

Psychedelics: nurses at the center of support

By Quentin Ulveling and Maxime Mellina

In Krankenpflege | Nursing | Cure infermieristiche (Swiss Journal of Nursing)

May 2024

The effectiveness of psychedelics, substances long criticized, is confirmed by growing research. Due to their privileged relationship with patients and their skills, nursing will have to play a central role in the therapeutic use of psychedelics.

In continuation of the centuries-old and traditional uses of psychedelics, a “revolution” is underway. Long banned, these substances are increasingly used in the United States and Europe to treat mental disorders. There is growing scientific evidence of their effectiveness in the treatment of post-traumatic stress disorder, severe depression, anxiety and addictions⁽¹⁾. MDMA, known as “ecstasy”, is for example in phase 3 clinical trials in the United States and, if approved, will soon be available in pharmacies there.

More broadly, the State of Oregon has authorized access to psilocybin for adults and allowed the establishment of dedicated healing centers in order to be able to consume them in more safety. In Switzerland, on the basis of the Narcotics Act (**NarcA**), the Confederation grants an increasing number of doctors exceptional authorizations for the limited medical use (compassionate use) of prohibited substances such as psychedelics⁽²⁾. The Geneva University Hospitals have already provided support to patients under the influence of substances within

the framework of psychedelic-assisted psychotherapies (PAP). These are aimed at people suffering from treatment-resistant mental illnesses, people for whom drug treatments and therapies have not produced long-term improvement. Exceptional authorizations are also granted for research in this area and listed by the ALPS foundation (Awareness Lectures on Psychedelic Science). Finally, the Federal Council itself – in its response to the Rechsteiner postulate – recommends regulation and more research and pilot tests in this area⁽³⁾.

Legal gray zone: This situation today places substances in a “gray zone” between illegality and legitimacy. This uncertainty prevents objective reflection on possible good practices. Scientific research has so far been hampered by the context of the “war on drugs”. In addition, non-medical therapeutic use of psychedelics exists throughout the world, particularly for personal development or the exploration of consciousness, but too little knowledge and knowledge drawn from these experiences has been integrated into the Western world. In recent years, the medical usefulness of these substances has been recognized. But federal authorizations for compassionate use of psychedelics are restrictive. They are reserved for serious cases, because it is necessary to prove that all possible therapies have already been tried. The organization of Psychedelic Assisted Therapies remains complex, both in terms of reimbursement and risks.

Support rather than a pill: The rediscovery of psychedelics suggests a turning point in the way we approach therapies. The substances are used as part of a deep therapeutic process, different from drug treatments. The way in which the experience is lived and supported (as well as its financing) is therefore a central element. It is in this sense that we must think about the role of nursing as a driving force in supporting these experiences inducing a state of expanded

consciousness. But how can this role of nursing be realized? How can we maximize the potential of these substances while minimizing the risks? What is the support provided while taking psychedelics

~~~The nursing profession, through its versatility, can invest in the field of psychedelics in a unique way.~~~

as part of therapies? How to use traditional knowledge on the use of psychedelics? The answers to these complex and varied questions should not be left to a single professional group and should not be considered from a single perspective. Thus, it is essential to think and decide collectively on the place that society wishes to give to these substances. Supporting the patient before, during, and after their experience is the key factor in the success (or, conversely, failure) of psychedelic therapies.

The challenges and issues of regulation: The GREA (Groupement Romand d'Etudes des Addictions) and Eleusis (Psychedelic Association of Switzerland) have been collaborating for a year with more than thirty experts from all walks of life to reflect on innovative regulation models for psychedelics. The recent founding of the Psychédélos association⁽⁴⁾, bringing together patients who have already experienced PAP, was central to defining these directions:

- A pragmatic, non-ideological approach, which does not glorify substances as “miracle cures” nor demonizes them as an “absolute danger”, but which takes into account how they are used.
- A democratic vision that allows everyone (except those for whom there are major contraindications) to live at least one psychedelic experience in safe conditions.

- A societal vision that allows an approach to the consumption of these substances not only in a medical context, but also a social or spiritual one. The current increase in mental illnesses is the consequence of deep societal dysfunctions. It is therefore not enough to treat a suffering person with PAP and then send them back to an environment that caused their suffering⁽⁵⁾.
- An interprofessional perspective in which the skills of professionals and the experiences of users are taken into account to develop good practices. This makes it possible to create a safe environment in which substances are consumed.

A review of nursing literature from the past two decades showed that nursing was absent from current psychedelic research⁽⁶⁾. The potential role of nursing, outlined below, should not be forgotten as part of an interprofessional approach.

Nursing skills: support, attitude, putting into words: Psychedelic therapies require personal commitment, both on the part of the person accompanied and those who accompany them. Lived experience is the heart of these practices and being supported is widely recommended. This is why it is fundamental to transfer the skills of nursing staff to psychedelic experiences, since they offer qualitative and holistic support through their constant commitment at the patient's bedside. Nursing know-how (knowledge how to do) is perhaps the best known: the professional knows how to react to emergency situations and how to ensure the well-being and safety of patients. As writer James Fadiman explains, in a psychedelic experience, the transference (of fear, refusal to get involved, power, attraction, etc.) is inevitable and must be recognized and managed. The purpose of sitting with a patient in crisis is not to lessen the effects, but to create and maintain a safe place where the individual can experience the process without coming into conflict with themselves or with others. Crises are

an integral part of the human psychological process. One way to deal with them is to view them as a healing process, not a “problem” to be solved. These are conventions that can be defined before the psychedelic experience⁽⁷⁾.

Soft skills (attitude = knowledge how to be) are also a central point. In a person who is in an expanded state of consciousness, sensitivity is heightened and every detail counts. Social work professors Clémence Gauvin and Emilienne Laforge emphasize the importance of attitude. This involves awareness and distance from one's own culture, self-confidence, authenticity, creativity, openness, empathy and the desire to know others⁽⁸⁾. An ethical question remains: must the accompanying person have had psychedelic experiences themselves to be able to establish a relationship based on a common language and experience?

Finally, with this (know-how (knowledge how to be), we develop the (knowledge how to say) needed to accompany the experience and integrate an ineffable experience. Doctor of Nursing Robert Krause says one of the problems with the liberalization of psychedelics is that in our culture we don't have the mythological language to understand the depth of the experience. Traditional cultures have a mythological, religious or spiritual context to understand what happens during these states of expanded consciousness⁽⁹⁾. The role of nursing is to establish helpful communication and to allow the expression of emotions, feelings, thoughts and beliefs that emerge from these states of consciousness. To support the integration of the psychedelic experience, the “Tidal Model” of Phil Barker and Poppy Buchanan-Barker and “active listening” of Carl Rogers could be considered.

A nursing concept to be revalued: presence: Thus, in the light of helping communication and the need to support specific states of non-ordinary consciousness, a fundamental nursing concept of caring reappears: presence. Responsibility for

~~~The return of psychedelics marks a change in the medical paradigm, putting the emphasis back on the patient-therapist relationship rather than on drug treatments.~~~

the therapist, in establishing a therapeutic alliance, lies in his or her ability to be authentically present, adopting a state of mind described as “beginner’s mind” by Zen master Shunryu Suzuki⁽¹⁰⁾. In a context where resources are often limited and caregivers faced with high workloads (execution of tasks according to protocols, increase in the number of patients, shortage problems), presence may seem difficult to maintain. Yet, by freeing themselves from the need to “do” something, the therapist creates a space of curiosity and non-judgment, which constitutes essential support for development. The role of the therapist is not limited to providing solutions, but to fully engage in “presence”, with the deep desire to understand the person⁽¹¹⁾. The American nursing researcher Jean Watson describes it as an “authentic presence”, her colleague Rosemarie Rizzo Parse as a “true presence”. Ultimately, presence establishes a space that provides a person with the opportunity to be meaningfully accompanied in their non-ordinary state of consciousness.

The support must undoubtedly be interdisciplinary, but these specificities of care are essential. Several key therapeutic skills identified by Janis Phelps, such as empathic presence or building the patient's confidence so that their innate healing capacity can emerge, align perfectly with the principles of nursing⁽¹²⁾. The profession is present at all fundamental turning

points in life – birth, end of life, psychiatric crisis (decompensation, etc.) – during which the process of “caritas” (described by Andrew Penn and Jean Watson), specific to care, takes on its full meaning⁽¹³⁾. This process includes "creating a healing environment for the physical and spiritual self that respects human dignity" and "assisting the person in their basic physical, emotional and spiritual human needs", i.e. engage in a practice of “caring-healing” by meeting basic human needs⁽¹⁴⁾. These tasks are essential elements of the "black box" of the therapeutic process with psychedelics. They are perfectly capable of being carried out autonomously by nurses, and could be a way of putting the notion of the profession's proper role, as put forward by the "for strong nursing" vote, back on the table in a broader sense.

This posture perhaps also allows for a certain transpersonal spiritual intelligence and invites the therapist to be open to the patient's transcendent and existential mysteries. The therapist's self-awareness and ethical integrity include maintaining appropriate boundaries, judicious use of power, and managing transference/countertransference issues⁽¹⁵⁾. The nursing profession, through its versatility, can therefore invest in the field of psychedelics in a unique way. Key skills, ranging from knowledge of the effects of psychedelics to mastery of complementary techniques, position nurses as essential players.

Towards a paradigm shift?: The return of psychedelics marks a medical paradigm shift, emphasizing the patient-therapist relationship rather than drug treatments. In this new paradigm, greater attention is paid to the patient. The prescription of psychedelics should therefore not be considered as pharmacotherapy but as a profound therapeutic process. Thus, these experiences, which are based on an expanded state of consciousness, can help to reconnect us with ourselves and support the psychological and existential challenges of our lives. Nursing, as a profession that spends most of its time with patients, can play a

fundamental role in this transformation. Currently, access to these therapies is limited, in part because of their high cost, and the need for medical supervision throughout the process. Promoting the skills of nurses, the knowledge of users and practitioners with experience of psychedelics could be a solution to make support for these therapies more accessible and financeable, while respecting the principles of safety and ethics. It would also be wise to recognize indigenous practices and knowledge, which the Western world groups under the term shamanism⁽¹⁶⁾. Their experience, combined with Western knowledge, could enrich therapies using psychedelics. How can our society learn from these experts? What are the examples not to follow? Nursing care can make a contribution and nursing staff can also bring their skills beyond the medical field by being active in prevention, risk reduction, information, training, teaching and support.

References

Denis-Lalonde, D., & Estefan, A. (2020). Emerging psychedelic-assisted therapies: Implications for nursing practice. *Journal of Mental Health Addiction Nursing*, 4(1), 3-41.

doi:10.22374/jmhan.v4i1.40

Fadiman, J. (2011). *The psychedelic explorer's guide: sage, therapeutic, and Sacred Journeys*. Vermont, USA: Park Street Press.

Penn, A., Phelps, J., Rosa, W.E., & Watson, J. (2021). Psychedelic-Assisted Psychotherapy Practices and Human Caring Science: Towards a Care-Informed Model of Treatment. *Journal of Humanistic Psychology*.

Penn A, Dorsen CG, Hope S, Rosa WE. Psychedelic-Assisted Therapy: Emerging Treatments in Mental Health Disorders. *Am J Nurs*. 2021 Jun 1;121(6):34-40.

doi:10.1097/01.NAJ.0000753464.35523.29.

Phelps, J. (2017). Developing guidelines and competencies for the training of psychedelic therapists. *Journal of Humanistic psychology*, 57, 450-487.

Phelps, J. (2019). Training psychedelic therapists. In M. Winkelman & B. Sessa (Eds.), *Advances in psychedelic medicine: State of the art therapeutic applications* (pp. 274-294). Praeger Books.

Rosa, W.E., Hope, S., & Matzo, M. (2019). Palliative nursing and sacred medicine: A holistic stance on entheogens, healing, and spiritual care. *Journal of Holistic Nursing*, 37(1), 100-106.

doi:10.1177/0898010118770302.

Authors: **Quentin Ulveling** Psychiatric nurse, Nant Foundation Hospital, Corsier-sur-Vevey, and member of the Eleusis committee

Maxime Mellina Psychedelics theme manager, Groupe Romand d'Etudes des Addictions (GREAA), Lausanne

Contact: q.ulveling@ protonmail.com

More references:

1. “There is growing scientific evidence of their effectiveness in the treatment of post-traumatic stress disorder, severe depression, anxiety and addictions⁽¹⁾.”

- Mitchell, J.M., Bogenschutz, M., Lilienstein, A. *et al.* MDMA-assisted therapy for severe PTSD: a randomized, double-blind, placebo-controlled phase 3 study. *Nat Med* **27**, 1025–1033 (2021). <https://doi.org/10.1038/s41591-021-01336-3>
- Carhart-Harris RL, Bolstridge M, Rucker J, Day CM, Erritzoe D, Kaelen M, Bloomfield M, Rickard JA, Forbes B, Feilding A, Taylor D, Pilling S, Curran VH, Nutt DJ. Psilocybin with psychological support for treatment-resistant depression: an open-label feasibility study. *Lancet Psychiatry*. 2016 Jul;3(7):619-27. doi: 10.1016/S2215-0366(16)30065-7. Epub 2016 May 17. PMID: 27210031.
- Carhart-Harris R, Giribaldi B, Watts R, Baker-Jones M, Murphy-Beiner A, Murphy R, Martell J, Blemings A, Erritzoe D, Nutt DJ. Trial of Psilocybin versus Escitalopram for Depression. *N Engl J Med*. 2021 Apr 15;384(15):1402-1411. doi: 10.1056/NEJMoa2032994. PMID: 33852780.
- Krebs TS, Johansen PØ. Lysergic acid diethylamide (LSD) for alcoholism: meta-analysis of randomized controlled trials. *J Psychopharmacol*. 2012 Jul;26(7):994-1002. doi: 10.1177/0269881112439253. Epub 2012 Mar 8. PMID: 22406913.
- Bogenschutz MP, Forcehimes AA, Pommy JA, Wilcox CE, Barbosa PC, Strassman RJ. Psilocybin-assisted treatment for alcohol dependence: a proof-of-concept study. *J Psychopharmacol*. 2015 Mar;29(3):289-99. doi: 10.1177/0269881114565144. Epub 2015 Jan 13. PMID: 25586396.
- Bogenschutz MP, Ross S, Bhatt S, et al. Percentage of Heavy Drinking Days Following Psilocybin-Assisted Psychotherapy vs Placebo in the Treatment of Adult Patients With Alcohol Use Disorder: A Randomized Clinical Trial. *JAMA Psychiatry*. 2022;79(10):953–962. doi:10.1001/jamapsychiatry.2022.2096
- Brewerton TD, Wang JB, Lafrance A, Pamplin C, Mithoefer M, Yazar-Klosinski B, Emerson A, Doblin R. MDMA-assisted therapy significantly reduces eating disorder symptoms in a randomized placebo-controlled trial of adults with

severe PTSD. J Psychiatr Res. 2022 May;149:128-135. doi: 10.1016/j.jpsychires.2022.03.008. Epub 2022 Mar 5. PMID: 35272210.

- Zeifman RJ, Yu D, Singhal N, Wang G, Nayak SM, Weissman CR. Decreases in Suicidality Following Psychedelic Therapy: A Meta-Analysis of Individual Patient Data Across Clinical Trials. J Clin Psychiatry. 2022 Jan 18;83(2):21r14057. doi: 10.4088/JCP.21r14057. Erratum in: J Clin Psychiatry. 2022 May 9;83(3): PMID: 35044730.
- Goldberg SB, Pace BT, Nicholas CR, Raison CL, Hutson PR. The experimental effects of psilocybin on symptoms of anxiety and depression: A meta-analysis. Psychiatry Res. 2020 Feb;284:112749. doi: 10.1016/j.psychres.2020.112749. Epub 2020 Jan 2. PMID: 31931272.
- Article ASI : https://eleusis-society.ch/francais/wp-content/uploads/sites/3/2021/06/2106_FR_psychedeliques_low-1.pdf
- Article GREA : https://www.grea.ch/sites/default/files/8_-_ulveling.pdf

2. In Switzerland, on the basis of the Narcotics Act (**NarCA**), the Confederation grants an increasing number of doctors exceptional authorizations for the limited medical use (compassionate use) of prohibited substances such as psychedelics⁽²⁾.

- <https://www.bag.admin.ch/bag/en/home/gesetze-und-bewilligungen/gesuche-bewilligungen/ausnahmebewilligungen-bewilligungen-betmg/ausnahmebewilligungen-verbotene-betaeubungsmittel.html>

3. Finally, the Federal Council itself – in its response to the Rechsteiner postulate – recommends regulation and more research and pilot tests in this area⁽³⁾.

- <https://www.bag.admin.ch/dam/bag/fr/dokumente/npp/sucht/drogenpolitik/bericht-po-rechsteiner.pdf.download.pdf/bericht-po-rechsteiner.pdf>

4. The recent founding of the Psychédélos association⁽⁴⁾, [...].

- Association Suisse de patients PAP : « psychedelos » <https://www.psychedelos.ch>

5. The current increase in mental illnesses is the consequence of deep societal dysfunctions. It is therefore not enough to treat a suffering person with PAP and then send them back to an environment that caused their suffering⁽⁵⁾.

- <https://www.rts.ch/info/suisse/13620818-hausse-sans-precedent-des-troubles-mentaux-chez-les-jeunes-filles.html>

- <https://www.bfs.admin.ch/asset/fr/23772012>
- <https://www.bfs.admin.ch/bfs/fr/home/statistiques/sante/etat-sante/psychique.html>
- https://www.liberation.fr/societe/les-tentatives-de-suicide-et-idees-suicidaires-en-augmentation-chez-les-jeunes-selon-sante-publique-france-20240205_5FJYP3TLCBCCTNY7BJEN6ZUXNE/
- <https://www.santeintegrative.ch/Revue/Restituer-la-dime-pour-decoloniser-les-sciences-medicales>
- <https://www.20min.ch/fr/story/suisse-toujours-plus-de-jeunes-auraient-des-pensees-suicidaires-103045525>

6. A review of nursing literature from the past two decades showed that nursing was absent from current psychedelic research⁽⁶⁾.

- Rosa WE, Hope S, Matzo M. Palliative Nursing and Sacred Medicine: A Holistic Stance on Entheogens, Healing, and Spiritual Care. *J Holist Nurs.* 2019 Mar;37(1):100-106. doi: 10.1177/0898010118770302. Epub 2018 Apr 18. PMID: 29669454.
- Denis-Lalonde, D., & Estefan, A. (2020). Emerging psychedelic-assisted therapies: Implications for nursing practice. *Journal of Mental Health Addiction Nursing*, 4(1), 3-41. <https://doi.org/10.22374/jmhan.v4i1.40>
- Penn A, Dorsen CG, Hope S, Rosa WE. Psychedelic-Assisted Therapy: Emerging Treatments in Mental Health Disorders. *Am J Nurs.* 2021 Jun 1;121(6):34-40. doi: 10.1097/01.NAJ.0000753464.35523.29. PMID: 33993135; PMCID: PMC8574982..

7. As writer James Fadiman explains, in a psychedelic experience, the transference (of fear, refusal to get involved, power, attraction, etc.) is inevitable and must be recognized and managed. The purpose of sitting with a patient in crisis is not to lessen the effects, but to create and maintain a safe place where the individual can experience the process without coming into conflict with themselves or with others. Crises are an integral part of the human psychological process. One way to deal with them is to view them as a healing process, not a “problem” to be solved. These are conventions that can be defined before the psychedelic experience⁽⁷⁾.

- James Fadiman. (2011). *The psychedelic explorer’s guide : sage, therapeutic, and Sacred Journeys.* Etats-Unis, Vermont : Park Street Press. (p. 88)

- (Traduction personnelle. Le texte d'origine : While sitting, transference (of fear, of not wanting to get involved, of power, of attraction, etc.) is inevitable and should be acknowledged, talked about in advance, and managed. The purpose of sitting with an attendee in crisis is not to reduce effects, but to create and maintain a safe place where the individual can play out the process without coming into conflict with themselves or others. Crises are normal part of the human psychological process and one way to engage them is as a process of healing, not a "problem" to fixed.)

8. Social work professors Clémence Gauvin and Emilienne Laforge emphasize the importance of attitude. This involves awareness and distance from one's own culture, self-confidence, authenticity, creativity, openness, empathy and the desire to know others⁽⁸⁾.

- https://educationspecialisee.ca/wp-content/uploads/2018/04/Habiletés_savoir_etre-CGauvin_et_ELaforge-UQAT.pdf (p. 2)

9. Doctor of Nursing Robert Krause says one of the problems with the liberalization of psychedelics is that in our culture we don't have the mythological language to understand the depth of the experience. Traditional cultures have a mythological, religious or spiritual context to understand what happens during these states of expanded consciousness⁽⁹⁾.

- Robert Krause, DNP APRN-BC sur youtube : <https://www.youtube.com/watch?v=GrZhFeqhwfY> (56:15)
- Traduction personnelle : « [...] One of the issues with psychedelics just being released to the mains publicly for everyone to use anytime is that : we don't have like a mythological language to understand the profundity of the experience [...] (like if) we were raised within a tradition that could make sense of it.”

10. Responsibility for the therapist, in establishing a therapeutic alliance, lies in his or her ability to be authentically present, adopting a state of mind described as “beginner’s mind” by Zen master Shunryu Suzuki⁽¹⁰⁾.

- Penn AD, Phelps J, Rosa WE, Watson J (2021) [Psychedelic-Assisted Psychotherapy Practices and Human Caring Science: Towards a Care-Informed Model of Treatment](#). *Journal of Humanistic Psychology* (p.9)
- L'esprit du débutant et Suzuki 1970 : <https://www.etreaujourd'hui.com/inspiration/garder-esprit-debutant>

11. The role of the therapist is not limited to providing solutions, but to fully engage in “presence”, with the deep desire to understand the person⁽¹¹⁾.

- Penn AD, Phelps J, Rosa WE, Watson J (2021) Psychedelic-Assisted Psychotherapy Practices and Human Caring Science: Towards a Care-Informed Model of Treatment. *Journal of Humanistic Psychology*. (p.9)

12. The support must undoubtedly be interdisciplinary, but these specificities of care are essential. Several key therapeutic skills identified by Janis Phelps, such as empathic presence or building the patient's confidence so that their innate healing capacity can emerge, align perfectly with the principles of nursing⁽¹²⁾.

- Phelps, J. (2017). Developing guidelines and competencies for the training of psychedelic therapists. *Journal of Humanistic psychology*, 57, 450-487.
- Phelps, J. (2019). Training psychedelic therapists. In M. Winkelman & B. Sessa (Eds.), *Advances in psychedelic medicine: State of the art therapeutic applications* (pp. 274-294). Praeger Books.
- Penn AD, Phelps J, Rosa WE, Watson J (2021) Psychedelic-Assisted Psychotherapy Practices and Human Caring Science: Towards a Care-Informed Model of Treatment. *Journal of Humanistic Psychology*

13. The profession is present at all fundamental turning points in life – birth, end of life, psychiatric crisis (decompensation, etc.) – during which the process of “caritas” (described by Andrew Penn and Jean Watson), specific to care, takes on its full meaning⁽¹³⁾.

- Penn AD, Phelps J, Rosa WE, Watson J (2021) Psychedelic-Assisted Psychotherapy Practices and Human Caring Science: Towards a Care-Informed Model of Treatment. *Journal of Humanistic Psychology*. (p. 11)

14. This process includes "creating a healing environment for the physical and spiritual self that respects human dignity" and "assisting the person in their basic physical, emotional and spiritual human needs", i.e. engage in a practice of “caring-healing” by meeting basic human needs⁽¹⁴⁾.

- Penn AD, Phelps J, Rosa WE, Watson J (2021) Psychedelic-Assisted Psychotherapy Practices and Human Caring Science: Towards a Care-Informed Model of Treatment. *Journal of Humanistic Psychology*. (p.5 et 16)
- Phelps, J. (2017). Developing guidelines and competencies for the training of psychedelic therapists. *Journal of Humanistic Psychology*, 57(5), 450-487. <https://doi.org/10.1177/0022167817711304> (p. 16)

15. The therapist's self-awareness and ethical integrity include maintaining appropriate boundaries, judicious use of power, and managing transference/countertransference issues⁽¹⁵⁾.

- Phelps, J. (2017). Developing guidelines and competencies for the training of psychedelic therapists. *Journal of Humanistic psychology*, 57, 450-487.
- Phelps, J. (2019). Training psychedelic therapists. In M. Winkelman & B. Sessa (Eds.), *Advances in psychedelic medicine: State of the art therapeutic applications* (pp. 274-294). Praeger Books.

16. It would also be wise to recognize indigenous practices and knowledge, which the Western world groups under the term shamanism⁽¹⁶⁾.

- <https://transformdrugs.org/assets/files/How-to-regulate-psychedelics.pdf>