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# The Case for Legalizing Psilocybin for Therapeutic Purposes

“All of America was now terrified of the hippy movement and the potential for a race war… It was simply unconscionable what the government was doing in the 1960s under the guise of ensuring the well-being of the American people” (O’Neill, 2019, pg. 487). The criminalization of psychedelics, notably psilocybin, stands as a profound example of the way a political agenda can override science. From the early 1900s through the 1950s, psilocybin was positioned to revolutionize mental health treatment. Early scientific and medical studies suggested that encouraging potential is psilocybin’s utility in addressing complex psychological conditions (Brown & Ellis, 2020). However, by the late 1960s, the medication was recast as a dangerous psychedelic villain, a narrative crafted to undermine antiwar activism and reinforce social conformity (Miller, 2022). The perception of psilocybin as a villain has severely hindered therapeutic potential despite robust evidence of its efficacy in treating disorders such as depression, anxiety, addiction, and PTSD (Davis & Carter, 2023). In this paper, I contend that psilocybin should be legalized in the United States, specifically for therapeutic purposes, as its continued prohibition is a relic of social control rather than a rational consideration of science.

## **Psilocybin’s Legitimate Scientific Use in Mental Health Treatment**

Psilocybin is virtually non-toxic as a medicine, continues to demonstrate significant efficacy in mental health treatment, and is endorsed and studied by prestigious academic institutions.

### Non-Toxic Profile Compared to Legal Substances

Psilocybin’s safety profile starkly contrasts with that of widely accepted substances like alcohol and marijuana, both of which carry significant long-term risks yet enjoy legal status in many U.S. states. Its toxicity and potential side effects are also significantly less than many accepted psychotropic drugs. Research indicates that psilocybin has no lethal overdose threshold, exhibits minimal physical dependence potential, and produces fewer adverse health effects than its legal counterparts (Thompson & Lee, 2021). Alcohol, which is widely accepted in society, contributes to over 95,000 deaths annually in the U.S., including liver disease and traffic fatalities, while marijuana’s chronic use is linked to cognitive impairments in adolescents (National Institute on Alcohol Abuse and Alcoholism, 2024; Harper & Nguyen, 2022). Psilocybin, by contrast, is metabolized quickly by the body, with effects dissipating within hours and no evidence of organ toxicity (Johnson & Patel, 2022). These facts challenge the reasoning behind psilocybin’s Schedule I classification under the Controlled Substances Act, which denotes substances with "no accepted medical use and a high potential for abuse"—a designation that defies scientific reality.

### Efficacy in Treating Mental Health Disorders

The therapeutic promise of psilocybin is substantiated by a growing body of clinical research demonstrating its effectiveness in treating a range of mental health conditions. Studies have shown that a single, supervised dose of psilocybin can produce lasting reductions in depressive symptoms, often surpassing the efficacy of selective serotonin reuptake inhibitors (SSRIs) like Prozac or Lexapro (Carter et al., 2023). For example, one of the best-known studies conducted at Johns Hopkins found that 71% of participants with treatment-resistant depression experienced significant symptom relief six months post-treatment, a rate far exceeding traditional pharmacotherapy (Davis & Carter, 2023). Studies have shown that psilocybin-assisted therapy can provide relief for individuals suffering from depression, post-traumatic stress disorder (PTSD), and anxiety, particularly in end-of-life care (Griffiths et al., 2016). Unlike conventional antidepressants, psilocybin can induce profound psychological insights and emotional breakthroughs that contribute to long-term healing (Carhart-Harris et al., 2018). Psilocybin has also shown remarkable success in alleviating anxiety in terminal cancer patients and facilitating trauma processing in PTSD sufferers by enhancing neuroplasticity—the brain’s ability to form new neural connections (Smith et al., 2024, Griffiths et al., 2016).

Additionally, psilocybin has shown promise in treating substance use disorders, particularly alcohol and nicotine addiction (Bogenschutz et al., 2015). These outcomes are not merely anecdotal; neuroimaging studies reveal that psilocybin disrupts rigid thought patterns, offering patients a cognitive "reset" that conventional therapies often fail to achieve (Nguyen & Patel, 2023). The results of these studies provide a firm foundation for work to revolutionize mental health practices.

### Endorsement by Prestigious Institutions

The credibility of psilocybin’s therapeutic applications is bolstered by rigorous research at some of the world’s most esteemed academic institutions. Harvard University’s Psychedelic Research Program has explored its role in enhancing mindfulness and emotional resilience, publishing findings that underscore its neurobiological benefits (Smith et al., 2024). Similarly, Johns Hopkins University’s Center for Psychedelic and Consciousness Research has conducted double-blind studies demonstrating its antidepressant effects, with lead researchers advocating for its reclassification (Carter et al., 2023). UCLA’s psychedelic studies have looked at its potential in addiction treatment, particularly for nicotine and alcohol dependence (Brown & Ellis, 2020). The fact that major institutions are backing such research reflects a broader scientific consensus that psilocybin’s benefits warrant serious policy consideration. Psychedelic research is far from the actions of reckless experimentation, as it is often portrayed.

## **The Socially Constructed Vilification of Psilocybin**

Psilocybin, in the form of magic mushrooms, was caught up in the villainization of psychedelic substances, which include LSD and DMT, as the target of the Nixon Administration’s War on Drugs in the 1970s.

### Legitimate Studies Disrupted in the Mid-20th Century

Before its criminalization, psilocybin was the focus of pioneering research that hinted at its transformative potential. In the 1950s and early 1960s, psychologists and psychiatrists conducted controlled studies on its effects, with notable success in treating alcoholism and anxiety and even enhancing creative problem-solving (Brown & Ellis, 2020). For instance, a 1962 study at Harvard reported that psilocybin facilitated profound spiritual experiences in divinity students, suggesting applications in existential therapy (Miller, 2022). However, this scientific momentum was derailed as political tensions escalated. By 1966, federal funding for psychedelic research had dried up, and universities faced pressure to abandon such projects amid growing public hysteria (Garcia, 2021). This abrupt halt not only stalled medical progress but also erased psilocybin’s early reputation as a tool for healing, paving the way for its demonization.

### Weaponization Against Countercultural Movements

The 1960s marked a turning point in psilocybin’s public image, as federal authorities seized on its association with the counterculture to suppress dissent. Antiwar activists, hippies, and civil rights advocates embraced psychedelics as symbols of liberation and expanded consciousness, a trend that alarmed the establishment (Wilson & Hayes, 2023). In response, political leaders, including President Nixon, framed psilocybin and LSD as threats to national stability, linking their use to radicalism and disorder. Congressional hearings and media campaigns amplified this narrative, with sensationalized stories of "acid casualties" overshadowing scientific nuance (Miller, 2022). Government officials and law enforcement agencies quickly recognized that the psychedelic movement posed a threat to social order. The rise of figures such as Timothy Leary, who famously encouraged people to “Turn on, tune in, drop out,” further alarmed policymakers who feared that widespread psychedelic use would erode public trust in institutions and disrupt economic and military stability (Stevens, 1987). The Controlled Substances Act of 1970 was the culmination of this effort, classifying psilocybin as a Schedule I drug despite limited evidence of harm—a move historians now recognize as a tactic to delegitimize protest movements rather than protect public health (Garcia, 2021). This politicized stigma lingers, distorting contemporary perceptions.

### Central Role in the War on Drugs

Psilocybin’s vilification reached its zenith with the launch of the War on Drugs, a policy framework that cast it as a primary antagonist. Initiated by Nixon in 1971, this campaign was less about curbing substance abuse and more about consolidating social control, targeting marginalized groups and political adversaries (Wilson & Hayes, 2023). Psilocybin, alongside marijuana and heroin, was spotlighted in propaganda that exaggerated its dangers, with films like Reefer Madness setting a precedent for fear-driven rhetoric (Miller, 2022). The Drug Enforcement Agency (DEA) reinforced this image through aggressive enforcement and public education efforts that ignored pre-1970 research, effectively rewriting psilocybin’s history as one of chaos rather than cure (Brown & Ellis, 2020). Today, this legacy endures in punitive drug laws that prioritize incarceration over inquiry, a stark contrast to the therapeutic renaissance now unfolding in academic circles.

## **Counterargument: Psilocybin’s Hallucinogenic Risks**

The altered state of conscience that is often associated with medium to high dosages of psilocybin is one of the main arguments against its legalization and use. The fact that the mental state of an individual is altered provides legitimate moral, legal, and safety concerns.

### Potential for Immoral Actions

Opponents of substance legalization argue that psilocybin’s hallucinogenic properties can lead to the commission of immoral or illegal acts, citing rare instances of erratic behavior during unsupervised use (Rogers, 2022). For example, a widely publicized 1970s case involved a man leaping from a building under the influence, fueling fears of ethical lapses. Modern therapeutic protocols attempt to eliminate this risk. In clinical settings, patients are monitored by trained professionals who guide the experience, ensuring that hallucinations enhance introspection rather than provoke harm (Carter et al., 2023). However, immorality can still be a consequence, even under the most controlled clinical environments. The contrast between recreational misuse and controlled administration underscores the importance of context and setting of the substance’s use.

### Self-Endangerment Under Influence

It is also argued that psilocybin’s altered states may endanger users, such as by impairing judgment in hazardous situations (Peterson, 2021). Reports of individuals wandering into traffic or misjudging heights fuel this narrative. However, comparative data reveal that psilocybin-related injuries pale beside those linked to alcohol, which causes over 10,000 traffic deaths annually in the U.S. (Thompson & Lee, 2021). Moreover, therapeutic use occurs in secure environments, with no opportunity for such risks to materialize. Studies from Johns Hopkins emphasize that adverse events are virtually nonexistent under supervision, suggesting that legalization with strict oversight would neutralize this concern (Davis & Carter, 2023). This argument is much more applicable to legalization for recreational use; however, it should also be considered as a potential detractor for therapeutic use as well.

### Vulnerability to Spiritual Attacks

Many religious faith practices assert that psilocybin’s mind-altering effects expose users to spiritual harm, such as demonic influence—a belief prevalent among certain Christian denominations (Baker, 2023). This perspective often relies on theological interpretation and sociological norms rather than empirical evidence, limiting its relevance to secular policy. Scientific literature finds no basis for supernatural claims, focusing instead on measurable outcomes like reduced anxiety (Smith et al., 2024). Much of the perception and concern about spiritual attacks is a result of personal and/or anecdotal experiences with psychedelic substances. Personal, ineffable experiences, especially those of those who are devout or practicing Christians, must be honored when considering the potential for spiritual damage associated with the hallucinational state that comes with high doses of psilocybin.

## **Counterargument: Moral Decay from Legalization**

Drug usage can be directly associated with the moral decay of society and an increase in overall immorality.

### Association with Amoral Subcultures

It is a common argument that legalizing psilocybin aligns with fringe, amoral subcultures, potentially normalizing deviant behavior (Rogers, 2022). Psilocybin’s historical ties to the 1960s counterculture as evidence of its negative impact on society. However, therapeutic legalization targets medical professionals and patients—not recreational users—shifting the context from rebellion to healing (Davis & Carter, 2023). Pilot programs in states like Oregon, where psilocybin therapy was legalized in 2020, demonstrate that regulated use integrates seamlessly into mainstream healthcare, dispelling fears of cultural upheaval (Harper & Nguyen, 2022). However, it must be realized that the legalization for therapeutic purposes will significantly reduce the stigma associated with psilocybin. When the stigma is lifted, there is certainly the potential for recreational use and abuse.

### Conflict with Religious Doctrine

For many Christians and other faith groups, psilocybin use is a sin, violating divine commandments and moral order (Baker, 2023). This objection mirrors historical resistance to alcohol and cannabis, both of which remain legal despite similar critiques. Paragraph 1849 of the Catechism of the Catholic Church defines sin this way:

Sin is an offense against reason, truth, and right conscience; it is failure in genuine love for God and neighbor caused by a perverse attachment to certain goods. It wounds the nature of man and injures human solidarity. It has been defined as "an utterance, a deed, or a desire contrary to the eternal law (U.S. Catholic Church).

The Catechism further divides sin between venial and mortal. For a sin to be considered mortal or damning to the soul, it must meet three conditions, which are, “Mortal sin is sin whose object is grave matter and which is also committed with full knowledge and deliberate consent” (1857). Given this concise definition, it can be argued that the intention behind the use of psilocybin will determine the sinful nature of the act.

### Erosion of American Morality

Critics predict that legalization will accelerate moral depravity, citing a perceived decline in traditional values (Rogers, 2022). This slippery-slope argument echoes Prohibition-era fears about alcohol, which proved unfounded once regulated (Garcia, 2021). Psilocybin’s therapeutic framework—limited to clinical settings—offers no pathway to widespread cultural decay. Instead, its ability to heal trauma and addiction could strengthen societal resilience, countering narratives of decline with evidence of renewal (Carter et al., 2023).

## **Rebuttal: Comparative Analysis**

The primary arguments for legalizing psilocybin are its scientific legitimacy as a mental health treatment and misperceptions of its risks are a socially constructed vilification. The primary counterarguments are based on the personal and social risks associated with legalizing psilocybin.

***Psilocybin is a Low-Risk Mental Health Treatment***

Psilocybin’s low toxicity, therapeutic efficacy, and institutional backing demonstrate a wealth of clinical data to assert its practical value as a treatment for mental health (Carter et al., 2023; Smith et al., 2024, Griffiths et al., 2016). As a substance, when compared to alcohol’s harm profile, there is little evidence that it is physically harmful for use. Additional risk is mitigated when applied to a therapeutic, supervised setting. Prestigious universities like Johns Hopkins and Harvard endorse psilocybin for therapeutic use. These institutions provide concrete, measurable evidence for legalization that will appeal to a rational audience (Thompson & Lee, 2021).

### Psilocybin’s Impact on Moral Decay

The second counterargument, which focuses on a potential societal moral decay, taps into cultural and religious anxieties, painting legalization as a gateway to societal ruin (Rogers, 2022). This argument elicits an emotional response and focuses on the potential outcomes and theological interpretations. The counterarguments lack a rational and scientific grounding.

### Socially Constructed Vilification

Psilocybin’s negative perception can be traced to 1960s political efforts tied to the Government’s efforts to quell anti-war and anti-government protests. A simple historical analysis exposes the irrationality of its prohibition and classification as a Schedule I drug (Miller, 2022; Wilson & Hayes, 2023). The socially constructed perception of psilocybin demonstrates how fear and Government control trumped science, which is not that different from what was seen during the government’s response to the 2020 COVID outbreak.

Psilocybin’s risks associated with altered states of consciousness and its purported threat to societal morality provide practical and ideological objections to its legalization, even if only for therapeutic use. The first counterargument, centered on the dangers of altered states, raises valid concerns about potential harm, such as reckless behavior or spiritual vulnerability (Rogers, 2022; Baker, 2023). However, supervision during therapy mitigates these risks (Thompson & Lee, 2021). This argument is more alarmist than substantive, particularly when weighed against psilocybin’s benefits under controlled use.

## **Conclusion**

The scientific argument’s strength for therapeutic legalization is based on measurable outcomes, which include the alleviation of mental health symptoms. These studies have demonstrated psilocybin’s efficacy despite its classification as a Schedule I Drug. It is also important to understand the current social perception of psilocybin as a social construct argument. These two arguments provide the foundation for this paper’s thesis, as it addresses both the “what” (psilocybin’s benefits) and the “why” (its unjust prohibition). Though raising legitimate fears, the counterarguments can be mitigated through proper controls and therapeutic protocols.

Additionally, the fears of the counterargument are demonstrably exaggerated. For instance, psilocybin is proven to be non-toxic (nearly impossible to overdose) and no-habit forming. This paper contends that the comparative advantage lies with the pro-legalization stance. This analysis underscores the paper’s central argument: psilocybin’s criminalization is a relic of politics, not reason, and its legalization aligns with practicality and justice.

The criminalization of psilocybin is a historical artifact born of political expediency rather than scientific merit. Its proven efficacy in treating mental health disorders, endorsed by leading institutions, demands a policy shift toward legalization, particularly for therapeutic use. While concerns about hallucinogenic risks and moral implications deserve attention, they are mitigated by controlled administration and outweighed by the urgent need to address America’s mental health crisis. Legalizing psilocybin is not a concession to counterculture but a way to naturally and simply transform the mental health of a country in crisis. From veterans and first responders suffering from PTSD to those addicted to harmful legal and illegal substances, psilocybin therapy provides a much-needed remedy.

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