
preparation for the journey

Rick Strassman

Important disclaimer: None of the authors of this book condones any illegal activities, even when it comes to the potentially beneficial effects of altering consciousness with a psychedelic drug. In nearly the entire world, it is illegal to possess major psychedelics such as mescaline, DMT, LSD, and psilocybin. In some instances, the plants that contain these chemicals, such as mescaline-containing peyote cactus and psilocybin-containing magic mushrooms, are also banned.

While a discussion of the current laws regarding these plants and chemicals is beyond the scope of this book, we believe in the maxim “The law of the land is the law.” Therefore, the authors take no responsibility—legal, medical, psychological, spiritual, or otherwise—for any difficulty in which anyone may find him- or herself as a result of manufacturing, possessing, distributing, or using a psychedelic substance.

Nevertheless, the human drive to profoundly alter consciousness in the way that psychedelics do so reliably cannot be extinguished. While there clearly are other legal ways in which we may alter our consciousness—meditation, prayer, fasting, extreme sports, and so on—few of us are able to attain truly psychedelic states without using drugs or plants. Thus, some may consider the legal and other risks associated with taking psychedelic substances as less compelling than their perceived benefits.

Whenever possible, we advise using such materials in licit circumstances. There are countries and contexts in which the use of certain psychedelic substances is legal. Examples include ayahuasca-using churches in the West, centers in Latin America that use ayahuasca and other psychoactive plants, and peyote-using churches in North America, where jurisdictions allow its use for both Natives and non-Natives.

Those preparing for a psychedelic drug experience, even the most seasoned veterans, nearly always feel intense anticipation. The late Secret Chief, a San Francisco Bay-area psychologist who supervised thousands, if not tens of thousands of psychedelic drug sessions, referred to this feeling of anticipation of a session as “The trip has already begun.”

The Secret Chief was uncannily, unerringly, and extraordinarily accurate—and it may require some deep thinking to fully understand what he meant. Obviously, the mere act of thinking about, discussing, and deciding to undergo a psychedelic drug session is not the same as actually taking a drug. Nevertheless, by making such a decision, we initiate a cascade of events within the matrix of set and setting, which form a continuum not only limited to the discrete time period during which we are under the influence of a psychedelic, but also spreading in all directions, like the proverbial pebble thrown into the pond. By embarking on the preliminary stages of taking such a trip, we set in motion certain feelings, thoughts, and actions that lead to a potentially life-changing event. Our lives have already come under the influence of the trip.

Set and setting, the two primary factors involved in determining the outcome of the inner journey to outer space, are themselves modifiable via the two primary tasks of that journey: getting ready and letting go.

GETTING READY

In order to get the most from making any journey, inner or outer, we must do what we can to minimize the risks of a negative outcome and

optimize the chances for a positive one. Once we have established the most solid foundation possible, we can be more assured of the beneficial outcome that may result from truly letting go.

We possess the power to determine the nature and course of our trip much as we possess the power to determine the nature and course of our lives. On one hand, our lives are undeniably constrained by the circumstances of our birth: our genetic make-up; who our parents are; and the chemical, social, and psychological environment into which we are born. In addition, we are subject to the “accidents” continuously coming our way: those chance encounters that play such an important role in who we are and what we do. On the other hand, we also have the choice of how to regard and react to these circumstances. This may be what is meant by the maxim “Everything is in the hand of heaven except the awe of heaven.”

At the same time, we must not forget that the ultimate purpose and context of our lives is vast and ultimately unknowable. In this case, we can refer to the complementary maxim “The work is never done, but we must never cease from doing it.” We must do everything we can to develop our intention and attitude toward what awaits us in the psychedelic state. Then, when we meet what awaits us, we can allow it to show us what it will and take us wherever it will.

There are several practical considerations in getting ready for a session. We can parse these into a general temporal scheme: long-term work, intermediate work, and short-term work.

Long-Term Work

If we know ourselves—our state and traits—as best as possible, we will be able to contend with any likely resistance to the letting go that is requisite for the optimal journey. This self-knowledge cannot be acquired quickly, but rather requires years and decades. Nevertheless, at some point, anyone who will make this journey must begin walking the path to inner knowledge.

The two most common ways of increasing self-knowledge and

learning how we relate to ourselves and others—those enduring and deep-seated elements of our set—are *psychotherapy* and *spiritual practice*. While some consider the two at cross-purposes, they may be combined in very useful ways, because they share common elements in theory, technique, and goals. Both use focused self-awareness to observe, understand, accept, and modify our feelings, thoughts, and behaviors in order that we may live more fulfilling, satisfying lives. Whereas meditation may emphasize awareness of mental, cognitive, and perceptual processes, Western psychotherapy usually relates to working with emotional concerns.

Spiritual or religious practice may be shorn of much of its theological content and rituals by emphasizing primarily its benefits in the development of self-awareness and the cultivation of desired mental states. For example, sustained concentration on our body and mind in a regular meditation practice can help make apparent several core issues: How do we experience anxiety—in our bodies or mentally? If we perceive anxiety in both the body and mind, which perception comes first? What of vulnerability, happiness, and fear? What are our fears? Is it our nature to share with others or keep to ourselves?

Prayer, perhaps in a way we usually don't consider, also may provide access to helpful discoveries. Praying to an outside source of help or wisdom may result in many of the same answers regarding who we are and how we function in the world—answers similar to those that might arise in a meditation practice. Where we acquire such information may not matter fundamentally within the context of simply obtaining increased self-knowledge and efficacy. In addition, regular meditation or prayer practice does much to develop our muscles of attention, and we can then apply our strengthened ability to focus toward examining ourselves in ways we may not have been capable of engaging previously.

A reliable, dependable, empathetic, and admirable teacher can be of great help in this process. He or she can provide instruction and encouragement and serve as a role model who encourages us to persist in our practice. In addition to these more formal teaching functions, an

effective meditation or prayer teacher allows for the development of a close relationship between him- or herself and students. An open-eyed examination of the nature of this relationship—its ups and downs, misinterpretations, and projections—can be invaluable to our process of discovering who we really are.

Effective psychotherapy shares features with an effective meditation or prayer practice. These include paying attention to areas of difficulty in our lives. By looking carefully at what situations stir up particular emotions, thoughts, and behaviors, we may discover previously unacknowledged emotional and cognitive habits that may have served us at one time, but no longer do so. Within the traditional psychotherapeutic setting, we find the relationship that develops between student and teacher more commonly subject to careful examination. This *analysis of the transference* is especially the case within the psychoanalytic framework.

If our meditation or prayer practice is focused on more than self-examination and self-improvement, it will begin forcing us to ask larger questions that almost certainly will arise in any deep psychedelic work. These questions concern the existence, nature, and providence of God; the reason for our birth; the nature of this reality; enlightenment; and how to contend with nonphysical realities and encounters with alien or spiritual or noncorporeal beings. The deeper mystical teachings of the religions from which these meditation or prayer practices emerge are well equipped to provide answers to these questions. We may thus find ourselves pursuing a deeper involvement in a particular religion.

Conversely, the typical psychotherapeutic endeavor is not as concerned with spiritual issues—though any good psychotherapist knows the limits of his or her skill and will make a timely and appropriate referral to a spiritual teacher when necessary. In the same manner, a competent spiritual teacher will recognize the need for a psychotherapy referral when mood, thought, or personality issues appear to be interfering with progress in a meditation or prayer practice.

Intermediate Work

Once we have decided to take a psychedelic journey, we can start preparing in specific ways. To the extent possible, we can educate ourselves regarding what to expect on our trip. Having some sense of the expected terrain, as described by those who have gone before, can be quite helpful. In this way, if others have alerted us to what to expect, we may not be surprised when we encounter phenomena far beyond the range of what is familiar to us.

The literature regarding near-death and out-of-body experiences, meditation, abduction, shamanism, and, of course, the taking of psychedelic drugs contains a wealth of information about others' experiences. It can provide us with helpful background information as well as practical means of dealing with those states. Also recommended is speaking with others who have gone before, listening to talks, and getting involved in online discussion groups of the various communities that discuss highly altered states of consciousness—and not only those concerned with the effects of psychedelic drugs.

Some might object on the grounds that these educational activities may bias us toward particular expectations which can lead to certain specific types of experiences at the expense of others—yet these arguments are not especially persuasive. The truly psychedelic experience is totally unexpected. Nevertheless, knowing how unexpected it can be may help us to keep our bearings when confronted with it. We will be ready for the unexpected. Discuss the impending trip with your therapist or spiritual teacher if you have one.

At this point, however, it should not come as a surprise if the stigma attached to drug use causes spiritual teachers to discourage the taking of them. This may be the case even if he or she has had personally beneficial experiences with psychedelics. Faced with disapproval from someone in whom we have placed great faith and who has previously been very helpful to us, we may need to shelve the topic of psychedelic use and continue our work with him or her without any continued interference of the discussion. Or perhaps we may decide to

seek instruction elsewhere, in a context in which we can discuss how psychedelic drug experiences may work together with therapy or meditation or prayer.

Those who are taking medication should make certain that there are no possible adverse interactions with these medications and the psychedelic drugs considered. For those who are taking medications for conditions that also can be managed by lifestyle changes such as exercise; weight loss; diet adjustments; and the cessation of the use of alcohol, tobacco, caffeine, and other drugs, try to follow through with these changes first to see if some of the medications may no longer be necessary. The point is to simplify body chemistry as much as possible. Though the reasons behind the desire to stop medications may remain private, the actual process of trying to discontinue them must be taken up with your health care provider.

Intent

Once we have decided we want to experience a psychedelic drug session, we must hone in on our intent. As the Secret Chief asked, “To what purpose?” Why are we doing this and what do we hope to accomplish or gain from such an experience? Is it primarily curiosity that drives us—are we intellectually and emotionally drawn to novelty, to something new, exotic, and exciting? Do we wish to experience pleasure of an extraordinary degree? Do we have an emotional, artistic, creative, professional, spiritual, or interpersonal problem we want to solve? Are we seeking a spiritual experience or answers to our deepest yearnings? Do we wish to know God—to see him or her face to face? Do we hope for an encounter with the angels or the powers through which God manifests? Are we interested in outer space travel, science-fiction revelations, journeys through time, and encounters with alien civilizations and their inhabitants? Do we wish to obtain information and power for good or for ill? Do we wish to make the world a better place—or do we intend to hurt those who have hurt us? Do we wish to suffer? Do we wish to create a situation in which we replay abusive past or present relationships?

There are so many possible motivations to take a trip—and any of these may compete and blend with one another. We must be as honest as possible with ourselves when deciding what our intentions are, realizing that having a particular intention doesn't necessarily guarantee the content of the session. We don't always have the trip we want; instead, we seem to have the trip we need. If we tell ourselves that our motivation is, perhaps, to learn more about our relationships, but more honestly, that we want to have a good time, we may be unpleasantly surprised when we're actually confronted by deeper, more painful psychological issues. Conversely, we may approach the experience with deep solemnity and expectations for a divine encounter, and may be similarly unprepared for the fun, light-hearted aspects of our session. Thus, it is important to understand the full range and complementary nature of our motivations. Ideally, this is accomplished through the use of the introspective skills we have obtained through our own inner work, either spiritual or psychotherapeutic.

It is worth noting that developing an intention to undergo a spiritual, otherworldly, near-death transcendent type of experience is, in some ways, the same as making the decision to subvert the dominant Western postindustrial worldview. That is, the total loss of self-control and our usual self-identity and the wish to interact with and be guided by spiritual entities whose mercy we count upon fly in the face of our materialistic, individualistic, and fear-based relationship to existence. It also runs contrary to a solely clergy-mediated relationship to the divine. If and when we do have this type of experience, we must realize that the mainstream, using the tools of ridicule and psychopathologizing, among others, will oppose our discussing and valuing it.

Short-Term Work

How do we prepare ourselves in the day or two before the psychedelic journey? First, it is paramount that we understand our intentions. Then, by attending to certain concrete matters, we validate our intention to mark this experience as unique. The essence of making something holy

or sacred is to separate or distinguish between the sacred and the profane. Though at the absolute level of reality, there are no such differences between what is sacred and what is profane, at the relative level in which most of us exist most of the time, the two do differ. Thus, it is important to manifest our inner intent through our physical reality. We want to perceive as clearly as possible our psychedelic experience without the muddying effects of other influences such as fatigue or an unsafe environment.

It's important to approach the trip in good health and with a positive state of mind and to be well rested and have a clean body and clean clothes. Participants should be careful with what they eat, drink, and smoke several days before the trip. Further, are there loose ends requiring attention? Are these minor tasks, such as taking out the garbage, making a necessary phone call, and paying an overdue bill, or are these more significant, such as updating a will? While updating a will may appear morbid, consider the prospect that while undergoing a near-death experience, you may recall that you have no will! Would your emotional reactions to your sense of dying be different if you knew you had taken care of those you were leaving behind?

Before taking any psychedelics, it is recommended that you check in with those who are most important in your life. Are we on good terms with our partner, spouse, family, friends, and business associates? An extra prayer, meditation session, or psychotherapy appointment or two in the days before a trip can make clear some internal or external issues that might require special attention.

SETTING

Clearly perceiving our intent naturally leads us to decide upon the setting, the circumstances in which we will be taking the trip. Earlier, we discovered different categories of experiences resulting from psychedelic drug ingestion. We can use these categories as a model for conceptualizing the different types of trips available to us:

- A pleasurable trip that fulfills curiosity
- A problem-solving session that addresses psychotherapeutic issues we wish to work on or creative, professional, or other concerns
- A spiritual, near-death experience or otherworldly journey

Also to be considered are the particulars of the trip. These include:

- Environment—outdoors or indoors
- The dose of the drug
- Whether we will journey alone or in a group
- Whether we will have a sitter
- Accoutrements for our trip such as music or art supplies
- Supplemental techniques for reaching altered states of consciousness

Finally, we must consider if the session will take place in a research setting. While all types of trips can take place in a research environment, it is important to note the constraints and opportunities unique to this type of setting—the most important of which concerns the issue of altruism, the notion of giving up something in our own trip for the benefit of others.

Is the Setting Outdoors or Indoors?

An outdoor setting of natural beauty can lead to profound levels of identification or merging with the natural world, yet being outdoors is also less predictable than being indoors. These unpredictable factors include insects, animals, inclement weather, unwelcome intrusions by other people, dirt of all kinds, and lack of facilities if participants fall ill or feel particularly helpless.

An outdoor setting in a city or suburb can provide a unique perspective on humanity, yet it lends itself more to an externally oriented and at times potentially chaotic experience. Such a setting requires us to be prepared for exposure to a wide array of interpersonal and

technical challenges. An indoor setting in an area of natural beauty can combine the best of both worlds: the safety and predictability of an indoor space and the option of going outside to experience nature.

DOSAGE, ROUTE OF ADMINISTRATION, AND COMBINING DRUGS

We can divide doses into low, intermediate, and high. Usually, the higher the dose of drug, the more intense and longer-lasting the effects. Yet there are many cases in which the same person may experience a marked effect from a small dose and may seem less affected by a large dose at some other time. Instead of serving as examples of tolerance, in which repeated dosing decreases subsequent responses, or sensitization, in which low initial doses increase the effects of subsequent low doses, there seems to be some poorly understood interplay among dose, set, and setting which results in dose not being invariably related to intensity and duration of effect.

There is merit in beginning with a low dose of any substance that is new to us, whether that “substance” is a relationship, exercise routine, or a psychedelic drug. As is true most of the time, however, the true nature of any particular relationship may rarely be known without receiving a full dose. Thus at some point, for the truly adventurous explorer of these realms, sooner or later a high dose plays a role in their work with the substance and the realms into which it leads.

Another consideration is route of administration. There are various ways to administer a drug. Intravenous injection, smoking, and snorting are the fastest ways to experience effects. Slower onset occurs with routes such as intramuscular and subcutaneous (under the skin) injection. Slower yet are gastrointestinal methods, such as swallowing or rectal administration. Topical application to the skin or mucus membranes varies in speed, depending upon the integrity of the tissue—that is, effects occur more quickly from applying a drug to a wound or open sore than applying it to intact, calloused skin. In addition, the “carrier”

for the topically applied drug, the solvent into which it is dissolved, can make a big difference in the speed of absorption. For example, DMSO (dimethylsulfoxide) is a solvent that allows for very rapid skin absorption of a drug, whereas cocoa butter is absorbed by the skin more slowly.

It's also best to choose one dose of one drug for a particular session, and then stick to that decision. Participants may feel the need to take more of a substance if the effects are not as hoped for—what some refer to as taking a “booster” dose. While there are instances of this “booster” being an integral part of the experience—for example, in indigenous ayahuasca sessions—it is advisable to exercise caution in this area. Particularly if participants are alone, impaired judgment may lead to making ill-advised decisions, and can lead to taking a dose that is too high. Remember, there is always the next time to take more.

Neither is it advisable to mix substances. Doing so blurs the effect of one or the other, and may produce toxic interactions.

SOLO OR GROUP: THE ROLE OF STRUCTURE

In this instance, the term *structure* refers to behavioral parameters that we impose upon ourselves during a session. Such parameters are for our own safety and comfort and optimization of the trip. Further, when we are in a group setting, establishing a structure is intended to respect others' feelings and needs. There are several options regarding how many people we may decide to journey with: We may travel solo, with a small group of friends or strangers, or with a larger group of friends or strangers.

Solo

Safety concerns suggest having a trusted individual or individuals in our space when we take psychedelics, but sometimes none is available. In addition, we may want to journey free from any interpersonal interference; we may not want company. Nevertheless, it is relatively imprudent to embark solo on a first trip. Even after we've gained some

familiarity with a particular drug, it is wise to let a confidant know of our plans and whereabouts when we take the drug again.

If we do take the journey alone, it is important to think through certain issues beforehand, and decide upon responses to which we can adhere. It's important to gain familiarity with these structural issues from those who are more experienced with taking a drug, and that we spend some time establishing reasonable and appropriate guidelines for our session. Though we might hope to commit these guidelines to memory, once the time comes, it is helpful to have them available in written form in case we are unable to recall them. In most cases, when we are under the influence, it is ill advised to change the structure we have set up before taking the drug. It is important to remember that we can always change the guidelines for our next session, when we have had some time to think about these issues after we've had the experience of one journey.

There are many structural issues to consider, especially if we are taking the drug alone. Will we be listening to music? If so, will we set up our play list beforehand or decide what we will listen to when we are in an altered state of consciousness? Do we intend to keep our eyes open or closed? Would we like eyeshades? Will we remain clothed? How much of the session will we spend lying down versus sitting up and walking around? When and what do we eat? How will we make sure we drink enough fluids? Under what circumstances might we take more of a drug or smoke a cigarette or drink alcohol or coffee? After our trip, when can we drive or leave the immediate premises? What about answering the telephone or making calls? How do we get help if we need it? What do we do if things become unbearable—do we want to have a tranquilizer on hand to chemically abort our trip?

Group

Whenever more than one person in the room is under the influence, we must take into consideration other people's set and setting issues, but this may quickly ferment into a frothy brew of personalities and inter-

actions. Therefore, in group settings—particularly in a new group—it is important to have additional elements of the structure decided and agreed upon in advance. One way to minimize stresses associated with a group session is for each person to have his or her solo trip. The use of eyeshades and well-spaced, single-sized mattresses or pads will help effect well-demarcated, individual experiences in a group setting. As drug effects wear off, interactions might then begin outside the main room in order not to distract those who wish to continue with a more inner-directed experience.

Yet the purpose of a group setting, particularly with lower and intermediate doses, may be to engage in some group activity such as playing or listening to music, sharing an aesthetic experience, or problem-solving. In cases such as these, we might spend most of our time exploring how the group is affected by the influence of the psychedelic. Most important, however, is that these expectations and ground rules are discussed and agreed upon before a session begins.

In addition to these issues, there are other concerns in a group: How do we signal that we are in need (that is, do we raise our hand or speak)? How would we like to be supported? Is support verbal or physical? How are decisions made regarding our welfare or behavior? If some find the music, incense, or room temperature or lighting unpleasant, how will this be managed? In addition, will others in the group be sober or intoxicated? If intoxicated, will everyone in the group be taking the same drug? How will we know?

While certain variables lend themselves to more or less flexible responses, some structural issues are best adhered to rather strictly. For example, intercourse or sexual interactions of any kind between participants during the session should be prohibited, as should physical, verbal, or emotional acting out of aggression. It is unwise to ask for or accept material favors such as money or property during the group session. Certainly, we may ask for and accept favors whose consequences do not extend beyond the session, such as a blanket if we are cold, a book for viewing, and the like. Asking for favors that

require follow-through outside of the session, however, should wait until everyone is back to a normal state of consciousness. In addition, everyone must remain in the group until previously agreed-upon criteria have been met—for example, the group leader has determined that drug effects are adequately resolved or, if there is no leader, everyone must get a good night's sleep before leaving. Privacy and confidentiality are crucial in the success of any such group, and therefore, everyone must agree never to mention with whom they took a group trip without the express permission of the others involved.

One of the advantages of the group setting is the option of having a period of organized sharing after the session, usually the day after the experience. This can be quite helpful in terms of the crucially important reentry and reintegration necessary for optimal use of the session.

THE SITTER

Along with the question of who else is in the room tripping with us, an important question concerns whether anyone is “sitting” for those under the influence. The sitter supervises a psychedelic session much like a babysitter supervises children—those who take psychedelics may need the same kind of steering, restraining, and nurturing. In addition, it derives from the similarity between sitting in meditation and supervising a psychedelic session. The sitter must combine the skill of allowing people under his or her care to go through whatever takes place in a psychedelic trip and the skill of remaining alert and focused on the needs of those who are journeying. This combination of alert passivity and passive activity is a hallmark of many meditation practices.

Whether we are tripping on our own or in a group, without a designated sitter, ostensibly there is a greater sense of freedom to have the type of trip we wish—yet, particularly with high-dose sessions, it may be easier to let go more completely if we feel someone is taking care of us. In addition, the relative anarchy that may reign in a group setting, particularly if people are on high doses, can be difficult to orchestrate.

One or more sitters can provide a much-needed supervisory function in such a setting.

Some sitters may lead sessions more actively, rather than simply responding to the needs of participants. Those trained in a shamanic model may play musical instruments; sing; whistle; dance; shout; manipulate bodies physically and energetically; and pour, rub, or spit various liquids, smokes, and powders onto participants.

Set of the Sitter

Though there are many reasons to trip with a sitter, it is important to be extraordinarily careful regarding under whose supervision we place ourselves when we are taking psychedelics. Such consideration both makes the most of sessions and works to avoid problems. It's useful to note that participants will be deeply involved with this person at all stages of a trip—before, during, and after. As someone in a position of authority, leadership, and support, those who will participate in a session are well advised to learn what they can about him or her.

Some questions include: Is he or she religiously or spiritually oriented? Is he or she a member of any particular religion or profession? What is his or her training? What about sexual orientation? Is he or she married or does he or she have children? Does a potential sitter drink alcohol or use drugs, and if so, does he or she use them excessively or in moderation? Is he or she vegetarian? What are his or her motivations for supervising sessions—money, a desire to heal, sadism, curiosity, altruism, voyeurism, career advancement? How does he or she relate to the power and reputation that the sitter may accrue? What is his or her experience with these compounds in terms of administration to others as well as regarding personal use? Is this someone of whom we can ask questions, and with whom we can work out plans for various situations that might arise during our trip? Do we feel we can trust this person to give us guidance and support when we are unable to provide these for ourselves?

We strongly encourage asking prospective sitters any or all questions

whose answers will affect participants' feelings of safety and encouragement during a session. Included in these questions is a discussion of issues regarding structure. In addition, because it is so difficult to obtain psychedelic drugs, the person who supervises a session may be the one from whom participants obtain the drug. This is usually the case in small group and shamanic sessions, and is always true in the research environment.

Is the Sitter Experienced?

Within the shamanic tradition, it is axiomatic that the leader is intimately and thoroughly familiar with all manner of drugs and plants that he or she will administer to others. This is also usually the case in the West with those who sit for underground users of psychedelics. Empathy—knowing what another is feeling—is quite important in any healing or spiritual work, and is found most often when the healer has previously undergone a similar experience. Even if the setting is not intended to address healing or spiritual issues directly, these may nevertheless arise at any time, and the sitter should be capable of responding appropriately.

Within the academic setting in the United States, a sitter's personal use of the psychedelic in question is discouraged. This is one of the unfortunate results of the Harvard research group's widely publicized personal use of psychedelics in the 1960s. Yet Western European researchers are required to "go first" in any of their own psychedelic studies. There are several reasons for this: in order to make sure drugs and doses are safe, these scientists believe it is more ethical to first self-administer an experimental treatment, especially if there is no significant therapeutic benefit expected. By going first, they bear the brunt of any adverse effects. In addition, European regulatory authorities believe that the informed consent process is better served if the researchers are personally familiar with the effects of the drug. As a result of their own experience, they then are more able to inform a prospective volunteer fully regarding what to expect, and can be more empathetic during the actual drug studies.

Is the Sitter Tripping at the Same Time?

It's important to know if, at the time of a session, a sitter is under the influence of a psychedelic. It's also important to determine how participants will know whether or not the sitter takes a drug. Often, in shamanic or indigenous settings, the leader also partakes of a psychedelic substance, though perhaps at a lower dose than the participants in order to retain the ability to move around and interact. This empathetic resonance among those who are experiencing a particular drug effect helps the sitter provide a particularly deep level of support and guidance. In Western models, however, this is an evolving area; while some leaders ingest psychedelics, others do not.

In an academic setting, it is unlikely that the researcher will also use the same psychedelic substance during the study period. The extraordinarily rare possibility exists that a sitter under the influence of the same drug would also be the object of study. For example, a research project might ask whether a therapist is more or less helpful while affected by the same psychedelic used by participants. Whatever the case, answers to the question of leader use of the drug should be addressed ahead of time. There have been a number of situations in which group leaders have acted inappropriately while intoxicated, crossing important boundaries and later using as an excuse the effects of the drug.

ACCOUTREMENTS

Music can evoke profound effects in a highly psychedelized individual. It usually is easier to arrange music beforehand, either by the solo tripper or, in the case of a group session, in consultation with the sitter if there is one. In a group setting, it is advisable to consider a "veto" rule regarding music: If anyone finds the music intolerable, it must be discontinued. Music with understandable lyrics can sometimes be distracting or can constrain the experience. Instrumental music or world music with lyrics that are unintelligible may allow for more fluidity in reaction to it. Playing musical instruments in a solo setting may

help a participant express nonverbal, nonvisual elements of a trip. In a group setting, participants must take into account the reactions of other group members.

Art supplies, particularly during the “coming down,” resolution period of a trip can aid in giving form, shape, and color to otherwise nonverbal aspects of the experience. Writing materials also may be helpful, and in solo settings, a voice-recording device can capture fleeting ideas. Some people find looking into a mirror while tripping to be particularly evocative, especially in a session with a primarily spiritual or psychotherapeutic focus. Similarly, reviewing family photos from the past and present can stimulate the release of many emotions and insights.

SUPPLEMENTAL TECHNIQUES

There are many nondrug-based methods available for altering consciousness. These may be helpful in refocusing attention for those participants who might be feeling adrift in the psychedelic space or who might be physically uncomfortable. Examples of these techniques include yoga, massage, and a quiet form of meditation. Other techniques may help participants break through a particular psychic impasse in a trip. These include controlled hyperventilation, singing, dancing, and exercise. It's a good idea to be familiar and comfortable with these ancillary techniques before trying them in a psychedelized condition. It's also important that participants not expose themselves to stressful or traumatic interventions unless that is one of the purposes of the trip. For example, participants may wish to work through their resistance to a particular yoga posture that they normally find too difficult to attain.

TYPES OF TRIPS

Keep in mind that despite the type of trip we wish to have, and despite deciding upon the dose, where we are, who we are with, and the activities available to us, we may not have the kind of experience we wanted.

For example, we may expect a relatively minor, pleasurable experience, but may instead reach a near-death state. We must be ready for anything to occur during a trip, no matter how much effort we expend in preparation. Also, it is rare that any one trip consists only of one particular type. Psychedelic experiences are notoriously varied. We enter and exit many different levels during any one session. Nevertheless, there are general types of sessions and advisable related parameters.

Aesthetic, Pleasure-Oriented Trips

These journeys may occur outside, in an environment of natural beauty or they may occur in a setting of man-made beauty that features music, art, or archaeological relics. Ideally, participants will have access to both environments. If we are alone, we may take a walk in the woods, visit a museum, play or listen to music, or get a massage. For this type of trip occurring solely in an urban setting, it is best to take a low dose of psychedelic.

These types of trips lend themselves to group experiences. Examples of large group settings include contemporary “raves”—large-venue dance events—and events such as Burning Man in the Nevada desert, where tens of thousands of people might congregate. Also fitting this type of intention are smaller groups, such as several friends who “hang out” together and enjoy each others’ company in a psychedelic state.

Usually, these are sessions without a sitter or leader. The spontaneity and freedom that we seek in such a setting, with doses generally being relatively low, do not require much supervision. It’s a good idea, however, to make certain that noninebriated people are available who know of participants’ condition and whereabouts.

Problem-Solving Sessions

We may decide to use a psychedelic drug to help work on personal, professional, or creative concerns. Lower and intermediate doses provide more ease in maintaining focus on these issues and recalling our solutions when we return from our journey.

Enhancing creativity with psychedelics may occur outdoors or indoors, depending upon the particular task. An unobtrusive sitter can help record our new approaches to problems, and can provide encouragement and focus. We may want help within the context of a psychotherapeutic process, using the effects of psychedelics to modify the processes by which psychological healing occurs—that is, projection, transference, abreaction, and catharsis. In psychotherapeutic sessions, it's usually helpful to have someone acting as a sitter. This may be our own therapist or someone with whom we only work with in psychedelic sessions. In a psychotherapeutic group setting, some people may be in therapy with the sitter, while others may not.

Lower doses in the psychotherapeutic setting allow for a better focus than higher ones, and provide the basis of *psycholytic psychotherapy*. High-dose sessions, referred to as *psychedelic psychotherapy*, add the qualitative spiritual, mystical, or near-death states to the quantitative augmentation of normal psychotherapeutic processes. Religious and spiritual issues often become conscious and important in psychedelic psychotherapy.

If we are working on interpersonal issues, we and those with whom we want to work through these problems might be journeying together. We may choose to begin the session solo and later come together with other group members. Because of the sometimes intense dynamics that may arise even with low or medium doses, it is helpful to have a sitter in this type of session.

One model of psychedelic psychotherapy combines high doses of drug with overpowering, multimodal sensory stimulation in an indoor group setting. This particular technique is intended to cause a breakdown of psychological defenses not deemed possible by any one modality alone. Yet such experiences are difficult to negotiate and later to integrate.

It is usually easier to work on psychological issues in an indoor setting, although access to the natural world can provide a necessary balance for the intense inner work that engages participants.

SPIRITUAL, NEAR-DEATH, AND OTHERWORLDLY EXPERIENCES

These breakthrough experiences usually lend themselves to large-dose, introspective, solo settings. They also require the most in terms of our ability to let go and open to highly unusual effects. If we choose involvement in a group setting, the emphasis usually remains on an individual's experience, at least in the initial and middle stages of the trip.

It is easier to maintain an inward focus in an indoor setting. Nevertheless, nature can provide powerful catalysts for such experiences. If we decide to take this type of trip outdoors, we must do our best to ensure that participants are safe and free from unexpected disturbances.

If there is a sitter, it is unlikely to be a minister of any organized religion. Rather those trained in the shamanic tradition are usually capable of containing and guiding these types of sessions. In the postindustrial West, sitters often are psychologically or spiritually trained individuals with their own psychedelic experience. Supplemental techniques such as controlled hyperventilation can be useful in providing the final impetus for the desired breakthrough.

As alluded to earlier, these types of experiences require us to be removed from and then, later, placed back into uncomfortable inner spaces. The giving up of cherished self-concepts and identifications necessary to emerge anew into our reality is nearly always quite distressing at some point—and once we have had this type of experience, there is little social support for discussing its merits within the larger social mainstream. Social and spiritual support to help integrate such deep experiences is necessary, and must be part of the preparation for any planned breakthrough session.

VOLUNTEERING TO BE IN A RESEARCH STUDY

Any of these types of trips can be experienced within the research setting. Volunteering to be a research subject, however, even for a study

which may provide benefit—such as psychotherapy, mysticism, or creativity research—involves the element of altruism, of giving up something in our own trip for the greater good. This altruism generates a unique dynamic between us and our setting, particularly those in the room with us. When we volunteer for a research study, the trip is not all ours. We are being asked—and are expected—to provide data and information rather than just have an experience for our own sake. While this is neither intrinsically good nor bad, the informed-consent process must be open and transparent and this altruism must be acknowledged at the outset. From the beginning, there exist competing interests between our trip and the data we are generating—and we will not be allowed to forget this give-and-take that's superimposed upon our trip. It's important that research subjects not be surprised by, rebel against, or resent the exigencies of providing data. For example, as we may be traversing the deepest reaches of inner space, our vein may clot, and the nurse will flush the intravenous line with jarringly cold water or the nurse might need to remove the line and replace it with another.

Those who are neophytes to psychedelic states must consider these issues carefully. “Sharing” a trip in this way can be likened to having our first sexual experience observed and having data and specimens collected. We might be more generous with our time, body, mind, and soul after we've gained some experience and familiarity with such new and intense experiences. Nevertheless, it is possible to participate in a research setting during our first psychedelic experience and have it turn out better than one which we undergo alone or with friends. Perhaps the setting takes into account our inexperience and is designed to determine those factors that contribute to the best outcome. Such research projects are rare, though, and regardless of their intent, they must still collect data.

Research settings are characterized by a relatively constrained physical environment. They are nearly always indoors, range of movement is restricted, and there are few surprises. Generally speaking, accoutrements or supplemental consciousness-altering methods are few or are unavailable altogether. These constraints are intended to keep constant

as many variables as possible while modifying only those of interest. For example, the researcher may vary the dose of drug in the exact same setting to determine the effects of dose on the measured variables such as heart rate, blood pressure, and the like. It is interesting to note that though the usual hospital research unit is not especially peaceful, there we may have a sense of medical security—for instance, knowing that a cardiac resuscitation team is nearby—that is otherwise unavailable. Yet in studies, we are nearly always the only one in the environment taking a psychedelic drug.

Once we have decided to participate in research, there are two general types from which to choose: biological and psychological. The emphasis in the former is on data regarding our body, and the emphasis in the latter is on data regarding our mind. Biological studies may include subjective effects in their purview. They are called *psychopharmacological*—that is, seeking the pharmacological underpinnings of subjective experiences. *Psychobiological* studies or *psychophysiological* studies attempt to explicate the physiology of the mind. For example, these may assess the effects of psychedelics on involuntary aspects of perception, such as how we respond to images presented to one or both eyes using various sequences and time intervals.

The tools used in biological research may include brain-imaging equipment, some of which may be noisy and tight-fitting, and may involve being injected with a radioactive drug. Participants may have blood drawn to quantify levels of any number of factors: hormones, immune function, and metabolism of the drug in question or other drugs. Body temperature may be monitored, as may cardiovascular responses such as blood pressure and heart rate using an automatic blood pressure cuff.

Psychological studies may be divided roughly into two different categories: *problem-solving* and *phenomenological*. We have previously discussed some of the parameters involved in problem-solving with psychedelics, as well as the difference in psychotherapeutic work between lower-dose psycholytic and higher-dose psychedelic therapy.

In the research setting, the goals are similar but the structure is more rigorously adhered to.

Phenomenologically-based psychological studies focus on the mental rather than biological effects of psychedelics—that is, perception of time, color, distance, and depth perception. Rather than assessing perceptual, information-processing mental functions, psychoanalytic studies may investigate more complex phenomena such as projection, transference, mood reactivity, and free association.

Finally, studies may investigate the efficacy of psychedelics in eliciting mystical, near-death, and otherworldly experiences. These are somewhat more difficult to categorize within a research setting, because they deal with concepts that, for many, fall outside of the purview of traditional scientific inquiry. Nevertheless, they partake of the general research model, limiting variables as much as possible and providing data to the research team.

LETTING GO

Once we have completed as much preparatory work as possible before a session and clarified our intent—thus choosing our setting—we are ready to turn our attention to the actual trip.

On the day of the session, we should be well rested and clear-eyed, feeling ready for whatever may come our way. Though it's a good idea to have water or ice chips available during the session to address thirst and dehydration, a person should not plan on eating any food or drinking alcohol.

The fundamental task required for an optimal psychedelic experience is somewhat paradoxical: It consists of actively establishing the direction in which we decide to let go. We consciously choose the cliff from which we will jump and with what degree of clear-headedness we make that leap. This is especially the case in high-dose sessions during which we hope to encounter the most radical and unusual experiences.

Resistance to high-dose, powerful trips, can be extraordinarily

painful and confusing. An opened-eyed, level-headed surrendering of resistance is the most effective way to prevent being thrown into this maelstrom and is the best method for pulling ourselves out of it if we do find ourselves overboard. Prayers, mantras, mudras, visualization, music, bodywork, and other aids may be helpful at various points in our trip to redirect the flow of experience. At the deepest, most exposed, raw, and vulnerable moments of the psychedelic encounter, however, it is only through letting go that we find ourselves making the most progress. From the five minutes of the DMT flash, to the twelve hours of an ibogaine ordeal, this surrender is the crux of a successful journey.

The foundation laid by any previous inner work will hold us in good stead at such times by virtue of the attention skills we have developed. These skills make it easier to remain focused when confronted with the unexpected. In addition, effective psychotherapy or 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. Thus, not only do we clearly perceive what is garnering our attention, but also we subsequently open up and drop our resistances to it. We will know when we are resisting and when we are moving forward at any particular moment of the psychedelic experience.

Yet it is not only in negative aspects of a trip that we may become blocked. We also might be unable to move out of pleasant or neutral states. For example, we might find ourselves deeply blissful but also sense that we can go even deeper into what lies beneath and supports that bliss. Seemingly innocuous images or feelings, such as the curtain of psychedelic lights that is often a hallmark of the drug experience, may stand in our way. We want to see even more, but we cannot take the next step.

All these states can be managed to facilitate our moving forward; we can slow down, right ourselves, and then go on. We regain our balance through the proper application of attention and awareness. This is the slowing down, which we can facilitate physically through relaxed, deep breathing, and by releasing any tension in our bodies. Once we've slowed

ourselves down and replanted our psychic feet, it is easier to move our consciousness through the resistance or block. Sometimes, however, we may not feel we have a body to relax or lungs through which to breathe. At these times, it may be useful simply to bring our minds back to what is happening, and to approach it in a positive, bright, and curious manner. For example, in my DMT work, I prepared volunteers by warning them that they might find themselves convinced that they had died. They could react in one of two ways: “Oh, my God, I’m dying—get me out of here!” or “I seem to have died. Very interesting. What’s next?”

This approach creates the smallest space between being aware of an object (such as an emotion, thought, or perception) and having a relationship with it—in other words, just before we establish a relationship with it. The leverage exists in that microsecond gap; we become aware of the stuck or static, nature of the relationship. Then, taking a psychic deep breath, we can pull back from it ever so slightly, enough to work ourselves through or out of the block. For example, with respect to the curtain of psychedelic lights, we can look for space or cracks within it, and then pass through it.

ENCOUNTERING BEINGS

One of the most profound aspects of a psychedelic session is contact with aliens or noncorporeal, spiritual, or invisible beings or entities. Upon experiencing such an encounter, the first task we must pursue is to regain our composure from the shock of meeting what appear to be sentient creatures in our newly discovered worlds—creatures that, in many instances, appear to have been waiting for us. Next, we are faced with how to relate to them.

Some beings appear to be kind, gentle, and concerned for our welfare. Others seem to be aggressive, angry, and hurtful. Some present in an ambiguous or mischievous manner. They may communicate more or less effectively, or they may ignore us altogether. While their sheer novelty and unexpectedness makes us feel a sense of awe, it may be best,

whenever possible, to appraise them with the same objectivity with which we would judge any chance encounter with strangers. At the time of such encounters, we don't know these beings' language or culture, nor do we know their intent. As with all elements of the psychedelic experience, it's important not to become obsessed with them or our reaction to them. Once we establish a modicum of stability in our interactions with them and have decided they are "safe," we can engage them in any number of ways—we can seek their help, advice, love, and healing. Keep in mind, however, the flux of the psychedelic experience, and do not be surprised if these beings morph readily into the opposite of everything that we had considered them the moment before.

Entities with fangs, poisonous-appearing appendages, and other clearly menacing features usually are not benign, and it is best to be very wary of them. We can listen to what they have to say, but we ought not to be in any hurry to follow their advice. On the other hand, strange or frightening entities that seem to understand our fears may be more beneficent, particularly if they modify their behavior or appearance in response to our anxiety. Even if their appearance and behavior may repel us, more benign entities usually do not force us to do or accept things or become angry with us if we do not agree to their requests. In addition, we should never make any contract with the beings for doing evil or harm to another person or thing.

THE BAD TRIP

Though we can try to ensure that we have a smooth session, it is the norm to have difficult, painful periods in at least part of any major psychedelic experience. These can range from transient anxiety to prolonged psychosis. More than 99 percent of the time in someone medically and psychologically healthy, properly screened, prepared, and supervised, such distressing moments are short-lived and leave little if any aftermath. Nevertheless, being prepared for difficult stretches in a session can help us manage them more easily.

Anxiety and fear are relatively common as we begin to enter into the psychedelic state—when we are “coming on” to the drug effect. Simply relaxing physically and mentally—for example slowing and calming our breathing—is often sufficient to dispel these jitters. If we are with a sitter or in a supportive group, we may ask to have someone lay a hand upon us in a nonerotic manner or to hold our hand. Sometimes placing a blanket over the body or removing uncomfortably heavy clothes or coverings can also help by allowing us to reconnect with our bodies. Once we are in the midst of the experience, we can deal with unpleasant periods in a variety of ways. The simple breathing or physical contact suggestions outlined here can be helpful in refocusing us on the flowing, dynamic nature of the experience and can get us out of a particular rut. More intense or prolonged confusion, anxiety, fear, anger, or grief may require more active intervention, either on our behalf or on the behalf of those with us—that is, the sitter or group members.

Quieting the environment—turning off the music, turning down the lights, lying down—can be helpful. Such maneuvers allow us to pay attention to what is important: our inner state. Soothing interventions may be necessary, however. A warm or cool compress on the forehead; mild, nonintrusive, and nonsexual massage; and quiet, melodious humming or singing can help replace the more tumultuous inner workings of our minds with quieter thoughts and visions.

For more intense disturbances, there are a range of options: Someone may perhaps have to hug us or even lay on top of us to help us to ground ourselves. A cold shower, ice cubes down the back of our shirt, and other firmly yet gently administered strategies can help break any vicious cycles in which we find ourselves. Controlled hyperventilation can also help push us through any particularly tenacious disturbing states.

Finally, there is the option of using medication to interrupt an especially out-of-control situation—but such instances are extraordinarily rare. For many of us, however, it can be quite reassuring to know that a medication is available to pull us out of almost any negative spiral if we are unable to do so ourselves. Usually, a benzodiazepine such as alpra-

zolam or lorazepam is sufficient, but the sedating side effects of these interventions—which can last for hours—must be taken into account. Antipsychotic medications are a last resort, and come with their own host of unpleasant side effects.

COMING DOWN AND REINTEGRATING

After a trip, we must be kind to ourselves. It's best to allow for one or two days between a session and resumption of normal, everyday activities. It's also important to rest, eat healthy food, drink plenty of liquids, and get several nights of good sleep. Rest. Most of all, we must consider what we just experienced. After a session, we should write, draw, or record in some way the images, feelings, ideas, body sensations, and perceptions we contacted. We should share and process our experience with others whom we trust: we may share with someone who either did or did not join us for our trip; with our sitter; or with a shaman, minister, or therapist. We must review the aspects of the trip that continue to draw our attention.

GETTING HELP

While most people can integrate even major psychedelic drug experiences relatively well, some sessions—particularly our first ones—may be traumatic. Generally, by the time the session is winding down, a well-integrated experience resolves itself into a sense of happy satisfaction with our session. Intense, unshakeable, powerful emotions such as sadness, anxiety, fear, or anger may foretell unpleasant postsession feelings.

Intense or prolonged negative after-effects can occur, and these can range from anxiety and depression to psychosis. Added to these potential negative outcomes are the stigma associated with psychedelic drugs and their illegality. These factors make seeking help more problematic. Nevertheless, when we feel we need help, we must search for it. If we have taken our trip with others or if we were supervised by a sitter, it is

best to start with them when asking for appropriate referrals for follow-up. Such after-session follow-up may range from an hour or two decompressing with a knowledgeable friend to psychiatric hospitalization. In between these two extremes is the common feeling that we have confronted issues we are not psychologically or spiritually mature enough to integrate. We may recognize that a course of inner work now must ensue in order to use the session optimally and in a healthy way.

INTEGRATION

Even after relatively trauma-free sessions, we are faced with a daunting task: What do we do with all this information? It may be a case of “Now for the hard part . . .” We may ask ourselves if we will trip again, and we may wonder why or how we will if we choose to try another session. Perhaps most important, we may ask ourselves if we plan to change anything about our life: our career, relationships, diet, drug use, or religious views or practices. Finally, we may ask whether we have begun a new phase of inner or outer work.

It may take a while for a big trip to fully exert its effects—we need space and time for the ripples to reach the shore. We may have to live many years to fully digest and manifest the results of a big journey. It’s important to be patient with ourselves and not to become frustrated that more has not changed in our lives as a result of what appeared, at the outset, to be a life-changing experience. More drug trips may not be the answer; perhaps what’s necessary is a sober, concerted application in our everyday life of what we experienced.



Though we should not push ourselves, we also do ourselves a disservice by allowing a trip to be forgotten, filed away in some dusty recesses of our minds as just one more interesting experience. We must remember that in a psychedelic trip we’ve been given a tremendous gift, one that very few people ever have the opportunity to receive and experience.