



Entheogens and Sacred Psychology

Samuel Bendeck Sotillos

The *psychedelic renaissance* did not emerge from a void. While a tremendous upswell of interest in psychedelics can be observed today, there is scant acknowledgment of the current spiritual crisis that has led to this burgeoning enthusiasm. Having lost our sense of the sacred, we have – with disastrous consequences – become alienated from ourselves, others, and the natural environment. Secular psychotherapy and psychiatry have failed to address the myriad mental health problems that are prevalent right now, which has compelled people to desperately look for alternatives to fill the void in their lives. Sacred medicines have been used for millennia in humanity’s traditional cultures as part of their spiritual practices. Now that Psychedelic-Assisted Psychotherapy (PAT) is being developed, we must avoid repeating the mistakes of modern psychology, which misguidedly seeks to situate entheogenic therapy on a desacralized foundation of materialism, reductionism, and scientism. Nevertheless, although the full benefit of entheogens can likely be gained only in the context of a sacred tradition, they may still have some measure of therapeutic value even when used in conjunction with secular psychotherapy. This article examines the metaphysical foundations of sacred psychology and argues that entheogenic therapy needs to be grounded on the same basis. The framework employed here is a *transpersonal perspective* that applies the insights found in the world’s great wisdom traditions. It will be argued that the adoption of psychedelics in mental health treatment presupposes a fully integrated psychotherapy that is possible only when it is rooted in a spiritually informed ontology.



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For the Kaliyuga... only a drastic medicine... is effective.

– Rāmakrishna (1977, 464)

For the same medicine is not suited for all, even when the illness is the same.

– St. Peter of Damaskos (1995, 185)

When your body is sick, it is sometimes necessary to take a strong drug. But when you are healthy, you don't take drugs. So this special medicine [note: entheogens] cures some sickness...

– Seung Sahn (1976, 97)

[P]art of a remedy contains poison... In all things there is a poison, and there is nothing without a poison. It depends only upon the dose whether a poison is poison or not...

– Paracelsus (1988, 95)

1 Introduction

Central to any discussion of entheogens are the circumstances in which we currently find ourselves. We live in a time of extremes, a great variety of which are visible all around us. Things not only appear to be out of place, but they are altogether abysmally wrong. The emergence of the *psychedelic renaissance* needs to be situated in light of the spiritual crisis that afflicts the modern world. As Albert Hofmann (1906–2008) said, “[t]he assertion that there is no truth, that everything is relative... is a demoralizing worldview that has had devastating consequences” (2013, 45). Without acknowledging the momentous developments that led to this eclipse of the sacred – principally *scientism* and *materialism* – is difficult to make sense of the explosion of interest in psychedelics, and their perceived capacity to heal the maladies of our time.

To be sure, the Western world is experiencing a resurgence of interest in the therapeutic potential of sacred plants with a long history of ceremonial use by the First Peoples. There is a search for more holistic forms of mental health treatment that go beyond the mere management of symptoms and, instead, pursue authentic healing and wholeness. The vacuum created by the loss of religion in the world today is often unrecognized in this discussion because of the hegemonic dominance of modern science and its empirical epistemology that rules out alternative modes of knowing reality. The wide-ranging consequence of this outlook is paramount, as Antonin Artaud (1896–1948) asserted when he wrote: “*That sense of the sacred which European consciousness has lost [note: is] the root of all our misfortunes*”

(Artaud 1976, 22). For many, this void has been filled with modern psychology and science. Therefore, the psychedelic renaissance is situated at a critical juncture, in which the mental health treatments of a totalitarian modern science will either continue, or a return to the metaphysical frameworks and methodologies of sacred psychologies will allow for a multivalent approach to epistemological pluralism.

A case will be made that bringing the insights of humanity's spiritual traditions to the discipline of psychology will greatly enhance therapeutic outcomes in the use of entheogens. In other words, a study of psychotherapy and the human psyche is proposed according to a perspective that is both metaphysical and transcendent in its assumptions. This is consistent with how a “science of the soul” was understood by the traditional cultures of the world prior to the emergence of modernity. While phenomenology – as informed by the epistemological pluralism of the sacred – is conducive to such an undertaking, our approach to this philosophical framework will differ from conventional applications.

Some further qualifications are needed here because we must differentiate between several levels when considering the therapeutic use of entheogens in traditional cultures: (1) general healing; (2) religious salvation; and (3) spiritual realization or enlightenment. If the general goal of entheogenic therapy is simply rehabilitation for the average person, this may not require adherence to a religio-spiritual framework for such treatment to be partially effective. With that said, PAT offered in a secular context can achieve predictably controllable protocols of treatment in a relatively safe context. So while it may not be necessary to observe the strict requirements of a spiritual tradition when having recourse to such treatment, we will nonetheless present the optimal conditions under which entheogenic therapy is likely to be most efficacious.

While much can be said about entheogens, we need to be clear about the scope of this study. Its aim is to situate Psychedelic-Assisted Psychotherapy (PAT) within the ontology and metaphysics at the heart of humanity's spiritual traditions. What it will *not* focus on are the following:

1. The idea that entheogens can produce religious-mystical experiences equivalent to those of the saints and sages of the world's spiritual traditions. [1]
2. The thesis that the nature and origin of all religions derive from entheogenic use. [2]

3. The claim that entheogens encompass the entire gamut of spiritual activity across all sacred traditions that use them in a ritual context, rather than serving as adjuncts in support of genuine religious practices. [3]

If we are going to take the highest ambitions of modern psychology seriously – for, as James Bugental (1915–2008) insists, “[a] truly human psychotherapy must celebrate the uniqueness of humankind and of each human individual” (1999, 61) – we need to acknowledge that secular therapies are unable to fulfill such promises, which is why we must turn to the sacred forms of therapy rooted in humanity’s spiritual patrimony. Czech-born psychiatrist and entheogenic therapy pioneer Stanislav Grof emphasized that “[p]sychedelic therapy can use the framework of different religions” (1980, 109) yet, to date, this has not been realized. It follows that entheogenic therapy must not be situated within the reductionistic and desacralized foundations of modern Western psychology. This has been pointed out for some time, yet it still holds for the plethora of novel therapies that have emerged since these words of caution from Robert Masters (1927–2008) and Jean Houston: “psychedelic[s]... as an ‘adjunct’ to old, and in some cases obsolete, therapies will not provide us with equal benefits” (Masters and Houston 1970, 342).

Many have observed that psychedelic therapy, as practiced today, lacks a fully developed theoretical basis [4]. The need for a properly integrated framework has been advocated by numerous authorities: “The fault lies not in the drugs, but in the psychotherapeutic framework in which they are used. The psychedelics are, after all, merely adjuncts to therapy, not a form of therapy per se” (Caldwell 1969, 285). As the wounds of our collective psyche become more apparent by the day, there is perhaps nothing more urgent than the need to recover an authentic psychology or “science of the soul” that is rooted in metaphysics, sacred science, and the spiritual healing of psychic illness.

In this connection, we need to stress that we are facing a global mental health calamity right now (Insel 2022). Statistics demonstrate the alarming rise in the number of people taking psychotropic medications. There is mounting research suggesting that these drugs fail to work as commonly expected – in many cases, they not only create more problems (such as unwanted side effects), but they can also cause chronic and irreversible harm. The fact that more people are being diagnosed and treated does not mean that there has been a decrease in mental health problems; on the contrary, the number of those seeking support has markedly escalated.

To escape the “counter-cultural” baggage of the term *psychedelic* (a Greek compound coined in 1956 meaning “mind-manifesting”) [5], the word *entheogen* (Gr. “accessing the divine within”) was proposed in 1979 (Ruck *et al.* 1998, 137–139). Prior to the introduction of these terms, a common label was *hallucinogens* (Lat. “traveling in the mind”) or *psychotomimetic* (also known as *psychotogenic*), which referred to the ability of these substances to mimic symptoms of psychosis, such as the alteration of perception, thoughts, and feelings.

2 Psychedelics in the Modern World

After nearly five decades of being underground, psychedelics have returned. Before they were banned, psychedelic research was burgeoning in the 1950s and 1960s (given the anticipated therapeutic potential), but these endeavors were hampered globally in the 1970s and 1980s despite purported evidence of enduring benefits. In the wake of the prohibition, we are now experiencing what has been widely hailed as the *psychedelic renaissance*, which began with the revival of research in the 1990s. Some divide this period into an initial wave of psychedelic research in the West (approximately 1950–1985), followed by a subsequent wave (2000 to present). However, by many accounts, while such research was officially curbed, there were always those dedicated to this cause who continued this work in underground communities.

The war on drugs has, in large part, shaped the public’s opinion on psychedelics, equating them with illegal activity and criminal behavior. These policies have disproportionately affected people of color and those struggling with mental health difficulties which, in turn, has led to mass incarcerations. This has conferred a tremendous stigma on these sacred medicines in the public mind, which is still difficult to overcome. To be sure, there were abuses of psychedelics that led to their proscription, and to scheduling that precluded clinical research from continuing, yet not everything reported was accurate.

Much was sensationalized in the mainstream media, which was focused on the detrimental effects of psychedelics. An example of this was the cover story published in the March 1966 edition of *Life* magazine entitled *LSD: The Exploding Threat of the Mind Drug That Got Out of Control* (Moore and Schiller 1966), and the December 1965 editorial *LSD – A Dangerous Drug* (Editors 1965, 1280) in the *New England Journal of Medicine*, a respected medical publication, that

ignored an entire body of research. It is therefore important to be clear about the benefits of entheogens when used under the right conditions, seeing as much fear has been instilled by poor research that has only served to thwart public access to accurate information about this phenomenon. Psychiatrist Sidney Cohen (1910–1987) points out (quoted in Subcommittee on Executive Reorganization of the Committee on Government Operations 1966, 152):

It must be explicitly stated that some individuals should never take drugs of this category, and that one's friends are not suitable judges of who are suitable candidates. Furthermore, a secure environment is essential for the protection of the subject who takes LSD for he is vulnerable, hypersuggestible and emotionally liable. In the hands of experts these agents are relatively safe, but they are potential mind-shakers which should not be lightly or frivolously consumed.

The United States government also had a large part to play in the harmful (and unethical) dehumanization of diverse peoples – especially in marginalized communities – caused by psychedelics through the MK-ULTRA and other mind-control programs of the Central Intelligence Agency (CIA), which sought to experiment with behavioral modification techniques by covert means (Lee and Shlain 1992; Albarelli Jr. 2009; Strauss *et al.* 2022). It cannot be overlooked that the infamous cult leader Charles Manson (1934–2017) participated in CIA-funded drug research and used psychedelics to brainwash his followers into murdering people without remorse (O'Neill and Piepenbring 2019).

It can hardly escape notice that the “*birth of the Psychedelic Age*” (Ott 1980, vii) very much resembles the advent of the introduction of Eastern thought to the West, which figured significantly in the counter-cultural revolution of the 1960s. It was during this time that there was a great hunger and fascination for all things Eastern. With the weakening of faith in the dominant religions of the West (namely Judaism and Christianity), seekers sought refuge in Eastern philosophy to free themselves of the perceived baggage of the faiths they had abandoned.

The ambiance of the psychedelic movement decades later appears to be the same, albeit with more restraint and sophistication. The focus is now on the psychological health and well-being that psychedelics can offer, as evidenced by clinical trials that confirm their efficacy for use in mental health treatment. There is also recognition of the errors made in the previously widespread and indiscriminate use of these powerful substances that led to their prohibition.

In order to avoid similar mistakes again, the movement has established education protocols to help shape the public narrative, to dispel myths and misinformation, and to highlight the benefits of entheogens.

As modern psychology has supplanted the role of religion in the contemporary world, people have been left alone to “find themselves,” encouraged to seek relief from their travails without any recourse to the spiritual domain. Yet all valid forms of sacred psychology prior to the modern world had an ontological foundation. During the medieval period, the West shared a largely common metaphysical outlook with many of the world's spiritual traditions; it was only in the period following the Renaissance, the Scientific Revolution, and the European Enlightenment that a desacralized outlook gained ascendancy (Bendeck Sotillos 2022a, 29–46).

Never before has humanity had access to these sacred medicines without having to participate in a ritual order of reality revealed by sacred tradition. Since their discovery and use in the modern world, these remedies have been employed for the first time outside a committed spiritual path. Traditional peoples have always maintained very strict formal requirements and ethical guidelines for their use. Today, anyone wishing to have the experiences they offer is free to do so with little to no constraints.

Advocacy for the use of psychedelics in isolation from a traditional spiritual context dates back to 1924, when German pharmacologist Louis Lewin (1850–1929) documented the therapeutic potential of entheogens in his landmark study *Phantastica* (Lewin 1998, xv):

Not only are these [note: mind-changing] drugs of general interest to mankind as a whole, but they possess a high degree of scientific interest for the medical man, especially the psychologist and alienist [note: psychiatrist], as well as for the jurist and ethnologist.

Modern psychedelic science could be said to have begun in 1938 when Hofmann synthesized lysergic acid diethylamide (LSD) at Sandoz Laboratories in Basel in Switzerland, or when he discovered the psychoactive properties of LSD when accidentally dosing himself in 1943 and taking his well-documented and life-changing bicycle ride under its influence. However, it was Richard Evans Schultes (1915–2001), an American biologist considered to be the “father of modern Ethnobotany,” who, in 1938, discovered the botanical identity of *ololiuqui* (*Turbina corymbosa* – formerly known as *Rivea corymbosa*, a species of morning glory), a psyche-

delic plant considered sacred to the Aztecs (1941). In 1960, Hofmann isolated lysergic acid amide from *ololiuqui* seeds, finding them analogous to LSD (Hofmann 1963, 194–212). It is worth recalling that the earliest scientific work on psychedelics was conducted in 1897 by the German pharmacologist and chemist Arthur Heffter (1859–1925), who isolated mescaline from peyote (*Lophophora williamsii*).

It is important to clarify that the use of sacred medicines in the traditional world – especially for the First Peoples and their shamanic traditions – has existed for much longer than its modern Western uses. To be sure, entheogens are not new. In this context, we are reminded of the Mazatec native healer, María Sabina (1894–1985), who introduced the ceremonial use of psilocybin mushrooms to R. Gordon Wasson (1898–1986) in June 1955, who then documented his experiences in a landmark *Life* magazine article entitled *Seeking the Magic Mushroom* (1957). A week later, his wife – Russian-American pediatrician and ethnomycologist Valentina Wasson (1901–1958) – recounted her participation in this indigenous ritual in a magazine article from *This Week* titled *I Ate the Sacred Mushrooms*.

One might wonder why the Wassons published their discoveries in popular magazines such as *Life* and *This Week* rather than in standard scholarly journals. Nevertheless, Wasson and his wife soon acquired a mythical status – although recent details have surfaced that undermine the narrative that has hitherto prevailed (Irving 2013, 565–619). Unknown to Wasson, the funding of his 1956 expedition to Huautla de Jiménez was made by the CIA's MK-ULTRA Subproject 58, of which Sidney Gottlieb (1918–1999) was the mastermind (Marks 1991; Kinzer 2020). This reveals the CIA's role in launching the psychedelic revolution for its own nefarious covert purposes. With that noted, it was Schultes who first identified *teonanácatl* (Nahuatl for “flesh of the gods”) – the sacred mushroom of the Aztecs in the late 1930s (Schultes 1939, 37–54; 1940, 429–443).

Wasson inspired American psychologist and counter-culture advocate Timothy Leary (1920–1996) to follow in his footsteps when he traveled to Cuernavaca in Mexico during August 1960 to try psilocybin mushrooms, which changed the course of his life [6]. Leary recalls, “[i]n four hours by the swimming pool in Cuernavaca I learned more about the mind, the brain, and its structures than I did in the preceding fifteen [note: years] as a diligent psychologist” (1990a, 33). It was Wasson who sent specimens of the *Psilocybe mexicana* mushroom to Hofmann, who, in 1958, was able to identify two psychoactive compounds for the development of a synthetic version of psilocybin. Beat writer William

Burroughs (1914–1990) traveled to the Amazon in 1953 to explore *yagé* (*ayahuasca*), followed by Allen Ginsberg (1926–1997) in 1960, resulting in the popular book *The Yage Letters* (1963). Following this surge of interest, other prominent individuals emerged who ignited further interest in shamanic or indigenous entheogenic traditions, such as Carlos Castañeda (1925–1998) (de Mille 1976; 1980) and Michael J. Harner (1929–2018) – all of this attention contributed to the widespread popularization of psychedelics in the modern West, which, in turn, served to launch the 1960s counter-culture and New Age movements (Aldred 2000, 329–352; Partridge 2019, 652–662).

3 Shadows of the Psychedelic Renaissance

It has been said that the sacred uses of mind-altering substances are the “*best kept secret*” (Smith 1998, 10) in the history of humanity, referring to a hidden knowledge about the abiding use of entheogens within diverse spiritual practices worldwide. The psychedelic movement is not monolithic in nature, as it reflects varying perspectives on how entheogens should be used. The problems surrounding present-day psychedelic use are illuminated by this telling comment: “[H]ow lucky those of us were who... approached LSD before it had either the demoniacal or the paradisiacal vibrations it has now – when it had no echoes of gurus and heroes, doctors or delinquents” (Huxley 1999, 74). Given this attitude, an astute observer has remarked that “[t]he psychedelic movement is *antinomian*” (Smith 1967, 146). This is indeed the case, as it radically breaks with sacred tradition by not conforming to its protective wisdom and healing knowledge – preferring to be led, instead, by its own idiosyncratic inclinations.

We need to recall the infamous maxim of the English occultist Aleister Crowley (1875–1947) [7]: “*Do what thou wilt shall be the whole of the Law*” (1976, 9). This is an inversion of what we find in St. Augustine (354–430): “*Love [note: God], and do what thou wilt*” (1888, 504). Leary, being instrumental in launching the psychedelic revolution, was not only influenced by Crowley but thought of himself as a continuator of his legacy, dubbing himself a “high priest” (1995) and writing a book called *Start Your Own Religion* (1967).

The psychedelic renaissance has been marked by the problematic phenomenon known as “*spiritual materialism*” (Trungpa 2002) which is all too often unnoticed or ignored. Due to the loss of a sense of the sacred in the modern world, people are forced to find new ways to give meaning

to their lives. As human beings are created for the Absolute, we cannot but yearn for it (even if unawares), but if this longing is not directed at its proper object, we will only be misled by counterfeit spiritualities such as the New Age movement, which undermines all forms of traditional wisdom. We need to be cautious about embracing a so-called spirituality based on “the religion of no religion” as popularized by Frederic Spiegelberg (1897–1994). Within the psychedelic movement, it has been suggested that entheogens could become “*the basis of a new religiosity*” (Hofmann 1980, 208) that would replace sacred tradition altogether. What this outlook fails to recognize is that it is not enough to simply acknowledge the esoteric dimension underlying all the world’s religions – what is required is to live their saving truths according to an authentic revealed tradition.

In light of this spiritual void in many modern people, we find a mentality that desperately seeks experiences and quick cures for all sorts of maladies, without submitting to the discipline of a valid religion. We also witness the proliferation of psychedelic cults led by self-professed “guides” with authoritarian personalities, who lack proper initiation or traditional qualifications in taking care of the souls entrusted to them.

We are reminded to approach a spiritual path on terms determined by the Divine, not by us: “*We ought to obey God rather than men*” (Acts 5:29). As it has been pointed out, we should “*enter houses through their proper doors*” (Qur’ān 2:189). The inner, mystical dimension of religion is only accessible through its outer, formal dimension. These two aspects are complementary and inseparable from one another, since both are grounded in divine revelation. The spiritual impoverishment created by secular humanism cannot be addressed by the use of psychedelics alone; we need to come under the sway of a sacred tradition, before even contemplating the use of entheogens because only conformity to a tried and tested path will ensure the safest and most beneficial outcomes. Likewise, the profane and undisciplined “expansion” of our consciousness alone will not resolve the deep-rooted crisis of modernity.

There is always a practical element to our lives, such that no matter how profound an experience we may have, there is still a need to conduct our everyday lives responsibly by attending to our work and families, while navigating our perilous and ephemeral sojourn in this world. No spiritual tradition that uses sacred medicines as adjuncts does so in order to avoid reality. Rather, they are committed to preserving the sacred ways in order to unite the community

around them, and to embody this timeless wisdom within themselves.

There are always real dangers in using psychedelics. Whether one has what is called either a “good” or “bad” trip, it needs to be remembered that any experience, even a difficult one, can also have positive outcomes that may open a door to an authentic spiritual path. We recall here Shakespeare’s (1564–1616) great insight: “*Sweet are the uses of adversity / Which, like the toad, ugly and venomous, / Wears yet a precious jewel in his head*” (Shakespeare 2004, 49). We also need to be cautious about psychedelic experiences because, even when helpful, they can distract us from pursuing the Divine. Many people have been seduced by these seemingly other-worldly awakenings. For this reason, we should not concentrate on the phenomenal aspect alone, because it remains rooted in a “horizontal” dimension of existence; instead, we need to focus our hearts and minds on the noumenal, which pertains to “vertical” reality.

There is a danger in grasping for more and more psychedelic experiences. As Alan Watts (1915–1973) is often quoted as saying: “*When you get the message, hang up the phone*” (1965, 26). We also recall the words of the Taoist sage Chuang Tzū (c. 369–c. 286) who remarked: “*The fish trap exists because of the fish; once you’ve gotten the fish, you can forget the trap*” (Chuang Tzū 1996, 140). This idea is important, as many seekers who look for psychedelic experiences do not have any formal affiliation with an authentic spiritual tradition. For First Peoples who employ these sacred medicines ceremonially, there is no need for “hanging up the phone” because there is no “attachment” to these realms of consciousness, as entheogens have been fully integrated into their way of life and sacred traditions.

The renowned scholar of comparative religion Huston Smith (1919–2016) offers the following perceptive observations of the shortcomings in the psychedelic mentality (Smith 2000, 41, 42):

To argue that there are things in religion that are best kept secret cuts against our democratic grain, yet tested religions do so argue. There are pearls which, cast before swine, will be damaged themselves (by trampling) or damage the swine (should the swine eat them). In the Bhagavad Gita, Krishna forbids imparting higher knowledge to those who are not ready for it... Either (as I have said) the subject will be damaged, or the significance of the experience will be missed and the encounter trivialized. Thus either the subject is damaged, or the dharma is damaged, usually both. The psychedelic movement pays lip service

to these dangers by advising screening and preparing subjects, but on the whole it honors the esoteric/exoteric distinction only perfunctorily.

Even within the psychedelic movement, the need to ground oneself in a spiritual practice has been thought of as imperative: “*Psychedelic experience, without the accompanying... daily practice, may otherwise be frittered away in an excess of narcissism and self-indulgence*” (Strassman 2000, 306).

Without submitting ourselves to an authentic guide, while following a proper traditional path, the ego will go down a blind alley of endless self-assertion. There were always initiatory rites and ethical norms that governed the taking of sacred medicine. These could not be transgressed without harming the psyche, and the experience itself was mediated by means of a collective wisdom inherent to a time-tested sacred path; it was not for the ego to engage in precarious innovations. The psychedelic renaissance does away with all these protections – as do its counter-cultural heirs – who tend to observe a few more precautionary measures, while still adhering to a fundamentally secular paradigm.

Today, many sacred medicines are being threatened with extinction because of ravenous consumerism, commodification, and a reckless extraction of these plants. The growing demand for entheogens in the West has disrupted traditional communities and their ecology; in some cases, these medicines have dwindled in number, making it difficult to access them for traditional ceremonies. The rise of psychedelic tourism has also had a significant impact on this dire situation. These developments are inseparable from modernity’s spiritual malaise, along with other consequent crises such as those related to mental health and the environment (Bendeck Sotillos 2022b, 34–55).

4 María Sabina and the Appropriation of the Sacred

The question is often asked as to which people have rights to sacred medicine. An obvious response is the indigenous peoples who have used them for millennia. Yet what remains unclear is who else might be justified in making claim to them, and what protocols ought to be observed by those who are not the traditional custodians of these remedies. The notion of “cultural appropriation” is a major hurdle to overcome. Who owns the rights to these plants, seeing as they are not always the property of one people (even if they do happen to be the traditional users)? The loss of the sa-

cred in the modern world and the *trauma of secularism* that has followed in its wake, should provoke a discussion regarding the destruction of cultures (Bendeck Sotillos 2022c, 23–53). Because of our alienation from our primordial nature (and thus each other), we identify with culture in an absolute manner, not realizing that it enjoys only a relative status; in other words, all people are extrinsically diverse by nature, yet unified as one humanity at a more underlying level.

By contributing to the well-being of First Peoples, who have made entheogenic medicines available to the world, we can learn to fully respect their sacred epistemologies and healing modalities. Approaching diversity requires a profound sense of humility that sees culture as the outgrowth of divine revelation, which, in turn, is inseparable from spiritual tradition.

María Sabina’s paternal side of the family was known to possess traditional healing knowledge. Although she came from a line of indigenous healers, she also identified with the Christian tradition and did not see any conflict in embracing both spiritual paths. María Sabina was true to the Mazatec religion while remaining committed to the Christian faith, seeking always to be close to God. The first “ceremony” (Es. *velada*) she attended where mushrooms were used was when her uncle became sick and required treatment by a healer. Subsequently, María Sabina herself became very ill and it was reported that she could not move. Sacred medicinal mushrooms were then successfully administered to her, during which time María Sabina was told that she too would be able to heal people through her devotion to God. For example, her sister also became sick, and it was predicted that she would die, but María Sabina was able to cure her, and word quickly spread regarding her abilities. Notwithstanding these gifts, she had a very difficult life and suffered greatly.

Without María Sabina, Wasson’s contributions to psychedelic research would not have been as influential, both as they are now, and prior to the ban on these substances. However, it was because he disrespected their traditional uses that María Sabina later expressed regret for introducing Wasson to psilocybin mushrooms: Prior to his arrival on the scene, “*nobody took the mushrooms only to find God. They were always taken for the sick to get well*” (María Sabina quoted in Estrada 1981, 73). She remarked:

Before Wasson, I felt that the saint children [note: mushrooms] elevated me. I don’t feel like that anymore. The force has diminished. If Cayetano [note: García]

hadn't brought the foreigners... the saint children would have kept their power... [F]rom the moment the foreigners arrived... the saint children lost their purity. They lost their force; the foreigners spoiled them. From now on they won't be any good. There's no remedy for it. (María Sabina quoted in Estrada 1981, 91, 90)

This statement is very disheartening and casts a negative light on the modern uses of these substances outside of a traditional context.

It is worth documenting Wasson's response to these reflections. Although appearing apologetic, he did not regret his cultural appropriation, suggesting that this knowledge would have been lost had he not saved it from its inevitable fate. In 1976, Wasson wrote (quoted in Estrada 1981, 20):

These words make me wince: I, Gordon Wasson, am held responsible for the end of a religious practice in Meso-america that goes back far, for... millenia. I fear she spoke the truth... At the time of my first velada with María Sabina, in 1955, I had to make a choice: suppress my experience or resolve to present it worthily to the world. There was never a doubt in my mind. The sacred mushrooms and the religious feeling concentrated in them through the Sierras of Southern Mexico had to be made known to the world, and worthily so, at whatever cost to me personally. If I did not do this, 'consulting the mushroom' would go on for a few years longer, but its extinction was and is inevitable.

He went so far as to say that what he did was necessary in order that the sacred mushroom rite "*could be preserved by us, for posterity*" (quoted in Forte 1988, 17). He did not believe that the Mazatec were able to preserve their sacred heritage and felt that only he and his affiliates were qualified to become its proper custodians.

Wasson's lack of remorse for what happened to the Mazatec people and their sacred tradition confirms the rank antinomianism behind the modern psychedelic movement: "*I was merely the precursor of the New Day. I arrived in the same decade with the highway, the airplane, the alphabet. The Old Order was in danger of passing with no one to record its passing. The wisdom of the Sabia, genuine though it was, has nothing to give to the world of tomorrow*" (1980, 223). Wasson could not have been more mistaken about traditional wisdom and its relevance for us today. We have much to learn from María Sabina, along with other traditional healers, to whom we ought to be tremendously grateful for our knowledge of these sacred medicines. Wasson's own per-

nicious appropriation mirrors precisely how many approach the use of sacred plants in the psychedelic renaissance movement.

Divulging the mysteries of sacred mushrooms to the outside world had deleterious consequences, not only to María Sabina but to the Mazatec people and their lands. Commercialization desecrated what was most sacred to them. Wasson claims that if he had not brought the world's attention to these mushrooms, knowledge of them would have been forever lost. However, this was not his decision to make. From the Mazatec perspective, the mushrooms became corrupted, which meant that they had largely lost their spiritual potency.

It is difficult to accept that psilocybin was first introduced into the modern West by Wasson – Vice-President of Public Relations at J. P. Morgan & Company – and Henry Luce (1898–1967), the owner of *Life* magazine; two less likely representatives of the counterculture could hardly be imagined! Upon Wasson's return from Mexico, it is reported that he conducted *ad hoc* mushroom ceremonies in his Manhattan apartment.

5 In Quest of Integrative Mental Health

The current mental health crisis has cast light on the fact that mainstream therapy does not support a wide group of people in their quest for improved mental health and deeper self-integration. Entheogenic treatments (under the umbrella of PAT) are poised between a conventional Western medical model and secular psychotherapy—these have clear shortcomings, because they cannot honor the fullness of what it means to be human in connection to Spirit, soul, and body. In the same way that modern science has its biases, we need to ensure that psychedelic research and therapy does not also limit itself to this same truncated framework. It must transcend "*those fashionable ruts of thinking that we dignify by calling them logic and reason*" (Osmond 1964, 143).

Although we see mental health services, including medication management, being made available to more people than ever before, critical cases have not declined as might be expected. If these approaches were as effective as they are widely touted to be, numbers ought to have decreased (or at least plateaued) rather than dramatically spiked as they have done. Furthermore, there are not enough therapists to support this massive upsurge (which is likely the

case), but this does not disprove the lack of remedial efficacy in mainstream psychotherapy and psychiatry. Trauma has been identified as key to many mental health diagnoses, so it is unsettling that – after over one hundred years of modern therapies – “*there is no established single drug or psychotherapy treatment that gets to the root cause of trauma*” (Sessa 2017, 742).

The modern Western “medical model” fails to support mental health treatment that is fully integrated spiritually. This is because it remains plagued by Cartesian bifurcation, which perpetuates the separation of mind and body by neglecting both what transcends and unites them. Another blind spot is its erroneous foundation in behaviorism and psychoanalysis – all subsequent therapeutic modalities are grounded on this desacralized bedrock (Bendeck Sotillos 2021, 18–37).

Swiss psychiatrist Ludwig Binswanger (1881–1966) made some pointed criticism of the fragmented mentality that undergirds modern Western psychology, observing that the chief culprit was a doctrinal “cancer” inherent in a “*subject-object cleavage of the world*” (quoted in May *et al.* 1958, 11). A key figure responsible for this pervasive dichotomy in modern science was René Descartes (1596–1650), who advocated a form of mind-body dualism that continues to have an enduring influence on the development of modernity’s *Weltanschauung*.

Descartes appeared to have foreseen the future of modern science, including its psychology, seeing as current mental health practices push, for the most part, treatments that are solely confined to empirically validated techniques. The Cartesian divide between *res extensa* (Lat. “extended entity”) and *res cogitans* (Lat. “thinking entity”) makes no allowance for overcoming this partition, thus reducing all human experience to a private, subjective realm bereft of objective reality.

This corrosive dualism lives on in modern science, especially in the fields of psychology and psychiatry, where its persistent influence is deeply embedded in their epistemological frameworks. It is especially to be found in the clinical diagnosis and treatment of mental illness, which severs the psychological (Gr. *psyche*) from the biological (Gr. *soma*). The Scottish psychiatrist R. D. Laing (1927–1989) acknowledged how widespread this medical model is, calling it the “*set of procedures in which all doctors are trained*” (2001, 39). It thus remains the dominant schema within these disciplines. Its thoroughly reductionist outlook views mental disorders as solely the product of physiological factors and

treats them, accordingly, as physical diseases; it generally divorces itself from broader psychological and transpersonal realities, instead becoming wholly fixed on a disease’s etiology (Elkins 2009, 66–84).

Grof (1985, 51) speaks to the wholesale overhaul that is needed in order to break the spell of narrow-minded scientific beliefs:

Scientific thinking in contemporary medicine, psychiatry, psychology, and anthropology represents a direct expression of the seventeenth century Newtonian-Cartesian model of the universe. Since all the basic assumptions of this way of viewing reality have been [note: seriously undermined and discredited], it seems only natural to expect profound changes sooner or later in all the disciplines that are its direct derivatives.

This is not a “gap” in our knowledge about these matters but, rather, a hegemonic conceptual dominance within the discipline that has determined how mental health treatment in the West is understood.

In response to concerns with this exceedingly narrow outlook, the biopsychosocial model emerged to encompass more dimensions of human reality, such as the social and cultural, with a view to gaining a fuller understanding of illness and health. It was George L. Engel (1913–1999) who popularized this approach after having observed a crisis that he attributed to an “*adherence to a model of disease no longer adequate for the scientific tasks and social responsibilities of either medicine or psychiatry*” (1977, 129). In this attempt to overcome mind-body dualism, he asserted that the following levels all need to be taken into account: “*the social, psychological, and biological*” (1977, 133). The pioneering work of influential psychiatrist Adolf Meyer (1866–1950), and of American psychiatrist and neurologist Roy R. Grinker, Sr. (1900–1993), contributed to the further development of the biopsychosocial model first established by Engel.

With the limitations of the medical model having been recognized, the biopsychosocial standard was soon found to have its own limitations because it could not adequately explain the various factors that determine psychopathology (Ghaemi 2009a, 3–4; 2009b). Even though it was more inclusive than its predecessor, it still fell short in failing to situate the spiritual dimension at the heart of the human condition. Some have advocated for a biopsychosocial model that embraces spirituality and, while this is certainly more satisfactory, its assumptions are still *ad hoc* and not

properly integrated into a “vertical” dimension. What is not acknowledged here is that the spiritual domain transcends (while fully embracing) brain functioning, psychological dispositions, and social influences, among other factors. This corresponds to the tripartite structure of the human being, although Spirit alone can fully bring into balance and harmonize all these aspects of our human nature.

It should be noted that entheogenic therapy is not immune to scientific reductionism when situated on the erroneous foundations of modern Western psychology. Pioneers within psychedelic research have discussed the limitations found in contemporary psychotherapy models (Osmond 1964, 141):

Our preoccupation with behavior, because it is measurable, has led us to assume that what can be measured must be valuable and vice versa... An emphasis on the measurable and the reductive has resulted in the limitation of interest by psychiatrists and psychologists to aspects of experience that fit in with this concept.

With this observed, these pioneers have not been able to provide a better-integrated model due to the desacralized roots of modern psychotherapy and its mental health treatments. By contrast, the use of entheogenic remedies within long-established spiritual traditions has roots in metaphysics, which does not depend on the scientific method for its insights. Healing and growth, rather than treatment, is something that psychedelic therapy – under the right circumstances – could offer. To achieve more effective forms of treatment, we need to acknowledge “*that where there is no therapeutic intent, there is no therapeutic result*” (quoted in Abramson 1960, 193).

6 Differentiating Psychic from Spiritual Realities

It is often overlooked that a traditional culture, in which entheogens are used, supports the efficacy of healing. Being born and raised in the ambiance of a sacred cosmology also provides a certain measure of psycho-spiritual protection. Notwithstanding these advantages, people in such cultures can still become ill, just like anyone else, and thus require intervention that restores wholeness. Once healing has been completed, a person returns to a sacralized life with its rites and ceremonies so as to maintain their human equilibrium; something that we do not find in modern Western psychology.

Whitall N. Perry (1920–2005) illustrates why psychic phenomena are so seductive and difficult to discern: “*The confusion is between the psychic and spiritual planes of reality, where the unfamiliar, the strange, and the bizarre are mistaken for the transcendent, simply by the fact that they lie outside the ordinary modes of consciousness*” (Perry 1996, 10). This recognition appears to be missing from the standard professional literature, and in any of the discussions related to psychedelic science and the hopes invested in it. French metaphysician René Guénon (1886–1951) elaborates on these dangers (Guénon 2001, 239–240):

It is impossible to be too mistrustful of every appeal to the ‘subconscious’... in a sort of ‘cosmic consciousness’ that shuts out all ‘transcendence’ and so also shuts out all effective spirituality... but what is to be said of someone who flings himself into the ocean and has no aspiration but to drown himself in it? This is very precisely the significance of a so-called ‘fusion’ with a ‘cosmic consciousness’ that is really nothing but the confused and indistinct assemblage of all the psychic influences... these influences have absolutely nothing in common with spiritual influences... Those who make this fatal mistake either forget about or are unaware of the distinction between the ‘upper waters’ and the ‘lower waters’; instead of raising themselves toward the ‘ocean above’, they plunge into the abyss of the ‘ocean below’; instead of concentrating all their powers so as to direct them toward the formless world, which alone can be called ‘spiritual’, they disperse them in the endlessly changeable and fugitive diversity of the forms of subtle manifestation... with no suspicion that they are mistaking for a fullness of ‘life’ something that is in truth the realm of death and of a dissolution without hope of return.

Although not adequately addressed within the psychedelic renaissance, the notion of “consciousness expansion” for its own sake can be spiritually dangerous. Lama Anagarika Govinda (1898–1985) writes (Anagarika Govinda 1972, 27):

[T]he mere expansion of a muddled consciousness, in which the faculties of discrimination, mental balance and understanding have not yet been developed, does not constitute an improvement and will not lead to the attainment or the realization of a higher dimension of consciousness, but only to a worse confusion, to an expansion of ignorance and an indiscriminate involvement in irrelevant impressions and emotions.

He goes on to add, “[t]hose who descend into the depth of this universal consciousness, without having found their inner cen-

tre, will be swallowed by it or will be swept away to their doom, like a rudderless ship that is lost in the immensity of the ocean" (Anagarika Govinda 1972, 30). Through traversing a spiritual path, we can learn to clearly recognize these realms. The Tibetan teacher Chögyam Trungpa (1940–1987) referred to psychedelic experiences as a “double illusion” or “super samsara” (Chögyam Trungpa quoted in Fields 1986, 309) which could, nevertheless, be helpful in better understanding the unilluminated dimension of our consciousness.

A traditional healer or shaman has the ability to “leave his body and ascend to the sky or descend to the underworld” (Eliade 1974, 5); however, secular approaches cannot access these transcendent realms of consciousness and their corresponding healing modalities. Secular psychotherapy, as offered through conventional forms of mental health treatment, can only discern the lowest aspects of the psyche.

The religion of the First Peoples present us with a sacred symbolism that sustains entheogenic therapy – “the purpose of taking yagé is to return to the uterus, to the fons et origo of all things, where the individual ‘sees’ the tribal divinities, the creation of the universe and humanity, the first human couple, the creation of the animals, and the establishment of the social order” (Reichel-Dolmatoff 1974b, 102). According to the First Peoples of Africa who belong to the Bwiti religion (which also uses entheogens): “Joy, joy the ancestors give joyful welcome and hear the news. The troubled life of the born ones is finished... All the misfortunes are shorn away! They leave... Everything clean... All is new... All is bright... I have seen the dead and I do not fear” (quoted in Fernandez 1982, 488–489). According to the Hindu tradition, “[w]e have drunk Soma and become immortal; we have attained the light, the gods discovered” (R̥gveda 8:48:3). Patañjali points out that “the psychic powers may be obtained either by birth, or by means of drugs, or by the power of words, or by the practice of austerities, or by concentration” (Patañjali 4:1).

When it comes to the study of extraordinary states of consciousness, modern psychology has scant insights to offer (Bendeck Sotillos 2023c, 12–21). The myopic outlook of the post-Enlightenment is still trapped within the confines of “consensus reality” (Tart 1975, vii) and struggles to see beyond its truncated foundations; however, “anomalous phenomena” (Grof 2006, xx) within consciousness studies are gradually calling into question the validity of modern science’s premises.

There is a widely cited passage within the psychedelic literature from Andrew Weil: “[T]he desire to alter consciousness periodically is an innate, normal drive analogous to hunger or

the sexual drive” (1986, 19). Through metaphysics, we can make sense of the compulsion to transcend ordinary consciousness. This is not about attaining exalted states *per se* but, rather, reclaiming who we really are: namely, human beings who are inseparable from the Absolute.

Leary once wrote about the lack of understanding of non-ordinary states of consciousness within present-day mental health treatment: “We were on our own. Western psychological literature had almost no guides, no maps, no texts that even recognized the existence of altered states” (1990a, 42). Hence, it was declared that “[c]onsciousness eludes any scientific explanation” (Hofmann 2013, 57) and that, thus far, “there is no good theory of consciousness. There is not even agreement about what a theory of consciousness would be like” (Hofstadter and Dennett 1982, 8).

Beyond the corporeal and psychic realms, traditional forms of wisdom maintain that human beings are able to occupy multiple states of consciousness. Buddhist writer Marco Pallis (1895–1989) explains that “Man is but one of an indefinite number of states of the being” (1949, 127). William James (1842–1910), the “father of American Psychology,” appears to concur (1985, 388):

[O]ur normal waking consciousness... is but one special type of consciousness, whilst all about it, parted from it by the filmiest of screens, there lie potential forms of consciousness entirely different. We may go through life without suspecting their existence; but apply the requisite stimulus, and at a touch they are there in all their completeness... No account of the universe in its totality can be final which leaves these other forms of consciousness quite disregarded. How to regard them is the question... At any rate, they forbid a premature closing of our accounts with reality.

The sacred psychologies of humanity’s diverse cultures provide us with a key for understanding these other states of mind. Due to their limited scope, empirical epistemologies fail to grasp them, as they can only take into account “horizontal” dimensions of reality. Perhaps the closest that modern psychology comes to acknowledging unconventional states of consciousness is through the notion of “unhabitual perception” [8].

Psychotherapists need an adequate metaphysical-spiritual framework in which to situate the myriad phenomena that arise when dealing with psychic forces; however, this possibility cannot be admitted by mainstream psychology, as the

discipline has renounced any connection to higher orders of reality.

7 The Transpersonal Dimension of Healing

Traditional cultures recognize the human body's innate wisdom and capacity to heal, along with the spiritual dimension that supports this transformation. If psychology does not return to its sacred roots, it will fail to see the tripartite division of human beings into Spirit, soul, and body—this is critical to appreciating each person's innate healing modalities (Bendeck Sotillos 2023b, 9–26). As traditional healers affirm, “[t]here is no sickness without a cause” (Calvo 1995, 139), yet it is incumbent on therapists to discern the interplay of these dimensions of a person, and to work with them in a wise and skillful manner.

True wholeness flows from the transpersonal order, yet only the outer self requires therapy, as the inner Self always remains intrinsically whole. The “science of the soul,” as informed by the world's spiritual traditions, is able to support the human psyche in becoming fully integrated into all its modes of knowing and corresponding ways of healing: “*The soul's apprehension of the nature of things changes in accordance with its own inner state*” (Stithatos 1998, 92). In the same way that sages have taught the existence of an inner teacher – “*the Guru is always within you*” (Ramana Maharshi 1996, 370) – there is also an inner therapist, along with the required remedy to heal us from within. But this first requires the spiritual guidance of a valid tradition to help prevent us from going astray and becoming lost in our turbid subjectivity.

A true sacred psychology ensures that the assessment, treatment, and healing of a person is informed by a transpersonal dimension – this is confirmed when we discern the intrinsic wisdom reflected in the human body (Nasr 1996, 235–269). Therefore, becoming a wayfarer on a spiritual path is indispensable. Paracelsus speaks of the “inner physician” hidden within each person and says that “[e]ach... disease bears its own remedy within itself” (1988, 76). Rūmī (1207–1273) states something similar: “*The physician comes to the sick man and questions the inward physician; for within you there is a physician*” (2004, 61). St. John Cassian (c. 360–c. 435) writes: “*The Doctor of our souls has also placed the remedy in the hidden regions of the soul*” (1983, 76). According to ‘Alī ibn Abī Ṭālib (d. 661): “*Your cure is within you, but you do not know*” (‘Alī ibn Abī Ṭālib quoted in Chittick 2008, 104). Traditional healers and shamans allow the immanent

“*doctor within*” (Dobkin de Rios 1992, 53) each person to support their healing process.

Similarly, psychedelic researchers and practitioners have suggested the concept of an “*inner healer*” or “*inner healing intelligence*” (Grof 2000, 182). This certainly makes sense in a sacred context, whereas secular psychotherapy struggles with such notions, given it lacks a framework informed by divine transcendence and immanence. This confusion partly stems from erroneously assuming that “[t]he psyche is a self-regulating system” (Jung 1933, 17). This misconception captures the very predicament that afflicts modern psychology: namely, seeing the human psyche on a purely profane level, cut off from its “vertical” dimension – which alone can resolve the debilitating impasse that this discipline has brought on itself.

8 Set and Setting

The “set” (the mindset or expectation that one brings) and “setting” (the environment in which it takes place) of the entheogenic experience are crucial – something that traditional healers always understood. Researchers and mental health professionals are trying to no longer utilize spaces that look like generic hospital rooms for the administration of these compounds, which is a step in the right direction towards ideal forms of treatment, but traditional approaches offer much more than just atmosphere. Sacred uses of this medicine presupposed a profound ecological knowledge rooted in metaphysics and spiritual principles that supported a person's connection to all sentient beings in the web of life. No hospital or outpatient clinic can deliver this, even if the treatment were to be offered in a natural ambiance.

A pioneering effort to account for “set” and “setting” within psychedelic research is as follows: “*Of course, the drug dose does not produce the transcendent experience. It merely acts as a chemical key – it opens the mind, frees the nervous system of its ordinary patterns and structures. The nature of the experience depends almost entirely on set and setting*” (Leary et al. 1990, 11). Elsewhere, this has been described in the following way: “*Some of the more important variables are the personality of the individual, his current life situation, the attitude of those in contact with him during the experience, the setting and the reasons why the drug was taken and given*” (Cohen 1972, 104–105). Other “*extrapharmacological factors*” (Grof 1980, 47) – such as non-drug variables – include inadequate preparation, negative expectations, poorly facilitated sessions, personalities of both the subject and therapist

(including their relationships), along with all the complex factors related to “set” and “setting” in the psychedelic therapy session.

Outside of a sacred tradition, we cannot ensure optimal “set” and “setting.” Traditional cultures provide a more appropriate environment for a shared experience, in keeping with the spiritual expectations of such an occasion. This is why, even in the most ideal conditions, there will always be something lacking in modern secular approaches to PAT.

Psychedelic research has also noted the importance of aesthetics and the need to adopt the use of entheogens in a “*beautiful natural setting*” (Grof 1988, 289). Although considerations of beauty are largely overlooked in the present day, this dimension is essential for the flourishing of human beings and can hardly be thought of as an expendable luxury.

From the metaphysical perspective, every form has an effect on the human psyche. In fact, no form is neutral. This is clearly understood in traditional varieties of entheogenic therapy, yet it needs to be better appreciated by PAT. Beauty offers great sustenance to both our inner and outer lives and is thus essential to our human flourishing. The loss of a sense of the sacred in the modern world has also led to a degradation in our apprehension of beauty; an affliction that continues to wound the human psyche in incalculable ways.

Music – in the form of song and chanting – has been an integral part of humanity’s religious traditions and is employed widely within entheogenic therapy, both in a sacred and secular setting. It has been shown to support long-term positive mental health outcomes. Music can aid in the cultivation of useful emotions, positive mental imagery, and a sense of therapeutic safety. Properly utilized in a sacred context, its therapeutic benefits can be linked to metaphysical roots, insofar as music arises out of a silence that is prior to all sound. While each person responds differently in its presence, they are all nevertheless connected to the sacred when listening or playing music. So, even though PAT certainly makes use of music, its transcendent dimension appears to be altogether ignored.

Outside the proper supports of “set” and “setting,” there remain certain dangers to entheogenic therapy. This requires a great sense of responsibility on the part of its practitioners, yet what does this mean in a secular framework?

Neither the person himself nor those around him may be aware that he is a high-risk candidate for [note: entheogens]. It is, therefore, no slight responsibility to turn another person on. Furthermore, the drug is all too frequently taken without the safeguards of a responsible, skilled, sober person to take care of them. (Cohen 1972, 267)

9 Entheogenic Therapy

Although the therapeutic uses of entheogens were recognized before their prohibition, one of the key features of the psychedelic renaissance is their use for supporting mental health and well-being. Many are enthusiastic at the prospect that entheogens may “*serve as a new tool for shortening psychotherapy*” (Busch and Johnson 1950, 243). Masters and Houston (2000, 3) asserted in 1966 that psychedelics “*afford the best access yet to the contents and processes of the human mind*”. While there are always risks, if entheogens are used responsibly and within a proper “set” and “setting,” they have tremendous potential to benefit those suffering from mental health difficulties: “*If properly used, it could become something like the microscope or the telescope of psychiatry*” (Grof 1980, 297).

The early researchers of psychedelic science never suggested that entheogens were a panacea: “[Note: LSD] *does not construct character, educate the emotions or improve intelligence. It is not a spiritual labor-saving device, salvation, instant wisdom, or a short cut to maturity. However, it can be an opportunity to experience oneself and the world in a new way – and to learn from it*” (Cohen 1972, 240). However, even with these cautions in mind, we need to be clear about what entheogens are and are not. As has long been pointed out, “*Every therapy has contraindications. Psychedelic therapy is no exception*” (Hoffer 1970, 366). What is missing in mental health practice today is an acknowledgement that proper healing is grounded in a knowledge of reality that is fundamentally metaphysical.

Many within the psychedelic movement refer to Aldous Huxley’s use of the hypothesis known as the “*reducing valve*” (Huxley 1990, 23). Originally conceived by Henri Bergson (1859–1941), it suggests that the brain and nervous system act as a filter that keeps biological survival possible by restricting access to our consciousness (Bergson 1929). English philosopher Charlie D. Broad (1887–1971) describes this process and why it exists (Broad 1953, 23):

Each person is at each moment... capable of remembering all that has ever happened to him and of perceiving everything that is happening anywhere in the universe. The function of the brain and nervous system is to protect us from being overwhelmed and confused by this mass of largely useless and irrelevant knowledge, by shutting out most of what we should otherwise perceive or remember at any moment and leaving only that very small and special selection which is likely to be practically useful.

The notion that entheogens offer a quick and easy shortcut to wholeness is mistaken. People are cautioned that “everyone who pursues the use of psychedelics for personal growth must be prepared for the ‘dark night of the soul’ experiences” (Stolaroff 2022, xiii). It seems that entheogenic therapy provokes a disturbing confrontation between our nescient egoic self and our True Self, which has fully integrated the human psyche into the Spirit.

Although the full benefit of entheogens can only be gained within their sacred traditions, they have some therapeutic value even when used in conjunction with secular psychotherapy. It has been shown that psychedelics can aid the ego in getting out of its own way in service of its healing: “For the moment that interfering neurotic who, in waking hours, tries to run the show, was blessedly out of the way” (Huxley 1990, 53). Entheogens have reportedly “reduced defensiveness and fear of emotional injury, therapy facilitating more direct expression of feelings and opinions, and enabling people to receive both praise and criticism with more acceptance than usual” (Greer 1985, 58).

The entheogenic therapist asks the person to reflect on themselves openly and without fear. Psychedelic researcher Myron Stolaroff (1920–2013) exhorts the people he worked with as follows: “Look at what you’re afraid of, just look at what you’re afraid of. All you have to do is just look at it; don’t do anything about it, just look at it. Just keep on looking at it and just tell me what you experience when you’re looking at it” (2022, 25). Another modality of therapy observes that “[t]he psychological problem solving that occurs is... most frequently a shift in perspective, a reframing of a belief that may also be healing” (Adamson and Metzner 1988, 59). There is also potential for repairing family ruptures: “A characteristic of such transcendental experiences is that family relationships, in the nexus of which personality is formed, become present to one with intense vividness” (Munn 1973, 105).

Huxley, in correspondence with British psychiatrist Humphry Osmond (1917–2004), noted: “People will think they

are going mad, when in fact they are beginning, when they take it, to go sane” (Aldous Huxley quoted in Smith 1969, 729). Entheogens could also be a valuable teacher for understanding psychosis as they allow the therapist to “enter the illness and see with a madman’s eyes, hear with his ears, and feel with his skin” (Osmond 1970, 22).

It has often been stressed that a central factor in therapy is the experience rather than the chemical. This is something that Sidney Cohen (1965, 71) recognized in an article published in 1965 when he coined the expression “*therapy by self-transcendence*”. It is with a more expansive sense of identity informed by humanity’s spiritual traditions that we can understand entheogens (Sherwood et al. 1962, 77):

The individual’s conviction that he is, in essence, an imperishable self rather than a destructible ego, brings about the most profound reorientation at the deeper levels of personality. He perceives illimitable worth in this essential self, and it becomes easier to accept the previously known self as an imperfect reflection of this. The many conflicts which are rooted in lack of self-acceptance are cut off at the source, and the associated neurotic behavior patterns die away.

With an expanded understanding of ourselves, we can be more aware of our dualistic identity that separates us from ourselves, others, and the natural world.

The terms *ego* and *self* are interchangeable as they represent the horizontal order of our personal reality. The founder of the “talking cure,” Sigmund Freud (1856–1939), supports this view: “*The ego represents what may be called reason and common sense*” (Freud 1989b, 19); likewise, “*there is nothing of which we are more certain than the feeling of our self, of our own ego*” (Freud 1989a, 12). At the same time, he observes that “*the Ego is not master in its own house*” (Freud 1955, 143). In psychedelic therapy, one often reports the experience of the ego’s “dissolution” or “death,” yet undergoing such a radical transformation is dangerous outside the protective measures afforded by a sacred tradition. It is the transpersonal order that provides a safe enclosure in which a therapist may safely work.

Entheogens function as an impetus – even as “*gnostic catalysts*” (Adamson and Metzner 1988, 61) to support us in working through our mental health struggles, and to see who we really are beyond our psychological challenges. They are also referred to as a powerful “*unspecific amplifier*” (Grof 1980, 52) of mental processes – so that when we experience something difficult, it may feel intensely sad,

alarmed, or enraged. Equally, something experienced as pleasant can become associated with intense joy.

One of the therapeutic outcomes of entheogenic therapy is the adoption of a more flexible mindset that is less defensive and reactive. According to a sage from the Chinese tradition: *“To set up what you like against what you dislike – That is the disease of the mind”* (quoted in Conze 1959, 171). Entheogenic therapy allows for a *“passage to the mind’s antipodes”* (Huxley 1990, 86) and fosters *“an exteriorization and magnification of the conflicts intrinsic to human nature”* (Grof 1976, 6). It is in this expansive state that we can navigate difficult thoughts and emotions, so that we may see our lives in light of a greater plenitude. In this way, psychedelics can provide a unique opportunity to exercise a greater range of cognitive flexibility.

Once a person has completed entheogenic therapy, a sense of fear can sometimes arise concerning the loss of what one has learned during the treatment. Within sacred psychology, it is understood that the spiritual gifts that come to us from above cannot be claimed as ours. A large component of any spiritual practice is the requirement to remember what we are continually prone to forget in our earthly sojourn. This is another reason why entheogenic therapy needs to be rooted in sacred soil.

Grof (1980, 89) writes, *“[p]robably the single most important element determining the nature of an LSD experience is the feeling of safety and trust on the part of the experient”*. When understood metaphysically, this notion becomes more complicated. The question of invulnerability cannot be answered merely on a physiological or psychological level. Like all forms of healing, the spiritual dimension needs to be recognized. The mantra *I am here, you are here – you are safe in a therapeutic context* does not conform to traditional forms of healing, because there is always so much more taking place when this process is undertaken properly.

10 Trauma, Entheogens, and the Self

A desacralized world is a formidable impediment to knowing ourselves and the world around us. It is the immanent Spirit within each of us that can guide and heal humanity. This has been acknowledged by some authorities: *“the God within them knows what’s wrong with them and provides them with whatever they need which I don’t know anything about and they don’t even know anything about. They don’t know*

what their real needs are. All they know is what their wants are” (Stolaroff 2022, 14).

Entheogen therapy can help us see through the separating veils imposed by our benighted self. As Cohen (1972, 205) explains:

A new awareness of one’s relatedness to others and to the universe is strengthened because the reality of these feelings is totally accepted. One’s concept of self is drastically altered. The hopeless, sinful derelict is now an identity with meaning and worth... A break is made between the miserable past and the hopeful future.

When researching trauma, it becomes apparent that *“your wound is the darkness of your [note: spiritual] states”* (Rūmī 1926, 175) and – while healing ultimately comes from within – its source is transcendent and Divine: *“Recognise that... [note: healing of the wound] proceeds from the ray: do not regard it as [note: proceeding] from your own constitution”* (Rūmī 1926, 175). Trauma can consume a vast portion of our soul, but it can never completely obscure our integral connection to the Spirit that is our primordial nature. The ability of entheogenic therapy to aid in the clear examination of our anguish is described by William V. Caldwell (1969, 190):

Much of the problem of psychedelic therapy is the healing of the deepest psychic fissures which drain off so much of our psychic energy. Once a patient has healed one, he feels an immediate, dramatic relief. He does not come in a week later saying he feels generally better; the moment it happens his face relaxes; his whole mind seems suddenly to unfold in ebullient joy. Some of the happiest experiences of therapy come from the resurgence felt when these scars of the mind are healed.

The importance of paying attention to the somatic manifestations of trauma in the body is key to any mental health treatment, especially entheogenic therapy. Grof (1980, 156) elaborates on how this can benefit the person undergoing treatment:

At the time when the effect of the drug is decreasing it is important to engage in verbal exchange with the subject, to get detailed feedback on his or her emotional and psychosomatic condition. If at this time he or she is experiencing discomfort, such as depression, anxiety, blocked aggression, feelings of guilt, circular thinking, headaches, nausea, muscular pains, intestinal cramps, or difficulties in breathing, this is the time to suggest active interven-

tion. The possibility of this happening should have been discussed during the preparation period. The first step is to find out exactly what type of experience is involved... It is also important to encourage the subject to scan his or her body for signs of physical pain, tension, or other forms of distress indicating energy blockage. There is, in general, no emotional distress or disturbing and incomplete psychological gestalt that does not show specific somatic manifestations. These concomitant psychosomatic symptoms then become the entry points for... intervention.

Given that we observe a high incidence of entheogens not only decreasing symptoms but, in many cases, removing them altogether, some important questions remain. When healing has been successful, what happens to a person's identification with a trauma that they have hitherto long lived with – sometimes for an entire lifetime? What happens if this trauma, following its cure, exposes a deep vulnerability that was previously suppressed? These queries have not been adequately tackled. A person may well be "healed," but they might continue to be troubled by the perennial quandary of *Who am I?*: "The self disappears, but no other self appears to occupy the empty space it has left" (Paz 1990, 84).

So much of a patient's time and energy can be expended on an all-consuming trauma that, once it subsides with any functional impairments having been restored, they are essentially lost without an abiding sense of self. In traditional healing, this was never a problem, as identity was embedded in the sacred use of entheogens which lent the experience a transcendent purpose. In a desacralized cosmos, however, this is not possible in that our grasp of who we are is largely forged in a profane ambiance that rejects the possibility of an enduring self not confined by the ego.

11 The Therapeutic Posture

What is most urgently required right now are fully integrated models informed by sacred psychology that facilitate epistemological pluralism and multidimensional perspectives. In this regard, it has been asserted that: "Unless you have an experienced guide... it would be extremely reckless" (Leary 1966, 96) to experiment with entheogens. Given the dominance of secular approaches to mental health, we need to be aware of the great obstacles faced by traditional healers who seek to facilitate entheogenic therapy, which radically differs from the "Western medical model." Gerardo Reichel-Dolmatoff (1912–1994) provides us with the fol-

lowing account of the tremendous demands of this calling (Reichel-Dolmatoff 1974a, 127):

In order to become a payé [note: shaman] an individual must have demonstrated since childhood a profound interest in the religious traditions of his culture besides having a good knowledge of myths, genealogies, and invocations. He must know how "to sit on his bench" and reflect; he must practice sexual abstinence, and he must also be a good drinker of chicha, a good dancer and singer, and he must be able to give sound advice to others. He should not be too fond of women, and he must channel his sexual energy toward other goals; however, he should be a family man. The most necessary quality is that he have the capacity to achieve well-defined hallucinations when he takes a concoction, and to be able to interpret them. Also, in the learning of myths and traditions what is involved is not so much a good memory but a capacity for interpreting their symbolism, and of 'hearing the echo' of the tales told by tradition.

The above description of a traditional healer's role suggests a discipline that lies well beyond anything that secular mental health practitioners are trained in. From the perspective of modern medical and therapeutic models, the path taken by a traditional shaman in becoming an effective healer must seem altogether unintelligible.

The shortcomings of modern Western education as a suitable PAT have already been identified within the psychedelic movement (Leary 1990b, 85–86):

A medical degree doesn't equip one to pilot a jet plane or to understand the incredible complexities of consciousness. The LSD experience is so novel and so powerful that the more you think you know about the mind, the more astounded and even frightened you'll be when your consciousness starts to flip you out of your mind. A new profession of psychedelic guides will inevitably develop to supervise these experiences. The training for this new profession will aim at producing the patience of a first-grade teacher, the humility and wisdom of a Hindu guru, the loving dedication of a minister-priest, the sensitivity of a poet, and the imagination of a science fiction writer.

To start with, there can be no confidence in a therapist who has not attained a certain level of experience and understanding of the sacred medicines, such as to be thoroughly familiar with the various realms of consciousness, and to know how to help others navigate their perilous waters: "It scarcely needs to be stated that no one can be a proper guide

without having experienced psychedelics himself or herself (Eisner 1997, 215).

The presence of the therapist in all forms of sacred psychology is invariably more important than the words spoken or even the actions taken. From Lao Tzu (sixth century) we hear: *“He who knows does not speak. He who speaks does not know”* (Lao Tzu 2017, 63). Becoming attuned to this posture requires us to embrace the Taoist attitude of “non-action” (Zh. *wu wei*), which is not idleness but the supreme activity because the person is then fully present and detached from all outward commotion wherein there are no oppositions. This awareness makes possible an entirely different reality, as Shunryū Suzuki (1904–1971) points out: *“In the beginner’s mind there are many possibilities; in the expert’s mind there are few”* (Shunryū Suzuki 1995, 21).

True non-directive forms of therapy make more sense when understood from this traditional perspective. Embracing true silence and equanimity in the “eternal now” is the most effective way to consummate the healing process. The following observation by Sengcan (d. 606), the Third Patriarch of Zen, is also useful here: *“The Great Way is not difficult for those who have no preferences. When love and hate are both absent, everything becomes clear and undisguised”* (Sengcan 1983, unpaginated).

Although the traditional healer may not appear to be “doing” anything when conducting a healing ritual, their immersion into the spiritual world – while abiding in a posture of ceaseless prayer – provides great protection for the person being treated. We are told that *“healers have a metaphysical system available to them and protective supernatural entities... beliefs which they share to one degree or another with their clients”* (Dobkin de Rios 1992, 25). What secular psychotherapy cannot provide, by way of real safety and recovery, is something that a traditional shaman alone can offer an ailing patient; namely, *“protection from... evil”* (Dobkin de Rios 1992, 58).

Now that we have explored the uses of sacred psychology, how does this differ from modernist approaches? The role of the secular psychotherapist has been described as follows: *“The task of the sitters is to give support and protection to the subjects, take care of their various psychological and physiological needs, facilitate the full unfolding of the experience, and deal with various forms of resistance as they occur during the session”* (Grof 1980, 150). What is overlooked here – other than the complete exclusion of spiritual considerations from this therapy – is that treatment from a secular perspective itself implies an unacknowledged

metaphysical worldview. With that said, it is not possible to provide true healing without taking into account the triad of Spirit, soul, and body that comprises a complete human being. Treatment on any other basis can only fall short of achieving its objective.

The metaphysical and ontological roots of sacred psychology not only ensure the efficacy of its practice, but also provide protection for both the healer and patient. *“While many therapists and physicians in industrialized society suffer a burn-out syndrome,”* the energies of traditional shamans *“are not drained by the onslaught of patients”* (Dobkin de Rios 1992, 94) because their healing strength draws from a wellspring greater than themselves.

Early pioneers within the psychedelic movement found that entheogens permit *“you to see more clearly than our perishing mortal eye can see”* (Wasson 1974, 197). For this reason, they often referred to the English poet William Blake (1757–1827), who famously spoke of the *“cleansed doors of perception”* [9]. What is often missing from this outlook is that, unless we ourselves have first become pure, our spiritual vision will remain obstructed. As Eckhart (1986, 311) says: *“However small a thing it is which sticks to the soul, we shall not see God”*.

To overcome these impediments, the discipline of psychology needs to recover the *“eye of the heart”* (or the *transpersonal Intellect*) (Bendeck Sotillos 2022d, 29–45). The practice of sacred psychology requires that thought, being, and reality be brought together in a unified mode of knowing: *“Knower, Known, and Knowledge are truly one only”* (Guénon 2001, 92). Medieval epistemology defined knowledge as *“adaequatio rei et intellectus – the understanding of the knower must be adequate to the thing to be known”* (quoted in Schumacher 1977, 39). Parmenides (515–445) emphasized something similar: *“To be and to know are one and the same”* (Parmenides quoted in Coomaraswamy 1989, 35). This is to say that, in the premodern world, there were degrees of knowledge – with their corresponding levels of reality – by which one could realize the Supreme Identity. According to this understanding, a distinction is always made between relative orders of reality and the Absolute.

12 The Meaning of Integration

Entheogenic researchers and practitioners have emphasized the importance of integration but, until recently, little direction has been provided on how to achieve this. A succinct account of what is meant by integration is *“a process*

in which the patient integrates the insights of their experience into their life” (Gorman et al. 2021, unpaginated). Moreover (Eisner and Cohen 1958, 533),

[t]he integrative experience should be described further because it has not been a matter for scientific scrutiny and the semantic difficulties are considerable. There is usually a perceptual component which consists of looking upon beauty and light. Affectually, there is a feeling of great relaxation and hyperphoria. The patients describe an insightfulness into themselves, an awareness of their place in the environment, and a sense of order in life. These are all fused into a very meaningful episode, and it is believed that this can be significantly therapeutic.

Other definitions include references to revisiting and working through what occurs during a therapeutic session: “Different aspects of a process that includes making sense out of the experience, filtering the content, assimilating and accommodating the experience psychologically, and implementing insights into lasting changes” (Loizaga-Velder and Loizaga Pazzi 2014, 148). Again, the general idea here is that “Integration is the process of bringing separate elements together into a whole... and anchoring them into our lives” (Bourzat and Hunter 2019, 179). Another way of thinking about the “integrative experience” is “a state wherein the patient accepts himself as he is, and a massive reduction in self-conflict occurs” (Eisner and Cohen 1958, 533).

An attempt to synthesize a number of existing definitions has led to the following (Bathje et al. 2022, unpaginated):

Integration is a process in which a person revisits and actively engages in making sense of, working through, translating, and processing the content of their psychedelic experience. Through intentional effort and supportive practices, this process allows one to gradually capture and incorporate the emergent lessons and insights into their lives, thus moving toward greater balance and wholeness, both internally (mind, body, and spirit) and externally (lifestyle, social relations, and the natural world)

As thorough and useful as this definition may sound, its inclusion of the spiritual dimension cannot readily be accommodated within current models of modern Western psychology, seeing as their ontological foundations are bereft of a transcendent perspective that validates sacred forms of therapy and healing. Without access to the spiritual dimension, the full potential inherent in the psychic and corporeal realms will not be fulfilled, thus limiting the mental health treatment possibilities available to us.

The First Peoples use entheogens in a ritual context so as to infuse spiritual norms into the cultural fabric of daily life. A steadfast focus on the sacred radiates through each individual into the collectivity as a whole. In effect, such integration is self-sufficient and does not require anything outside itself in order to render traditional communities complete.

Key to understanding the integration offered by entheogenic therapy are the perspectives of complementariness and the union of polarities. Through a metaphysical lens, we may discern the existence of binaries at one level of our experience; yet, from another angle, we might not perceive them in the same way. The existence of complementarity is not only important to understanding our own mental health challenges, but is also significant in the context of both female and male therapists working together to enhance the healing process: “growth happens best in the presence of yang and yin” (Eisner 1997, 215) consisting of “two sitters, a male-female therapeutic dyad” (Grof 1980, 152).

Joseph Epes Brown (1920–2000), renowned scholar of Native American traditions and world religions, outlined the following transformative process which appears to be universal (Brown 2007, 34):

All true spiritual progress involves three stages, which are not successfully experienced and left behind, but rather each in turn is realized and then integrated within the next stage, so that ultimately they become one in the individual who attains the ultimate goal. Different terms may be used for these stages, but essentially they constitute purification, perfection or expansion, and union.

Across the diverse religious traditions of the world, these stages are present in sundry forms: “Despite the many differences of technique and approach in various paths of spiritual realization, there is in every process of realization the three grand stages of purification, expansion, and union. Something in man must die, something must expand, and only then the essence of man is able to achieve that union” (Nasr 1989, 330). If this is the final goal of all spiritual disciplines, then the impure must not be conjoined with the pure. For this reason, a purgative process is necessary.

A prominent teaching in the world’s religions is the injunction to “die before you die” (Ar. *mūtū qabla an tamūtū*; quoted in Schimmel 1975, 135), which is an exhortation to seek a “spiritual death” in this life. As Eckhart (1981, 216) made clear, “a truly perfect man should be accustomed to regard himself as dead”; or, as found in the Jewish tradition, one

should aspire to the “*cessation or annihilation of existence*” (He. *bittul ha-yesh*; Schaya 2014, 134) – by implication in the ultimate reality. In the First Peoples and shamanic traditions, we hear of “*the death and mystical resurrection of the candidate by means of a descent to the underworld and an ascent to the sky*” (Eliade 1974, 43).

Hofmann also speaks to this: “*The danger exists that what one has experienced cannot be integrated into normal consciousness in a meaningful way*” (2013, 78). Cohen (1972, 202) speaks of the perils inherent to entheogenic use in the absence of an integrated psychotherapy:

There are hazards. If a person has seen the glory and goodness of life via psychedelics and then backslides, the guilt of failure is added to the hopelessness of his situation. The depression may be deeper than before the treatment. Others who have been touched by the Light may develop so unrealistic a view of themselves and the world that they become most difficult to live with. These hazards demonstrate the need for counseling even when the psychedelic technique is employed.

Psychedelics are not like psychotropics – they require preparation, integration, and ongoing inner work. Psychiatric drugs often suppress symptoms, which can sometimes be helpful. While psychedelic therapy can catalyze the therapy and address the underlying cause, symptoms may well become more pronounced before they improve.

When thinking about models of integration, we ought to be mindful of the wise adage “*by their fruits you shall know them*” (Matthew 7:16). This is evidenced by someone who knows the psychedelic movement well: “*Look at what the whole psychedelic culture has produced, and not produced. Has it brought forth a Buddha or Ramana Maharshi? All I have seen through... meeting many of the psychedelic leaders is, at best, openings or illuminations that have led people to an ongoing path*” (Michael Murphy quoted in Badiner 2002, 82).

Our isolated selves rely on the transpersonal to guide them toward wholeness. This is why we need to carefully observe what arises in our consciousness, so that we are not seduced into thinking that everything we encounter therein is true. Recourse to a dimension beyond the ego is essential if we are to discriminate correctly and to properly integrate our shadow side. Many people taking these substances are still dominated by their egos, so what they get exposed to becomes just another profane experience. Even if these are profound in nature, the loss of the sacred in our lives makes

us want to repeat such experiences over and over again in a desperate attempt to fill the abyssal void within us.

One of the most important things to keep in mind regarding entheogenic therapy is that “*the goal is not altered states but altered traits*” (Smith 2003, 97). Transformative experiences can sometimes bring forth enduring change, but they tend to fade unless stabilized by ongoing spiritual practice. This is why the great saints and sages of humanity, even following their spiritual awakening, always continued to live in accordance with the prescriptions of their faith, never abandoning their traditional practices.

13 The Dangers (and Potential) of Secular Approaches

At the outset, we stated that the focus of this article would be to situate entheogens in their proper metaphysical context, particularly with regard to mental health treatment. With that said, most forms of entheogenic therapy will likely take place in a secular space, so it is worth making a few observations about this. It has been widely recognized that “*no psychedelic substance is a ‘magic bullet’ that will permanently cure any condition*” (Richards 2018, 143). This is why it is critical to ensure that entheogenic therapy is buttressed by the abundant valuable resources found in all valid spiritual traditions.

It has been noted that “[n]ot infrequently, the more troubled the patient the better the prognosis since impetus to change may be greater” (Eisner and Cohen 1958, 531). Success was also observed with “*unhappy and floundering individuals who had lost the ability to believe in anything or to identify with any concept larger than themselves*” (Eisner and Cohen 1958, 532). In many cases, it has been found that entheogens seem “*to do for each person what the person needs*” (Huxley 1971, 147).

Clinical studies demonstrate the utility of PAT in supporting those struggling with mental health challenges. Yet it remains unclear as to whether those who do not adhere to a spiritual tradition can benefit – to the same degree – from these sacred medicines as those who do, even under optimal conditions. It is also not known whether the positive gains conferred by entheogenic therapy diminish over time outside a metaphysical context.

Psychiatrist and psychedelic researcher Rick Strassman (2008, 293) notes that “*spiritual practice will have made us familiar with the skeletons in our closets and will have better*

equipped us to contend with them if and when they emerge". Beyond the safeguards afforded by sacred tradition, there are no effective means to offset the possible harm caused by secular uses of entheogens. Leary (1995, 170) readily admitted that the "*cortex... washed clean of... rituals*" may be susceptible to "*psychedelic brainwashing*".

The cultivation of spiritual virtue is a direct participation in the Divine nature. Therefore, this may prove an indispensable complement to a lasting cure for those suffering mental illness. Many afflicted people who embark on a life of virtue often recover in an inexplicable manner. Yet virtue, on its own, may not always assist someone who has been so deeply traumatized as to prevent them from knowing how to become virtuous in the first place. In such cases, an entheogen may provide a liberating release as a preliminary step toward a more enduring recovery.

Entheogens do appear to harbor a spiritual power that can serve to undermine the stranglehold that materialism and scientism have over many people today. In other words, treatment of this kind may be the antidote to a disenchant-ed worldview by restoring a "*sacramental vision of reality*" (Huxley 1990, 22) that recalls to us the "*divine source of all existence*" (Huxley 1990, 18). Under the right conditions, entheogenic therapy "*can bring a sudden liberation from ignorance or illusion, enlarge the spiritual horizon and give new meaning to life*" (Terrill et al. 1964, 192). Furthermore, "*it may lead to a lessening of alienation, to a rediscovery of the self, to a new set of values, to the finding of new potential for growth and development and to a new beginning*" (Terrill et al. 1964, 198). In some cases, entheogens have led people to "*a new faith in God*" (Davis 1961, 73).

Owing to the spiritually compromised nature of modern people, psychedelics may be made available to not only heal worldly afflictions, but to bring us closer to our true selves. It is from this metaphysical standpoint that we may justify the need to make available, to all people, powerful medicines for mental health purposes – a use that was hitherto forbidden outside of a sacred environment. The highly anomalous times in which we live today appear to call for a corresponding response that is also irregular and unconventional, but with a view to a greater good that serves to give relief to those who need it most.

14 Pitfalls of a Chemical Utopia

The modernist mindset is distinguished by a debased notion of permanence, sometimes referred to as the "*immanentiza-*

tion of the eschaton" (Voegelin 1952, 163) or the "*counterfeit of Eternity*" (Burckhardt 2008, 38). From a metaphysical perspective, everything in our transient world comprises causes and conditions that will inevitably exhaust themselves; yet the Real is timeless and cannot perish.

The secular ideologies that sustain the psychedelic movement are undoubtedly powerful and seductive. They should not be dismissed as the opinions of a minority, especially as the world becomes increasingly dystopian. Nevertheless, given the conditions of our flawed and ephemeral existence in *saṃsāra* – this "burning house" as the Buddha described it – there is no possibility of creating an earthly paradise, as much as many are tempted to do so (having given up any notion of a transcendental mode of perfection). Huxley (1931, 227) writes:

If we could sniff or swallow something that would, for five or six hours each day, abolish our solitude as individuals, atone us with our fellows in a glowing exaltation of affection and make life in all its aspects seem not only worth living, but divinely beautiful and significant... then, it seems to me, all our problems... would be wholly solved and earth would become paradise.

Propaganda and pharmacology were themes also explored by Huxley in his 1936 essay "Writers and Readers," underscoring how mind-control drugs would influence future society (1947, 1–45). This question is addressed in his utopian manifesto *Island* (1962), where he brings together his final reflections on education, psychology, metaphysics, and the role of entheogens in exploring human potential (Beauchamp 1990, 59–72). In this work, he invented a new mind drug called *moksha-medicine*, "*the reality-revealer, the truth-and-beauty pill*" (Huxley 1994, 153). It is as if the universal and timeless wisdom of the world's spiritual traditions is distilled into a pharmacological solution. Accordingly, "*for a little while, thanks to the moksha-medicine, you will know what it's like to be... what in fact you always have been*" (Huxley 1994 192–193):

But, like everything else... it will pass. And when it has passed, what will you do with this experience? What will you do with all the other similar experiences that the moksha-medicine will bring you in the years to come? Will you merely enjoy them as you would enjoy an evening at the puppet show, and then go back to business as usual, back to behaving like the silly delinquents you imagine yourselves to be? Or, having glimpsed, will you devote your lives to the business, not at all as usual, of being what you are in fact... And all that the

moksha-medicine can do is to give you a succession of beatific glimpses, an hour or two, every now and then, of enlightening and liberating grace.

In his earlier novel *Brave New World* (1932), a medicine known as *soma* is used to control people by making them happy and complacent within a dystopian status quo.

Prior to his death, Hofmann expressed his entheogenic idealism as follows: “*It is my wish that a modern Eleusis will emerge, in which seeking humans can learn to have transcendent experiences with sacred substances in a safe setting*” (Hofmann 2008, 8). Dare we conclude that this utopian wish is being fulfilled through the emergence of PAT? According to Grof (1980, 74), “*psychedelic therapy... represent[s] a twentieth-century version of a process that has been practiced through millennia in various temple mysteries, rites of passage, secret initiations, and religious meetings of ecstatic sects*”.

A chemical utopia is characterized by the coming together of psychedelic research, the nascency of Silicon Valley, the rise of artificial intelligence (AI), and a burgeoning transhumanism (Markoff 2005). Utopian discourse may give the impression that global tech elites are planning, through such means, to save the world by ending poverty, curing all disease, solving the ecological crisis, and establishing idyllic working conditions – with the ultimate aim of achieving immortality through a grotesque fusion of humanity and technology that promises to liberate us from the constraints of the flesh. Despite this techno-optimism, the contrary appears to be the case in that the fruits of these dystopic measures will not in fact deliver increased material prosperity, comfort, and leisure but, rather, unimaginable forms of bondage. It is here that we can discern the true goal of the post-Enlightenment movement, which is none other than to radically redefine human beings as the monstrous creation of a depraved subversion of spirituality – the very antithesis of the Divine image that we are in reality (Kurzweil 1999).

15 Conclusion

Entheogens and PAT defy all simplistic constructs and cannot fit into a Procrustean bed. To do so only serves to reinforce the pernicious supremacy of the Western medical model and its myopic approaches to mental health. Some might suggest that having recourse to psychedelics in a world that is in such disarray could be seen as *upāya* or “skillful means,” as the Buddhists would say – precisely because they offer some kind of psychological salve for the

abnormal conditions spawned by our desacralized environment. Entheogens can be useful if we understand them in the way indicated by the Buddha; namely, as a finger pointing at the moon. They provoke an experience larger than ourselves to support healing and wholeness, but they are not the liberating reality itself. In other words, entheogens can undoubtedly be used to restore a basic level of equilibrium in certain people. While certainly helpful, this is not an end in itself, for what is called for is a further dimension of healing that involves the spirit and its rehabilitation.

Perhaps as a saving mercy in these end times, psychedelic medicine may now prove beneficial – not only to the religiously faithful, but also to secular society at large; in other words, the traditional restraints on the use of these substances may, providentially, be set aside *in extremis*, so to speak. With that in mind, we recall the following “saying” (Ar. *ḥadīth*) of the Prophet Mohammed: “*At the beginning he who omits one-tenth of the law is condemned; but at the end he who accomplishes one-tenth of the law is saved*” (quoted in Glassé 2002, 129).

Whether the psychedelic experience is comparable to the spiritual realization promised in the world’s religions is not really the issue here. What is central is living in accordance with a revealed tradition and doing so with steadfast commitment and sincerity. A wholehearted reliance on what transcends the human condition as a way to secure lasting health and well-being is confirmed across the sapiential traditions: “*Man shall not live by bread alone*” (Matthew 4:4); this counsel also extends to entheogens!

At its best, entheogenic therapy undertaken with the right “set” and “setting” can facilitate an opening to a realm beyond our fleeting world that affords a passing glimpse of Reality. Some might compare this to the vision of English poet and theologian Thomas Traherne (c. 1637–1674; 1908, 20):

You never enjoy the world aright, till the Sea itself floweth in your veins, till you are clothed with the heavens, and crowned with the stars: and perceive yourself to be the sole heir of the whole world, and more than so, because men are in it who are every one sole heirs as well as you.

In this context, we may turn to the following prayer dedicated to the use of sacred medicines: “*We humbly ask Our Heavenly Mother the Virgin Mary, help of all who call upon Her, to aid us to know and understand the true qualities of these psychedelics, the full capacities of man’s noblest faculties, and*

according to God's laws, to use them for the benefit of mankind here and in eternity" (quoted in Holden 2021, 83).

At the same time, we must not confuse this "opening" with an end in itself. Huston Smith (1991, 389) reminds us that "the human opportunity, the religions tell us, is to transform our flashes of insight into abiding light". As promising as entheogenic therapy appears to be, we need to keep in mind that psychedelics are simply catalysts; they are not enlightenment itself, and certainly far from the panacea they are made out to be. Likewise, we cannot forget that what is safe in one situation may not be so in another, and that serious abuses do occur: "It is true that uninformed or misdirected use of psychedelics can be harmful" (Stolaroff 2022, xii). If we are serious about entheogenic therapy, we need to set aside all the hype and abandon our belief in quick fixes.

The commodification and commercialization of sacred medicines in our era is of growing concern. The present day presents much suffering that can be alleviated when entheogens are used wisely in a safe context, but they are no substitute for the sacred, for which many in the modern world acutely hunger. Today's mental health crisis makes clear that what we need now are true forms of healing, and that we should avoid the temptation to overmedicalize entheogenic therapy.

We already have at our disposal the vast knowledge and healing modalities of humanity's treasury of traditional wisdom. As St. Teresa of Ávila (1515–1582) affirms: "Clearly, many remedies are necessary to cure us" (Teresa of Ávila 1979, 51) and as Mou-Tzu, the second-century Buddhist and Taoist philosopher writes: "What accords with principle is to be followed, what heals the sick is good" (Mou-Tzu quoted in de Bary 1972, 132). Likewise, we can apply the straightforward principle that: "Whatever helps, I call good medicine" (Schuon 2006, 66). The differences between traditional spiritual uses and those that are secular are far from negli-

ble; they represent antithetical views of reality and ways of life, revealing a profound conflict between the diverse epistemologies grounded in sacred metaphysics, and those that are secular, materialist, and reductionist in their outlook.

PAT, in the same way as modern Western psychology, is rendered anomalous when devoid of a metaphysical foundation. For psychology to be considered an authentic discipline, it will have to tend to its self-inflicted wounds in the wake of the Enlightenment project and its secularizing agenda. Attempts to heal the psyche, including by means of entheogenic therapy, can only be thwarted without a true ontology nourished by the wellsprings of spiritual tradition.

PAT may, at times, be able to restore the loss of our sense that "everything that lives is holy" (Blake 1906, 47). Likewise, as Goethe (1749–1832) points out, "[w]hat greater in this life can mortal gain / Then that to him God-Nature be revealed" (Goethe quoted in Carus 1915, 50). Nevertheless, there is no getting around the need to ground ourselves in one of humanity's time-tested paths to fully benefit from our innate healing potential. Due to an unfettered humanism that has lost its spiritual center, many today are not interested in finding their way back to one of humanity's spiritual traditions. Entheogenic therapy may indeed support a person's discovery of this hidden longing, but some may choose to explore their connection to the sacred through nature, for example, without seeing any necessity to embrace a traditional salvific vehicle. In such cases, the therapist will have to trust that their focus on the healing work is sufficient and that they cannot take it upon themselves to do any more than this. After all, there are mysteries that transcend our conceptualization of reality: "There are more things in heaven and earth... / Than are dreamt of in your philosophy" (Shakespeare 1877, 116).

Notes

- [1] Here are a few citations that come from within the psychedelic movement challenging the notion thatentheogens can produce religious-mystical experiences equal to those of the saints and sages of the spiritual traditions: “[H]ighly improbable that a true spiritual experience could follow from ingesting a particular chemical” (Watts 1972, 342); “I am not so foolish as to equate what happens under the influence of mescaline or of any other drug, prepared or in the future preparable, with the realization of the end and ultimate purpose of human life: Enlightenment, the Beatific Vision” (Huxley 1990, 73). After many decades of discussion and debate, even psychedelic pioneers openly admit their uncertainty, admitting that the “question whether... psychedelics can induce genuine spiritual experience is still open” (Grof 1980, 264). We recall the well-known words of Neem Karoli Baba (c. 1900–1973), who was given a psychedelic to see what he thought of it in terms of Spiritual Realization: “[I]t’s useful, [note: but] not the true samadhi” (quoted in Alpert 1974, 112). See Zaehner 1967; Weichberger and Smith 2003; Bendeck Sotillos 2013, 130–154.
- [2] See Bendeck Sotillos 2023a, 165–173.
- [3] See Whitall Perry 1996, 7–16; Mark Perry 2012, 245–271.
- [4] See, for example, “The theoretical basis of psychedelic therapy is rather underdeveloped” (Grinspoon and Bakalar 1981, 194).
- [5] Osmond coined the term “psychedelic” in his correspondence with Huxley. In responding to a letter that Osmond received from Huxley, he wrote in poetic reflection: “To fathom Hell or soar angelic, / Just take a pinch of psychedelic” (quoted in Smith 1969, 795).
- [6] “I was whirled through an experience which could be described in many extravagant metaphors but which was above all and without question the deepest religious experience of my life” (Leary 1964, 324).
- [7] See Crowley 1997.
- [8] “[P]erceiving in an unhabitual way” (James 1918, 110).
- [9] “If the doors of perception were cleansed everything would appear to man as it is, infinite” (Blake 1906, 26).

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