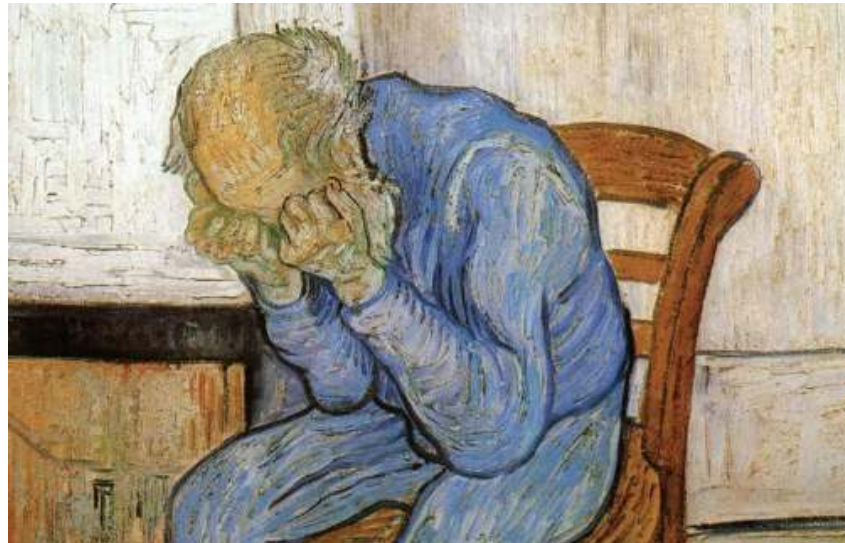


Why Psychedelics Must be Legalized and Normalized: A Patients and Human Rights Argument



Elliott Edge [Follow](#)

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Sorrowing Old Man (At Eternity's Gate), Vincent van Gogh—finished only two months prior to the artist's suicide; among his last words being "La tristesse durera toujours" (The sadness will last forever)

In 2001, The World Health Organization published a press release stating, “One in four people in the world will be affected by mental or neurological disorders at some point in their lives. Around 450 million people currently suffer from such conditions, placing mental disorders among the leading causes of ill-health and disability worldwide.”

In an updated meta-survey published April 2018 in Our World in Data, Max Roser and Hannah Ritchie shared a compendium of international datasets from various mental wellness studies. Their results are at once painful to behold—and yet nothing out of touch with our waking experience of the world.

Those suffering from substance abuse and mental illnesses range in the **billions**, and in other cases multiple hundreds of millions. If that were not tectonic enough, Rose and Ritchie admit that they, “consider reported estimates to be an under-estimation of true prevalence and disease burden.”

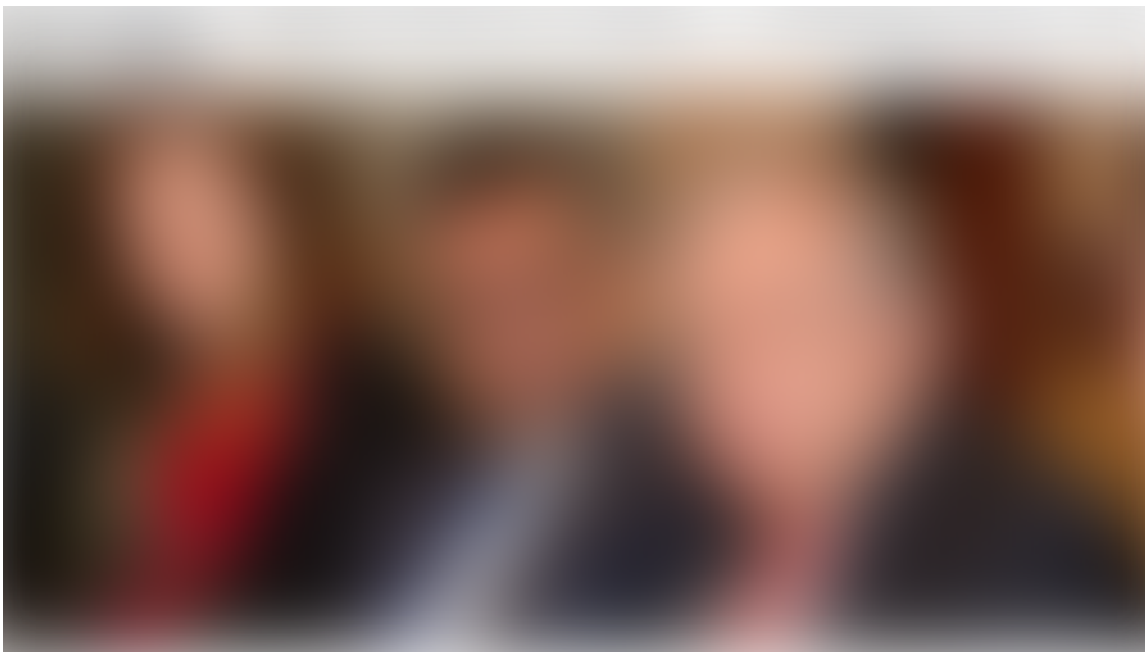
Disorder	Share of global population with disorder (2016) [difference across	Number of people with the disorder (2016)	Share of males:females with disorder (2016)
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	countries]		
Any mental or substance use disorder	15.5% [13-22%]	1.1 billion	16% males 15% females
Depression	4% [2-6%]	268 million	3% males 4.5% females
Anxiety disorders	4% [2.5-6.5%]	275 million	3% males 4.7% females
Bipolar disorder	0.6% [0.4-1.5%]	40 million	0.55% males 0.65% females
Eating disorders (clinical anorexia & bulimia)	0.14% [0.05-0.55%]	10.5 million	0.07% males 0.2% females

From Our World in Data

The feeling of a worldwide calamity is not just a phantom of our collective imagination—it can be stated as a scientific certainty. Most people either suffer from a mental illness, or they know and likely love someone affected by mental illness-type issues. This is an established fact and it is getting more serious every year. WHO published regarding the increase:

“Between 1990 and 2013, the number of people suffering from depression and/or anxiety increased by nearly 50%, from 416 million to 615 million. Close to 10% of the world’s population is affected, and mental disorders account for 30% of the global non-fatal disease burden.”



As recently as this year, the United Nations met in London and declared mental health to be a ‘neglected issue’, but one absolutely essential to accomplishing global goals and international wellbeing. The May 2018 press release states:

A main message coming out of the discussion was growing support for the notion that there can be “no health without mental health” and there is a need to look beyond the health sector, for creative solutions to tackle the root causes of deteriorating mental health.

There is yet another cost that has only recently come into light: the social economic cost. A landmark 2016 WHO study indicated a previously un-researched connection between depression and economy. Turns out that “depression and anxiety disorders cost the world nearly US \$1 trillion annually.” However, about \$4 trillion is made in treating these ailments. This led Dr Margaret Chan, Director-General of WHO to conclude: “We must now find ways to make sure that access to mental health services becomes a reality for all men, women and children, wherever they live.”

Addiction and mental illnesses have been torturing individuals and families, destroying lives, devastating communities across the class spectrum and even impact GDPs. Mental health is both a local and a global problem of growing magnitude.

Is there any hope?

The answer is an emphatic—**Yes!**

We are within striking distance of making a continent-sized dent in the collective human tragedy of mental illness. For over a half century we have been learning time and again that at our fingertips sleeps an ally for radically healing the body and mind. It has been in use for millennia but only recently rediscovered. Ironically, it likely holds the position of being one of our first major medical discoveries as a species—psychedelics.

The main problem with the latter-day rediscovery of psychedelic therapies is that they have come with an equally recent, yet nearly unilateral taboo. A stigma that has been effective in holding back decades of what now looks like one of the most significant, promising, and exciting breakthroughs in modern medical history.

The reason why psychedelics must come into the discussion now is that their power and potential for treating mental illnesses is no longer mere felt opinion, or colloquial anecdote — it is now established medical fact.

Psychedelic Rumblings Today





In the last twenty years you would basically have to be living under a rock to not encounter a popular or scientific article touting the hitherto before obscure benefits of psychedelic therapies, followed by a comment or two on their culturally ancient origin.

Articles and essays concerning the outstanding results of new scientific trials have been covered by CBS, NBC, The Atlantic, The Washington Post, The New Yorker, The New York Times, The Denver Post, The Independent, The Guardian, The Sun, Rolling Stone, Big Think, Psychology Today, Business Insider, Science Direct, and Popular Science to name only but a few. Largely, this is due to a renewed scientific interest as well as a cultural shift—the Psychedelic Renaissance.

Just this year, a new documentary called *From Shock to Awe* demonstrated the power of Ayahuasca and MDMA-based therapies in treating Iraq and Afghanistan US war veterans utterly crippled by PTSD.

From Shock to Awe TRAILER



But it is really over the last half century of research that has shown psychedelic therapies to be a consistently powerful tool in treating lifelong addiction, chronic depression, anxiety, PTSD, OCD, and insomnia. Who knows how many other conditions psychedelics could end up treating. Psychedelics look like they might also be able to treat other burdens like diabetes, as well as cluster headaches—a condition regarded by some to be one of the most painful known to human beings.

Much of the recent progressive activity around psychedelics can be said to be thanks to the legendary Rick Doblin, who has been trail-blazing for psychedelic therapies for over 45 years with the Multidisciplinary Association for Psychedelic Studies.



From from Christopher Ryan.

MAPS has been one of the most effective agents in growing the medical research and funding that has gone into recent psychedelic studies.



From Beckley Foundation

This wave of cultural interest has peaked journalistically with author Michael Pollan of *The Omnivore's Dilemma* fame, who has published a wildly popular and excellent new book called *How to Change Your Mind: What the New Science of Psychedelics Teaches Us About Consciousness, Dying, Addiction, Depression and Transcendence*—which is enlightening even more people to the history, science, and honest therapeutic value of psychedelics.





In it Pollan states, “For the most part of the 1950s and early 1960s, many in the psychological establishment regarded LSD and psilocybin as miracle drugs.” The use of this word “*miracle*” reflects a scientific and medical reality — When it comes to healing a myriad of physical and mental health issues no other known compounds, therapies, or combinations thereof have been as robust, long-lasting, efficacious, or quite like psychedelic therapies.

Pollan recently summarized the current attitudes in medical fields with Joe Rogan.

Joe Rogan Experience #1121 - Michael Pollan



“[...] There’s good data now that this can help heal people who are really suffering. And the other reason for the openness that’s going on right now that surprised me, because I expected to get a lot of pushback from the psychiatric establishment, and I looked for it.

I called around you know, I want to hear the critical voice on the Hopkins work, on the NYU work. And what I kept hearing blew my mind. I remember calling the head of the National Institute of Mental Health to get what I thought would be a really negative quote about psilocybin research, and he was like, 'No. We have to look at this. This is really interesting research.' Former heads of the American Psychiatric Association.

And the reason they are so open to it is that mental health treatment in this country is just a mess. I mean we only reach half of the people who are struggling with mental illness at all, have any exposure to the system. If you compare mental health treatment to any other branch of medicine — oncology, cardiology, infectious disease — its accomplished very little. It hasn't prolonged lifespan. It's not saving lives. And yet we have soaring rates of depression. Depression is now the leading cause of disability worldwide. There are 300 million people with major depression or treatment-resistant depression in the world right now. And suicide rates are way up. Partly it's the vets, but in general the taboo has come off suicide. Suicide is climbing rapidly and addiction as we know is rampant. So they need some new tools. There hasn't really been innovation in mental health treatment since the early 90s late 80s with the introduction of SSRI antidepressants. Drugs like Paxil and Prozac. They need some new tools and that's why they're open to this. And that's why I think it will be embraced eventually by the medical world."

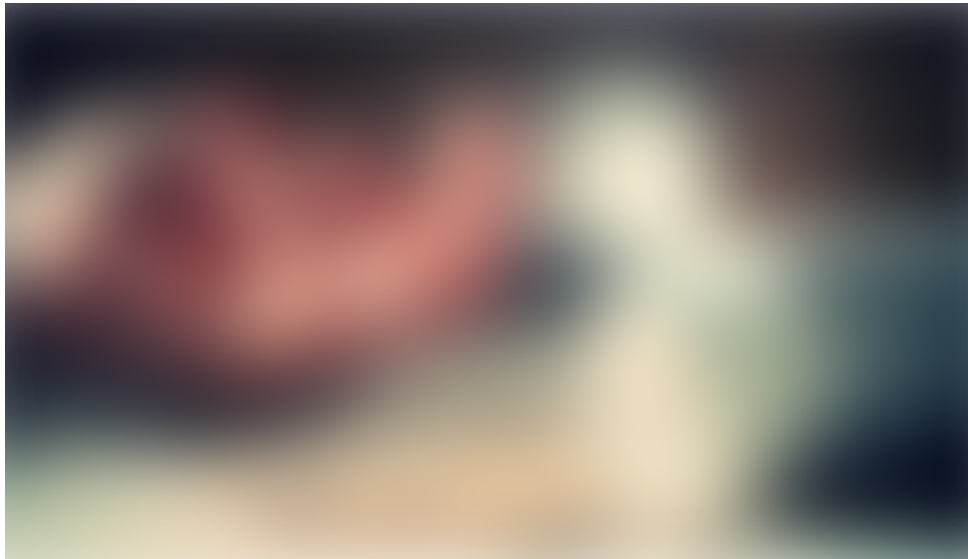


Pollan on Joe Rogan

Since the 1940s psychedelic research has been conducted at Johns Hopkins, Maryland Psychiatric Research Center, NYU, Harvard Divinity School, Technische Universität Kaiserslautern, and many others; and schools now offer psychedelics studies programs.

In essence: the medical, psychological, and scientific communities are buzzing over psychedelics again. And if we honestly taste the air right now, it seems psychedelics are here to stay. That is not only because psychedelics are so uniquely and profoundly useful —it is also actually because they are so much safer than many of the pharmaceutical drugs in use today.

Psychedelics are Safer, Better, and More Effective than many other Pharmaceuticals



"The rate of drug overdose deaths involving synthetic opioids nearly doubled between 2013 and 2014." from CDC

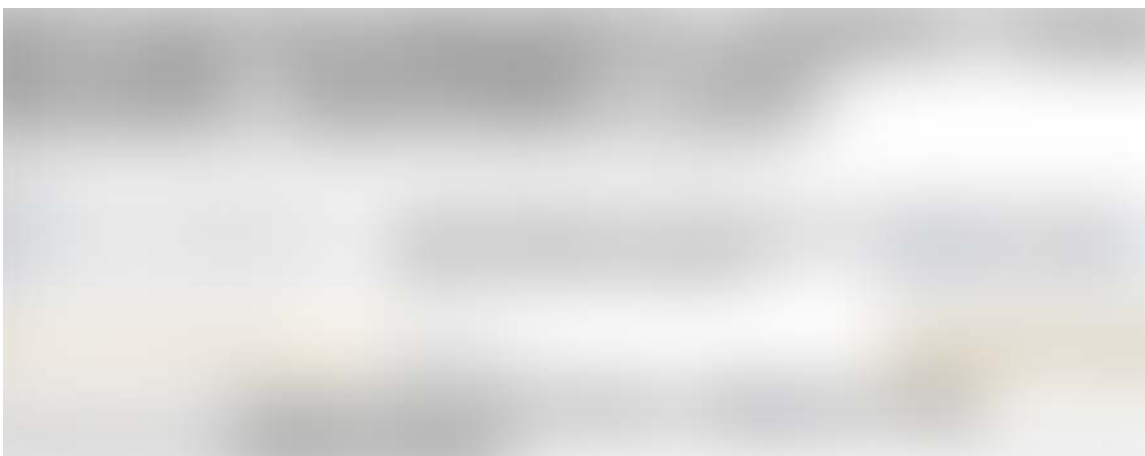
Pharmaceutical therapies as they exist today are not working as well as we should hope if we are to tackle the global issue of mental healthcare with any seriousness.

This comes as no surprise when one is familiar with modern medical industry culture.

Many antidepressants marginally break the placebo limit — that means they barely, if at all, actually ever really work robustly (meaningfully) against a medicine-less sugar pill.

The issues of pharmaceutical propaganda, flagrant bribery, fake journals, and fake research, are now a major thorns in the medical profession as a whole.

This year alone, The Washington Post reported, "The Justice Department charged more than 600 people, including 165 doctors and other medical professionals, with making \$2 billion in false billings in what Attorney General Jeff Sessions said Thursday was the nation's largest ever health care fraud takedown."

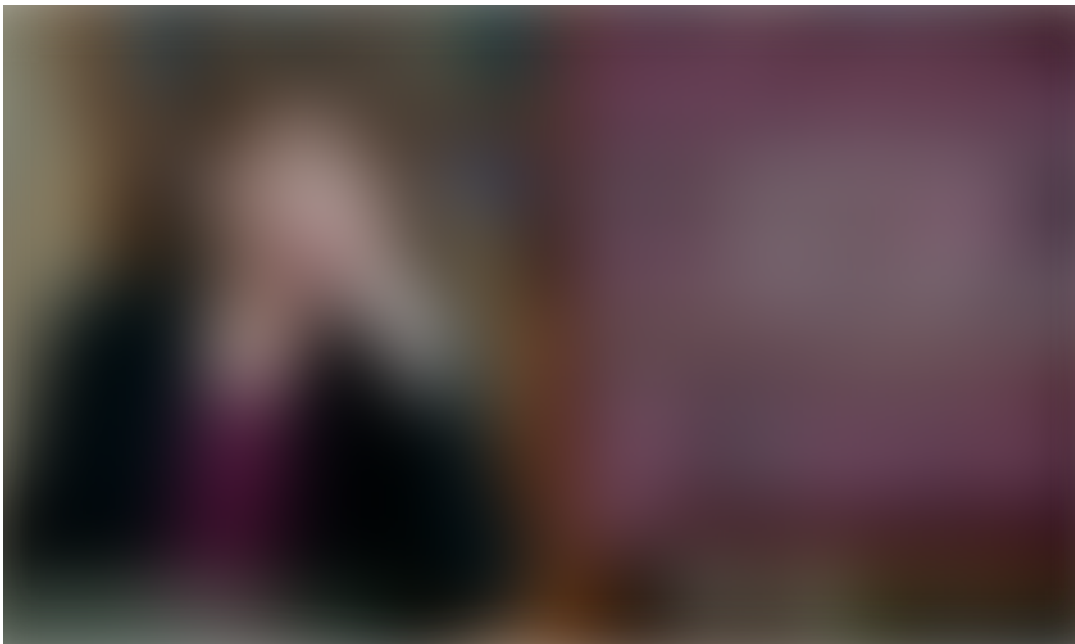


A mere whiff of the corruption plaguing modern medicine

In 2009 things got so out of hand that even Dr. Marcia Angell former Editor-in-Chief of the prestigious *New England Journal of Medicine* sounded the alarm to how conniving aspects of Big Pharma and the sometimes colluding medical field really are. She said:

“It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgment of trusted physicians or authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as an editor of The New England Journal of Medicine.”

Dr. Marcia Angell also stated, “I think physicians and the public have come to believe that drugs are much better and much safer than they really are.”



In 2015, Dr Gilbert Ross, M.D. summarized the findings of a multi-council UK convention on Reproducibility and Reliability of Biomedical Research, titling his own article on the subject Science Publication Is Hopelessly Compromised, Say Journal Editors. In his conclusion, Dr Ross states, “I saw no solutions being offered.” And, “Stanford’s Dr. John Ioannidis, who tried to reproduce many published studies and found that less than half were reproducible.”

Take all this in. This is supposed to be medical science.

It is hard not to punctuate this woeful state of medicine without mentioning the added grim hilarity that Big Pharma’s own television commercials hoc drugs designed to treat depression, but which may include the unfortunate side-effect of suicidal thinking. In comment, author Chris Kresser has described the conjunction of chronic disease and the pharmaceutical industry predation thereof as like watching “a slow-motion plague.”

Abilify Commercial - Side Effects



Abilify television ad

Meanwhile, LSD has been found to be 1/10th as harmful as alcohol, and it is one of the most efficacious treatments for dealing with alcohol and cigarette addiction. Both LSD and Psilocybin “magic mushrooms” are wildly safe, with psilocybin declared the safest recreational drug on the planet. Most people have seen the videos now demonstrating cannabis extracts’ remarkable ability to sooth painful and dangerous seizures in children, and reduce painful Parkinson’s tremors.

Furthermore, it turns out psychedelics are difficult if not impossible to overdose on. The 2018 Global Drugs Survey found psychedelics to be some of the safest drugs; whereas we’ve all heard horror stories about how easy it is to overdose on just about every Big Pharma product in the whole catalog. While psychedelics actually lower the risk of suicide, Big Pharma drugs are *used* to commit suicide. You just cannot do that with psychedelics.

We all know someone, or we are someone, affected by mental illness. That is hard enough; but the so-called cures hocked by Big Pharma are sometimes worse than the disease—or they inevitably compound the problem by adding an addictive substance dependency *upon* that disease. Rather than just dealing with a loved one suffering from mental illness, we have the added tragedy of watching them become addicted to Percocet, Ambien, Xanax, Oxycodone, Adderall, Paxil, and tons of other Big Pharma products—often times *simultaneously*. Psychedelics are rarely, if ever, habit-forming and do not require daily use. Right now, millions of people are hooked on Xanax.





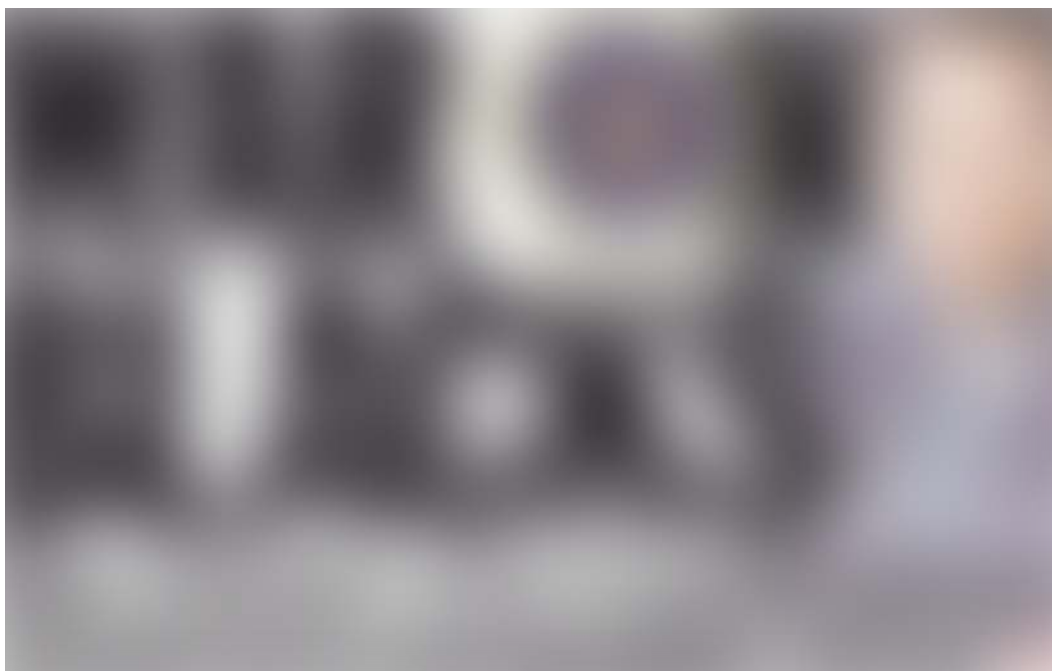
From DailyMail

When push comes to shove, one could make a wager that the major pharmacological industries will likely be unable to produce an SSRI, benzodiazepine, tranquilizer, hypnotic, or any other medicine as efficacious as psychedelic therapy when it comes to treating some of the most common mental illnesses. And, unlike psychedelics, no Big Pharma commercial is going to come out anytime soon with a product you can ask your doctor about that has been shown to produce astonishing neuronal growth in the same way that psychedelics have.

When we look at the mental health landscape we see Big Pharma's arguable failure to concoct therapies nearly as good as what has been pouring out of medical psychedelic research since the mid-20th century.

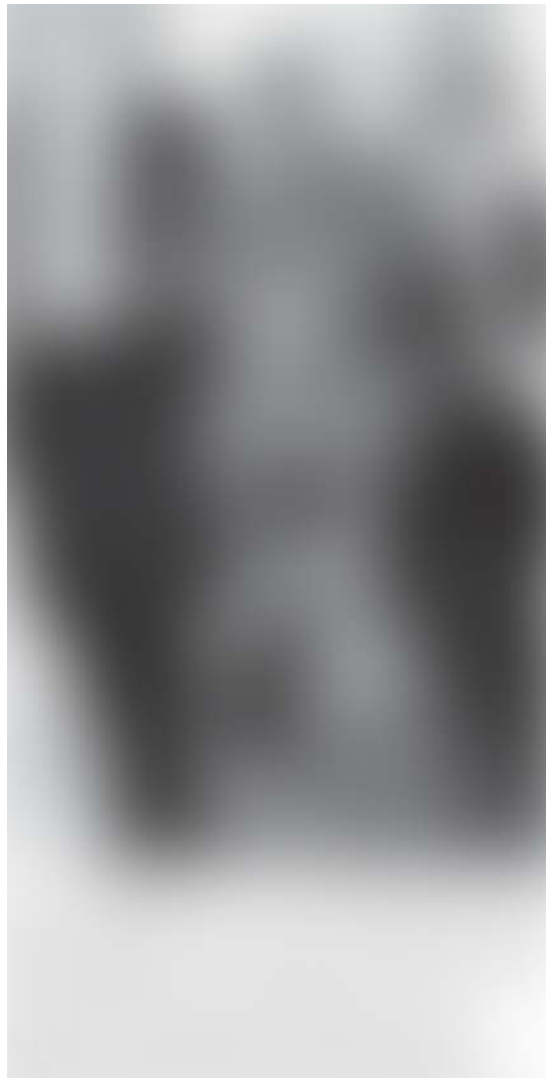
As we absorb this picture and consider Pollan's comments above, something is terribly amiss about how we are dealing with mental illness, which is likely why it has gotten so far out of hand.

Why is This News?: Psychedelic Stigma, Propaganda, Superstition, and Ignorance



he 1960s and 70s were rife with myths regarding psychedelics. These famously graphic and absurd urban legends have had a tendency to linger in public consciousness decades after their first whispers. This has created a kind of undeniable psychedelic superstition. You can often cut the air in a room with a knife when psychedelics are laid on the table (either figuratively or literally.) Legendary trips, grotesque accidents, unending psychoses, and all manner of boogiemens have pockmarked the 20th Century western attitude towards psychedelics.

Timothy Leary, the guru of LSD, ultimately failed to be the easy-minded cultural voice that psychedelics so desperately needed at the time of their wide introduction in the States. Richard Nixon did not help matters for psychedelics either.



Nixon coined the propaganda term War on Drugs and went as far as to declare drugs “public enemy number one.” He was famous for his unflinching, frequently violent attitude against “drugs” and “drug-users.” However, the attitudes enforced by the Nixon Administration nationally—and then forwarded by Reagan internationally—were not at all truly based in any kind of scientific or medical reality.

Rather, it has come to light that Nixon’s Drug War campaign was not at all what it claimed to be. The Drug War was actually a covert method of targeting African Americans (particularly the Black Panthers, whom Nixon and the FBI are well-known to

have despised), as well as the nonstop anti-war counter-culture effort that Nixon weathered throughout his two terms of office — the Hippies and Yippies.

As for Reagan, it is hard to imagine that a Nixon-era policy pushed into the international community was sincerely designed to help the most vulnerable people in the world.



via CNN

Even if Nixon and Reagan's anti-drug militarization and mass prosecution efforts *had* been a sincere quest to help humanity, the global community is now largely in agreement that it has been a disastrous failure.

Ultimately, Nixon and Reagan did not actually know anything of what we know about psychedelic therapies today. Yet, we are still living unhappily under a system they designed—a system that does not have any medical or scientific merit. These cultural and legal policies, as well as the virtual halt on all psychedelic research, has aided to keep most of the world in the dark about the true nature of these compounds and therapies. For the last few decades the global community from top to bottom has been roundly misinformed, either deliberately or through salacious rumor, about the reality and potential of psychedelics for global wellbeing.

This is why psychedelic therapies are big news... again.

Legalizing Psychedelics & International Policy





In 2016, at the United Nations General Assembly Special Session (UNGASS2016), the member nations of the UN spoke out on the overwhelming failure the War on Drugs has been, and the need to change global policy. This goes for drug use issues across the board — not just psychedelics. The Open Society described the UNGASS2016:

Never before have so many governments voiced displeasure with the international drug control regime. Never before, to this degree, have citizens put drug law reform on the agenda and passed regulatory proposals via referenda or by popular campaigns. Never before have the health benefits of harm reduction approaches — which prevent overdose and transmission of diseases like HIV — been clearer. For the first time, there is significant dissent at the local, national, and international levels.

UNGASS 2016 was an unparalleled opportunity to put an end to the horrors of the drug war and instead prioritize health, human rights, and safety.

Despite these global cultural victories for a more humane approach to drug-related issues, The UN's own International Narcotics Control Board (INCB) is still operating under the old Nixon and Reagan Era “War on Drugs” attitude. From that very same Open Society report on the UNGASS2016, they take time to comment on the INCB's own dinosauric vision:

For example, in the early 1990s, Switzerland faced a major drug problem. The country had open-air drug scenes and one of the highest rates of HIV in Western Europe. Rather than traditional, unsuccessful criminal justice approaches, the government pioneered health services such as heroin prescription, supervised consumption rooms, and community-based treatment. The Swiss people approved this policy through a series of referenda.

The results were eye-opening.

The number of new heroin users declined from 850 in 1990 to 150 in 2002; drug-related deaths declined by more than 50 percent between 1991 and 2004; levels of new HIV

infections dropped 87 percent in 10 years, and there was a 90 percent reduction of property crime committed by people who use drugs.

However, rather than lauding these successes, the UN's drug panel (the International Narcotics Control Board), accused the Swiss government of "aiding and/or abetting the commission of crimes involving illegal drug possession and use, as well as other criminal offenses, including drug trafficking."

This is just one example of the INCB's unfortunate, if not downright backward positions. Nevertheless, the global opinion on drugs in general is changing in profound and accelerating ways.

In 2015, the INCB attempted to pressure Uruguay and the United States against moving towards cannabis legalization, production, and distribution. After their total failure of intimidation in 2017, the INCB bent and released a single page-long letter, basically asking to be left in the loop regarding what happens.

Despite the tension between conventions like UNGASS2016 and quasi-judicial bodies like the INCB, the question remains—is there a precedent for the medical use of psychedelic therapies within the UN?

The answer is once again an emphatic—**Yes!**



Eleanor Roosevelt with novelty giant-font sized version of the UDHR

Article 25.1 of the 1948 Universal Declaration of Human Rights clearly states:

"Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care..."

If psychedelics cure chronic depression and you have chronic depression, and you are *denied access* to a medicine that can help alleviate your medical suffering, then we are

now potentially dealing with a human/patient rights violation.

The very Preamble of the United Nation's own Single Convention on Narcotic Drugs in 1961 states:

“Recognizing that the medical use of narcotic drugs continues to be indispensable for the relief of pain and suffering and that adequate provision must be made to ensure the availability of narcotic drugs for such purposes...”

Articles 1, 2, 4, 9, 12, 19, and 49 of the same Convention contain provisions for the “medical and scientific” use of controlled substances—arguably including psychedelics.

The more steely-worded Convention on Psychotropic Substances of 1971, Article 7 states:

In respect of substances in Schedule I, the Parties shall: (a) Prohibit all use except for scientific and very limited medical purposes by duly authorized persons, in medical or scientific establishments which are directly under the control of their Governments or specifically approved by them.

This particular ‘71 Convention is one of the reasons why the continuation of that very promising psychedelic research in the 50s and 60s came to a virtual standstill.

Nevertheless, it must be repeated that this whole argument truly rests not in opinion, but in repeatable medical science. The questions are:

1. Do certain psychedelics, and other psychedelic-like compounds (MDMA, Ketamine), have valid medical applications that help relieve human suffering?—**YES!**
2. Would certain psychedelics, and other psychedelic-like compounds, be safe within a medically controlled or therapeutic context?—**YES!**

Herein the case can simply be made that psychedelics are not anything like opioids, cocaine, or benzodiazepines—which are some of the most dangerous compounds on the planet.

Psychedelics are far safer, and in some circumstances wildly more effective than other pharmaceuticals. This means that the common Schedule 1 status of many psychedelics “high abuse potential, no medical use, and severe safety concerns,” no longer (and never did) have any scientific or legal merit.

It is time for legal policy to catch up with medical scientific fact. As William Lloyd Garrison said of the execution of John Brown, just before the outbreak of the American Civil War, “It is high noon.” Indeed, it is high noon for psychedelic therapies to become normalized and integrated into modern society.

We are nearly there





In that very same London meeting of this year, UN Secretary-General Antonio Guterres said, “The UN is committed to working with partners to promote full mental health and wellbeing for all.” When the UN Secretary-General states, “there is a need to look beyond the health sector, for creative solutions to tackle the root causes of deteriorating mental health,” to me it sounds like a call to normalizing psychedelic therapies on a vast scale. That is simply because an individual cannot at once be dedicated to alleviating the pain and suffering of addiction and mental illness and at the same time denounce psychedelic therapies. Such an outlook is mere cognitive dissonance brought on by a groundless and antiquated moral panic — not based on any kind of legitimate medical research.

Earlier this month, the net boomed over psychedelics once again as researchers in a late September John Hopkins article pushed for psilocybin’s reclassification. This was covered by the The New York Times, Motherboard, Fortune, Anti-media and many others.



From John Hopkins Hub

“We want to initiate the conversation now as to how to classify psilocybin to facilitate its path to the clinic and minimize logistical hurdles in the future,” says Matthew W. Johnson, associate professor of psychiatry and behavioral sciences at the Johns Hopkins University School of Medicine. “We expect these final clearance trials to take place in the next five years or so.”

What does this all ultimately point to?

Given where we have come in psychedelic trials and where they seem to be inevitably heading, it is time to begin normalizing psychedelics as a medical therapy. This is something that now seems patently obvious given only a cursory glance of the growing body of research.

The sooner we get to normalizing and legalizing psychedelics the better for all humanity. If it turns out that psychedelic therapies are one of the greatest medical breakthroughs in human history, then to *deny* suffering patients access to these therapies would end up being something of a **human rights violation**.

. . .

As we have seen, the Schedule 1 status for psychedelics is not only a wildly out-of-date and scientifically **invalid** claim all the way from the disgraced Nixon Administration, but it is also a claim holding back methods and therapies that could help hundreds of millions of suffering people around the world—and according to the UN, WHO, and Our World in Data: those affected by the crisis of mental illness are either someone you already know, or someone you already are.

Countries around the globe should reexamine the legal status of many psychedelics *immediately* since the criteria—“illegal because they have high abuse potential, no medical use”—outright does not and never has been an honest scientific truth regarding psychedelics.

We are living in a new world of psychedelic science, but we are still wrestling with old (Nixon Era old) cultural laws, rules, and ideas that ultimately represent the last gasps of psychedelic superstition. Due to this, it is my own fantasy to see a sociologically, medically, and scientifically honest convention on psychedelics at the UN.

It is high time for citizens and governments, for medical, psychological, legal, and other professionals to act meaningfully towards alleviating our collective human plight of mental illness suffering by normalizing and legalizing psychedelics. Right now there are countless citizens from all over the world and within every country than can benefit from them.

Everyone gets depression at some point in their lives, just like everyone catches a cold. But, based on this growing body of research, it very much looks like depression could actually be *easier* to cure than the common cold after all.

