

Psychedelic-Assisted Psychotherapy (PAP): Paving the Way Forward in Nursing

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sychedelic-assisted psychotherapy (PAP) is defined as the supervised use of psychedelic medicines in concert with both pre- and post-experience psychotherapeutic work, also known as the preparatory and integrative sessions (Schenberg, 2018). This in-depth and dynamic journey into wellness represents a unique paradigm shift in the treatment of individuals with mental health issues that is congruent with holistic nursing care ethics. The American Holistic Nurses Association's position statement on the role of nurses in the practice of complementary and integrative health approaches (AHNA, 2016) supports a whole-person approach to patients as complex beings, including full consideration of their biopsychosocial-spiritual nuances and needs. As PAP access expands beyond ketamine and more novel, research-based medicines become legalized for treatment (such as psilocybin and MDMA), it is imperative that we as holistic nurses, nurse practitioners, and nurse educators are knowledgeable of and prepared to engage in the application of this work (Lehto et al., 2021). Such activism on our part will increase the understanding and access of PAP to patients who might otherwise not be given the option.

A systematic review of PAP revealed that patient-reported themes of healing contained a qualitative panoply rarely identified in more biomedical models of care, including mystical experiences fostering newfound interconnectedness,

compassion, and positive regard for the self, others, and nature regardless of the patient's previous spiritual belief systems (Wheeler & Dyer, 2020). This type of cathartic meaning-making post-PAP session/s has become somewhat of the hallmark of successful PAP treatment, and in certain instances, has been shown to last years after treatment has occurred (Wheeler & Dyer, 2020). Facilitating and supporting an experience with the capacity for such a profound revelation as through PAP follows the ethics of holistic nursing care as a contributor to the harmonious interrelatedness of the individual, all living beings, the natural world, and the spiritual, intangible aspects of our existence. Adopting a professional role of catalyst for expanding PAP access potentiates patient healing that research suggests can include a person's complete mindset transformation (Lehto et al., 2021; Wheeler & Dyer, 2020). Something of such significance, with the ability to affect almost every aspect of a patient's life, is an incredibly exciting and worthwhile endeavor.

Working as a psychiatric nurse, I have witnessed firsthand the devastating effects of the very same mental health issues that research suggests PAP is efficacious against, for example, treatment-resistant depression, posttraumatic stress disorder, and substance use disorders (Wheeler & Dyer, 2020). Many of the patients I have cared for with these problems ultimately relapse into illness regardless of provider-prescribed medication adherence. Many find the regimens no longer effective or the

side effects, particularly apathy, unmanageable. In light of this, it becomes increasingly apparent that the time-limited treatment requirement, low side effect profile, and built-in psychotherapeutic aspects of PAP make it an attractive treatment option for patients in need of alternatives to the current standard of care.

As PAP continues to be developed and guidelines defined, now is the time for nurses to begin the conversation in earnest on how to engage as an integral part of its success as a truly holistic, person-centered healing modality. Nurses are experiencing unprecedented amounts of trauma exposure and burnout in the era of COVID-19, and PAP offers members of the caring profession a radical, self-compassionate vocation model. This consideration alone can ignite a community of clinicians willing to explore a niche of nursing that can reinvent how we view all our roles and the environments in which they occur. Paving the way will necessitate that nurse practitioners actively break ties with the title of mid-level providers and fully embrace and advertise their function as primary care clinicians, through research, certification, and offering PAP independently as legally appropriate. Registered nurses (RNs) must also be prepared to redefine their accepted concepts of nursing culture. Within the PAP paradigm, the RN will find many innovative and possibly unfamiliar occupational shifts, such as positions available in research or treatment facilities in therapeutic, home/spa-like outpatient settings with tasks moving away from constant chaos towards that of reverentially observing one to two patients at a time who mostly require minimal medical intervention (Wheeler & Dyer, 2020).

The humanistically enriched possibilities offered through PAP have opened a door of reflection for all disciplines of nursing, representing an opportunity to communally grow in mind, body, spirit, and practice to cultivate new, sustainable pathways of nursing. As active participants in a caring profession, we often have the opportunity to be vicariously invigorated by our patients, which can motivate and beneficially serve us in coming back to our work each day. Witnessing a patient's profound, consciousness-

expanding rebirth facilitated by PAP can further operate as a reminder that it is our moment to fully embrace a more holistic, gentle, and fulfilling experience for ourselves as nurses.

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stress and resilience. She is passionate about psychedelic-assisted psychotherapy (PAP), engaging in coursework, and training with the organizations Polaris Insight Center and Fluence, as well as hosting the podcast Psychedelics in Mental Health along with her life partner Dylan Cotton. Lauren is also an artist, and she painted the artwork on page 20.

PAP TERMINOLOGY AT-A-GLANCE

Preparation: These are therapeutic sessions geared towards preparing the patient for the psychedelic experience. A general pattern of these sessions might include both considering and reviewing intentions and expectations for the actual psychedelic medicine session/s, covering contraindications and pre/post-psychedelic experience protocols, educating the patient on what they might expect during and after the psychedelic medicine session/s, and leaving time and space for any patient-specific questions or concerns.

Integration: These therapeutic sessions are meant to allow the patient to fully process the psychedelic medicine experience in a safe and supportive environment. It is a time for the patient to reflect on their previously defined

intentions and expectations and how that might have been fulfilled or radically changed during the psychedelic journey. It is an opportunity to internalize what was learned from the psychedelic experience and allow those lessons to drive permanent healing transformation in the patient's life.

Mystical Experience: A highly-individualized level of consciousness experienced during a psychedelic medicine session that has been found to consist of "common core" characteristics, including a sense of unity with all beings and things, transcendence of time and space, intuitive knowledge, sacredness, deep-seated positivity, and ineffability (Richards, 2016).

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