

Supporting SB1009

I moved to Maryland from California in 1971, intending to stay only a few years before returning to either California or Colorado. I am still here.

What drew me to Maryland over 50 years ago was the Maryland psychiatric Research Center (MPRC), the only research facility in the United States for the use of psychedelic compounds that had survived Richard Nixon's "War on Drugs." I had just finished my PhD in psychology at Stanford and was fascinated by the amazing research results using psychedelics that had come out in the preceding 10 years. I worked there for 6 years, until the psychedelic research was discontinued in 1971. During that time I was a state employee, advancing from Psychologist I, Doctorate to Psychologist III, Doctorate while picking up a various certification and licensure credentials.

One of the requirements for working as a psychologist in the psychedelics research program (called "Clinical Sciences" at the time) at MPRC was having a personal LSD session conducted by two of the existing staff clinicians. That experience, combined with the published scientific results of the research being conducted at MPRC, cemented my interest in doing research with psychedelics and my belief that such research could result in the alleviation of suffering for a number of conditions.

I left the MPRC in 1977 and since then have been a program director at a private psychiatric hospital, worked as a psychological consultant in the state prison system, provided family therapy at a state-run school for emotionally disturbed children, been on the faculty of the University of Maryland School of Medicine, and have had my own private practice for over 40 years.

Although I have refused to provide direct psychedelic-assisted psychotherapy to my private practice clients, I have supported them when they have chosen to undertake some work with psychedelics as an adjunct to their ongoing psychotherapy with me. My decision to refrain over the years from providing psychedelic-assisted psychotherapy has been based primarily on my desire to protect my psychology license.

Since the recent renaissance in research with psychedelics all of the positive outcomes my MPRC colleagues and I published 50 years ago have been replicated and enormously expanded. Not only have positive outcomes been documented for a wide variety of mental health issues, but treatment procedures have been refined and expanded, leading to even better outcomes.

The one caveat I want to offer has to do with the treatment procedures mentioned above. While many people report taking psychedelics alone or with friends and having positive experiences, I think this is risky. I recommend that a competent professional assist in the preparation for the psychedelic journey, be present during the journey itself, and assist in subsequent sessions to help integrate the powerful experiences that the journey produced. I believe that only in this way can we maximize the long-term positive results of this kind of treatment.

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