorporating plant medicines, which don't always map cleanly onto Western paradigms.

Ric Escobedo, a clinical social worker who supports Indigenous migrant laborers and who is himself descended from the Wixárika people, emphasizes the importance of “bringing the ecological traditional knowledge that has always been there” to his work in communities, particularly in discussions about how to incorporate psychedelics into programs for mental health treatments:

“The word from Native people is ‘remembering’ and bringing back our ceremonial ways. And that was lost because of colonization. (...) When you come together [in ceremony], there's healing that happens, but there's also this practice of doing the traditions of those tribes, and there is this connection with the land and the plants that is not just information and teaching. It's humans being informed of what to do and how to do it.”

– Ric Escobedo

As Escobedo describes it, coming together in community and in communion with the land is fundamental for social and cultural renewal. Sacred plants may be part of this, but they are integrated

with culture and community practices rather than abstracted as standalone. We heard that focusing specifically on psychedelics, for example in conversations with funders or psychedelic advocates, is often unengaging or actively discouraged, especially if the conversation is not aligned with community values. Riccardo Vitale, an activist anthropologist who works with UMIYAC, an organization of five indigenous groups from the Colombian Amazon rainforest, was explicit about the problem with this narrow focus:

There is a problem: that many times in the psychedelic world, philanthropy comes in one direction – that is, it focuses on the medicine. They [funders] want to help the sacred medicines prosper... and talk about 'psychedelic medicine'. We say 'that's good, but that's your own knowledge system'. We have a different knowledge system that we're using and we don't use the word 'psychedelics'."

– Riccardo Vitale

Vitale goes on to say that if psychedelics bring attention to the needs of Indigenous communities, then that is overall a positive movement. However, he and other interviewees were clear that funders and philanthropists must recognize that protecting plant medicines and their attendant practices is just the entry point. A more appropriate frame would be to go beyond psychedelics and medicines. Rather than talk about spirituality, there is an opportunity to explore spiritualities – a plurality of discourses – and understand that these spiritualities are supported by restoring the environments, strengthening Indigenous guardians, strengthening and empowering the role of women, the transmission of knowledge between elders and youth, supporting inter-ethnic gatherings and multicultural work. As Vitale describes, this means that funding or philanthropy can't be effective by focusing on psychedelics alone:

"Our work, it's integral. All aspects of life need to be strengthened if communities are to prosper spiritually, politically (...) we need individuals to be healthy, families to be healthy, and communities to be healthy. And if communities are to be healthy, what do they need? First of all, they need security in their territory (...) and so that is what we want our allies to understand: that when you want to strengthen the medicine you always have to focus on that, to think integrally."

– Riccardo Vitale

This need for integral thinking is echoed by others we spoke to. Miguel Evanjuanoy, an engineer and human rights leader of the Inga people (Putumayo, Colombia), explained that protecting the plants means protecting the land and its people, and ensuring the voices of the people is foregrounded:

"To talk about sacred plants, in this case to talk about yagé or ayahuasca, is to talk about the [Indigenous] peoples, the different peoples that for thousands of years have been practicing, protecting, and caring for the sacred plants within our territories. To what end? For cultural survival. Because it is the only tool we have; it is our spiritual guide. We walk the processes as we build them. And that is currently at risk... [often because] there is no participation [by Indigenous peoples] in spaces where they talk about the Indigenous peoples, or about their medicinal plants. I think we have been talking and hearing about the topic of reciprocity which has caused a lot of damage for the Indigenous people."

– Miguel Evanjuanoy

Evanjuanoy went on to describe the limitations of a Western view of psychedelics in which medicine is central and disconnected from its context. As he explains it, in the Indigenous context medicine is also the connection with the territory, with mother earth, and with the care of mother earth. "This is also the path of Indigenous people, to take care of life and survive in time and space" he says.

Restoration before reciprocity

Reciprocity is vital to building equitable and balanced relationships, but as Evanjuanoy implies, invoking the idea of "reciprocity" without deeper commitment or engagement is unfortunately commonplace, including in the psychedelic space. When psychedelic advocates or others invoke reciprocity as a gesture towards supporting Indigenous peoples, it is vital to first consider what conditions are required for reciprocity to be possible. As Evanjuanoy describes it, reciprocity is challenging within a fundamentally unequal system shaped by conflict and colonization:

"To talk about reciprocity is to know how to listen and respect sacred plants. After 50 years of internal armed conflict [in Colombia], plus approximately 530 years of invasion and pillage that the Indigenous people have lived through [in the Americas], we cannot talk about reciprocity. Right now there are no reparations, there is no physical, mental, or spiritual healing towards the territories."

– Miguel Evanjuanoy

The view of reciprocity as an exchange is a flawed concept, says Evanjuanoy. It is not giving unrestricted access to medicines and traditions. Instead, "Reciprocity for us Indigenous people means stewarding and caring for mother earth so that humanity can survive". True reciprocity, Evanjuanoy explains, must come from a place of respect, not from a desire to extract.

Before attempting to invoke 'reciprocity', there must be respect. This might include respect for and awareness of the long history of oppression against Indigenous people, as well as respect for the land. Without reparations and restorative justice, there is no possibility of a symmetrical relationship. Instead, what is often left is a transactional approach: the well-resourced give money and the Indigenous prepare the plants and conduct ceremonies for them. Evanjuanoy explained how this one-sided relationship concerns him deeply: if the people and the lands are not respected, there is no reciprocity, and this puts everything at risk: the plants, the territories, the people, and the knowledges:

If we are going to talk about reciprocity, they should listen to us. Reciprocity from a place of respect. That is what we want. To share what we know and listen to each other — listen to us. That is reciprocity. To understand what is happening with Indigenous peoples. Right? We do that with mother earth; we know how to listen, to respect the territories. That mentality of 'reciprocity-in-exchange-for' is harming society worldwide."

– Miguel Evanjuanoy

"At this time, the medicinal plants are again at risk. Because we don't know if they will be able to continue healing or if they will be the cause of a conflict for society (...) there are those who want to industrialize them, medicalize them, globalize. And we cannot be sure that this plant will continue to be a healing plant."

– Miguel Evanjuanoy

These lessons have been learned before, with the adoption and exploitation of other sacred plants like nicotine (tobacco), cocaine (coca), and opiates (poppy). We heard from interviewees that prospective funders and psychedelic advocates must continue to learn: learn to listen, learn to respect, and from there find ways to support the stewardship of the peoples, the land, and its medicines.

How to support Indigenous/Native American/First Nations/Alaska Native peoples

Philanthropists and organizations necessarily engage with other communities in their efforts to effect positive change. However, Indigenous social worlds are layered with complex systems and frameworks about which many non-Indigenous people may have little understanding. This difference in worldview is not innately problematic, as long as potential funders acknowledge their gaps in knowledge and there is sincere effort to develop a respectful relationship.

Indigenous communities are necessarily entangled with the social and financial interests of non-Indigenous people, as Garcia Cerqueda points out above. To be in “right relationship” when it comes to engaging with Indigenous communities around psychedelics and sacred plants requires careful consideration and respectful engagement, and an understanding that communities are not monolithic.⁵

Diverse communities with diverse histories and worldviews

Within Indigenous communities, there are often significant differences in opinion around psychedelics and plant medicines. Susan Beaulieu (Anishinaabe and an enrolled member of the Red Lake Nation) of the NDN Collective emphasizes the divergences within Indigenous communities, especially when it comes to so-called psychedelic medicines:

“In our communities everyone's not on the same page in believing that psychedelics can be a really helpful tool for healing. And so we're still trying to figure out some of those pieces, like where is their interest?”

– Susan Beaulieu

As mentioned by Miguel Evanjuanoy above, accounting for the forms of historical oppression and violence that Native American, First Nations, and Indigenous peoples have experienced is integral to any efforts for supporting peoples, their territories and traditions. Many Indigenous communities have labored in resistance for hundreds of years to keep their ceremonies, traditions, and languages alive amidst policies that not only made them illegal, but tried to systematically erase them through forced education and other means. Because of this, Beaulieu finds the skepticism of “these are not our medicines” a very reasonable response by many people. As she puts it: “there's this real holding on to these are our ways. We don't need other ways. We have our ways, sort of thing.”

“Some elders are very traditional (...) They'll say “those medicines aren't from here”, right? So there's a lot of education that needs to happen and it needs to come from Native folks to say “I experienced this and it helped me”. That's how it gets vetted...you got to ask the right questions. You got to know your community and you got to have the right partners.”

– Ric Escobedo

⁵ We acknowledge the vital contribution of RiverStyx Foundation and its co-directors Miriam Volat and Cody Swift in this arena. RiverStyx's work to support Indigenous communities and establish the Indigenous Medicine Conservation Fund and has informed our thinking and shaped the space.

"I know that there are some tribes that have a long history with working with peyote through the Native American Church and other things like that. But I also know when talking with some of those folks, even in those groups there's some strong resistance, like 'we only use peyote, we don't use any of the other medicines', right?"

...it needs to come from multiple places: IHS (Indian Health Service), policy, and really pushing our sovereignty as tribes to be able to self-determine how we want to heal. And so there's a lot of different angles from which we need to be working. But we're still at the point right now of just having conversations about whether this is even something that, for the most part, tribes want to move forward collectively."

– Susan Beaulieu

For funders and philanthropists, the complex and historically-situated nature of these conversations means that self-awareness and commitment are needed to respectfully and create supportive relationships in the space. As philanthropist and advocate Christiana Musk describes, humility and openness is essential:

"It takes a lot of courage to say, 'I don't know anything about you or your culture or who you are, where you're coming from. Will you help me learn? I would like to learn and listen. I would like to learn and to know you.'"

– Christiana Musk

Of course, it is not the onus of Indigenous people to teach outsiders, and many Indigenous communities in the US have had their trust broken before. However, committing to listen to and learn about a people, their history and culture is a powerful form of respect. As Musk notes, if one has the courage to embrace this process with humility and respect, it can open up new worlds and relationships. When it comes to providing practical support that honors Indigenous peoples and their expertise and stewardship, we heard that philanthropists and investors alike are considering the current models of giving and investment, and whether they are fit for purpose.

The challenges and opportunities of bringing Indigenous medicines into a Western context

A key consideration for some of our interviewees was the delicate issue of how to incorporate medicines from non-Western lineages in a way that is culturally appropriate and medically safe, while also opening pathways for people to respectfully engage with the traditional contexts of the medicines if they are called to it. For David Nassim, who works to protect the rights and wellbeing of Indigenous peoples who traditionally work with iboga, traditional knowledge is key for ensuring safety outside of clinical practices:

“Basically what we want to put forward is that the traditional knowledge associated with these medicines is about harm reduction, especially in the long-term understanding of these medicines and how they affect people.”

– David Nassim

Nevertheless, the growing number of people interested in accessing medicines in small-scale community context can create its own problems. The sudden flood of people coming to Indigenous communities seeking treatment and bringing their own expectations, projections, money and other resources has been known to cause jealousy within and between communities. In addition, the lionization of certain practitioners or communities can also engender new tensions and can essentialize people and communities only as proprietors of a certain kind of Indigenous knowledge. As both Nassim and Osiris Garcia Cerqueda mentioned, sudden increases in wealth often do not get distributed evenly around families and communities. In addition, a few of our interviewees expressed the problems with giving money to specific individuals, emphasizing the importance of investing in communities and ensuring there is a local infrastructure for dealing with an increase in resources.

“That's the reality of it. I think it's [increased attention to iboga] going to have some benefits and I think it's going to have some disasters (...) I think that they're going to help a lot of people and they're also going to harm a lot of people.”

– David Nassim

In this case, harm refers not to just adverse or challenging experiences for medicine users, but also harm to peoples and communities affected by the widespread interest in psychedelics, especially when plants or resources are appropriated without permission. Sandor Iron Rope (enrolled member of the Oglala Lakota Oyate), President of the Native American Church of South Dakota, brought up the centrality of interconnection and consent:

“My early learning of the psychedelic movement was just that: another colonial mechanism to just take what you want without asking (...) there was minimal Indigenous awareness to this movement, and then they started to advocate for policy change without consent of the stewards of these medicines.”

– Sandor Iron Rope

“For Lakota people, our worldview is Mitákuye Oyás’in, which is all things are related, all things are connected, and it's the spiritual path. And so looking at this psychedelic movement... it brings curiosity to me in a sense, but it also brings concern to me in their quest to utilize plant medicines without prior consent.”

– Sandor Iron Rope

Osiris Garcia Cerqueda spoke lucidly to these conflicts around consent, appropriation, and the divergent priorities of Indigenous communities and outsiders. We quote him here at length:

“And what is the interest of these foreigners, these scientific people – the chemists, the pharmacists, what do they care about? Well, they tell us they want to cure depression, anxiety, stress, all of these illnesses which have their origin in the cities. Which have their origin in a very accelerated rhythm of life, a rhythm of life that tires you and harasses, that demands more money, that demands that you are successful, and that demands you to be more productive. So, they say let's cure these illnesses. And the Mazatec people can say ok, that is fine, because the medicine that is given to us by nature is good, it can heal this suffering. But, the questions that we often ask ourselves is what do we gain from this?

What do we gain as Indigenous people? And this question does not have to do directly with money, but with recognition, with valuing our ancestral knowledge, with respect to nature, with respect for our identity. Showing respect by not just using us – not only saying that Indigenous people have protected these medicines and this knowledge. No. Indigenous people are much more than that. We are history. We are protectors of bioculture. We are protectors of nature. We are resistance against a world that seeks to go too quickly, to accelerate more and more. We are resisting that.

... And we have found ourselves in many conflicted situations, because many foreign people come to us and ask: what do you think if we start a clinic? Oof – a clinic of what? or for what? or for who? And this brings a conflict because we don't realize it, but it is very subtle the way these other knowledges – academic, political, scientific – start once again to try to dominate the wisdom of Indigenous and original peoples.”

– Osiris Garcia Cerqueda

As Garcia Cerqueda explains, the Mazatec people conceptualize a 'clinic' as a place with medical doctors in white coats who cure diseases like colds, diarrhea, fever, and give you prescriptions. In this context, the idea of a traditional Mazatec healer working in a clinic like that makes no sense – it would be a total break from the Mazatec cultural schema.

“And so we find ourselves against this dilemma: ok, now the foreigners are interested again in our medicines – sure, they were always interested, but it's only that now in this new wave, in this process of the psychedelic movement, that now we have pharmaceutical and academic sectors seeking them.”

– Osiris Garcia Cerqueda

A topographic map with white contour lines on a dark green background, showing a mountainous terrain. The lines are more densely packed in the upper right and become more widely spaced towards the bottom left.

“

**What do the Mazatec people want?
Do Mazatec people have a
representative? Who speaks for the
Mazatec people?**

**Indigenous representation is a very
difficult subject. A delicate and
prickly subject. We must be very
careful when we speak of
Indigenous representation.”**

— Osiris Garcia Cerqueda

These communities find themselves too often approached by people and organizations whose priority is entirely financial or entirely within the Western medical paradigm. The people who come to the Mazatec wanting to start a clinic may have little or no interest in repairing what Garcia Cerqueda refers to as the “epistemological and academic violence that for many years has been present in original people’s, not only the Mazatec”. In many cases, research, pharmaceutical development, and academic publications do nothing to serve communities like the Mazatec, and in fact may be a threat to traditional practices and epistemologies. In this context, it is understandable that for many people and communities, attention from investors or philanthropists may be cause for concern rather than celebration.

Considerations for philanthropists and funders

Throughout our conversations, we heard a number of very concrete considerations that are necessary prerequisites to engaging with Indigenous communities in supportive and committed ways, which we list below. These considerations may be a useful starting point for philanthropists and funders looking to work with Indigenous communities.

- Respect Indigenous autonomy, sovereignty, and leadership
- Enable local elders, leaders, and youth to control the dialogue and help set policy direction, respecting that many Indigenous peoples have complicated and traumatic histories with “outsider” medicines and programs
- Understand that the “right” questions and solutions cannot be effectively imposed by outsider stakeholders (e.g., funders, policymakers, researchers), but should be led from community members themselves. Communities know what is important for their wellbeing.
- Don’t assume that all Indigenous peoples are interested in psychedelics, or in a specific plant medicine
- Many Indigenous peoples are open, accepting, and interested to learn, as long as a “psychedelics” agenda is not pushed onto communities.



Supporting elders

As psychedelic-assisted therapies are increasingly mainstreamed in the US, it can be easy to gloss over the decades of expertise and stewardship carried out by underground practitioners in the space – many of whom are still alive and working. During the many decades in which legal use of psychedelics was prohibited, practitioners and enthusiasts continued to develop new therapies and protocols, work with and learn from the traditional Indigenous stewards of various plant medicines, and document experiences and best practices.

Recognizing and honoring our respective cultural histories includes paying attention to the genealogy and original context of different medicines, but it also includes looking to the accumulated wisdom and knowledge from non-Indigenous traditions. This ranges from the remarkable discoveries and explorations made during the 1960s psychedelic movement, to the work of the many community practitioners, old-heads, and therapists with lived experience and deep knowledge of the pre-legalization landscape.

Since the re-emergence of research into psychedelic therapies in the 2000s, some long-time practitioners and elders have felt excluded from scientific research, policy conversations, and investment. We heard from a number of interviewees who are elders in the space, and others for whom the wisdom and expertise of elders has been essential to their training or mentorship.

Maria Mangini, a long-time researcher and practitioner, raised the issue of how best to support the elders who took great risks over the years to work underground in a highly stigmatized and criminalized social context:

“I am old, and I know a lot of old people. A lot of psychedelic pioneers and elders are a little bit reluctant about [the new popularity of psychedelics]. They see the advent of commercialization as something they don't want to be in support of, or they may just see commercialization as something which will not profit them. They may think of their accumulated wisdom as a kind of intellectual property which they don't want to just give away.”

– Maria Mangini

Patricia James, another elder in the psychedelics space, reflects on the need to make sure elders are taken care of after so many decades of renegade work with little or no pay. While some people and companies stand to make millions from psychedelic ventures, these elders do not see the financial benefits of the psychedelic “renaissance” yet continue to quietly provide space and the wisdom of experience.

“If you've been in the underground, you generally don't have a retirement plan or health benefits sometimes, or you didn't make the money people are making now – there wasn't the opportunity – or you could have been thrown in jail. Especially as elders get older, how do people support themselves, and how does the community support them? It's the same issue as, if one is using traditional medicines, whether there is reciprocity to the origins, you know, I mean true reciprocity. I think it's coming to greater attention.”

– Patricia James

In discussing how best to support the work of elders in the space, Mangini and James both pointed to the work of the Women's Visionary Congress. The WVC, which Mangini co-founded and James serves on the board of, expands the inclusion of women in critical discussions about psychedelics in mental health and community wellness.

James explains that recently, the WVC has shifted part of its work towards a focus on elders for the reasons elucidated above. She also acknowledges the need to archive and protect the knowledge stewarded by older people in the space, in order to maintain cultural memory:

“There's been an opportunity cost for paying attention to this subject for the last 50 or 60 years when it was forbidden and dangerous, and it had personal costs, and professional costs, and financial costs. And a lot of the people who are really the elders in this realm are not in a good way right now.”

– Maria Mangini

“With the Women's Visionary Congress, one of the things that's on our radar is that as people need some financial help, how to facilitate that. An option is if they've contributed art or literature, to chronicle it, and pay people for their time.”

– Patricia James

James goes on to note that fundraising and grant allocation are an important part of this picture. Both Mangini and James point out that the WVC operates on a small budget and generally without the robust financial support enjoyed by some bigger or more mainstream psychedelic institutions. However, despite its small size and low profile, James explains the WVC and other elders' councils offer invaluable expertise and input to other practitioners and the community at large:

“Now, as people have experienced the council, a lot of people want to have it or want access to it. In the field there's age bias, and the elders are the ones with the experience. ... I think what I've been noticing is our presence [elders] is beginning to have the ripple effect and people are seeing the value – and you know, we'll see how it unfolds.”

– Patricia James

From some other interviewees like Julie Megler, co-founder of the Sage Integrative Health clinic, we heard a recognition of the value and expertise of elders in the space, and a respect for what it means to develop expertise through decades of practice:

“Even with all the experience I have, I don't call myself a psychedelic therapist. And maybe there's something in my own humility that's to work with there. But also because of my humility, I really honor the amount of work that peers of mine have done as guides before, really kind of putting it out there.”

– Julie Megler

As Mangini puts it, elders with deep experience have a lot to offer newer practitioners or the space in general, if only we can find mechanisms to accept and incorporate that knowledge, compensate for it, and approach each other with a commitment to reciprocity.

“A subject area that interests me the most is: how is the mature wisdom of people, who are actually qualified by experience and personal development, to be really good support for people who are delving into unusual realms of consciousness? ... How are we going to put the people who need to learn that together with the people who have it?”

– Maria Mangini



Medicalization & clinical science

“This whole idea that you're going to take a medicine once and then be healed forever? I mean, it's about an ongoing relationship.”

– David Bronner

“If there's one takeaway, it's that research is great, universities are great, but if you're focusing only on the medical use and the therapy, you're missing a massive gap. That's really the one takeaway.”

– Ismail Ali

“I'm kind of disconcerted by the way in which the medicalization of psychedelics has been so successful that it seems to be, at the moment, largely drowning out some other stuff.”

– Maria Mangini

Clinical research, medicalization, and ensuring equitable and affordable access to high-quality substances and providers are vitally important in building an effective psychedelic ecosystem. However, an approach to psychedelics that exclusively focuses on medicalization and clinical science risks excluding other practices and frameworks, and may contribute to intense hype the substances alone cannot live up to.

Almost all of our interview participants expressed concern over the narrative that substances themselves are key to addressing a global mental health crisis. While the consensus was that psychedelics may be useful tools with a variety of roles in health, wellness, and spiritual growth, there has never been a greater need for well-informed and thoughtful discussion on the tensions that inform the moment.

Discussions that frame psychedelics as “innovative” or “novel” medicines is only telling a partial story. There are novel aspects to contemporary therapies that involve psychedelics, but there is also a rich history of psychedelic use in clinical, religious, ceremonial, and personal contexts.

"It is not true that we don't know anything about them [psychedelics]. It is not true that there's no context or background. We have 50 years in contemporary Global North modernity, plus 500 or more beyond that."

– Ismail Ali

Overreliance on the "novelty" argument by psychedelic proponents is partly a result of the need to onboard new advocates and allies in the push for legalization via medicalization or other health-oriented models. Benjamin de Loenen, founder and executive director of ICEERS, spoke to the difficulty of ensuring that the narrative of medicalization and legalization don't override all other stories:

"The momentum of 'we're almost there, you know, if psychedelics are the new substances and the revolution is here', also really generates a situation where a lot of the funding is about wanting to get to that finish line [of medicalization]. (...) I know several funders who have decided to really focus everything on that, and I think that's what makes it more difficult."

– Benjamin de Loenen

It is undeniable that drug development and medicalized use hold great promise to help many people, and nobody we spoke to would advocate for stopping this trajectory altogether. However, we heard significant discomfort with the intense focus on medicalization as the most efficient, accessible, and safe way for psychedelics to be legally integrated into our society.

A number of interviewees encouraged funders to consider a different story around the future of psychedelics, and to re-conceptualize how we understand the "psychedelic renaissance" beyond the boundaries of individualized, drug-assisted care. Tom Insel, former Director of the National Institute of Mental Health, and Ismail Ali, Director of Policy & Advocacy at MAPS, both proposed a more expansive approach to psychedelic philanthropy:

"So after everyone goes and gets dosed in a medical setting...where do you think they're actually going to do their integration and follow-up for the next several years? It's in communities. How do we support that to be healthy in the long term is a question I think we all should be sitting with more."

– Brian Anderson

"Part of what I've been proposing is that we stop thinking about a kind of medication-driven model and we move to something very different in the mental health space. I still think medications are vital, they're essential. They save lives. My problem has been that this field has become absorbed with the idea that there's some pill, some magic bullet that's going to solve a very complex set of problems. And I think it's happening again in the psychedelic space that people just think if we just get the right pill, get it through the FDA and get it out to people, make sure they have access, it'll in some ways solve the mental health crisis. It won't."

– Tom Insel

“The mainstream conversation with psychedelics is super-focused on medical use and mental health, which is cool because we need support there, but it kind of sucks up the air in the room. There's this kind of fixation that because there's a treatment option that may be available, that justifies the research, the development, the investment, the engagement, and that's like, 'let's bring those into the healthcare system'.”

– Ismail Ali

The benefits of medicalization are clear: replicable and quality-controlled molecules, oversight of therapists and medical providers, safe supply, more safety for immunocompromised or co-morbid patients, regulated quality control of care, and data protection. However, as the interviewees acknowledge, conversations around these benefits may also come packaged with certain ideologies:

“People are given this story, that medical use is the safest type of use, which I would push back against as a framework, as I don't think that's necessarily true (...) There's this sense that we have to do this medical thing first, and move toward what I've been calling the 'design of a post-prohibition world'. Like, how do we actually design a post-prohibition world? (...) The thing that I'm much more interested in and I think is much more needed is an affirmative and magnetic vision, which requires looking beyond just medical use.”

– Ismail Ali

Ali articulates an important but complex point: there is a tension between people who want to design a “post-prohibition world” and those who just want to make it legal to access psychedelics for medical or therapeutic use. Some people want both, while others want to medicalize certain substances while keeping a social framework of prohibition for other substances (including for example any psychedelics that are not FDA-approved, or non-psychedelics that were historically demonized in the ‘war on drugs’). Even among the post-prohibitionists, there are tensions around how different groups of people envision a society in which certain drugs are legally available, and how that availability would be regulated.

Outside of medicalization and clinical science, there are many other issues and initiatives that warrant attention and investment, ranging from the Indigenous and traditional concerns described in earlier sections to the need for diverse treatment providers and access options. Julie Megler, co-founder of Sage Integrative Health, and Hanifa Nayo Washington, co-lead Investigator of the national Psychedelic Health Equity Initiative (PHEI), both reflect on the need to support other areas that are essential but underfunded:

“This entire psychedelic field is missing something when it says that the drugs [alone] are saving people's lives. We already know its the container, and the context, and the set, and the setting. (...) It isn't just the [drug] that can be profound and transformational, but how you're held, and the community doing the holding.”

– Christiana Musk

"What we're seeing in the psychedelic space is that all the funders are wanting to go towards the big names and focus on the least risky areas (...) drug development and research is where everybody's willing to put their money, and then probably a third thing is education programs. But retreat centers, clinics, and various other things are too risky [for investment] because they still rely on things becoming legalized first before they can be successful. So it [investment in safer areas] makes sense from a risk perspective, but still it prevents smaller organizations that are actually doing really amazing work from getting up and going."

– Julie Megler

"...in the philanthropic space right now there's more hesitancy and reservation and people wanting particularly MDMA to go through the FDA process and be approved [before funding other initiatives]...But then if we just wait until that happens we might miss an opportunity. So, how do you fund things to create capacity so that when MDMA does get approved, that things are already set up and ready?"

– Hanifa Nayo Washington

Along with the risk of excluding other practices and initiatives through a narrow focus on medicalization, we heard from interviewees that delivering psychedelic therapy exclusively through the US medical system would exclude and alienate many people that could otherwise benefit from these therapies:

"I think the medical system, and therapists or medical professionals in particular, underestimate how much trauma people have received from the medical system. There's a sort of fantasy that once therapists and psychiatrists can offer psychedelics, everyone will go to them. That is definitely not true. (...) A lot of veterans will never go back to the VA again even if they had psychedelic therapy. I see a lot of philanthropists who want to focus on the thing that feels more sure and less politically sketchy, which is medical use and therapy. Everyone wants to help people who are sick, great – love it. But they're not recognizing the huge swath of people that are still using it in an illegal context."

– Ismail Ali

"I find it so funny that we're going to like plug into this US medical system that is the most ineffective, inefficient, expensive model in the world to then create affordable access to care. So I'm like maybe let's try some other paths... it's hard for me to imagine a world where the US medical model is the most affordable path to care."

– Genevieve Jurvetson

Interviewees also discussed whether a medicalized model is feasible for practitioners to provide at scale, let alone accessible and affordable.

“On the one hand, I want this to be as accessible and available to everyone as possible (...) a complicated factor is that psychedelic therapy takes a long time, and oftentimes it requires someone with a certain level of skill to be able to be present with the person. To be with people who have so much pain and to hold space for that and to help process with them and to love and care for them – that's not easy work. And so I do think the people who are providing services should be fairly compensated for what they do. And that's often at odds with capacity, because there's not a ton of money everywhere to give free services to people.”

– Yarelix Estrada

For these reasons and many others, the use of psychedelics outside a mainstream medical context will continue to be most accessible, affordable, or appealing for many people.

By expanding the narratives around psychedelics, there is an opportunity to make space for other stories and modes of practice to flourish.

As Courtney Watson, therapist and founder of Doorway Therapeutics, puts it, psychedelics can have inspiring potential if we look beyond the desire for a quick fix:

“You're asking people to make a huge shift in their practice, right? Because therapists are used to billing in 45 minute, 50 minute chunks. Now you're asking them to do an 8-hour session. It's a very big reorientation of how people practice.”

– Joe Green

“The idea that psychedelics are still the... it's the pill, right? It's “I take the thing and then everything gets better.” As opposed “I take the thing and then see the ways that I can participate in things getting better and then act on it”

– Courtney Watson



Non-medical models of care

A medicalized model and individualized psychotherapeutic approaches are generally considered safe and appropriate for Western contexts. In the previous section, we heard from interviewees about the limitations of letting medicalization and clinical science dominate the discourse. Outside of a traditional medical setting, other models of care are available that support (and have supported) people's healing and community-based care.

In our interviews, we heard significant enthusiasm for group therapy and communal processes, which can offer more integral approaches and even more opportunities to scale care ethically and cautiously.

"I think that there's great benefit to doing one-on-one sessions with psychedelics, absolutely. But I also think there's even greater benefit in working with these medicines in the collective, in groups, in ceremony...and yet in the bills that are being pushed in policy, that's not even on the table."

– Susan Beaulieu

“One of the things that I care a lot about is delivery of care. The drum I'm pounding all the time is group therapy. I believe it might be the only scalable approach to making an offering that is economically viable for people. I also think it offers better healing [in many cases]. ... So, we have just granted Heroic Hearts and Bendable money to bring veterans to Oregon to get treated legally in a group context.”

– Genevieve Jurvetson

Genevieve Jurvetson went on to explain that she sees the group model is an ethical, sustainable, accessible model at scale, and therefore a high priority for her as a philanthropist:

“As a philanthropist, I always think about where I can take the dollars that I have, which are not tremendous, and really push something forward that would otherwise not happen, or is not going to happen in a timeline [that’s optimal]. In talking to all these service centers in Oregon, no one was doing group therapy and no one had [near term] plans to...And I said, “what if I gave you the money today? Could we get this going?” (...) This is the thing that gets me jazzed up, because it wouldn't otherwise happen without philanthropic dollars.”

The appeal of group processes is manifold. Along with enabling potentially more effective healing and keeping costs lower, group and community-centered processes also push against the individualized model of care that delivers medicine in isolation and treats people as atomized individuals.

“The current model is like, ‘let's isolate the alkaloid or let's have your ketamine experience or MDMA experience’ in a neoliberal, individualist kind of lens on how healing happens.... [but] healing happens at a much more communal scale. And we need to address that communal infrastructure problem, the dearth of spaces for deep relationality.”

– Alnoor Ladha

We heard from interviewees that there are a range of models to turn to in considering how best to approach group treatment or collective healing. Funder and advocate Christiana Musk points to the practices of Indigenous communities as models for healing in community.

“What is so beautiful to learn from the Indigenous models of healing that incorporate medicines is that they're really like medicine-assisted community healing. That's what I'm finding really integral to how we learn from these lineages and shape containers in society that are community-based (...) And how do we introduce those kinds of containers into modernity, postmodernity, where we've broken down the structures of community?”

– Christiana Musk

However, these community-based processes have long been under threat from Western medical paradigms and legal restrictions on long-standing Indigenous practices. Susan Beaulieu of NDN Collective remarked on the pressing concern that traditional ways of working and healing can be quashed in the rush to medicalize:

“You see how all of this is unfolding within this dynamic of scarcity and hierarchy and othering (...) And we see how not only are groups of people being left behind, but really powerful ways of working with the medicines are also being left off the table, like ‘this is the way that the medicines can legally be worked with and all of these other ways which Indigenous peoples have used them around the world for thousands of

“When we look at the social science around mental health, there's a broader context that needs to be addressed. These things are not separate — having strong, resilient communities and economies, having bioregional assemblies, having mutual aid networks, having community-run foundations and centers. These are as important as the psychedelic work will be.”

– Alnoor Ladha

years isn't right'. So again, this sort of pitting the Western view versus Indigenous, the individual versus the collective"

– Susan Beaulie

Many of the interviewees we spoke with suggested that psychedelics are most effectively employed when they are considered in the context of broader wellbeing, and within community. A number of interviewees expressed that communal, and in particular religious models, were not only more feasible at scale but also provide lessons from which medicalized models can learn. Hanifa Nayo Washington of the Psychedelic Health Equity Initiative emphasized that religious models offer opportunities for people that would never be able to seek treatment within a conventional medical setting.

"When I think about philanthropy and the religious and ceremonial model, I think that there's a lot of people that will be supported through those channels that would never go into a clinical or medical setting. And there's a lot to learn from those practices and those leaders in those models. I just wonder about more of an interest in protecting and supporting ceremonial and religious use of psychedelics from the philanthropic community."

– Hanifa Nayo Washington

David Bronner, funder of and advocate for the therapeutic use of psychedelic medicine, also emphasizes that religious and church settings are models of care that are more readily scaled than individual therapy:

"These churches that are nonprofits and delivering medicine in a frame that's not profit maximizing are important to support. And I think ultimately they can really scale. There are a lot of mental health services where that's already true – like AA meetings, or pastors giving you counseling – and I think that's just much more economical."

– David Bronner

At the root of some of these conversations about non-medicalized models of care is a fundamental question about the purpose and uses of psychedelics. Is healing and mental health the priority, or should psychedelics be available for other purposes and other kinds of growth? As Tom Insel, co-founder and Executive Chair of Vanna Health and former Director of the National Institute of Mental Health, asks:

"Are these medicines for people who have a diagnosis or are they opportunities for people who are involved with personal or spiritual growth and are looking for assistance in their own journey?"

– Tom Insel

Ultimately, Insel notes that medicalization and legalization remain important to ensure these medicines can be available at scale and covered by health insurance.

“I just worry that if these remain Schedule 1 compounds without any FDA approval of medical value, we may have lost a huge opportunity (...). I think as a field it's going to be important to sort of choose a lane and I've chosen for the most part to go down the medical lane. But I absolutely appreciate that there's another lane there that ultimately may be just as important.”

– Tom Insel

However, Hanifa Nayo Washington notes that it is not a binary choice between medicalization and spiritual/ceremonial use. A “one lane or the other” mentality can lead to confusion and perceived competition between the medical model and the community-based model, which is ultimately unproductive:

“There's this values challenge happening ...around the medical model and the community-based or ceremonial retreat-type model, about which one is more important, the efficacy of each of those. (...) I have observed philanthropists wanting to have opportunities to marry those two things together. But there are not really a lot of examples of that, and there's also a feeling like they have to sort of pick sides. And I think that can be dangerous honestly.”

– Hanifa Nayo Washington

Areas for outsided impact in this domain include funding and fostering non-medicalized models of care in preparation, facilitation, and integration. As several of the interview participants explained, while medical use can provide life-saving services to many people, it is typically biased toward the well-resourced and well-insured. Even with scaled-up offerings of medical or therapeutic services, many – if not most– people will fall through the cracks. Interviewees were more interested in a complementary agenda that puts “psychedelics into a framework that already exists” in non-medicalized contexts and ensures there are other models available for use in the community, either as a complement to or an alternative to medical use.



Bottom-up, community-based investments & partnerships

Some of the most impactful but under-the-radar work in the psychedelic ecosystem is happening at the level of community-based programs and other bottom-up initiatives. For funders looking to find leverage points or places to have outside impact, investing in community-based work offers an opportunity to support the grassroots of the ecosystem and strengthen the communities where so much healing and learning takes place.

We heard from interviewees that many of the initiatives in this space are nimble, effective, and dedicated to working within and for their communities. However, there are a number of considerations for people looking to support or invest in this kind of work, not least of which is the need to understand what it means to invest in communities. This can be a challenge from the outside, as Maria Mangini explains, especially for funders who may not have experience in these existing grassroots communities themselves.

“Being able to immerse yourself in community is incredibly rich and inspiring. But if you haven't had it, it's difficult. It's like, try to talk to somebody about what love is, you know? If you don't already know, talking to you about it isn't going to help much.”

– Maria Mangini

Osiris Garcia Cerqueda points out that the idea of “community” is often abstracted and romanticized. This can make it harder to work with actually-existing communities and community-based initiatives, which have multiple and overlapping priorities and social complexities.

“The idea of community is very romanticized. We think that community means everyone, and that's not true. There is a community since there is a family that is in agreement. There is community where there are friends, neighbors, fellow countrymen, kids, who have the awareness to belong. That's the commonality. Where there is one person who is ethically recognized by its community and who invites them to get organized, to have a conversation.”

– Osiris Garcia Cerqueda

We heard from a number of interviewees that supporting community-based initiatives means taking a humble approach and truly listening to communities, rather than imposing an agenda from the outside. This includes ensuring that policy conversations and program direction-setting happens at a local and embedded level, and foregrounds the voices of people on the ground.

“I think the reflection is: what are the local sources? If you're in Oregon, talk to Oregonians. No one wants to talk to a Californian about what to do in Oregon, right?... They're going to want to learn from trusted folks locally. How do we support those conversations happening in a way that the local community experts feel safe to come talk and the local policy people know who to even ask?”

– Brian Anderson

Along with ensuring policy and program development is created at a local and community-based level, we heard from Benjamin de Loenen and others that initiatives and leadership should also arise from and represent existing communities and community priorities, rather than imposing organizational structure in a top-down way.

“Harm reduction strategies [must be] rooted in those communities of accountability instead of like a board that nobody really feels represents them (...) Creating an organization is not going to create a community. Maybe creating a community is going to generate an organization. But that's completely different, though, because it becomes an instrument of a community that is aligned around something. You know they've aligned around what they most value in life.”

– Benjamin de Loenen

“You've got to have those folks engage in the program development piece. That's how any successful program is sustainable. It has to be bottom-up, not top-down. You have people that are actively engaged and doing things for that community, right? But sometimes a lot of the assessments that come through, it's a cookie cutter that's been used somewhere else and they're not asking the right questions, then that's not being distributed correctly.”

– Ric Escobedo

As Yarelix Estrada argues, the most effective and efficient way to ensure these strategies are rooted in communities is to provide resources and education for organizers who are already active so they can use their experiences, connections, and local wisdom to serve their communities:

“Fund people that are in the community as community organizers, that work in different spaces to give education around psychedelics to communities that they serve or that they're part of (...) have a local community leader or a local community organizer that has that community trust come in and say, 'there's this thing that exists that could be helpful.'”

– Yarelix Estrada

However, funding community organizers does not mean coming into a community and pushing an agenda from the outside, but rather facilitating educational efforts to empower the communities to make their own, well-informed decisions. As an example, Hanifa Nayo Washington she talks about a pilot project that partners with Black churches for psychedelic support:

“Utilizing and working with some of the Black churches as partners to help teach people and help unlearn some of the impact of the war on drugs and fold this into the church communities... it's revolutionary to utilize and leverage the Black church in that way. Because a lot of people in the Black community have, in my opinion, a lot of bias, prejudice, fear, right?... [if] someone from the congregation might be able to bring in their pastor or the preacher into that experience and be the ongoing support for them, that is huge.”

Churches and other religious or spiritual congregations have a major role to play in the psychedelic ecosystem. While local church congregations can offer space for education and support, there are also churches that use psychedelics as sacrament and serve as an impactful space for community-based psychedelic work. Psychedelic use in church or congregation contexts plays by a different rulebook than therapeutic or personal use (i.e., non-medical, non-religious use, recreational or playful use) with its own policy settings, benefits and limitations. In our interviews, we heard that psychedelic-oriented churches and congregations represent organic communities of practice and accountability.

Religious communities and congregations have a shifting policy landscape to navigate, which means mutual support between different communities and congregations has become key. Brian Anderson, Assistant Professor of Psychiatry at UCSF School of Medicine and co-founder of interfaith alliance the Sacred Plant Alliance, speaks to the importance of having associations of churches that can learn from each other and also agree on some protocols and guidelines:

“There are actually really solid things you can do to make your [church or religious] organization more financially solvent regarding tax benefits and other things that help you bring in support for your organization that we can share amongst different communities now. And everyone doesn't have to reinvent that wheel. We can create some consensus regarding medical screening, and safety screening for people who are not medically trained.”

– Brian Anderson

Because of the legal or regulatory limbo in which many church and religious or spiritual congregations find themselves, mutual support is often difficult to achieve in an above-ground way. This makes the role of church alliances and learning networks even more important.

“The principle behind it is supporting, peer support, supervision, intervision – like we do in psychotherapy – but for people who have felt like they have to hide themselves and haven't been able to avail themselves of collaboration. What a gem to offer the field [a peer association]. If those structures could be more widely accessible and people knew more about them who were in the ceremonial world, more than the ‘I'm here to treat your depression or your alcoholism’ sort of frame.”

– Brian Anderson

Anderson goes on to discuss the complexities of what it means to be “regulated”, and the importance of promoting self-regulation and non-medical regulation among communities. There is no reason different models of regulation and mutual accountability cannot sit alongside more above-ground practices.

“There's one thing that's come up a few times in my engagement with healthcare professionals, government regulators, is that I see there's this tendency to say if it's not clinical and licensed, it's not regulated. And I've been trying to push back with this kind of a different cultural understanding that just because it's not licensed doesn't mean that it's unregulated. And I would hope that the field and key stakeholders start to have some appreciation where maybe they haven't had the opportunity to spend 8 months in Brazil learning from those communities or maybe they haven't been in very structured NAC- type work. But they can understand that there's a regulatory capacity among spiritual communities. If they have the time and space to develop, they can come above ground, they can be transparent and accountable and that non-medical regulation can be just as helpful and just as important. We need to move away from 'it's either clinical or it's wild' because that's not the situation for these lineages that have existed for generations.”

– Brian Anderson

From churches to community-based harm reduction groups, psychedelic initiatives that arise from communities in order to meet community needs serve a vital layer of support and practice in the psychedelic ecosystem. Understanding how to collaborate with grassroots groups, and supporting them to be sustainable and effective, is an important piece of the psychedelic philanthropy puzzle.



Training & education

The growth and expansion of the psychedelic medicine ecosystem will require a significant expansion of training and education pathways for practitioners and facilitators. To equip practitioners and medical professionals to deliver effective and accessible psychedelic-assisted therapy and other forms of care to a large number of people is a major undertaking, and there is no one-size-fits-all solution.

The work to build out the training and education ecosystem has already been a major undertaking, thanks to the strategic forward thinking of people and organizations that have designed programs and launched initiatives in anticipation of the US expansion of psychedelic therapies. Along with training for people delivering psychedelic-assisted care, the education ecosystem also involves students and academics working in academia as researchers and scholars to develop and assess protocols, research public health issues around mental health and psychedelics, and develop public education strategies.

From interviewees, we heard a number of considerations and concerns about what needs to be embedded in training programs or available to students and practitioners as the ecosystem ramps up and expands. This included how to make high-quality training and education accessible, what training should look like, what is considered a legitimate form of training, alternative forms of education, and the role of mentorship and apprenticeship. We also heard about what might be missing from or hard to deliver through formal training programs.

The topics covered below are necessarily high level, and are focused on identifying gaps and challenges across the education space, rather than providing in-depth commentary on specific training programs or curricula.

Education within and beyond the classroom

Many of the interviewees we spoke with have decades-long experience with psychedelics, and have benefitted from relationships with mentors and involvement in communities of practice. Everyone acknowledged the need for robust formal training programs for people wanting to deliver psychedelic-assisted care. Still, we heard trepidation around what might be omitted or missed in the process of undertaking a training program, which is necessarily time delimited and relatively standardized.

“There is a part of the needed skillset that really doesn't translate well into classroom teaching.”

– Maria Mangini

In particular, Mangini pointed to the central role of mentorship in developing skills outside the classroom. Christiana Musk makes a similar point, highlighting the value of mentorship and apprenticeship.

“Apprenticeship work is different than the paradigm of becoming a licensed psychologist and very different than 120-hour facilitator training.”

– Christiana Musk

Courtney Watson, founder of Doorway Therapeutics which provides psychedelic-assisted therapy to BIPOC and queer communities, noted that systems of mentorship are difficult to implement in conventional academic training programs:

“I think the psychedelic field at large is taking ‘what are models of apprenticeship?’ and learning and then applying it into like white academia, where you go to this place, and you sit, and you role play, and then you, you get a certificate that says that you're qualified”

– Courtney Watson

Mentorship often happens organically within communities, and can be hard to scale or make accessible via formal training programs. Mangini considers it a responsibility of trained practitioners to serve a mentorship role, to better enable knowledge transfer and build the field.

“..you should require someone who holds any kind of certification to provide mentoring in order to maintain their certification. In any clinical training environment, the bottleneck is always getting preceptorships where people get a chance to work directly with an experienced practitioner (...) I think that's distinctively missing in this environment: an alliance of reciprocity with a mentor. Thai is made more complicated by the fact that mentors generally are embedded somewhere in a community from which that mentor comes.”

– Maria Mangini

While training and education need to equip facilitators and practitioners to deliver care within the limits of the existing (and emerging) healthcare system, wellness and healing aren't linear and involve many interconnected factors. We heard from Watson that despite best efforts, the narrative of psychedelics as a panacea or magic pill still permeates aspects of the facilitator training program she went through. She went on to point out what many of our interviewees emphasized: that healing work is nuanced and ongoing, and doesn't usually conform to the boundaries of the mainstream healthcare system.

“Even though people will say this is not a silver bullet, they still talk about it like it's a silver bullet. They'll be like ‘this is not a silver bullet and you'll be cured in 12 sessions’. Baby, that sounds like a silver bullet to me, you know? and I bought that. I really did. Like, there was so much unlearning that I had to do.”

– Courtney Watson

One thing that is just true: it's like this is not a one time thing. This is not a three medicine session. Protocols like this are continuous, right? ... It's not something that happens in silence with eyeshades on.

– Courtney Watson

Given the practical limitations of certification programs, Mangini was concerned that people might not recognize how much more training and apprenticeship is needed beyond existing certification programs:

My new fear is what's going to be the outcome of these sort of not very well-seasoned practitioners that are coming out of training with a limited amount of skill. You know, they get a lot of didactic information but a limited amount of practice and not very good resources for helping them hone their personality or their personal characteristics for the demands of the work.

– Maria Mangini

Ideally, formal training programs would be part of a longer-term and more holistic system of training, education, apprenticeship and experience. Julie Megler, co-founder of the Sage Integrative Health, suggested that people who undertake trainings should enter with a mentality that this will not in and of itself qualify a person to start a practice:

"I think the ideal mentality is 'this is offering me a foundation and the lay of the land.' It's not the complete training that's needed for me to move forward with offering psychedelic-assisted therapy. There's a lot of experience and additional supportive trainings that are helpful."

– Julie Megler

Training and education in a broader public health context

While training programs for clinicians and facilitators are central to the future of psychedelic medicine delivery, other kinds of education and training are also an essential part of the picture. As Ismail Ali, Director of Policy & Advocacy at MAPS, notes, the expansion of legalized psychedelics has implications for the broader field of public health and requires a different kind of education effort. At a time when the general public are seeing headlines about psychedelic treatments for mental health issues and then starting to use substances on their own terms, there are risks that people will be inadvertently harmed or traumatized.

Ali argues that philanthropy has a role in supporting training and education in this capacity:

“My angle lately has been that philanthropy really needs to fill the gap of education and harm reduction. There is a huge need for crisis response, for first responders, law enforcement, EMT's, mental health respondents to be trained in de-escalation, techniques for harm reduction, and unarmed crisis response.”

– Ismail Ali

Other interviewees continued the conversation about the need for nonjudgmental public education about safer drug use in a number of different contexts. Yarelix Estrada, a drug policy and harm reduction researcher working for the New York City department of health, suggests that education and training should extend beyond a narrow focus on psychedelics, to be considered as part of a bigger picture of polydrug use, stigma, and safety:



I think that researchers and universities and other formal institutions have a moral obligation to put energy and resources toward education and harm reduction for the public.”

– Ismail Ali

“The most important point I've found is having a space where people can receive non-judgmental care for bringing their drugs. Like whatever, no matter what drugs they are, whether they are psychedelics or MDMA or research chemicals or fentanyl or xylazine, they can receive the same standard of care and information and counseling on how to use their substances in a safer way...[and] the training piece of it is really important. There's a lot more training that's needed than people think.”

– Yarelix Estrada

We also heard enthusiasm from a number of interviewees about the need to invest in students and early-stage researchers, starting at the undergraduate level and extending to Master's, PhD, and other kinds of facilitators-in-training. The earlier people get access to high-quality educational resources, the more prepared they will be for entering clinical training or a career in research.

Building culturally-appropriate training and education that supports diverse students and communities

It is a certainty that education and training for psychedelic medicine providers will be expanded and offered in mainstream academic settings in the near future. However, as this expansion occurs there is an imperative for educational programs to build ally-ship with Black, Indigenous, and other marginalized voices, and to ensure practitioners are equipped to work sensitively and effectively with communities of color, poor people, and others that are often underserved by the medical system.

Many mainstream education institutions have contended with their exclusionary and often racist histories, and begun work – albeit unevenly – to improve diversity, equity, inclusion and anti-racist practices at their institutions. Similarly, the psychedelic space has to consider the biases and extractive approaches that have characterized aspects of its current form. This is essential for ensuring that people from historically marginalized or invisibilized communities are respected and that their innovations and intellectual property are recognized.

Courtney Watson pointed to the importance of proper citation and attribution, noting that some psychedelic educators and academics have drawn heavily from Indigenous medicine practitioners without providing proper credit or citation.

"The erasure is just there. Like at one point in my training, I heard several prominent researchers talk about going to South America and sitting with medicine people. When are you going to tell us their names? (...) Every time you referenced, ambiguously, these 'amazing maestros' that taught you what you learned and then you brought it here – that is colonialism. That is plagiarism."

– Courtney Watson

Training for facilitators should also acknowledge that many patients will have complex and overlapping traumas, argues Julie Megler. This requires specific and additional training to ensure therapists are equipped to treat these patients sensitively and effectively.

"I think even for people who are licensed with counseling or therapy backgrounds, people could use more trauma-informed training for the MDMA protocol since that's for treatment-resistant PTSD."

– Julie Megler

Megler also touched on the perennial question of how much personal psychedelic experience practitioners should be expected to have in order to effectively serve patients:

"And then, you know, practitioners who've been involved with this work for a long time have a lot more experience of what it's like to actually be in the altered state of consciousness. So there's kind of the old saying, you can only take people as far as you've gone yourself."

– Julie Megler

At the community level, such as in local integration groups and Psychedelic Society meetings, it is important that local organizers and community workers have the skillset to draw on when dealing with people's challenging experiences and consequent mental health problems. This means a sufficient understanding of how the use of psychedelics intersects with an individual's life circumstances as well as their mental health history and other substance use. Yarelix Estrada notes that folks may take psychedelics in search of healing, but their material conditions – such as the daily demands of family life, their job, their living situation – do not lend themselves to a full process of working through complex trauma:

“Part of what's needed is about creating learning tools and educational tools that teach people at large about psychedelics. About what they are, what they are not, helping people understand the impact of the war on drugs and what that actually is, and creating learning tools for folks to be able to have conversations about drug use and psychedelics.”

– Hanifa Nayo Washington

"We've worked with people in our integration circles that have become suicidal in their process of healing with trauma and different issues, or have had suicidal ideation, or have gone through really tough times. (...) There needs to be a lot of safeguards in place so that people don't get re-traumatized or end up in a really difficult financial situation because they start unrooting things that they may not be ready to unroot."

– Yarelix Estrada

Estrada wants organizers and facilitators to recognize that for working-class people, it may not be possible to undertake deep or extended treatment processes, reflection and integration work because of time and financial constraints. Educational efforts for therapists and community-based organizers must include discussions about class, working conditions, and realistic conversations about individuals' immediate concerns, short-term life goals, and basic needs.





Engaging in balanced relationships between funders & recipients

“Whether it is from the academics, politicians, pharmaceuticals, or NGOs. It is quite complex. It is not impossible though. I trust it is not. And that is why I am collaborating now. I am also learning a lot.”

– Osiris Garcia Cerqueda

Philanthropy is not a unidirectional transfer of money or resources from a funder to a recipient. It is a relationship – and often an unequal one. Even with the best intention from funders, grants can come with hidden strings attached, which in turn can frustrate grantees and restrict their ability to act according to their values or community’s best interests.

Many of the interviewees we spoke to work with or are part of small but incredibly impactful organizations. Many of them are seeking bigger budgets and more resources to expand their work. Still, they don’t always view philanthropic dollars as an unalloyed good, and some of them have rejected offers of financial support that don’t align with their vision or priorities.

Underlying this wariness around misaligned philanthropy is often a sense that the relationships between philanthropists and ‘recipients’ are unbalanced, or that funders are seeking to exert power through their giving rather than coming in the spirit of learning and collaboration.

In this section, we highlight how the interviewees spoke about both ideal and troubling relationships between philanthropists and recipients, and what could be done to build relationships that have greater levels of trust and respect.



“

Oftentimes, these encounters with the academics, pharmaceuticals, and the political sector look for it all to happen immediately. They say: organize the people. Do this. Call upon and gather the people. Get me twenty men of knowledge. Organize a ceremony with mushrooms.

Hey.. the community's timeline runs differently. It is not the same as in the city. It is not the timeline of money production, it is different. It is a time that runs based on the rain. On when the sun will arrive, when the mushrooms will grow.

It is a timeline that tells us when it is time to make an offering to our divinity shi contón cosho. It is a timeline that tells us when the river dries, when there will be water again.

It is a time that tells us when we are to celebrate our dead, the time of the corn. It is a timeline that is very much connected to the ecology, to nature. And so having people telling us to organize, and to do so quickly, makes us question what is the correct way of generating reciprocity with original peoples. Right?”

— **Osiris Garcia Cerqueda**

Not all support is equal

A number of interviewees expressed that their organization is strict about what kinds of support they seek and will accept. Susan Beaulieu, Healing Justice Director at the NDN Collective, explained that the Collective has a tight policy around the kinds of resources they will accept from donors:

“None of the funds that come in are allowed to have strings attached. We as Indigenous people who are working with our Indigenous relatives know best how to distribute this money, know best how to work with this. We don't want any strings from you because you're not in our communities. You don't know what we need. You just give us the resources and we will work with our communities to develop what works best for them.”

– Susan Beaulieu, on the NDN Collective

Bia Labate, as executive director of the Chacruna Institute for Psychedelic Plant Medicines which directs philanthropic money directly to communities with a no-strings policy, corroborated the need to let communities and organizations decide the priorities:

“Avoid reinventing the wheel...just try to consult the people that know more than you, which is the principle that we have. We're not trying to invent any thinking. You know in Mexico, in Costa Rica, in Brazil and Peru and Colombia, we found people that are doing work on the ground. They don't have money. So we're going to give them small grants and they can use the money however they wish, because what everybody needs is money for operations. But it's very unsexy for the donor to say, “hey, I helped with operations””

– Bia Labate

“We don't want any strings from you because you're not in our communities. You don't know what we need. You just give us the resources and we will work with our communities to develop what works best for them.”

– Susan Beaulieu, on the NDN Collective

Local community-based psychedelic organizations that have spent years building trust and relationships often struggle to find funding that fits their values. Yarelix Estrada describes the problem of potential funders approaching organizations in a purely transactional way:

“We've been offered a lot of money from large organizations, from organizations that are trying to commodify community... Like ‘do our community’ (...) We'll pay you this amount of money to do our programming for community work.”

– Yarelix Estrada

Similarly, Riccardo Vitale explained the importance of staying true to the mission of the organization, regardless of how much money they are offered:

“It's about being true to the grassroots and how the community sees themselves, what they need to build and be true to that, to that community building...People that come with interesting buzz concepts – you know like ‘reciprocity’ – we tended to say no thank you.”

– Riccardo Vitale

Asymmetric relationships

Why would an organization decline an offer of money from someone coming to them speaking to the concept of “reciprocity”? As discussed in the section above, in many cases reciprocity has become something of a hollow buzzword, a concept taken from Indigenous communities, studied, then “re-proposed” back to them as a form of engagement. However, communities may view this repurposed reciprocity as just another transactional approach: I give you this, and you give me that.

This watered-down reciprocity is especially problematic when the funder-grantee relationship is based in an historically asymmetrical dynamic, in which one party represents the resources of the Global North, and the other lives the ongoing legacy of colonial extraction, attempted genocide, and land dispossession. More often than not, transactional reciprocity does little to help the community, and may only serve one specific individual or a few individuals. Riccardo Vitale went on to explain:

“We’ve had interesting proposals, like “can you give us a couple of elders and we’re going to place them in our Board of Directors. As long as they’re elders, that would work. You don’t have to do anything.” And then we have to explain that that is just marketing.... And we said OK, let’s stop talking about reciprocity. Let’s talk about reparation.”

– Riccardo Vitale

For a relationship of real reciprocity to emerge, we must start with questions of reparations and restorative justice. These are well-established methods that have been applied in various contexts to begin to restore balanced relationships between the political elites and the historically oppressed.

These restorative processes are not easy. But they acknowledge the impossibility of equitable relationships in the present without an acknowledgement of the historical basis of the uneven power dynamic.

Miguel Evanjuanoy expands on this idea, and describes the difference between reciprocity and reparations:

“So let’s not invent anything. You know, we already have instruments. Let’s apply our instruments. So we want to talk of restorative justice, collective justice, and reparation to restore the ecosystem, the biocultural ecosystems where we live. You know, let’s work to contain this massive ongoing extraction of resources, right? That’s the language that we put on the table.”

– Riccardo Vitale

“We have always said “welcome” but have always looked to uphold what is ethical in this philanthropic process. Because we cannot just accept something and become friends—as has happened before and continues to happen in some territories. Often funds are offered, for example in the case of petroleum; petroleum is extracted under ulterior motives. In exchange, they build a school or a sports field. But they generate a massive damage to humanity. And that is not only impacting indigenous people, that has an impact for the entire world through climate change. This is why we have said with heavy hearts that instead of speaking about reciprocity, we should speak about reparations.”

– Miguel Evanjuanoy

Towards more balanced relationships

These reflections point to the need for power dynamic between donors and recipients to be considered and addressed, while making explicit the opportunities for funders to take accountability and work towards more balanced relationships. For potential funders open to the slow work of building trust and undertaking necessary processes with communities, respectful and effective relationships and giving are possible.

Bia Labate describes the kind of funder approach that can lead to more effective grantmaking and respectful and sustainable funder-grantee relationships:

“Do the research, find out the budgets, find out the size of the team, find out the culture of the organization... evaluate the culture of the organization and whether people get along and if there is a way to make conflicts improve. Evaluate the relationship between budget and accomplishments. If you have a tiny, tiny budget and a huge list of accomplishments – this is a good organization to donate to.”

– Bia Labate

Maria Mangini, co-founder of the Women’s Visionary Congress, explains the difference between a worldview based on utility – what resources can the world offer me – versus one based in interconnectedness and embeddedness. In order to be effective and avoid unintended consequences, people investing in the psychedelic space should seek to understand the interconnectedness of different aspects of the ecosystem in which they operate.

“If you look out your window and there's a mountain out there and all that represents to you is a pile of ore that you might be able to mine, you have a different relationship with that mountain from somebody who sees it as the place where the clouds gather and that's where the rain comes from and that's what causes the crops to grow. And that's what makes it possible for you to eat. It's a different way of being in the world.”

– Maria Mangini

It follows from this metaphor that instead of treating philanthropy as a goal-oriented endeavor (the mountain as a potential mining site), engaging in philanthropy could be framed as a relationship-generating activity (the mountain as part of an ecosystem). Along these lines, Benjamin de Loenen proposes that funders consider measuring progress and impact not by outcomes, but by how the process of relationship-building is unfolding over time.

“I think it requires an ongoing relationship with the funder, where it's more about the relationship with them that's cultivated and it's more like active philanthropy. They are partners. They're not just sources of income, they are informed about what you're learning, so that can actually help them navigate whatever other initiatives they're supporting and you keep an eye on what's possible in synergy.”

– Benjamin de Loenen



Funder interests

In the course of this project we interviewed philanthropists, investors, and funders who have made significant contributions to the psychedelic ecosystem. They expressed a range of interests, such as sharing best practices, magnetizing allies to the psychedelic space, building sensitivity to ethical issues, and deploying catalytic capital. In this section we reflect some of the key funding priorities we heard from philanthropists, funders, and investors looking to make an impact in the psychedelic ecosystem.

Unlocking capital

While the psychedelic ecosystem is expanding rapidly and some organizations are supported by significant funding, we heard that the space overall is still nascent, with limited funding and investment flowing as yet.

Philanthropist and advocate Christiana Musk suggests there is an opportunity for the philanthropic community to better align and coordinate in order to more effectively mobilize dollars.

“I think a priority for the philanthropic community is to get more organized and more open and more communicative, and to feel more comfortable and to invite other philanthropists in. We can bring in several more aligned large foundations and ideally many more small foundations and then unlock crowdfunding at a larger scale. Then we're going to be in a field in which organizations are not fighting for a few donor dollars, but instead will be experiencing more abundance to be able to resource lots of different types of projects.”

– Christiana Musk

The variety of priorities among funders, and the fact that stakeholders from disparate projects have different agendas that are often not aligned, could be a roadblock to abundant resourcing without further communication and collaboration. Oleg Gorelik, president and co-founder of the Evolve Foundation, proposes additional strategies for activating increased investment and other sources of funding in the space.

"I feel that the veterans work will be historic, kind of a watershed change in this psychedelic community. Because there's only so much you could do with philanthropy. (...) So what we want to do is activate billions of dollars in funding from governments and insurance companies. That's when we can really spread it around the world and make it accessible to everybody. The amount of philanthropic dollars that goes into this field is very small."

– Oleg Gorelik

As Gorelik states, while philanthropic support can do a lot in the psychedelic ecosystem it is a drop in the bucket compared to the federal dollars that strategic philanthropy can unlock if funders and allies can mobilize around politically agreeable topics. However, philanthropic dollars will always be required to support projects that will not suit a scaled approach, or which fly under the radar of larger funding initiatives.

Supporting communities and Indigenous cultural survival

A number of funders we spoke to were invested in issues of Indigenous reciprocity and culture. David Bronner, among others, emphasizes the need to support the sustainability and of Indigenous communities and investment in alternative models of care:

"I think it's really important to support these indigenous wisdom keepers and holders, and make sure that as a psychedelic renaissance unfolds and demand skyrockets that their cultures are benefiting and respected and not disrupted, and their wild sources of medicine aren't depleted."

– David Bronner

Christiana Musk discusses how, alongside the FDA process which is necessary for equitable and safe access through the medical care system, investing in Indigenous communities and alternative healing models could result in a more holistic and well-developed model of care:

"A fraction of the money that can go into this FDA process – just 10%, 5%, some tiny amount of that – could go into really long-term thinking on how to support the cultures, and how to propagate the plants in a regenerative and reciprocal way, how to support these healing centers, and these community-based models in the places where the medicines are already legal, right? And then in the ten years or however long it's going to take to go through this FDA process, we could have a whole other model [of care]. It is important that we put the reciprocity narrative at the very, very, very beginning, so it's not an afterthought, once all this destruction has already happened."

– Christiana Musk

Finding the right funder-organization fit

David Nassim, whose organization Blessings of the Forest works with communities in Gabon, noted how uncommon it is to find funders who feel like an appropriate “match” for working with the Indigenous organization he represents:

“It takes a very particular, narrow group of people that have a connection with the medicine, a feeling that they need to do something associated with the origin of the medicine, and have a feeling towards Indigenous people conservation...and you've got a narrow bandwidth of people that really want to do something like that.”

– David Nassim

Benjamin de Loenen of ICEERS remarked on the importance of being nimble and willing to learn and pivot in philanthropic relationships, especially as people’s understanding evolves and organizations change:

“A lot has been evolving in our organization, which sometimes gives a feeling of instability. But nobody really talks about how that is also important. If you start working with these other knowledge systems and perspectives, then are you willing to let go of certain ideas you had? Or [let go of] things you were doing because you start learning that maybe they're not so much the right direction? It takes being willing to change things in the course and that might be seen by philanthropists or the ‘change makers’ as something like failure. But I believe that we need more of that.”

– Benjamin de Loenen

From the funder side, Oleg Gorelik notes the need to balance accountability and reporting demands while giving grantees the space and freedom to do what they do best. Instead of a one-size-fits-all approach, funder-grantee relationships must necessarily be unique:

“It depends on the organization....it's individual, but the notion is that you want to have appropriate accountability, but you don't want to burden the organization with too much work serving the needs of the donors. Just let them focus on doing their job. But you need to make sure that they are doing their job.”

– Oleg Gorelik

Optimism and diving deeper

Overall, funders we spoke to were optimistic about the opportunities and interest in the space. Genevieve Jurvetson notes there is already a lot of interest and investment in areas like clinical research from philanthropy, venture capital, and conventional sources (e.g., academic, research, and government institutions), which means she is able to extend her focus to more complex or less-supported areas:

"There are things that are no longer so incredibly difficult to fund, like research at top-tier Universities, where inspiring researchers are doing important work. I've actually started to move away from that because there are more people [philanthropists and institutional funders] who will do that work. But this gnarly stuff, like in Oregon and Colorado, takes a lot of coordination and understanding, and [I feel that] I need to do that because I understand a little bit better where I can have an impact. (...) I try to do the things that I think might not get done if I don't do them."

– Genevieve Jurvetson

For funders like Jurvetson who have been in the space and learning about the nuances of the psychedelic ecosystem for a number of years, there is significant opportunity in taking risks on lesser-trod philanthropic pathways:

"I feel like there are areas that are a little bit harder to understand, a little riskier. And I'm happy to do those things if they make sense to me. And I'm starting to step away from the other stuff that I feel like okay, this movement is at a place where [well-funded institutions] do not need me."

– Genevieve Jurvetson



5

Conclusions

What are some ways forward?

This report has a dual purpose. It aims to serve as a kind of harm reduction guide to help minimize potentially destructive economic and financial practices that might damage or undermine the psychedelic ecosystem and prevent it from reaching its potential for widespread healing and transformation. However, it also has bolder ambitions: to inspire funders and philanthropists to be imaginative about the possibilities of what a post-capitalist philanthropy approach can do in the psychedelic space, and beyond.

The interview participants were clear about the historical context that needs to be acknowledged in the psychedelic space, starting with contextualizing psychedelic use within the history of the war on drugs. To avoid the narrow and damaging narrative that psychedelics should be privileged for reform while other drugs remain prohibited (known as “psychedelic exceptionalism”⁷), it is necessary to promote education and training around drug use and policy in general, not just about psychedelics. Interviewees were also clear to emphasize the need for equitable access to care services, training, and education. Equitable access should be a particularly high priority for people who have been disproportionately affected by the war on drugs.

There are a number of charitable foundations and other giving organizations that might serve as radical inspiration. For instance, after years of attempting to reconcile the role of traditional philanthropy as a “function of colonial capitalism”, the board of charitable foundation Lankelly Chase decided to abolish the foundation with the aim of redistributing its wealth toward life-affirming social justice work. Part of this work included acknowledging where their funds came from historically and what their wealth and role in philanthropy represents.⁸

Rather than charity or philanthropy, life-affirming organizations such as Grassroots International focus on solidarity work in direct partnership with communities. New World Foundation and NoVo Foundation provide more examples of organizations that are seeking a paradigm shift, ensuring people at the grassroots level are on equal footing to the top-down policy makers, with the slogan “partnership instead of domination”. The NoVo foundation asserts that the kind of solidarity work that is needed cannot be scaled, that “the next big thing will be a lot of small things.” Instead of looking for measurable outcomes or accomplishments, their mission is to sow seeds for future generations to thrive.

⁷ Dustin Marlin, “The Myth of Psychedelic Exceptionalism”, in *Bill of Health*, 24 March 2021. Retrieved from: <https://blog.petriefrom.law.harvard.edu/2021/03/24/psychedelic-exceptionalism-drug-policy/>

⁸ Patrick Butler, “UK charity foundation to abolish itself and give away £130m”, *The Guardian*. 11 July 2023. Retrieved from: <https://www.theguardian.com/society/2023/jul/11/uk-charity-foundation-to-abolish-itself-and-give-away-130m>

To shift towards a more expansive and radical kind of giving, Alnoor Ladha tells us that we must start by really understanding our own positionality and context:

“We have to start with being good students of our culture to really understand the impoverishment of the Western mindset and Occidental thinking (...) As a culture we're consequence-blind [as opposed to consequence-literate]. And so any little thing that works, we're like 'let's scale this thing up'. It's a deep ontology, it's a deep mindset and I don't know if that can necessarily be shifted. I think the discourse can change but we need to show examples of the lived alternatives of other ways of doing this.”

– Alnoor Ladha

However, even the most dedicated of ethical funders and practitioners in the philanthropy space can't expect to transform the political and economic system as a precursor to expanding the psychedelics ecosystem.

“I sometimes find myself saying that reinventing capitalism is probably mission creep for the psychedelic space.”

– Joe Green

Each of us has our part to play in the complex work of developing a more equitable psychedelic system. It requires learning from and co-creating with others who are striving to develop new economic models or political processes. It also requires brave and imaginative funders.

“It's difficult to find funders who really understand that the timeline to do this should by definition not be linear. And by definition, you should actually not know the outcome of what you're co-creating (...) Instead of writing a new chapter of the same old story, we can actually really come together, open a blank page and write a new story together.”

– Benjamin de Loenen

The way forward also likely involves rigorous storytelling and public messaging, sometimes writing a new chapter from the beginning.

“When we can see it rigorously and clearly, as cognitive, psychological, spiritual and political all at the same time and really tell that story, then we [can] change the public perception of what psychedelics are (...) These are not ways of coping with capitalism. These are ways of becoming capable agents of change. These are not ways of dealing with loneliness. These are ways of finally having the courage to meet your neighbors, you know? By telling a better story it's going to help (...) that would be where I would put the philanthropy money – into that storytelling and doing it in a rigorous way.”

– Douglas Rushkoff

This requires learning how to collaborate with people from different social worlds, as well as disrupting our perceptions of the timeline of progress. For funders, practitioners, and medicine stewards alike, trusted relationships and deep listening are the key.

I think the best thing to do ... is to personally get inside the ecosystem with people you trust and then make your decisions based on that.”

– David Bronner



What's next

This report is just the beginning. As we heard from interviewees, the excitement about psychedelic medicine and its potential to aid healing and support human flourishing is warranted. Many of the people we spoke to have been working with psychedelics for decades, and are deeply invested in the space. However, we also heard loud and clear that this urgency must not be wielded as a cudgel to accelerate commercialization and medicalization without thoughtfulness, care and intentionality.

There are many dedicated, effective organizations already doing great work to enable community healing, protect and foster Indigenous community practices, and provide integrated training and research support for practitioners. Despite this impactful and vital work, many of them are underfunded. We see significant opportunities to strengthen the ecosystem by funding these organizations to sustainably expand their work.

In addition, more work is needed in the space to develop strategies for scale that are ethical and less extractive. This includes activities like developing best practices for philanthropists and funders, building relationships and trust between funders and potential grantees, and developing tools and mechanisms to ensure that elders and Indigenous community practitioners are compensated for their expertise and stewardship.

We suggest that future work might include:

- Connecting relevant organizations and community-based groups to facilitate conversations around the sharing of best practices, common ground, and opportunities for regional, program-based, or strategy-based partnerships.
- Working with organizations to understand the challenges and opportunities around philanthropic funding. This includes challenges in accessing philanthropy, understanding how resources will be utilized and what accountability or reporting models are relevant and appropriate, and understanding where technical support may be needed.

- Enabling equitable and less-extractive revenue models and organizational strategies for the psychedelics space. This would include building from existing research and experiments in the space of new economic models and economic democracy – including stakeholder ownership models, community based revenue models, and participatory budgeting – and considering how these models might be relevant to or adapted for use by psychedelics initiatives. This might also include looking at case studies where new economic models have been developed to ensure a meaningful portion of profits from Indigenous medicines flow back to the Indigenous communities where the medicines are grown or developed, and considering where the models could be scaled or replicated.
- Investigation of where for-profit investing versus philanthropic resources can be advantageous and constructive to the ecosystem. Some aspects of the field will be a good fit for for-profit investing or blended capital models, where other areas will be better served (at least in the shorter term) by philanthropic giving.

This ecosystem is still emergent, and the intersection of psychedelics with new economic approaches and governance is unique. Along with the practical interventions listed above and work to further understand best practices around funding and economic models, we suggest work is also needed to build alliances, narratives, and community. This includes:

- Magnetizing new funders and collaborators to this work.
- Facilitating additional conversations with experts, advocates, and practitioners we did not reach within the limited scope of this initial listening project. There are many other voices and groups whose perspectives could offer vital guidance for leaders and funders in the space.
- Developing storytelling and narrative strategies to share themes and findings from this report to build literacy and understanding, and ensure conversations around ethical funding and non-extractive growth are represented in the mainstream psychedelics space.
- Supporting conversations with adjacent communities of practice – including mental health and healthcare, end of life care, public health, Indigenous healing, and PTSD and trauma recovery.



Initiatives

In the course of the listening project, we learned about many exciting projects and initiatives that are undertaking interesting or exemplary work in the psychedelic space. These range from established, sustainable organizations that are grant-ready, to small community-based projects that may require technical support or capacity building.

Below is a list of the organizations we heard about from interviewees or otherwise in the course of our research, in alphabetical order. Asterisked entries indicate mention by two or more interviewees. For funders and philanthropists interested in supporting and accelerating work in the psychedelic space, many of these initiatives will be of interest, but we note that these organizations have not been vetted by us in the process of compiling this report.

Initiatives mentioned by interviewees

The Association of Entheogenic Practitioners
Baobab Foundation
Blessings of the Forest
Cardea
Centro Nierika
Chacruna
CIPREPACMA
Decolonize Mycology
Detroit Psychedelic Conference
Erowid
Fireside Project
Guerrilla Foundation
Healing Breakthrough*
Heroic Hearts Project
Horizons
ICEERS
Indigenous Medicine Conservation Fund*
Indigenous Peyote Conservation Initiative
Indigenous Roots and Reparations Foundation
Healing Advocacy Fund
InnerTrek
Limina Foundation
Local psychedelic societies (various)
The Mission Within
NDN Collective
Plant Magic Cafe
POC Fungi Community
Polaris Insight Center
Psychedelic Science Funders Collaborative (PSFC)

Psychedelic Liberation Training Program
Reason for Hope
RiverStyx
Sacred Garden
Sacred Plant Alliance*
Source Research Foundation*
Students for Sensible Drug Policy
A Table of Our Own*
Thousand Currents
UMIYAC
Urban Survivors Union
Wenatchee River Institute
Women's Visionary Council*

Additional initiatives discussed during our research:

Black Therapists Rock
CreeAition
Native Americans in Philanthropy
Psychedelics in Society and Culture
Rainforest Agroecology Information Network (RAIN)
Roots to Thrive
SoundMind

Philanthropic and charitable organizations with non-traditional models:

Baobab Foundation
Guerilla Foundation
Lankelly Chase
Thousand Currents
Transition Resource Circle

**Circadian
Labs**

