



## **Dominant Narratives in Contemporary Psychedelic Medicine**

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**Abstract**

Within the past two decades, the institutional effects of twentieth century anti-drug politics have begun to lessen for researchers interested in understanding the influence of psychedelics on humans. Rooted in Indigenous intellectual property and practices, contemporary psychedelic research has centred syncretic approaches to psychedelic-taking, blending elements of various cross-cultural practices, largely by and for Western subjects. Recent changes in the social, economic, and institutional positioning of psychedelics come subsequent to growing evidence concerning the safety profile and observed effects of psychedelics to date, leading educational and regulatory bodies to temper barriers to psychedelic research within controlled clinical and preclinical contexts. In light of the nascent clinical and cultural reinterest in psychedelics within Western society and culture, the present thesis examines dominant narratives within contemporary psychedelic medicine through a synthesis of Cohen's (2016) theory of psychiatric hegemony with recent theoretical developments in the emerging field of critical psychedelic studies. It is argued that within contemporary psychedelic medicine, dominant discourses centre individualizing, medicalizing, depoliticizing, and utopian frameworks, upholding Western conceptions and imperatives regarding human subjectivity and self-governance; narratives which countervail the development of class consciousness, despite relying on emancipatory language and aesthetics.

*Keywords:* psychedelics, psychedelic medicine, critical psychedelic studies, psychedelic capitalism, psychiatric hegemony

## Résumé

Au cours des deux dernières décennies, les effets institutionnels de la politique antidrogue du XXe siècle ont commencé à s'atténuer pour les chercheurs intéressés à comprendre l'influence des psychédéliques sur les humains. Enracinée dans la propriété intellectuelle et les pratiques autochtones, la recherche psychédélique contemporaine a centré ses approches syncrétiques de la consommation psychédélique, mélangeant des éléments de diverses pratiques interculturelles, en grande partie par et pour des sujets occidentaux. Les changements récents dans le positionnement social, économique et institutionnel des psychédéliques font suite à des preuves croissantes concernant le profil de sécurité et les effets observés des psychédéliques à ce jour, ce qui a conduit les organismes éducatifs et réglementaires à tempérer les obstacles à la recherche sur les psychédéliques dans des contextes cliniques et précliniques contrôlés. À la lumière du réintérêt clinique et culturel naissant pour les psychédéliques au sein de la société et de la culture occidentales, la présente thèse examine les récits dominants au sein de la médecine psychédélique contemporaine à travers une synthèse de la théorie de Cohen (2016) sur l'hégémonie psychiatrique avec les développements théoriques récents dans le domaine émergent du psychédélique critique. études. On fait valoir qu'au sein de la médecine psychédélique contemporaine, les discours dominants se concentrent sur des cadres individualisants, médicalisés, dépolitisés et utopiques, soutenant les conceptions et les impératifs occidentaux concernant la subjectivité humaine et l'autonomie gouvernementale ; des récits qui contrecarrent le développement de la conscience de classe, bien qu'ils s'appuient sur un langage et une esthétique émancipatrices.

*Mots-clés:* psychedelics, psychedelic medicine, critical psychedelic studies, psychedelic capitalism, psychiatric hegemony

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## Introduction

Within the past two decades, the institutional effects of twentieth century anti-drug politics have begun to lessen for researchers interested in understanding the effects of psychedelics in humans. Rooted in Indigenous intellectual property and practices (Devenot, Conner, and Doyle, 2022; Ens, 2020; Fotiou, 2019; Williams, Romero, Braunstein, and Brant, 2022), contemporary psychedelic research has centred syncretic approaches to psychedelic-taking, blending elements of various ceremonial and psychotherapeutic practices, largely by and for Western subjects. Changes in the social, economic, and institutional positioning of psychedelics come subsequent to growing evidence concerning the safety profile and observed effects of psychedelics to date (Family, Hendricks, and Raz, et al., 2022; Hodge, Sukpraprut-Braaten, Narlesky, and Strayhan, 2021; Krebs and Johansen, 2013; Nichols, 2016), leading educational and regulatory bodies to temper barriers to psychedelic research within controlled clinical and preclinical contexts.

Throughout the 2000s and 2010s, despite legislation blocking the mainstreaming of psychedelic research, select research and psychedelic advocacy groups based in North America and Europe were nevertheless permitted to conduct psychedelic research, investigating the effects of psychedelic-taking on cognition and consciousness (Carhart-Harris, Erritzoe, and Williams, et al., 2012; Carhart-Harris, Leech, Hellyer, Shanahan, Feilding, Tagliazucchi, Chialvo, and Nutt, 2014; Tagliazucchi, Carhart-Harris, Leech, Nutt, and Chialvo, 2014; Turton, Nutt, and Carhart-Harris, 2014; Roseman, Leech, Feilding, Nutt, and Carhart-Harris, 2014), emotion and mood (Kaelen, Barrett, and Roseman, et al., 2015; Kraehenmann, Preller, Scheidegger, Pokorny, Bosch, Seifritz, and Vollenweider, 2015; Turton, Nutt, and Carhart-Harris, 2014), memory (Carhart-Harris et al., 2012; Carhart-Harris et al., 2014), mystical experiences (Griffiths, Richards, and Jesse, et al., 2008; MacLean, Johnson, and Griffiths, et al., 2011), and the treatment of addiction

(Garcia-Romeu, Griffiths, and Johnson, 2014; Johnson, Garcia-Romeu, and Griffiths, et al., 2014), in addition to numerous other aspects of human experience. Additional studies have considered the use of psychedelics for those suffering from conditions such as chronic pain and those inducing severe headaches or migraines (Castellanos, Woolley, Bruno, Zeidan, Halberstadt, and Furnish, 2020; Kargo, 2021; Schindler, 2022), the latter of which are comorbid with a number of psychiatric conditions, including mood and anxiety disorders (Jette, Patten, Williams, Becker, and Wiebe, 2008; Kamal and Radhakrishnan, 2023; Merikangas and Stevens, 1997; Minen, De Dhaem, Van Diest, Powers, Schwed, Lipton, and Wilbersweig, 2016). Complementing the rise in medical-scientific psychedelic studies, other researchers and academic units have increasingly focused on both the historical and contemporary nexus of psychedelics and spirituality (Apud, 2016, Hartogsohn, 2018; Johnstad, 2022; Podrebarac, O'Donnell, Mennenga, Owens, Malone, Duane, and Bogenschutz, 2021).

Most influential in contemporary psychedelic scholarship is the work of researchers and clinicians at the Multidisciplinary Association for Psychedelic Studies, Johns Hopkins Center for Psychedelic and Consciousness Research, and Imperial College London's Centre for Psychedelic Research, each of which have worked both independently and collaboratively to investigate the utility of psychedelic-taking, particularly for Western patient populations lacking effective treatment options, or "treatment-resistant" patients (Carhart-Harris, Bolstridge, Ricker, Day, Erritzoe, and Kaelen, 2016; Roseman, Nutt, and Carhart-Harris, 2018). It is estimated that between 20 to 60% of psychiatric patients are "treatment-resistant," affecting a wide range of conditions with varying etiologies and treatment options (Howes, Thase, and Pillinger, 2022). Once synthesized in clandestine, underground laboratories, and now tested through state-sanctioned investigatory protocols, psychedelics have been contemporarily positioned as a revolutionary

therapeutic development within medicine and the health sciences, with promises of therapeutic efficacy and efficiency, and transformation for individual patients, medicine broadly, and even societies across the globe (for works positioning psychedelics in medicine as revolutionary, see: Cameron and Olson, 2022; Heal, Smith, Belouin, and Henningfield, 2023; Sessa, 2013; Sessa, 2014).

Simultaneously, popular culture has taken up the revived medical-scientific interest in psychedelics, with researchers and psychedelic enthusiasts writing and appearing in articles published in the mainstream press and in podcasts interviews, as well as posting regularly on various social media platforms, with audiences ranging in size from tens of thousands to millions.<sup>1</sup> Likewise, influential figures in the social sphere, including celebrities and venture capitalists, have too taken a keen interest in psychedelics, ushering in capital to fund both public and private psychedelic research, effecting expansions to the pharmaceutical and self-help markets through an emerging psychedelics industry (Aday, Barnett, Grossman, Murnane, Nichols, and Hendricks, 2023; Gearin and Devenot, 2021; Noorani, 2019; Plesa and Petranker, 2022). Organized efforts from psychedelic research and advocacy groups not only position psychedelics as a potential therapeutic option for particular patient populations, focusing especially on those with psychiatric diagnoses, but also routinely promote the mass (i.e., global) medicalization of psychedelics as to

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<sup>1</sup> For instance, *The New York Times* (Jacobs, 2021) and *GQ* (Skipper, 2021); *The Joe Rogan Experience* (2021; 2023), the *Lex Fridman Podcast* (2021), and *The Tim Ferris Show* (2020). In addition to articles in the mainstream press and appearances in various interviews, psychedelics and prominent figures in psychedelic medicine (e.g., Rick Doblin, Michael Pollan, Ben Sessa, etc.) have appeared in series such as Netflix's *How to Change Your Mind* (2022). Netflix has also recently produced another film exploring the cultural and clinical impact of psychedelics, titled *Have a Good Trip: Adventures in Psychedelics* (2020).



the benefit of both patient populations and healthy individuals alike. The combination of renewed clinical and cultural reinterest in psychedelics with institutional and legislative shifts concerning psychedelic research has thus produced an abundance of materials to assist in making sense of the social, economic, and political forces and processes intersecting to inform and make possible changes in uses and conceptions of psychedelics in Western society. Such materials provide insight into the nature and implications of such forces and processes, particularly as psychedelics are placed in proximity to notions of “revolutionary” social change and countercultural identities and aesthetics (Davies, Pace, and Devenot; 2023; Tempone-Wiltshire and Matthews, 2023).

While it is possible that vulnerable populations may ultimately benefit from the clinical availability of psychedelics for various experiences of cognitive, emotional, and/or physiological distress, there remain normative implications to the global mainstreaming of psychedelic medicine for Western society and subjects, particularly as mental health-related diagnoses rise and psychiatric concepts and terminology increasingly leave the domain of medicine (Overholser, McGovern, and Silva, 2023; Fisher, 2009; Cohen, 2016). In particular, as psychedelics are increasingly positioned through “liberatory rhetoric” (Davies, Pace, and Devenot; 2023), it becomes ever more essential to examine the narrative threads across the social, scientific, political, and economic spheres, each informing the development of psychedelics as medicines and the subsequent attitudes the public will continue to form towards varying uses of psychedelics. Likewise, there remain ethical implications to the psychedelics industry that has emerged and continues to evolve, particularly regarding extractive and appropriative practices and “cultural tourism” that, when combined with a competitive push to privatize and patent psychedelics for clinical ends, could too affect populations in dire need of pathways to care, community, and well-being (Feinberg, 2018; Vidriales and Ovies, 2018).

Given such normative and ethical implications, the present work examines a series of evidence concerning dominant narratives within contemporary psychedelic medicine, synthesizing Cohen's (2016) theory of "psychiatric hegemony" with recent theoretical developments in the emerging field of critical psychedelic studies (Davies, Pace, and Devenot, 2023; Devenot, Conner, and Doyle, 2022; Gearin and Devenot, 2021; Petrement, 2023; Plesa and Petranker, 2022; Tvorun-Dunn, 2022). Each communication examined is sourced through open platforms such as YouTube channels and the websites and social media accounts of prominent organizations and figures within psychedelic medicine, providing a vast overview of the narrative patterns and ideological positions of influential leaders within contemporary psychedelic research. The present work addresses two primary questions. First, what are the dominant narratives in psychedelic medicine, and how are they informed by the ideals and norms of neoliberal capitalism? Second, what are the implications of such narratives, particularly in the context of emancipatory thought and action?

Cohen's (2016) theory localizes psychiatric discourse and practices to the overarching social-economic imperatives guiding (and constricting) the aims and operations of contemporary Western institutions, including governing bodies overseeing education, healthcare, and labour. In applying Cohen's (2016) framework to a particular aspect of psychiatric research, innovation, and practice—that is, dominant discourses in contemporary psychedelic medicine—it is argued that such discourses fall within four primary themes: individualism, medicalization, depoliticization, and utopianism; corroborating and extending previous work by critical psychedelic scholars (Davies, Pace, and Devenot, 2023; Pace and Devenot, 2021). Narrative themes within psychedelic medicine are particularly evident through the messaging of the Multidisciplinary Association for Psychedelic Studies (MAPS) and its Founder and Executive Director, Rick Doblin, whose communications account for the vast majority of materials examined in the analysis that follows.

The influence and proximity of both MAPS and Doblin to other prominent figures within psychedelic medicine allow for a robust analysis of the narrative themes across the contemporary period of medical psychedelic research, informing both the public's conceptions of psychedelics and medical access to psychedelics in the West.

In extending Cohen's (2016) work and synthesizing his theory with recent findings from critical psychedelic scholars, it is demonstrated that contemporary psychedelic medicine, despite being positioned as revolutionary, has adopted narratives which uphold central features of neoliberal capitalism (i.e., individualism, medicalization, and depoliticization), coupled with utopian narratives concerning the potential effects of mainstreaming psychedelics in Western society. In upholding such hegemonic ideals, contemporary psychedelic medicine risks countervailing truly liberatory solutions and thinking concerning the most pressing issues of our time, from exploitation to dysphoria, artificial scarcity to alienation, and geopolitical conflict to settler colonialism; each of which fundamentally cannot be solved through individuals alone, global systems of medicine, and the depoliticization of human experiences of distress and well-being alike. In positioning medical psychedelic-taking as a revolutionary solution for issues inherently and profoundly informed by one's material conditions and inequities through the language and aesthetics of liberation, the development of class consciousness, and thus, truly revolutionary consciousness, is stifled, thus reinforcing dominant class interests and obscuring public and patient proximity to emancipation.

### *Psychedelics in the Twenty-First Century*

Psychedelics, initially popularized for Western subjects within an American, mid-twentieth century countercultural milieu, have recently become key psychopharmacological tools of some seeking to promote psychedelic use for global well-being. Despite stigmatization, strict legal

barriers, and the disapproval of research into psychedelics up until the early twenty-first century, psychedelics have now wholly re-emerged into a landscape whereby dominant discourse centers notions of their clinical utility, a promise of profoundly self-transformative capabilities, and a stated objective of “mass mental health, eventually moving toward a world with net-zero trauma” (“From the Desk of Rick Doblin, Ph.D,” Doblin, 2020). This is due, in part, to the guiding work of Doblin and the Multidisciplinary Association for Psychedelic Studies, whom have positioned psychedelics as the agent that “when used wisely, have the potential to help heal us, help inspire us, and perhaps even to help save us ... [in the] race between catastrophe and consciousness” (“The future of psychedelic-assisted psychotherapy,” Doblin for *TED*, 2019, 0:38-0:48).

Psychedelics are “unspecific amplifiers” of consciousness (Grof, 1978) that effect central facets of human subjectivity (Yaden, Johnson, Griffiths, Doss, Garcia-Romeu, Nayak, Gukasyan, Mathur, and Barrett, 2021). In the broadest sense, psychedelics induce changes in human sensation, perception, and self-experience, such as through an alteration of cognitive operations, memory, and emotion processing (Dolder, Schmid, Müller, Borgwardt, and Liechti, 2016; Healy, 2021; Roseman et al., 2019). Though psychedelics have been consumed for medicinal purposes for millennia within non-Western environments (Ens, 2021; González Romero, 2022; Williams, González Romero, Braunstein, and Brant, 2022), contemporary “psychedelic medicine” refers to psychedelic-assisted psychotherapy and related practices which import psychedelics, whether naturally-occurring or synthetic, into highly regulated clinical environments for treatment-related purposes. Prominent medical psychedelic studies have explored the mediating effects of psychedelics for symptoms in individuals with diagnoses ranging from major depressive disorder to problematic substance use, among numerous other psychiatric conditions (DiVito and Leger, 2020; dos Santos, Bouso, Alcázar-Córcoles, and Hallak, 2018; Galvão-Coelho, Marx, Gonzalez,

Sinclair, de Manincor, Perkins, and Sarris, 2021; Johnson, Garcia-Romeu, and Griffiths, 2022; Johnson, 2022; Magaraggia, Kuiperes, and Schreiber, 2021; Mendes, dos Santos Costa, Wiltenburg, Morales-Lima, Fernandes, and Filev, 2022; Yaden, Berghella, Regier, Garcia-Romeu, Johnson, and Hendricks, 2021).

Therapeutic methods integrating the use of psychedelics are often syncretic, combining elements of various therapeutic modalities with frameworks and practices in Western psychotherapy (Metzner, 2011). For instance, the Multidisciplinary Association for Psychedelic Studies' *Manual for MDMA-Assisted Psychotherapy in the Treatment of Posttraumatic Stress Disorder* details various therapeutic approaches that “may occur spontaneously in MDMA-assisted therapy, [including] Internal Family Systems (IFS), Voice Dialogue, Psychosynthesis, Hakomi, Sensorimotor Therapy, Holotropic Breathwork, Jungian psychology, Buddhist psychology, and Virtual reality” (Mithoefer, 2015). In addition to varying and syncretic therapeutic approaches across clinical contexts, there has also been an emergence of novel clinical practices and systems of classifying psychedelic states in humans, such as the Ego-Dissolution Inventory (Nour et al., 2016) and the Emotional Breakthrough Inventory (Roseman et al., 2019). Such frameworks are used to make sense of the profound alterations in consciousness, cognition, affect, and emotion evoked by psychedelics.

Whereas antidepressants elicit subperceptual effects centred on the stabilization of mood and cognition (Serretti, Calati, Goracci, Di Simplicio, Castrogiovanni, and De Ronchi, 2010), psychedelics induce profound alterations in consciousness and conscious experience, ranging from “mind-altering [and] intense acute effects on perception, cognition, affect, and frequently ... mystical, self-transcendent, or out-of-body experiences” (Nautiyal and Yaden, 2023). Although the precise mechanism of psychedelics' antidepressant action remains elusive, it has been proposed

that the neuroplastic effects of psychedelics may be the underlying mechanism, implicating the glutamatergic and serotonergic systems (Artin, Zisook, and Ramanathan, 2021; Kadriu, Greenwald, Henter, Gilber, Kraus, Park, and Zarate, 2020). On a cellular level, psychedelics agonize serotonin (5-HT) receptors, characteristically agonizing the 5-HT<sub>2A</sub> receptor, which has been found to induce long-term structural changes in humans through processes such as neuroplasticity (Nutt, Spriggs, and Erritzoe, 2023). Theories of psychedelic effects and action in humans occurs predominantly through the discourses of neuroscience and psychiatry, with both psychedelics and antidepressants characteristically agonizing 5-HT receptors in the treatment of similar—and in many cases, the same—psychiatric diagnoses, although through tremendously different subjective experiences.

In light of the acute effects of psychedelics, contemporary psychedelic research sees a positioning of psychedelics as a medical development with promises of far-reaching implications at the individual and societal levels. In Knudsen's (2023) review of the enduring effects of psychedelics, he describes psychedelics as efficiently and thoroughly inducing durable alterations in fundamental areas of human subjectivity. He reviews existing literature corroborating how “just a single psychedelic dose is associated with long-lasting effects. This includes effects on personality, e.g., higher openness, and amelioration of depressive symptoms” as well as “effects on behaviours, attitudes, [and] values, ..., i.e., elements of a human's individuality that normally are regarded as relatively stable throughout adulthood.” Similarly, Nutt, Spriggs, and Erritzoe (2023) open their paper by describing psychedelics in psychiatry as “perhaps the most exciting new development in psychiatry,” a notion reiterated across papers and communications published during the contemporary “psychedelic renaissance” (Sessa, 2013). Clinical research into psychedelics has opened up new avenues of drug development and discovery, as well as

medicalized pathways to betterment for vulnerable demographics. Given that psychedelics still occupy a stigmatized status due to their strict regulation and scheduling in the twentieth century (Hall, 2022), their association with positive clinical outcomes and the potential for pharmaceuticalization confers legitimacy to their medical-scientific use, with psychedelics newly associated not just with recreation or pleasure, but also medical utility.

Current medical conceptions and uses of psychedelics within academic and non-academic settings alike can be attributed largely to the advocacy and research of the Multidisciplinary Association for Psychedelic Studies (MAPS). Founded by Rick Doblin, Ph.D., in 1986, MAPS is the organization most influential in ongoing efforts towards mainstreaming psychedelic medicine, focusing significant efforts and resources on education and advocacy surrounding psychedelic decriminalization and clinical use. MAPS researchers and clinicians conduct research exploring the effects of psychedelic-assisted psychotherapy, the practice of central focus within psychedelic medicine broadly. Concurrently, Doblin and others within the organization engage frequently in advocacy, with the objective of fostering changes to the legal and medical position of psychedelics in society. MAPS describes their mission to “develop medical, legal, and cultural contexts for people to benefit from the careful uses of psychedelics and marijuana” for the purpose of achieving liberatory states such as “mental health, well-being, and connection” (“Our Mission,” Multidisciplinary Association for Psychedelic Studies, 2022a; “About MAPS,” Multidisciplinary Association for Psychedelic Studies, 2022b). To develop such contexts, MAPS works to “[change] the way people think of, talk about, and consume psychedelics through research, education, and advocacy” (“About MAPS,” Multidisciplinary Association for Psychedelic Studies, 2022c).

As a major source of influence within contemporary psychedelic research, Doblin’s work, particularly through MAPS, continues to shape the emergence of psychedelics as medicinal tools

in the West. Doblin initially gained notoriety for his thesis exploring Pahnke's (1962) psilocybin study, referred to as the "Good Friday Experiment." The experiment involved the administration of psilocybin (30 mg) to a group of twenty divinity students of Protestant faith for the purpose of better understanding psychedelics and mystical experiences (Pahnke, 1962). Doblin (1991) conducted a long-term follow-up to Pahnke's (1962) study, locating 19 of 20 participants within the original study, interviewing 16 of them and administering the same questionnaire as Pahnke to determine the long-term mystical effects of psilocybin. As a major follow-up to Pahnke's study, Doblin gained widespread recognition within the psychedelic community for his work.

Major works by MAPS include research exploring MDMA-assisted psychotherapy for post-traumatic stress disorder (PTSD) patients, in addition to studies investigating the medical application of cannabis, lysergic acid diethylamide (LSD), ibogaine, and ayahuasca (Bonn-Miller, Sisley, Riggs, Yazar-Klosinski, Wang, Loflin, Shechet, Hennigan, Matthews, Emerson, and Doblin, 2021; Brown and Alper, 2017; Gasser, Holstein, Michel, Doblin, Yazar-Klosinski, Passie, and Brenneisen, 2014; Mitchell, Bogenschutz, Lilienstein, et al., 2023a; Mitchell, Bogenschutz, Lilienstein, et al., 2023b; Noller, Frampton, and Yazar-Klosinski, 2017; Thomas, Lucas, Capler, Tupper, and Martin, 2013). Such research has informed the development of expansions to the pharmaceutical market, orienting around an emerging psychedelics industry. Nevertheless, carefully-controlled psychedelic research remains limited (Muthukumaraswamy, Forsyth, and Lumley, 2021), and thus, firm conclusions cannot yet be drawn regarding the therapeutic efficacy of psychedelics, especially on a cross-cultural, global scale. Accordingly, caution and pause as attention surrounding therapeutic psychedelic-taking mounts is warranted in order to protect patients, the public, and the future of government-approved psychedelic-taking in humans.



Given the authority and contributions of Doblin and MAPS to contemporary psychedelic research, their work and messaging is consequential for the direction of psychedelic medicine broadly. Their influence and history thus provide a vast array of materials to consider in light of their role in shaping dominant narratives within the field. MAPS has published numerous primary sources on their website, available in the form of podcast interviews, press releases, and other forms of digital publication which centre efforts surrounding psychedelic medicine, research, marketization, and advocacy. Likewise, Doblin and related influential figures within contemporary psychedelic medicine have appeared in numerous publicly available talks and interviews, materials significantly shaping the digital landscape through which the public accesses information regarding psychedelics and their effects. Through these materials, dominant narratives within psychedelic medicine are clarified; initially from narratives of folk healing and counterculture (challenging cultural norms regarding purity, sobriety, and authority), to ones of psychological well-being, self-transformation, and global healing. Such narrative changes have associated psychedelics with normative values such as the minimization of abnormalities and perceived dysfunction (Cohen, 2013; Cohen, 2016), social progress and cohesion (Schiefer and van der Noll, 2017), and self-care and -change (Ward, 2015; Han, 2017; Rimke, 2020), as well as the “professionalization” (Hall, 1968; Wilensky, 1964) of psychedelic therapists. Doblin and MAPS’ primary message is one promotional of psychedelics for “mass mental health,” a notion examined within the analysis that follows, in light of the individualizing, medicalizing, depoliticizing, and utopian narratives present within contemporary psychedelic medicine.

Though MAPS has demonstrated the clinical potential of psychedelics, the organization has received criticism for their work with and focus on military personnel and police officers, and the dearth of Indigenous perspectives represented within their work (e.g., Silman, 2023). Such

insurgencies direct attention to the underlying ideological and practical ways in which psychedelics are being reoriented in public consciousness. With such social-cultural and political-institutional changes concerning the methods of utilization, social positioning, and regulation of psychedelics, and the experienced implications of the mainstreaming of psychedelic medicine, comes the necessity of examining such changes from a sociological perspective, with an awareness of interdependent influence of capital, class, ideology, and power within medical-scientific research and enterprise.

*Psychiatric Hegemony and Critical Psychedelic Studies*

Central to the analysis that follows are the theory of “psychiatric hegemony” and recent advancements in the emerging field of critical psychedelic studies, respectively, with the latter advancements pioneered largely by Devenot, Pace, and researchers at *Psymposia*. The present work builds upon the theoretical framework developed particularly in “Psychiatric Hegemony: A Marxist View of Social Constructionism” (Cohen, 2013), and the author’s subsequent work, *Psychiatric Hegemony: A Marxist Theory of Mental Illness* (Cohen, 2016), where Cohen examines the material and discursive/ideological (i.e., neoliberal) functions of psychiatry throughout the past two centuries. Such material and discursive/ideological functions directly inform contemporary psychedelic research, as psychedelic medicine continues to emerge predominantly through the disciplines of psychiatry and neuroscience. Within Cohen’s subsequent work, he links the practices and contemporary breadth of psychiatry to the individualizing, medicalizing, and depoliticizing ideology and policies emerging in the 1980s, particularly as a result of the “declining welfare state and an increasing focus on individualism” (Cohen, 2016, p. 20). Additionally, scholarship emerging from critical mental health studies and critical theory broadly are of additional theoretical relevance, with Han’s (2017) *Psychopolitics: Neoliberalism and New Technologies of Power* and

Mark Fisher's (2009) *Capitalist Realism* complementing Cohen's (2016) Marxist analysis of psychiatric discourse and practice, especially with regard to the theoretical view of neoliberalism as the ideology and political ordering of modern capitalism.

Cohen's (2013; 2016) works provide a Marxist perspective and critique of the mental health industry and related discourses and professional practices, assessing both material conditions and case studies to illustrate the role of neoliberal capitalist imperatives (e.g., privatization, commodification, individual autonomy, etc.) in effecting the individualized, medicalized, and depoliticized approach to mental health and healthcare across Western institutions globally (Cohen, 2013; Cohen, 2016). Cohen describes how "knowledge claims on human behaviour [are used] to depoliticise attempts at social transformation at the group and community level, in turn acknowledging only individual solutions as possible" (Cohen, 2016, p. 33). Such imperatives and approaches necessarily shape psychiatric discourse and practice, informing dominant narratives and their implications across the discipline of psychiatry at the individual and collective levels; including within contemporary psychedelic medicine, which continues to be revived through modern psychiatry. The theoretical perspectives developed in Cohen's works are of utmost relevance in assessing discourses and practices within psychedelic medicine, particularly as the field's individualizing, medicalizing, and depoliticizing narratives are coupled with utopian envisioning and linkages to countercultural sentiments and aesthetics. Such rhetorical and aesthetic positioning—and in particular, the association of psychedelics with freedom, world peace, and radical social change—is especially relevant and worth approaching critically given the limitations of medicine as it relates to broader, social-structural change.

In Cohen's (2013) paper, he addresses social constructionist perspectives on the "proliferation of categories of mental illness and ... increasing acceptance within [Western] society

of such categories as evidence of real disease,” challenging the ability of such perspectives to capture the extent to which the interests of capital and capital owners are reflected within psychiatric discourse and practice (Cohen, 2013, p. 3). Following Althusser (1971), Cohen (2013, p. 3) understands mental health professionals (or “psy-professionals,” as initially theorized by Rose, 1999) as practicing within a broader “ideological state apparatus, which conforms and functions to the needs of capital and the ruling classes.” Such interests necessarily effect the existence of psychological and behavioural imperatives for subordinate classes, including high levels of productive output and strict self-governance, with mental health professionals upholding (and enacting) such imperatives. Ideological state apparatuses, which include religious, educational, governmental, and other prominent institutions within society broadly, reinforce and shape dominant discourses and norms through ideology rather than force or explicit coercion (Althusser, 1971; Cohen, 2016). Such ideological and normative constraints are thus viewed as directly rooted in material or economic constraints, which position certain attitudes, behaviours, practices, relations, and states of being as favourable over others (Althusser, 1971; Cohen, 2016). This is in contrast to the social constructionist view, which localizes practices and discourses in psychiatry (and medicine broadly) to social control, rather than the imperatives of capitalism at both the material and ideological levels.

Cohen develops his theory of “psychiatric hegemony” as an improvement upon the social constructionist view of psychiatry through an incorporation of the material, economic incentives and interests exerting an overarching effect on psychiatric discourses, practice, and experiences (Cohen, 2013; Cohen, 2016), each aspect of which are reflected within contemporary efforts in psychedelic medicine, both economically and discursively. His theory centres the contemporary position of psychiatry in the West, as “psychiatric language and concepts have come to dominate

our everyday understandings of madness while other meanings are marginalized” (Cohen, 2013). This is evident in contemporary messaging and policies across institutions and fields, as well as in the attitudes, communications, and self-examination practices of Western subjects, each of which are increasingly aligned with the discourses and practices of psychiatry (Cohen, 2013; Cohen, 2016). Cohen’s (2013) paper ultimately intends “to make sense of those professionals who claim they can make sense of madness in modernity and have gained expertise and power as a result of such claims” (Cohen, 2013, p. 3). This is of particular relevance within the present work, as “psychedelic therapists” constitute a new grouping of mental health professionals, and as the discourses and practices of psychiatry (e.g., psychiatric nosology, therapeutic modalities) have conferred legitimacy to psychedelics in contemporary Western society.

It is important to note that within his work, Cohen does not deny the validity or existence of experiences of psychological suffering or dysphoria. Rather, he critically considers the observable changes, practices, discourses, and relations of power and production present within psychiatric practice and nosology, each of which are influenced by the overarching imperatives of the prevailing capitalist economic order (Cohen, 2016). His critical analyses are rooted in observation not only of recent changes in psychiatric discourse and practice, but also psychiatry’s historical record, which “is littered with too many acts of violence, torture, and death to be able to write them off as aberrations or exceptions in a ‘progressive’ and ‘scientific’ system of health care” (Cohen, 2016, p. viii). Like psychiatry, historical and contemporary Western psychedelic medicine, too, possesses records of violence and harm, from Dr. Donald Ewen Cameron’s MKULTRA experiments at the Allan Memorial Institute during the period of 1957 to 1964 (Noakes, 2021), to video footage released of the abuse of PTSD patient Meghan Buisson by her psychotherapist during a MAPS Phase II MDMA study in 2015 (Lindsay, 2022). In the case of Dr.

Cameron's work with the Central Intelligence Agency, it was thought that psychedelics could be used in the treatment of schizophrenia patients by "erasing memories and bringing patients to a childlike state," with researchers administering psychedelics to patients without their consent, and 77 former patients receiving compensation as a result of the abuse and ethics violations they endured (Noakes, 2021). While it stands to reason that individuals accessing psychiatric care are experiencing adverse affective or emotional states for which care might be urgently needed, the relations of power and authority-making within psychiatry, including in historical and contemporary Western psychedelic medicine, warrant a critical view, given the normative and ethical implications of psychiatry and psychedelic medicine as both healthcare services and economic ventures.

Cohen's later work extends his previous critical analyses of discourses and practices within the mental health industry and professions, providing a thorough examination of the economic, social, and psychological conditions which shape practitioner-patient relations, the discourses such relations occur within and by, and the normative and ethical implications of such relations, discourses, and practices (Cohen, 2016). At the centre of Cohen's (2016) theoretical framework is a "[grounding of] the mental health system as a moral and political project" (p. 8) whose "priorities and practices are fundamentally shaped by the goals of capitalism" (p. 18), including individualism, medicalization, and depoliticization. Cohen (2016) examines both the proliferation of psychiatric diagnoses and the widespread experience of negative emotional states in Western society, coupling such examination with an analysis of the widening and increasingly hegemonic position of the institution of psychiatry across the West. His analysis incorporates an awareness of the intersecting influence of economic, social, and psychological conditions on individual and collective experiences both presently and historically, emphasizing the embeddedness of capitalist

imperatives in psychiatry and biomedicine at large (Cohen, 2016). Coupled with Cohen's emphasis on the capitalist imperatives and relations informing psychiatry, he too places emphasis on the ideological effects of *neoliberal* capitalism in particular (Cohen, 2016). Integral to his theoretical framework is the role of neoliberalism in shaping all contemporary institutions in both their language and practice (Cohen, 2016).

Although neoliberalism is typically studied in relation to its social, political, and economic antecedents and implications, critical scholars have also extensively studied its downstream effects on fields such as psychiatry, psychology, and the mental health industry broadly. Others have focused on political reforms of the late twentieth century which saw the descent of welfare policies and increasing economic deregulation, each of which are purported to enable the public to pursue individual economic prosperity (Zeira, 2022). Individualism, economic deregulation, and privatization are inherent to neoliberalism, as is the valuing of individual modifications over collective action and truly emancipatory action and thought (Esposito and Perez, 2014; Harvey, 2005; Herrawi, Logan, Cheng, and Cosgrove, 2022; Moncrieff, 2008; Moncrieff, 2014; Moncrieff, 2018; Pickren, 2018; Teghtsoonian, 2009; Rimke, 2020; Zeira, 2022). Abbinet (2021, p. 96) describes such relations as a "transformation of the experience of religiosity, sacrifice, and redemption into a new aesthetic register of utility, productivity, and happiness," evoking new values, practices, and visual representations, each of which centre individual freedom and agency.

In *Psychopolitics: Neoliberalism and New Technologies of Power*, Han (2017, p. 10) describes neoliberal capitalism as introducing a social-psychological imperative of perpetual self-transformation, wherein "we do not deem ourselves subjugated subjects, but rather projects: always refashioning and reinventing ourselves. A sense of freedom attends passing from the state of subject to that of project." Such a project can take manifold forms, which under the prevailing

social-economic order, inherently necessitates a productive, “normal,” optimized, and efficient population (Abbinnet, 2021; Arnoldi, 2012; Bard, 2012; Bell, 1978; Cohen, 2016; Han, 2017). The downstream social effects of neoliberal political-economic policies and the institutionalization of neoliberalism include heightened imperatives of self-optimization, shaping the motivations and goals of entire collectives. Han (2017, p. 42) describes the imperatives of self-governance and self-change within psychiatric discourse, articulating how

[t]he neoliberal imperative of self-optimization serves only to promote perfect functioning within the system. Inhibitions, points of weakness and mistakes are to be therapeutically eliminated in order to enhance efficiency and performance. In turn, everything is made comparable and measurable and subjected to the logic of the market. It is not concern for the good life that drives self-optimization. Rather, self-optimization follows from systemic constraints—from the logic of quantifying success on the market.

Therapeutic frameworks, such as cognitive-behavioural therapy, have become of particular focus in Western society, again with an emphasis on individual thought patterns, emotional responses, and behaviour, centring individual over collective and politicized mobilization. Neoliberal capitalism, in shaping all aspects of human relations, necessarily informs aims and practices within the mental health industry, with the field experiencing a significant widening of institutional and commercial interest and power since at least early 1980s, when the *Diagnostic and Statistical Manual of Mental Disorders* released its third edition (Cohen, 2016). Like Han, Cohen (2016) thinks through the implications of such imperatives and changes in self-governance over time, emphasizing “the many dangers of simply ‘doing’ mental health work without any thought to the



wider structures in which [such activities are carried out]” (viii). In effect, Cohen (2016, p. 19) states that

the dominant norms and values of the ruling classes are reflected in the psychiatric discourse on human behaviour and the workings of the mind. Consequently, the psy-professions are responsible for facilitating the maximisation of profit for the ruling classes while individualising the social and economic conditions of the workers. The mental health system seeks to normalise the fundamentally oppressive relations of capitalism by focusing on the individual—rather than the society—as pathological and in need of adjustment through ‘treatment’ options.

While individuals may experience positive effects from available interventions, the widespread emphasis on and availability of individual adjustments through medicalized treatments or enhancements fails to address the inherently social and political origins of human distress and suffering, while also normalizing deficit-based approaches to care and the relations of power and production which shape the experience and development of such states in humans, thus upholding “the status quo, where the dominant norms and values of society are normalised and deviations from them are pathologised” (Cohen, 2016, p. 98). Simultaneously, the individualization, medicalization, and depoliticization of the source of and solutions to human suffering is, as Han (2017) articulates, not in service of eudaimonia, but in service of interests which orient around a vested interest in maximizing productivity, “normality,” and capital. In such pursuit, liberatory solutions and efforts towards emancipation of the subordinate classes, which would certainly influence reductions in psychological and social experiences of suffering, are stifled within

institutions across society, from union busting and exploitation in the workplace, to austerity measures in the political sphere, and individualized, medicalized, and depoliticized framings of inherently collective, material, and political experiences and issues.

The ways in which contemporary psychedelic medicine has taken up and operates through neoliberal capitalist imperatives is a central focus within the work of critical psychedelic scholars such as Devenot and Pace, with colleagues at *Psymposia*. Scholars and journalists at *Psymposia* have published articles, podcasts, interviews, and resources on various social platforms and within academic journals, contributing to a growing body of scientific and cultural knowledge regarding the practices, effects, and implications of contemporary psychedelic medicine. For instance, Pace and Devenot (2021) have published a seminal paper entitled “Right-Wing Psychedelia: Case Studies in Cultural Plasticity and Political Pluripotency” which examines “the nascent psychedelic medicine industry” and the ways in which “the potential for psychedelics to improve society” through pro-social outcomes, such as reduced authoritarianism and “increased environmental concern,” with the authors providing counterexamples to such claims. Their analysis of the role of neoliberal capitalism in shaping discourses in psychedelic medicine was further extended in their recent analysis of the use of “liberatory rhetoric” in psychedelic medicine (Davis, Pace, and Devenot, 2023), which is of particular relevance to the content examined in the analysis that follows.

Gearin and Devenot (2021) have also engaged in analyses of contemporary psychedelic medicine’s neoliberal orientation, examining emphases on ego dissolution and the ethical implications of the dominating and enduring focus psychedelic researchers and “thought leaders” place on the ego, its functions, and its dissolution, or the colloquial “ego death.” This becomes particularly problematic when such experiences of ego dissolution can disrupt one’s sense and

experience of self, and making sense of such experiences tie into broader culturally-contingent frameworks and conceptions which greatly contrast with Western attitudes towards the mind and human functioning (Gearin and Devenot, 2021).

Like ego dissolution, other forms of cognitive and emotional dissolution ought to be carefully considered, rather than intuitively posited as a beneficial psychological or phenomenological process. Such aspects of psychedelic medicine raise important questions regarding safety and subjectivity within psychedelic medicine, warranting critical reflection on how individualization, medicalization and pathologization (Davies, Pace, and Devenot, 2023), and depoliticization inform psychedelic approaches. Likewise, those at *Psymposia* have thoroughly assessed the phenomena of “true believers” (Pace and Devenot, 2021) within psychedelic medicine, which is of particular relevance within the present work. Han (2017, p. 23) describes the manner in which each

dispositive—every technique of domination—brings forth characteristic devotional objects that are employed in order to subjugate. Such objects materialize and stabilize dominion. Devotion and related words mean ‘submission,’ or ‘obedience.’ Smartphones represent digital devotion—indeed, they are the devotional objects of the Digital, period. ... Both the smartphone and the rosary serve the purpose of self-monitoring and control. Power operates more effectively when it delegates surveillance to discrete individuals.

Aspects of subjugation and subjectivity, devotion and submission, and self-governance are of essential relevance to the present work, as psychedelic medicine emerges through the discourses and practices of psychiatry, and a rendering of potentially adverse psychological states and effects

as a result of psychedelic-taking as positive, from sensations of dissociation to acute experiences of dysphoria. In light of recent work within critical psychedelic studies, the present work aims to extend both previous analyses into the individualizing, medicalizing, depoliticizing, and utopian narratives within psychedelic medicine (e.g., Davies, Pace, and Devenot, 2023; Gearin and Devenot, 2021; Pace and Devenot, 2021), contributing to the growing body of literature considering the implications of “psychedelic capitalism” (Devenot, Conner, and Doyle, 2022) and the extent to which psychiatry has become hegemonic in Western society and culture (Cohen, 2013; Cohen, 2016).

### *Chapter Overview and Objectives*

The present work seeks to advance recent theoretical developments within the emerging field of critical psychedelic studies through an examination of the dominant narratives within contemporary psychedelic medicine. Davies, Pace, and Devenot (2023) recently published an article examining the “liberatory rhetoric” adopted by proponents of psychedelic medicine, detailing how such language “subjects socially-determined distress to psychotropic intervention through the mechanisms of depoliticization, productivisation, pathologization, commodification, and de-collectivisation,” to no material effect on “the psychopharmaceutical status quo.” While in agreement with the conclusions drawn within this recent work, the present work couples together the themes of pathologization and commodification under medicalization, and productivisation and de-collectivization under individualism, while also placing greater theoretical emphasis on the countervailing effect of dominant narratives in psychedelic medicine on revolutionary thought and praxis. Like Cohen (2016), Davies, Pace, and Devenot (2023) too argue that in the absence of material change, psychedelic medicine, like medicine broadly, will not evoke the liberatory outcomes it proposes (e.g., widespread well-being, pro-sociality, ecological restoration, etc.),

particularly as psychedelic research and psychiatry are embedded in neoliberal capitalist imperatives inherently reliant upon exploitation, artificial scarcity, and alienation.

The following analysis addresses psychedelic medicine's dominant narratives, their antecedents, and their implications through four areas of investigation, beginning with individualism, then medicalization, depoliticization, and utopianism, respectively. In analyzing the individualizing narratives within psychedelic medicine, evidence concerning the interiorizing and individualizing nature of therapeutic outcomes are examined, with a narrative emphasis on purity and purification identified. In examining the medicalizing focus within psychedelic medicine, the imperatives of globalization and mass marketization are assessed in light of messaging centred on patient neurobiology. In examining the issues taken up by contemporary psychedelic medicine, the countervailing influence of dominant narratives in psychedelic medicine on the development of liberatory thinking and solutions is thus argued. Lastly, the utopian vision proposed by those such as Doblin and MAPS, emerging especially through the individualizing, medicalizing, and depoliticizing nature of dominant narratives in the field, is discussed. It is argued that such vision has the potential to not only stifle liberatory thinking and solutions, but also to mislead the public regarding the potential effects of psychedelics, if they were to enter mainstream medicine and psychiatric practice. Subsequently, the findings from the present analysis are discussed in relation to recent works in critical psychedelic studies (Davies, Pace, and Devenot, 2023).

## **Individualism and Medicalization**

### *Self-Help and Trauma*

Individualizing and medicalizing logic within psychedelic medicine orients largely around and through the discourses of self-help and trauma, with psychedelics positioned as medical tools aiding in an individual's development of self-acceptance, whether relating to one's disposition and

cognition, or past experiences, particularly if trauma-related. Much of the work of MAPS focuses on PTSD patients, with MDMA and other psychedelics viewed as a tool of purification, and understandings of the mind and behaviour embedded in Western psychotherapeutic and neurobiological frameworks.

In describing the psychotherapeutic effects of MDMA, Doblin frequently associates psychedelics with aiding in the process of self-acceptance, particularly as such a process relates to psychoanalytic conceptions of the unconscious mind. He states that MDMA “helps people to accept themselves. ... [If he] had to condense what everything—what MDMA does—is self-acceptance” (Doblin, 2022, 4:04-4:16). Elsewhere, MAPS takes up similar lines of thought, conducting research into the effects of psychedelic-taking on subjective states such as “self-compassion, burnout, professional quality of life, psychological inflexibility, and mood” (Multidisciplinary Association for Psychedelic Studies, 2019). In order to achieve such states, whether self-acceptance or self-compassion, an attenuation of burnout or an increase in cognitive flexibility, Doblin describes psychedelics as allowing individuals to better access the depths of their unconscious mind, a process which requires highly involved psychotherapeutic labour on the part of individuals and/or patients. Doblin’s focus on self-acceptance as a mechanism through which psychedelics exert their effects is particularly representative of the individualizing logic underlying conceptions and applications of psychedelics, with those experiencing distress positioned in need of developing into an accepted, “real,” or idealized version of oneself.

Individualizing logic is expressed elsewhere by Doblin, such as in thinking through why the public might be fearful of psychedelic-taking. Doblin articulates that

[s]ome people are afraid of psychedelics and MDMA because they're afraid of themselves. They're afraid of the things they have buried through the course of their life, that they've chosen not to deal with or not to look at. A lot of people think that people are basically animals; that society and its rules prevent us from destroying each other—from raping and pillaging—and that we need this system of laws and drug prohibition to prevent people from letting their evil natures come out. That if you end up unleashing the unconscious, that it's going to be for horrible, destructive purposes. And that's in a way true; we see that the Nazis and others were able to unleash the unconscious in ways that were horribly destructive. But there's a way to release it in a therapeutic context, and supportive context, where people's instincts are purified; where people grow and learn. So, I think there's a resistance to psychedelics by people that don't want to do their own inner work; that if other people are doing [...] their own difficult, painful work with psychedelics, it makes other people think, well maybe they should be doing it themselves, and if they don't want to do that, they will suppress other people" ("Why are some people afraid of psychedelics?", MDMA The Movie, 2015, 0:05-1:23).

As with Doblin's previous statement regarding psychedelics for self-acceptance, Doblin similarly positions hesitation towards psychedelic-taking as reflective of an individual's broader hesitancy towards self-change and self-work, which he and MAPS here and elsewhere position as a central subjective effect of psychedelics. He too frames historical violence as reflective of a damaging approach to "[unleashing] the unconscious," contrasting this framing with the psychotherapeutic utility of "[unleashing] the unconscious in a productive manner," where one's "instincts are purified" through "difficult, painful" psychotherapeutic labour. Such labour occurs through both

the consumption of psychedelics and the guidance of psychedelic psychotherapists, who hold an interpretive role within the psychedelic clinical context.

As in Western psychotherapy broadly, the psychedelic therapist holds a position of significant power and authority within psychedelic medicine, with Doblin, MAPS, and others placing emphasis on the therapeutic relationship between the clinician (or clinicians) and the patient. However, although psychedelic therapists hold a position of authority, psychedelics are still the tool through which individual change is taking place. Doblin describes the “psychedelic therapist” as being

best understood as just being a therapist. [With] psychedelic medicine [helping] people work through their traumas—addiction, depression, anxiety, post-traumatic stress disorder. The psychedelics bring you into a pure state of mind that makes the therapy more productive. ... We have at this point in time treated about 250 people with PTSD. A Vietnam vet, trapped in mental suffering for almost 50 years, went through MDMA-assisted psychotherapy and now no longer has PTSD (“Heal soul! Multidisciplinary Association for Psychedelic Studies,” Dr. Bronner’s, 2020, 0:29-1:17).

Again, notions of psychedelics effecting a purification of patients’ minds reappears, with experiences such as problematic substance use and related psychiatric diagnoses positioned as a function of trauma, separated from economic or political antecedents to the presentation of patients’ symptoms. With a focus on the veteran population, MAPS has provided a medical solution to (and account of) the experienced effects of war, individualizing and medicalizing approaches to addressing the consequences of geopolitical conflict. In another video, Doblin



reiterates similar narratives surrounding the effects of psychedelics, describing a veteran PTSD patient who had participated in a MAPS-sponsored MDMA-assisted psychotherapy study as stating, “PTSD changed my brain and MDMA changed it back” (Doblin, 2022, 0:49-0:59). Experiences of distress are framed as “traumas” for which psychedelics can be curative, with psychological transformation (e.g., self-acceptance or mystical experiences) and a biological reset (or “purification”) framed as mechanisms through which psychedelics can exert such effects.

Although Doblin and others emphasize the role of psychedelic therapists within psychedelic medicine broadly, Doblin, in some ways, subverts the therapeutic dynamic within psychedelic-assisted psychotherapy from relations of power typically found within Western psychotherapy. For instance, he describes how within “psychoanalysis, it’s the psychoanalyst that does the interpretation. And they then give this to the patient in a way, so that they are the healer; the source of the healing is outside the patient. [MAPS] trying to make it so that the source of the healing is inside the patient, so that they can do that on their own” (Sisko, 2022, 0:00-0:18). The proliferation of traumatic experiences and trauma-related disorders thus offers a worldwide demographic positioned as suited to the psychedelic experience, as all individuals, whether dealing with the effects of trauma or simply wanting to engage in self-improvement, may find utility in psychedelics.

### *Ego and the Default Mode Network*

The language of self-help and trauma relates to broader conceptions of psychedelic action and effects, as articulated by prominent figures in psychedelic medicine, including Doblin, Michael Pollan, and stakeholders in the medicalization of psychedelics. One of the most prominent narratives within psychedelic medicine is the association of psychedelic-taking with ego dissolution, or the transcendence of the self (Gearin and Devenot, 2021). This has led to the

development of ego-related explanations of psychedelic action, which are again wholly intertwined with Western conceptions of the human mind and behaviour. In localizing the subjective and biological effects of psychedelics to alterations in ego functioning, and in particular the dissolution of the ego, Doblin, Pollan, and others have centred the effects of psychedelics on the default mode network, a cluster of regions which are biologically responsible for essential ego functions (Gattuso, Perkins, Ruffell, Lawrence, Hoyer, Jacobson, Timmermann, Castle, Rossell, Downey, Pagni, Galvão-Coelho, Nutt, and Sarris, 2022). The effects of psychedelics on the ego and default mode network have dominated communications with the public throughout the last five years, originating largely from the public relations of those such as Doblin and Pollan. Doblin describes psychedelics as able to

weaken this sense of who we are, the ego sense—it’s been called, from neuroscientists, the default mode network, that’s sort of our resting state of scanning the world for what’s important to us as an individual—and when that’s been weakened, you kind of see how much we’re part of a much bigger picture, and that links to these mystical senses of connection, and people can draw strength from that (“Where Psychedelic Medicines are Headed with Rick Doblin, PhD,” End Well, 2021, 7:38-8:03).

This mechanism of action is associated with both mystical experiences and brain-based explanations of psychedelic effects. From around 2017 to present, ego- and default mode network-specific explanations of psychedelic action have become especially popular. Pollan has echoed similar narrative threads across numerous platforms, ranging from his book *How to Change Your*

*Mind*, published in 2018, to text-based and podcast interviews. In one such filmed interview, Pollan describes one's

ego functions, that 'self' idea, is a regulator of all mental activity. ... The brain is a hierarchical system and the default mode network appears to be at the top. It's kind of the orchestra conductor, or corporate executive. ... It appears to have a beneficial effect in terms of jogging the brain out of bad patterns. Many of the disorders that psychedelics appears [sic] to treat well are manifestations of a stuck brain. ... And if we have a tool for behaviour change, that's a huge deal ("How psychedelics work: Fire the conductor, let the orchestra play, Big Think, 2019, 2:53-4:49).

In adopting an individualized, deficit-based framing, Pollan associates psychedelics as effecting both biological and behavioural change, attenuating "bad patterns" within "a stuck brain." Doblin also positions psychedelic effects similarly, stating that psychedelics can increase positive clinical outcomes for those not benefitting from stand-alone psychotherapy. He describes how some

people need more than psychotherapy; that's what we have proved in our research, that some people can get better from psychotherapy, but [for] a lot of people, it's too painful, their memories, they need some help. So, the MDMA reduces activity in the amygdala, so that it really has this ability to help people to have these fearful memories without the fearful emotions. Also, MDMA enhances people's activity in the prefrontal cortex, so we are more logical, and we can tell ourselves a different story. ... Once the MDMA is gone,

once you've got this new story, it can sustain, it can persist, it can be durable (Doblin, 2022, 2:21-7:54).

While Doblin accurately acknowledges that some need more than just psychotherapy to effect positive psychological changes, he still relies on hegemonic notions of paths to betterment for patients; in particular, through pharmacological means. Likewise, he upholds a number of particular effects associated with psychedelic; namely, a reduction of fear and increase in “logical” thought. Similarly, in Netflix’s (2022) adaptation of Pollan’s (2018) *How to Change Your Mind*, other prominent psychedelic figure and researcher, Dr. Ben Sessa, psychiatrist and author of *The Psychedelic Renaissance*, published in 2013, describes a positively-appraised experience he had with friends on MDMA in previous decades, upholding similar lines of thought as Doblin; namely, reductions in particular “negative” emotions. Sessa sets a scene of him and his friends

lying around all loved-up, [when] somebody said, ‘oh, wow, this is amazing—so beautiful, and everything’s so perfect.’ ... And someone said, ‘let’s think of the worst possible thing we can imagine ... Let’s imagine our mums dying.’ And someone said, ‘it’s not that bad!’ And, [Sessa] didn’t know it then, but that was really what MDMA does. It allows you to think about and go to those dark, difficult, forbidden, avoidant memories that you normally wouldn’t be able to touch, but for some reason on MDMA, the fear and pain that would be associated with those memories is switched off (“MDMA,” *How to Change Your Mind*, 2022, 23:19-24:01).

This experience of dissociation and deactivation is likewise reiterated elsewhere by those such as Pollan, who describes how when the default mode “network goes quiet, or appears to on an fMRI, that’s when people report an experience of complete ego dissolution,” to which the moderator responds,

I think it’s very interesting, this idea of decentralizing the brain, and it’s very timely considering this theme—a lot of people here are probably from the blockchain world—this theme of decentralization and, so, in many ways, psychedelics are ... decentralizing the brain in the same way that blockchains are decentralizing economies (Pollan, 2018, 0:15-4:40).

In response, Pollan says, “[y]eah, in that sense, they’re anti-hierarchical, the experience. ... The fact is, the brain is being wired in a new way, temporarily, and that temporary rewiring can actually have lasting effects” (Pollan, 2018, 4:40-6:25). Throughout each of these communications, each of which occurring in video form, Doblin, Pollan, and Sessa reify particular explanations of psychedelic action, lauding ego dissolution and adopting metaphorical language which associates psychedelic effects with switch- or computer-like changes which reduce particular emotions they regard as negative. However, it is possible that particular negative emotions may serve an evolutionary or protective function for certain individuals, thus warranting critical consideration. In the reliance on psychiatric and neuroscientific explanations of psychedelic action, individualized explanations of psychedelic effects and actions are emphasized.

*Mainstreaming Psychedelics*

The mainstreaming of psychedelic medicine hinges directly upon the association of psychedelics with biological psychiatry and Western psychotherapy. However, Doblin and MAPS in particular have a stated goal of mass-medicalizing psychedelics, not simply for psychiatric disorders or particular patient populations, but for all demographics on a global scale. Doblin describes how “what [he and MAPS] want to do is mainstream psychedelic medicine, and make that available to people who have a wide range of clinical indications” (“Breakthrough for Psychedelic Medicine,” Multidisciplinary Association for Psychedelic Studies, 2018, 2:29-2:37). In another video, Doblin states his belief “that throughout the lifespan these experiences will have tremendous potential; and we can weave them into a lot of different therapeutic approaches” (“Where Psychedelic Medicines are Headed with Rick Doblin, PhD,” End Well, 2021, 7:17-7:28). Elsewhere, he describes his and MAPS’ work as oriented towards global growth and expansion, estimating

that over the next several decades, there will be thousands of psychedelic clinics established at which therapists will be able to administer MDMA, psilocybin, ketamine, and other psychedelics, to potentially millions of patients. These clinics can also evolve into centers where people can come for psychedelic psychotherapy for personal growth, for couple’s therapy, or for spiritual-mystical experiences (Doblin, 2019, 13:41-14:08).

Since all humans have a brain that can be modified and optimized, all demographics are positioned as potentially benefitting from the mass-medicalized availability of psychedelics, ranging from treating deficits to facilitating mystical experiences.

The globalization of psychedelic medicine would, for Doblin and MAPS, be a process in opposition to standard approaches to pharmaceutical development and administration. He states,

[w]e hope, if we can raise the money for Europe, that we'll have MDMA approved in 2021 or so, maybe early 2022, in both FDA and Europe. Then, we have roughly ten to fifteen years of thousands of psychedelic clinics being set up all over, and these clinics eventually are going to be for people that work with ketamine, with MDMA, with psilocybin. ... I think what will happen then is, you go to these clinics ... I think, the 'safety way' to think about this, that you go to a clinic, paid for by tax money, because, now we're selling these drugs and there's enough tax money, and you have one experience under supervision. So, you know what you're getting into. Then, you have to pass a little, simple written test, not so hard, and then you have a license to buy the drug on your own. ... I think it should be illegal for minors, but your parents should have an override, so that they can give it to you if they want to. Because, you look at the traditional societies that have integrated ayahuasca, integrated peyote, and they don't have age limits like that ("Rick Doblin: MDMA will be legal in 2035, OPEN Foundation, 2020, 1:11-3:16).

Doblin employs logics and practices rooted in cultural conceptions of psychedelic-taking that are in significant opposition to Western cultural, social, and medical norms. Although the practices he identifies may be of less risk to cultures across the globe, Western subjects do not necessarily have the same cultural and subjective lenses through which psychedelic experiences may be adequately integrated, running the risk of providing psychedelics as a widespread tool, without the requisite knowledge and perspectives needed to benefit from the experience at hand.

Other stakeholders in the global medicalization of psychedelics for widespread populations articulate the shamanic origins of current approaches within the field, although economic, social, and political benefits to Indigenous communities whose practices are currently being patented, appropriated, and medicalized within Western systems of care are not detailed (“Psychedelics Are Fueling a Mental Health Revolution,” *Bloomberg Origins*, 2021). One psychedelic executive, Shlomi Roz, in a *Bloomberg Origins* video alongside Doblin and other psychedelic stakeholders, describes how the work of Eleusis, the company at which Roz is Chief Executive Officer, originates in Indigenous healing systems and practices. The narrator begins by describing how “[Eleusis’s] inspiration comes from ancient shamanic practices, such as ayahuasca ceremonies in South America, which have become increasingly popular among people seeking alternative forms of healing after traditional treatments have failed them,” continuing on to say that, “this is not the job of a psychiatrist [and that he’s] not sure that you even want a psychotherapist in the room. Instead, the person that we think should be in the room is an attendant; someone where you feel safe in their presence. Are they certified, ... medical professionals? Not necessarily” (“Psychedelics Are Fueling a Mental Health Revolution,” *Bloomberg Origins*, 2021, 7:34-8:35). Thus, although psychedelic medicine is emerging through Western medicine and related institutions, the neoliberal imperatives of deregulation and privatization remain ever-present, extending to, for some, psychotherapists, although much of the ongoing efforts in psychedelic medicine do still orient around more regulated forms of psychedelic-assisted psychotherapy.

In addition to associating with various private medical psychedelic ventures, MAPS is also associated with figures and academic units in Silicon Valley. One researcher, taking up a deficit-based approach to autism spectrum disorder, describes the work of MAPS as



perfectly situated within Silicon Valley. One of the things that I've been mostly interested in at Stanford has been developing new therapies, both behavioural and drug-based, that can treat the core social deficits in autism and MAPS is doing a fantastic job in targeting a very clearly unmet need by looking at the effects of MDMA and the treatment of social anxiety and autism. ... We've all been working together to try and figure out what's the best approach to developing MDMA or investigating MDMA as a potential therapeutic in autism. ... Government funding has been applied to very basic-level research, or to drug discovery opportunities where there is a clear intellectual property component to it. The interesting thing about MDMA and other psychedelics in general is we're really talking about old drugs that have now re-emerged. Now that we understand the neurobiology a lot better, we can see there's an application to treating a variety of different indications. So, accessing private funding to be able to move this research over the line will not only help us in the short-term, but it will open up the opportunities to access and encourage federal funders to provide grants for this type of research ("MAPS in Silicon Valley: MDMA Biomarker Analysis at Stanford," Multidisciplinary Association for Psychedelics, 2015a, 0:08-2:48).

Although the mainstreaming of psychedelic medicine remains rooted in observations of psychedelics' propensity to elicit mystical-type experiences or effects, much of the ongoing research into medical psychedelics adopts a deficit-based understanding of variations in human functioning, characterizing symptoms associated with neurodivergence, such as autism spectrum disorder, as constituting deficits rather than neurodiversity.

Other psychedelic researchers take up similar narrative lines, such as Dr. Robin Carhartt-Harris's view of psychedelic action. On the popular right-wing show, *The Jordan B Peterson Podcast*, Peterson asks Carhartt-Harris about his theory of psychedelic action, stating:

[as] far as I can tell, [it] is that psychedelic usage enables the... .. it re-novelizes the environment, or re-novelizes experience, so that the effect of ... over-learning is ameliorated, at least temporarily, and that gives the cognitive system—that gives the person having the experience the opportunity to lay down new conceptions that are less constrained by that previous learning (“Consciousness, Chaos, and Order | Dr. Robin Carhart-Harris | EP 314,” Jordan B Peterson, 2022, 8:05-8:40).

Carhart-Harris responds, “That’s right.”

In another interview on the same podcast, other prominent thought leader and figure in psychedelic medicine, Dr. Dennis McKenna, brother of the late Terence McKenna, tells Peterson that

[t]he brain is resilient, the brain is always going to tend toward equilibrium, right? So, it’s going to fall back together, but it’s going to fall back together in a more functional way; and I think it’s very similar, in fact maybe, I think it’s quite similar to what happens when you reboot your computer. You get this big reset, essentially, and it comes back together, but it works more efficiently, because you’ve purged all the kludge out of it that builds up in this system. In that sense, it’s very much like, sort of purging your computer; when you reset it, you get rid of all that stuff (“Psychedelic Science | Dr. Dennis McKenna | EP 299,” Jordan B Peterson, 2022, 36:03-36:45).

Like Doblin, Pollan, Carson, and Carhartt-Harris, McKenna too adopts similar deficit-based framings, positioning psychedelics again as purifying or providing a “reset” of the brain, attenuating behavioural and psychological symptoms.

Furthermore, since psychedelics still remain relatively stigmatized in Western society due to myriad cultural, social, political, and economic factors, Doblin and MAPS push the medicalization of psychedelics as the primary method of achieving the decriminalization or legalization of psychedelics. Doblin describes how “medicalization changes attitudes, brings a more accurate risk-benefit analysis to people, ... and then they start changing their attitudes towards legalization” (Doblin, 2016, 18:21-18:31). In another interview, Doblin describes how “to understand what’s going on with MDMA-assisted psychotherapy, it helps to think in terms of exponential growth. ... MAPS is, in essence, a change agent using pharmaceutical science as the point of leverage into our society, but the goals go way beyond that” (“Breakthrough for Psychedelic Medicine,” Multidisciplinary Association for Psychedelic Studies, 2018, 0:00-2:08). Thus, although much of the dominant narratives in psychedelic medicine associate psychedelics with subjective states such as self-acceptance, positive psychological states, the reduction of traumatic responses, and so on, there is an underlying imperative of psychedelic legalization embedded in the goals of those like Doblin and MAPS.

### **Depoliticization and Utopianism**

In addition to the individualizing and medicalizing logic and narratives across discourses in contemporary psychedelic research, such narratives too possess a logic of depoliticization and utopianism, each of which operate in tandem with individualizing and medicalizing narratives. Depoliticization and utopianism are exemplified in the orientation of Doblin and MAPS around a

stated objective of “mass mental health” and “net-zero trauma,” each of which are positioned as potential effects of the global medicalization and access to psychedelics. MAPS has frequently posted about this objective on social media and across their website. For instance, they wrote online, quoting Rick Doblin, that their “goal is mass mental health, and that’s what [they’re] moving towards. Psychedelics have been used for thousands of years, so it’s not surprising there’s value in them” (Multidisciplinary Association for Psychedelic Studies, 2022d). Elsewhere, Doblin has articulated his “long-term goal: mass mental health and global spirituality” (Multidisciplinary Association for Psychedelic Studies, 2022a), positioned as arising through the global access to psychedelics. In a *TED Talk*, Doblin reiterates his global focus and orientation towards psychedelics for spiritual purposes, stating that “psychedelics, when used wisely, have the potential to help heal us, help inspire us, and perhaps even to help save us. Humanity now is in a race between catastrophe and consciousness. The psychedelic renaissance is here to help consciousness triumph” (Doblin for *TED*, 2019, 0:38-0:48).

In addition to MAPS’ ongoing focus on treating veteran and police PTSD patients, MAPS has also contributed to research into psychedelic-assisted psychotherapy for Palestinian and Israeli individuals affected by the atrocities of ongoing settler colonization and violence in the region. For instance, in the paper by Roseman et al. (2021), in affiliation with MAPS, the group explores “how psychedelics might contribute to processes of peacebuilding, and in particular how an intercultural context, embedded in a protracted conflict, would affect the group’s psychedelic processes in a relational sense.” They identified “a feeling of unity and ‘oneness,’ and that ‘social identities seemed to dissolve (such as national and religious identities)” (Roseman et al., 2021). They describe how “participants revisited personal or historical traumatic elements related to conflict, usually through visions. These events were triggered by the presence of ‘the Other,’ and there was

a political undertone in those personal visions.” Such observations led the authors to conclude that their study “has revealed that psychedelic ceremonies have the potential to contribute to peacebuilding. This can happen not just by ‘dissolution of identities,’ but also by providing a space in which shared spiritual experiences can emerge from intercultural and interfaith exchanges” (Roseman et al., 2021).

Ginsberg, co-author on the study, has written elsewhere for MAPS about the use of psychedelics for peace-making purposes, and for “healing cycles of trauma” (Ginsberg, 2019). She describes how

Allen Ginsberg, guided by Leary in a mushroom ritual, had agonizing visions which transformed into a momentary messianic frenzy, running naked attempting to call world leaders and turn them on. This vision ignited in him a revolutionary spirit, and in his integration, he made a pact with Leary to leave institutional exclusivity and bring mystical states to the people (Ginsberg, 2020).

In another communication for MAPS, Ginsberg (2020) presents the results of her collaborative work with MAPS and colleagues, presenting a talk entitled “Can Ayahuasca Promote Peace in the Middle East? Conversations with Palestinian and Israeli Ayahuasca Drinkers.” In her talk, she asks if “ayahuasca [can] help heal political cycles of trauma” (Ginsberg, 2020), later detailing the therapeutic coupling of ayahuasca drinking with elements of “New Age, Amazonian Shamanism, Buddhism, Judaism, Islam and Christianity,” with an “emphasis on spirituality and mysticism,” “Oneness,” and “‘inner’ transformation” (Ginsberg, 2020).

In addition to such lines of work, Doblin and MAPS' work with veterans and police officers constitute a major focus within their trauma-centred medicinal psychedelic research. Doblin describes his and MAPS' work, detailing how they are working to develop new therapeutic options for veterans diagnosed PTSD. Doblin articulates how

[v]eterans who are coming back from the war [often] feel that the psychological wounds that they are coming home with have not been successfully treated by the currently available treatments that are offered to them through the [Veterans Administration]. That they work for many soldiers, but there are some people for whom the currently available treatments do not work. And I think there's a lot of discontent by veterans who are searching for something else, and MDMA-assisted psychotherapy is something that can be helpful when other treatments have failed. What we're trying to do is work with the Veterans Administration, with the Department of Defense, so they can integrate this as one of the tools among the many that that they [use] with vets; and I think if they were to do so, it would have a higher level of satisfaction and cures among the vets that they're working with. We'll be able to be able to talk more persuasively to the VA and to the Department of Defense about how this might be one of the tools that they might want to add to the treatments that they offer through the formal system to the veterans that are coming back ("MDMA-Assisted Psychotherapy for Veterans with PTSD," Multidisciplinary Association for Psychedelic Studies, 2013, 0:00-1:21).

Doblin's orientation towards globalizing psychedelics for medical-spiritual ends originates in his personal use of and interest in psychedelic-taking. In another interview, he describes how he felt

as if “these experiences were so important to the survival of humanity .... I felt it was a lot of this sense of how we’re all connected, and that would undermine a certain kind of racism, prejudice, fundamentalism. And so, basically, at 18-years-old, [he] decided to devote [his] life to psychedelics for what it could do for [him] and others in the world” (“Where Psychedelic Medicines are Headed with Rick Doblin, End Well, 2021, 2:05-2:49).

As with Doblin’s framing of Nazism as reflective of a destructive “unleashing” of the “unconscious” mind, Doblin too details highly utopian lines of thought, again relating to Nazis and Nazism, in another discussion regarding the human capacity for evil, on a striking episode of the *Joe Rogan Podcast*. During the interview, he details a N,N-dimethyltryptamine (DMT) experience he had where he hallucinated a meeting with Hitler, tying the experience back to his primary objective of “mass mental health.” He orients this story around the notion that “we all have the capacity for evil,” and that he thought, “if everything’s part of you, and you’re part of everything, then Hitler’s part of you, too. It’s inner, and that was very shattering for me” (“Rick Doblin's DMT Realization About Hitler,” PowerfulJRE, 2021, 0:09-1:49). He goes on to state,

if we want to claim that we’re connected with everything, that it’s not just the evil out there, that it’s potentially in me, and it was very shattering. And the next day, we did ketamine, and so, this is where I did more see Hitler. So, this is actually an experience that has helped me with my political strategy, in a way, of what MAPS is doing, is both drug development, and drug policy reform. So, under this experience, it was very depressing and shattering to realize that I couldn’t just say all the evil’s out there, that I have this capacity, that Hitler’s inside me, so the next day under ketamine, I was hovering above and behind Hitler as he’s giving one of these speeches, like the Nuremburg rally kind of things, and the ketamine

gave me a bit of remove so I didn't freak out, I was there, but I was not there, so I didn't feel vulnerable in that way, and I saw him doing this speech, and I'm thinking, how do I get into his head, how do I help him not want to murder and kill and what can we do to undo this evil? And then I saw the heil Hitler salute, near the end of his speech, and he would put up his hand like that, and everybody in the crowd would do it back to him. And I felt like it was the one pushing out this energy and then the many pushing it back to him, and ... they would go back and forth, the intensity was kind of increasing. And, at that point, I was just realizing there's no way to get into his head, that—it has to be voluntary, and that he was getting so much from it, that he wouldn't—and I felt this panic rising above me, and I felt that if I were to panic I would never be able to be effective in the world, that I would just turn away from that, and then with ketamine, you can still breathe, and so I realized that if I just breathe, that might help me deal with this fear, and I started deep breathing, and then came this idea that ironically, rather than trying to change the mind of the one, we need to change the mind of the many. And that they don't get as much out of it as Hitler did, that they're giving their power to him. And so, that's where we need mass mental health (“Rick Doblin's DMT Realization About Hitler,” *PowerfulJRE*, 2021, 1:58-4:17).

The orientation of MAPS towards “mass mental health” and “net-zero trauma” is essential in making sense of the depoliticizing, utopian thinking and logic underpinning contemporary psychedelic medicine. Such messaging and imperatives include a focus on “psychedelics for personal, emotional, and spiritual growth [so] that we'll have a more spiritualized humanity to turn us more towards saving the planet from mass weapons, climate change, and prejudice” (“Aubrey



Marcus Podcast: The MDMA Therapy Revolution With Rick Doblin, Ph.D.,” Multidisciplinary Association for Psychedelic Studies, 2021d).

Similarly, discussions of “net-zero trauma” within psychedelic medicine also centre on intergenerational trauma, despite a continued lack of acknowledgement of the material and historical conditions shaping such experiences across lifespans and generations, as with the above communication. For instance, Amy Emerson, the CEO of MAPS Public Benefit Corporation, describes her and MAPS “hope that [they] can interrupt multigenerational trauma and move towards not just treating trauma but to mass mental health” (Multidisciplinary Association for Psychedelic Studies, 2021c). The effect of “mass mental health” is, in part, “net-zero trauma,” coupled with utopian ideals, from the abolition of fundamentalism, to peace-building, despite no systemic and structural solutions considered.

Taken together, discourses within psychedelic medicine, as exemplified by the communications of prominent figures within contemporary psychedelic medicine, such as Doblin and his work through MAPS, reveal the relationship between individualizing, medicalizing, depoliticizing, and utopian narratives, imperatives, and logics. With an overarching goal of “mass mental health” and “net-zero trauma,” psychedelic medicine is oriented around the development of psychedelic pharmaceuticals for a vast array of issues and demographics in Western society and across the globe. With an emphasis on trauma, Doblin and MAPS’ communications position psychedelics as a solution for myriad crises and instances of distress and suffering. However, such positioning relies on imperatives inherent to neoliberal capitalism, from individualizing distress and paths to recovery, increased medicalization and pharmaceutical development, and depoliticized conceptions of the origins of such crises. In overlooking material conditions shaping such experiences of distress, and in positioning psychedelics as possessing the ability to effect

global social change through individuals and the medical system, dominant narratives in contemporary psychedelic medicine provides answers to social and political problems it cannot alone solve. Like psychiatry broadly, psychedelic medicine offsets the public's ability to reckon with the economic origins of experiences of inequality and subjugation, thus stifling truly emancipatory thinking and action.

## **Discussion**

The aim of this thesis has been to examine dominant narratives within contemporary psychedelic medicine, how such narratives are informed by the broader hegemony of psychiatry (Cohen, 2013; Cohen, 2016), and the implications of such narratives at multiple levels of analysis. Integral to this analysis has been a theoretical awareness of the linkages between capital, class, ideology, and power within medical-scientific enterprise. In reviewing the communications and messaging of Rick Doblin and the Multidisciplinary Association for Psychedelic Studies in particular, the direction of and logic underpinning psychedelic medicine has been further clarified, representing, as within psychedelic medicine broadly, an orientation around individualizing, medicalizing, depoliticizing, and utopian narrative themes. In corroborating previous work within critical psychedelic studies and contributing to the growing body of literature concerning the normative and ethical consequences of ongoing practices and messaging within psychedelic medicine, the present work demonstrates, like Davies, Pace, and Devenot (2023) and Pace and Devenot (2021), that contemporary psychedelic medicine, despite the use of “liberatory rhetoric,” remains entrenched within normative and ethical ideals rooted in our broader economic and ideological systems of production, relations, and oppression, particularly through an adherence to neoliberal capitalist imperatives which centre the individual, the productive, the profitable, and the de-political; which, taken together, produce a utopian vision of the potential effects of

psychedelics, were they to be mainstreamed on a global scale. The “expansion of the mental health enterprise” (Cohen, 2013, p. 9) has thus entered the domain of psychedelia.

With efforts towards the mainstreaming of psychedelic medicine has come the association between psychedelics and healing. Han (2017, p. 42) describes healing as “the magic word” in “contemporary American self-help literature,” ultimately referring

to self-optimization that is supposed to therapeutically eliminate any and all functional weakness or mental obstacle in the efficiency and performance. Yet perpetual self-optimization, which coincides point-for-point with the optimization of the system, is proving destructive. It is leading to mental collapse. Self-optimization, it turns out, amounts to total self-exploitation.

While psychedelics are narratively portrayed as tools for global health, spirituality, and progress, they are also described as purifying or evoking purging, such as with McKenna’s analogy of psychedelic experiences as a sort of computer “reset.” Psychedelic-assisted therapy is likewise associated with notions of productivity and efficiency, whether through the speed at which psychedelics exert their long-term effects, or the breadth suitable demographics that Doblin and MAPS describe as potentially being able to benefit from psychedelics. Individuals remain the site of change, with authority remaining in the hands of psychedelic therapists with regard to integration and guidance. Therapeutic approaches in psychedelic medicine are quite similar to dominant approaches in Western psychotherapy, albeit intermixed with various spiritual and psychological frameworks. The language of biological psychiatry is relied upon largely, with emphases on the ego and default mode network, and phenomena such as ego dissolution. Such

communications further play into larger narratives within modern psychiatry broadly, with the use of computer-like language and brain-based explanations in the discussion of psychedelic experiences. Psychedelics are also narratively framed by Doblin in particular as appropriate for all when taken “responsibly” or “carefully.” Others, such as Bronner (2014), echo this sentiment, emphasizing that “properly used and approached psychedelics can enable us to realize a much more compassionate and conscious level of awareness and awareness of self and other, and get over all the trivial differences that divide us from each other and become much more aware of and respectful of our consumption choices.”

With such focus on mass mental health, Doblin emphasizes a world where psychedelics can be used to effect “net-zero trauma.” Although the effects of psychedelics are not restricted to medical outcomes, the method of making accessible psychedelics to the public is occurring through the medicalization of psychedelics. The medical explanation of psychedelic action within the content analyzed relies on brain-based explanations, with an emphasis on the default mode network (DMN). This primarily involves an association between the DMN and the propensity for psychedelics to induce ego dissolution, with the DMN associated with conceptions of the “self” and “ego functions.” This aligns with the focus within psychedelic medicine on individuals as the locus of healing and change, aligning with previous work by Gearin and Devenot (2021).

Both Doblin and MAPS have prioritized engagement with the public, whether through the mainstream media, social platforms, or popular culture. Through such engagement, is a self-awareness of the social positioning of psychedelics in Western society and culture, which potentially underlies the linkages between psychedelic medicine and the discourses of psychiatry and neuroscience; conferring legitimacy on psychedelic-taking from the perspective of Western subjects. Hundreds of hours of video footage exist online featuring Doblin and those associated

with MAPS, in addition to an abundance of textual documentation, emphasizing the role of psychedelics in contemporary medicine and a direction towards “mass mental health.”

For psychedelics to effect a utopia of mass mental health, change is positioned to occur first through individual psychedelic-taking for myriad curative and non-curative purposes. This process is rendered efficient, profound, and self-actualizing. With the individual as the locus of healing and change, psychedelics are described as exerting cellular changes and spiritual effects which evoke a purification or purging process, leading to increased cognitive and emotional functioning, self-acceptance, and connection. Although group-level outcomes are integrated into this vision of society following the mainstreaming of psychedelic medicine, individuals remain the locus of change, whereby the group-level effects are antecedent to individual psychedelic-taking. This is a pervasive logic in Western society, with neoliberal ideology influencing “a normative privileging of the individual [and] a preference for private sector funding for, and provision of, services” (Teghtsoonian, 2009). With individuals as the catalyst for “mass mental health” and “globalized spirituality,” there comes the opening of a new avenue for enterprise in the mental health and nootropics industries, with Doblin and MAPS explicitly working to substantiate the medical-scientific thesis in favour of widespread psychedelic access. Doblin, MAPS, and other prominent figures in contemporary psychedelic research have too emphasized the association between psychedelics and their potential role in global health. The associated claims have international implications, shaping public perceptions of psychedelics and organizational practices.

The emphasis on “mass mental health” possesses a logic which envisions “human enhancement [as] more than just an option: it is a moral obligation” (Hauskeller, 2016, p. 122). By positioning the end result of the mainstreaming of psychedelic medicine as “mass mental health,”

the use case and significance of making psychedelics accessible is implied, regardless of the likelihood of this outcome. MAPS and related figures emphasize the potential effects psychedelic medicine might have for enhancing humanity as a whole, through psychedelic-induced increases in spirituality and pro-social behaviours and attitudes. Rather than emphasizing structural or systemic change, emphasis is placed on changing individuals first and foremost, at the behavioural, psychological, and cellular levels. In this sense, not only are dominant narratives reflective of the material and ideological commitments of neoliberal capitalism, but also of transhumanist discourse, which emphasizes human enhancement and self-modification—whether through technological, pharmaceutical, or other means—as a moral imperative (Hauskeller, 2016). Within “transhumanist discourse, individual enhancements are related to and framed by broader visions of an enhancement of collective performance and even of fundamental transformations of humanity” (Arnaldi, 2012, p. 97), a sentiment reflected within the communications especially of Doblin. Such sentiments are coupled with narratives which center market expansion. Dominant narratives surrounding medicalization envision a future with a globalized psychedelics industry, with thousands of clinics accessible to broad patient demographics and those interested in psychedelic-taking broadly, including for “personal growth,” “couple’s therapy,” and “spiritual-mystical experiences.” Hauskeller (2016, p. 122) describes how there has been a collapse in the “distinction between therapy and enhancement,” a conceptual intermixing present within messaging surrounding psychedelic medicine. With the pharmaceuticalization of psychedelics has come the medical-scientific rationalization of psychedelic-taking; and with the cultural reinterest in psychedelics has come their positioning as nootropics, useful in intervening in various aspects of human life, from relationship complications to self-discovery.

The phenomena of psychedelic-taking for self-actualization purposes, as found through practices such as microdosing and psychedelic tourism, is widespread in places like Silicon Valley. Abbinnett (2021, p. 184) writes about how

[t]he techno-entrepreneur has become fetishized in neoliberal ideology: he replays past elements of bourgeois democracy (one off individualism, natural irreverence, irrepressible will, boundless optimism, philanthropy, love of life, etc.) and of the new order of things (incendiary genius, visionary wisdom, and the ability to apply theoretical science to practical problems), and is the apotheosis of both of them. What is important here is that the figure of the techno-entrepreneur has become the source of a constant escalation of performativity: we must all push ourselves as hard as we can, risk ourselves as much as possible, and overcome our moral scruples, in order to accelerate the arrival of the technological future that is coming.

The figure of the techno-entrepreneur is ever-present in psychedelic medicine, with those such as Elon Musk, Peter Thiel, and Jordan Peterson displaying a fascination with and support for medicinal psychedelics. It might also be argued that Doblin himself represents this sort of figure most prominently, especially through his advocacy. The association between such prominent figures and psychedelic medicine confers an additional sense of legitimacy to the field. There is simultaneously a widespread positivity in psychedelic medicine, while also positioning psychedelics as the tools through which widespread suffering can be solved. Baru and Mohan (2018) describe “how the activities of philanthro-capitalists have transformed the architecture of health governance,” which is apparent in the public relations and aims of psychedelic medicine.

One former MAPS executive describes psychedelics as a “disruptive technology,” emphasizing their potential to help a significant number of those suffering. This is not a new framing, particularly within Silicon Valley. Fisher (2009, p. 17-18) has previously called attention to

the establishment of settled ‘alternative’ or ‘independent’ cultural zones, which endlessly repeat older gestures of rebellion and contestation as if for the first time. ‘Alternative’ and ‘independent’ don’t designate something outside mainstream culture; rather, they are styles, in fact the dominant styles, within the mainstream.

Hancock (2019, p. 50) similarly emphasizes that

capitalism is counterculture. The new capitalism is transgressive and needs a counterculture that expands horizons and seeks out new possibilities; it needs an ideology that is focused on expression and the development of the self because any development in the social and the breaking down of any taboo establishes fresh markets.

The position of psychedelics in Western society and culture includes strong links to the counterculture of the 1960s, which serves as both an obstacle to legitimacy and a means through which a transformed vision of contemporary counterculture can be capitalized upon. With the positioning of psychedelics as having the potential to effect significant societal and global shifts in health and wellbeing, it is integral to critically consider why psychedelics are being emphasized as “disruptive” or revolutionary, and who stands to gain from such characterizations. In the 1990s, Dr. Peter Kramer, psychiatrist and author of *Listening to Prozac* (1993) made similar



characterizations to figures prominent in psychedelic medicine. For instance, he described how “people who do well on [Prozac] may say, ‘this is my real self’; that the transformation is not away from the self but towards some ideal self” (“Prozac: Revolution in a Capsule,” *The New York Times*, 2014, 3:09-3:17). In an interview on Charlie Rose (1994), Kramer further describes how his patients taking Prozac for depression have “said that they were better than they had ever been before—not just better than they were before they had become acutely depressed, but they had never felt as well as they felt on this medicine.” Decades later, Doblin (2019c), in recalling a psychedelic experience of his own, describes “saying ‘this [is] us speaking, it [isn’t] the drug speaking; that it permitted [my partner and me] to be in touch with deeper aspects of [ourselves], or truer aspects of [ourselves]; ... and so it felt genuinely real.” Like previous pharmaceutical solutions to mental health challenges, psychedelics have taken up similar narrative threads, imbuing psychedelics with notions of authentic self-change.

Further, Doblin and MAPS have placed an early focus on implementing psychedelic-assisted psychotherapy in the veteran and police officer populations. Doblin often references his and MAPS’ work with such groups, relying anecdotally on patient outcomes from research into the effects of psychedelics on treating PTSD in each population. The medicalization of psychedelics and their subjective effects overlaps with depoliticizing narratives within the field. Ginsberg (2020)’s talk surrounding the use of psychedelics in the healing of “political cycles of violence” (i.e., for Palestinian and Israeli participants) included mention of varying therapeutic approaches, with an “emphasis on ... inner transformation.” Further work should explore the importing of Western psychedelic medicine into such contexts, as it is beyond the scope of this thesis to examine the full implications of such research. However, the depoliticizing nature of such efforts are of significance to the present analysis, aligning with other findings within the present

work. For instance, PTSD diagnoses in veterans and police officers through their line of work is likewise depoliticized. Fisher (2009, p. 32-33) describes how

pathologization already forecloses any possibility of politicization. By privatizing these problems—treating them as if they were caused only by chemical imbalances in the individual’s neurology and/or by their family background—any question of social systemic causation is ruled out.

By positioning the effects of social and political issues as falling under the purview of medicine and technoscientific experimentation, emphasis is placed on individualized solutions to problems that cannot be solved through individual action or change alone. Pellizzoni and Ylönen (2012, p. 60) describe how “depoliticization is intrinsic to all hegemonic projects,” and in psychedelic medicine, such emphases and lines of research also reveal who “psychedelic medicine” is for, in both the clinical and cultural senses. Both the dominant narratives and legitimation practices within psychedelic medicine prioritize their association with medicine and science, conferring the field institutional legitimacy, and shaping public perceptions of psychedelics away from counterculture and towards notions of clinical betterment, spirituality, and healing. Doblin articulates explicitly that “it’s through medicine, and through science, that ... cultural attitudes about drugs [can be changed]” (“MAPS: Psychedelic Science in Silicon Valley,” Multidisciplinary Association for Psychedelic Studies, 2015b). Once such cultural attitudes have shifted, Doblin envisions a world with “more tolerance, compassion and empathy” (“MAPS: Psychedelic Science in Silicon Valley,” Multidisciplinary Association for Psychedelic Studies, 2015b). Doblin details “a telos, a perfected

state for human society to be actively pursued” (Arnaldi, 2012, p. 93), where psychedelics will evoke “mass mental health.”

Through examining authoritative messaging within the field of psychedelic medicine, the ongoing “expansion of the mental health enterprise” (Cohen, 2013, p. 9) has been examined. Cohen (2016) brings attention to “Marx and Engels’ (1965: 37) statement that capitalism ‘must nestle everywhere, settle everywhere, establish connections everywhere,’” a dialectical process currently effecting a resurgence of interest in psychedelics in Western society and culture. Relying on psychiatric and neuroscientific discourses, the communications and imperatives embedded within psychedelic medicine reveal not only the nascence of Cohen’s (2013; 2016) psychiatric hegemony, but also the extent to which neoliberal capitalist imperatives influence medical-scientific enterprise and advancement broadly. Fisher (2009, p. 29) has called the mental health field “a paradigm case of how capitalist realism operates,” particularly as it renders its clinical findings as “a natural fact.” In overlooking the class origins of many of the forms of suffering afflicting Western subjects, continual advancements and enhancements within medicine and science are proposed to solve issues with bases that are socially and politically contingent. With the rise of therapeutic and self-help discourses (Maasen, Sutter, and Duttweiler, 2007), new imperatives for Western subjects are emerging. The demands arising from such advancements and therapeutic opportunities

imply certain requirements in terms of a highly specific kind of communication: first, they are firmly based upon everybody’s capability to perform a demanding discourse called therapeutic communication. It entails our ability to present a problem to an expert, who will then help us, as a layperson, to solve that problem in various settings (be it short-term,

long-term therapy or counseling). Second, they require that one knows when to seek professional help and how to choose among various offers on the market (you pick up the phone, click into the self-help chat, or buy a book). Third, in all cases you need to transfer the lessons learned in special settings (on the couch or in a group seminar) into your everyday life (Maasen, Sutter, and Duttweiler, 2007).

As in traditional therapy, psychedelic therapy represents a heightening of the labour demands on the public, through the offering of an experience with a promise of inducing profound and durable subjective effects. This has the potential to “incite individual coping with social problems, instead of encouraging long-term political solutions” (Beeker, Mills, Bhugra, Meerman, Thoma, Heinze, and von Peter, 2021).

The role of economic conditions and social policy in shaping rising rates of mental health diagnoses cannot be overlooked as ongoing innovations in the mental health industry are underway, including in the area of psychedelic research and medicine. Maitra (2008, p. 194) articulates that “[a]s therapists everywhere know, victims of socially sanctioned violence in any form may not be simply rescued by formulaic solutions, whether taken from one’s movements (‘empowerment’), mainstream psychiatry (antidepressants to treat depression triggered by trauma), or the psychological therapies.” There must be material solutions (and organized, emancipatory action) to social and political problems which effect disturbances in the cognitive and emotional wellbeing of entire communities and collectives.

In light of the absence of material solutions in favour of expansions to the mental health industry, some have called for a reconfiguration of negative cognitive and emotional experiences, such as stress, in public consciousness. For instance, Fisher (2009, p. 29-30) argues that

it is necessary to reframe the growing problem of stress (and distress) in capitalist societies. Instead of treating it as incumbent on individuals to resolve their own psychological distress, instead, that is, of accepting the vast privatization of stress that has taken place over the last thirty years, we need to ask: how has it become acceptable that so many people, and especially so many young people, are ill? The ‘mental health plague’ in capitalist societies would suggest that, instead of being the only social system that works, capitalism is inherently dysfunctional, and that the cost of it appearing to work is very high.

Thus, given the nature and implications of dominant narratives within psychedelic medicine, there exists a pressing need to consider the material origins of rising rates of psychological distress, and to reckon with the limitations of the medical system in reducing such distress, particularly through individuals. Future works should continue to examine the implications of perpetuating individual coping mechanisms and solutions over collective, organized, emancipatory action and thinking.

## **Conclusions**

In summary, this thesis has undertaken an examination of dominant narratives within contemporary psychedelic medicine, exploring the nexus between broader neoliberal capitalist imperatives and discursive themes in contemporary psychedelic medicine. In exploring both the material and ideological bases of the individualizing, medicalizing, depoliticizing, and utopian narratives within psychedelic medicine, dominant discourses within psychedelic medicine have been clarified. The roles of capital, class, ideology, and power within medical-scientific enterprise has likewise been highlighted, demonstrating the countervailing effect the adoption of emancipatory language has across multiple levels of analysis. Corroborating previous work within

the emerging field of critical psychedelic studies, the present work aims to unsettle notions of “mass mental health” and “net-zero trauma” as they pertain to contemporary approaches within psychedelic research. The messaging of both Rick Doblin and the Multidisciplinary Association for Psychedelic Studies offer a specialized understanding of the direction and operations ongoing within psychedelic medicine, revealing the limitations of individualized, medicalized, depoliticized, and utopian narratives within the field.

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