“IT KIND OF POLISHES ALL YOUR FLAWS AWAY”: LONG-TERM EXPERIENCES WITH PSilocybin Mushrooms and the Influence of Set and Setting

By

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This study explores the experiences and motivations of people who take psilocybin mushrooms long-term. Little scholarly attention has been given to the psilocybin experience outside of a clinical setting. Likewise, there is a dearth of research examining the factors that lead to first-time and ongoing experiences with mushrooms. I conducted in-depth semi-structured interviews with 18 informants who have taken psilocybin mushrooms at least 10 times and for over three years. I encouraged open dialog and storytelling to gain a deeper understanding of their mushroom experiences and motivations to take long-term. Using a grounded theory approach, I identified the following patterns in how my informants take psilocybin mushrooms: learning to like and to control the psilocybin experience; the importance of having a positive mindset (set) and safe environment (setting); and how the psilocybin experience changes the perception of objective reality for the participant to subjectively determine personal meaning. Utilizing a symbolic interactionist theoretical framework, my research contributes to our understanding of how those who take mind altering substances make sense of their experiences and integrate their consumption into their daily lives. My
research also adds to the growing body of literature on psychedelics providing a rich account of the experiences and motivations of a group taking psilocybin mushrooms long-term.
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INTRODUCTION

The psychedelic trance music thuds in a rhythmic beat while dancers twirl and stomp their feet all around me. Every person I make eye contact with smiles at me while rhythmically moving their bodies. One shirtless man with dreads tactfully zoomed through the crowd like he was an airplane, with a huge smile on his face. While walking away from the swarm of rhythmic bodies, I cross paths with a woman with both excitement and tears in her eyes. With a smile she said, “I just felt everything in the Universe pulsate through my entire body at the same time, it was amazing.” What the woman was describing was what one could experience on psychedelics, such as psilocybin mushrooms.

Psilocybin mushrooms have been the focus of decriminalization activism in recent years (Decriminalize Nature 2020). These efforts have drawn on the accumulating evidence showing therapeutic benefits, along with the low potential for abuse (Griffiths et al. 2008, 2011; Studerus et al. 2011; Carhart-Harris et al. 2016; Johnson et al. 2014; MacLean, Johnson & Griffiths 2011; Ross et al. 2016). For these reasons I chose to study those who have taken psilocybin mushrooms long-term to understand their experiences while on mushrooms, and their motivations for taking them long-term.

This study is an important contribution to the literature on psilocybin use because it presents the voices of the people who choose to take psilocybin mushrooms on a continuous basis. Since the War on Drugs the media has been the main voice describing psychedelics, such as psilocybin mushrooms, as dangerous, and portraying those who
take psychedelics as addicts, uncontrollable, and harmful to society (Bracco 2019; Pollan 2018; Wesson 2011). This constructed image is not consistent with my own 19 years of experience with taking psychedelics and being around hundreds of people who take psychedelics. In my experience, those who take psychedelics, such as psilocybin mushrooms, have better mental health, and are more caring about the environment and the well-being of others. In my experience people who take psychedelics are more mindful neighbors, more loyal friends, more honest employees, and more understanding parents. Allowing the voices of those who take psychedelics to be heard is important to counteract the dominant media constructed frame of psychedelics as dangerous.

Little scholarly attention has been given to why certain people choose to take psilocybin mushrooms long-term, and what their experiences are like on mushrooms outside of a clinical setting. I conducted 18 semi-structured in-depth interviews with people who have taken psilocybin mushrooms at least 10 times for over three years. I sought to learn about their motivations for use, factors shaping initiation, preparation rituals, first time and memorable experiences, as well as long term personal development with psilocybin use.

My thesis begins with a literature review of prior research into psilocybin mushrooms starting with the brief recorded history of the ceremonial use of psilocybin mushrooms, and how psilocybin became a topic of interest in the United States. I then provide a brief summary of the transition from scientific inquiry into psilocybin as a potential therapeutic medicine, to an illegal substance and the object of social control. My
review of the literature then explores more recent research into the uses of and clinical experiences with psilocybin. Having knowledge about psilocybin mushroom’s history and scientific research, is important to better understand the psilocybin experience and motivation for use. I then describe my theoretical framework, first drawing on Howard Becker’s (2015[1953]) seminal study, *Becoming a Marihuana User*, to inform my analysis of how my informants initiated and made sense of their experiences with psilocybin. Next, I integrate Norman Zinberg’s (1984) conceptual framework for explaining drug effects and controlled drug use with a focus on *drug, set, and setting*. The subsequent chapter describes the interview methods I used for this research. I then present the analysis of my interviews. In my last chapter I summarize my findings, discuss limitations of my study, and offer recommendations for further research.
The aim of my study is to understand the motivations and experiences of those who have chosen to take psilocybin mushrooms for over a three-year period and who have had over 10 psilocybin mushroom experiences. This review of the literature will cover what psilocybin mushrooms are, how psilocybin mushrooms became a topic of interest in the US, and the past and recent research with psilocybin. I will also be examining the prior research into the motivations and experiences of substance users. I will begin with identifying the psychoactive qualities of mushrooms.

Psychoactive substances affect the brain and nervous system which can alter a person’s perception, mood, behavior, and consciousness (Grob et al. 2011). Psilocybin containing mushrooms are psychoactive, and can produce a psychedelic experience. The psychoactive effects occur 15 minutes to an hour after ingestion, and once in the body psilocybin is chemically converted into psilocin for absorption (Letcher 2007). The psychoactive effects and experience with psilocybin mushrooms differ depending on dosage, current state of mind, surrounding environment, past experience, personality (Studerus et al. 2012; Honyiglo et al. 2017), strain of psilocybin mushroom, body weight, biological makeup, and if taken on a full or empty stomach (Letcher 2007). Psilocybin mushrooms can cause unpleasant physical effects such as digestive issues along with difficulty with motor skills (Letcher 2007).

There are 40 different strains of Psilocybe Cubensis, but their potency levels are similar (Carlin 2020a). So, using Psilocybe Cubensis as an example: a low dose would be
one gram, where colors and the surroundings would become more vibrant and alive; a moderate dose would be two to three grams, where fractal visuals would be experienced along with patterns emerging from the surroundings, such as the bark of a tree melting or the faces of woodland creatures coming out of the bushes (Carlin 2020b). A high dose of up to five grams could create a possible experience of losing touch with reality and a sense of merging into the universe. One may forget who they are or what they are, and for some people this could turn into a difficult experience, and for others such an experience could be blissful (Carlin 2020b). The correct dosage depends on the person and how comfortable they are with letting go of reality as they know it. It is always a good idea to start with less and add more the deeper one wants to go into the experience.

There are 250 known psilocybin mushroom species, of those 150 are psychoactive and 53 of those grow in Mexico (Guzman 2008). Psilocybin mushrooms grow in all continents, although only in Mexico and in New Guinea are they documented to have been traditionally used in mushroom ceremonies (Guzman 2008). However, evidence does suggest ceremonial use may have also occurred in Africa and Colombia (Guzman 2008). Unfortunately, there is little documentation on the use of mushrooms within the indigenous culture in the US before and during colonization. Psilocybin mushrooms historically have grown in abundance in the US (Letcher 2007), so presumably they were consumed by indigenous populations.

The following section will explore the first documented use of psilocybin mushroom consumption and how mushrooms became recognized in the US. Along with
the journey of psilocybin’s transition from an area of scientific interest to an illegal substance.

The Introduction of Psilocybin Mushrooms in Western Society

First documentation of psilocybin mushroom consumption.

The first European documentation of psilocybin mushroom consumption occurred during the 16th century Spanish invasion of Mexico (Guzman 2008; Powell 2011). However, mushrooms were consumed by the Aztec’s and Mayan’s thousands of years before the invasion (Powell 2011; Letcher 2007). Over 300 stone and pottery mushroom carvings have been found in Mexico and Guatemala dating back thousands of years before the Spanish invasion (Letcher 2007). Aztec documents contained drawings of mushrooms, and literature described how they were used, yet unfortunately most of the Aztec and Mayan artifacts and literature were destroyed by the Spanish (Powell 2011). Some of the Aztec documents were translated into Spanish and trusted Spaniards, such as Dominican friar Diego Duran, were able to document stories and lore about the use of psilocybin mushrooms from the Aztec community (Letcher 2007). Mushroom consumption was forced underground after the Spanish invasion because the use of psilocybin was deemed as satanic (Letcher 2007). The Spanish pushed their Catholic religion on the Aztecs to “civilize” them (Powell 2011). However, a few shamans were able to secretly keep knowledge about the mushrooms to pass on to future generations (Powell 2011).
How psilocybin mushrooms became popular in the US.

A chain of events led to the rediscovery of the secret Mazatec Indian mushroom ceremonies. In 1937 Blas Pablo Reko, an Austrian Physician, collected mushroom samples for Richard Schultes, a Harvard ethnobotanist (Shultes 1939). During Reko’s research in Mexico, he reported evidence of ceremonial mushroom use in Oaxaca (Shultes 1939; Guzman 2008). In 1938, Reko traveled to Oaxaca with Schultes to gather mushroom samples, which were delivered to Harvard University for analysis (Guzman 2008). Intrigued by the evidence of Mazatec mushroom ceremonies, North American anthropologist Jean Bassett Johnson traveled to Oaxaca to observe a mushroom ceremony the following year (Guzman 2008). Johnson became the first documented Western scientist to witness the traditional ceremony. In the 1940’s mycologist Rolf Singer studied Shultes’ samples and identified some of the mushrooms as psilocybe cubensis, which in turn were documented as narcotic mushrooms. Inspired by the work of Schultes, Robert Gordon Wasson, a wealthy U.S. banker, and his wife Valentina Pavlovna traveled to Mexico in 1952 intending to gain a deeper understanding of how psilocybin mushrooms were used in the Mazatec culture (Guzman 2008).

Psilocybin containing mushrooms became widely recognized in the United States in the late 1950s from Wasson’s research in Mexico (Letcher 2007). Wasson traveled to Mexico 10 times to learn about psilocybin mushrooms and to experience a psilocybin mushroom ceremony. Healing ceremonies in Mexico involve a curandero (shaman) consuming psilocybin mushrooms to understand a patient’s illness and what that patient should do to get well; it was believed that the mushroom gave instructions to the
curandero to relay to the patient. In 1955 Wasson met Maria Sabina, a well-known and respected curandero, in Oaxaca. Surprisingly, Sabina allowed Wasson to eat psilocybin mushrooms with her in a ceremony. Wasson was the first documented Westerner to ingest mushrooms in a ceremonial setting. For Maria Sabina, and the Mazatec Indian culture, psilocybin mushrooms were recognized as spirits with whom the curanderos built relationships, and through that relationship the mushroom would provide guidance and healing. Wasson sat in ceremony with Sabina several times and made recordings of her ceremonial songs to introduce to the western world. In 1957 Wasson published an article in *Life* magazine describing his psilocybin mushroom experience, introducing the term “magic mushrooms” in the article title (Letcher 2007). This same year the term psychedelic was also introduced to describe mind altering substances (Pahnke 1969).

Wasson’s “Magic Mushroom” article inspired many Westerners to travel to Mexico to obtain psilocybin mushrooms and have a ceremonial experience with Maria Sabina (Letcher 2007). This included Timothy Leary, a Harvard professor who led the 1960’s psychedelic revolution (Letcher 2007).

In the early 1960’s Oaxaca was swarming with Westerners, referred to as *jipis* (Dawson 2015). Jipis were known as apolitical, promiscuous transients seeking a drug experience (Dawson 2015). Sabina’s village blamed her for the unwanted visitors and thought of her as a traitor for sharing the sacred Mazatec mushroom secrets (Letcher 2007). Consequently, her home and shop were burned down, her son was murdered, and she lived the rest of her life impoverished (Letcher 2007). During an interview in the 1980’s Sabina expressed her feelings of betrayal from those who used her for their
benefit; sharing her image, songs, and rituals without honoring her as a person (Dawson 2015). Sabina shared her knowledge with many people who abandoned her when she needed support. Sabina’s image is still used today in Oaxaca for marketing and promoting psychedelic/spiritual tourism (Dawson 2015; Feinberg 2018).

The 1960’s jipi invasion of Oaxaca concerned the Mexican Government because of their open use of psychedelics (Dawson 2015). In 1972 The Mexican Center for Pharma Codependence Studies was created, pronouncing psilocybin mushrooms and other psychedelics as having no medicinal use and having the potential of causing both psychological and physical harm (Dawson 2015). In 1974 the Mexican government criminalized psilocybin mushrooms in an attempt to disrupt the high volume of Westerners traveling to Oaxaca (Dawson 2015; Letcher 2007). The drug legislation did give Mexican states room to allow indigenous people to continue ritualistic use of psilocybin mushrooms, even though it remains illegal nationally (Dawson 2015).

The transformation from a therapeutic investigation to a dangerous substance.

Wasson and Roger Heim, a French mycologist, collected psilocybin mushrooms for analysis by Albert Hoffman, the Swiss chemist who in 1938 created the psychedelic substance *lysergic acid diethylamide* (LSD) and discovered its psychedelic effects through accidental ingestion in 1943 (Guzman 2008; Letcher 2007). Hoffman isolated psilocybin and *psilocin* from the mushroom to be synthetically produced in 1958 for the Sandoz pharmaceutical company under the patented name *Indocybin* (Johnson 2018, Letcher 2007; Vargas et al. 2020). During the 1960’s researchers in the United States
used synthetic psilocybin in animal experimentation and on human volunteers (Johnson et al. 2018). However, research with psilocybin was unable to continue for long. The mainstream recreational use of psychedelics sparked sensational media, which manifested a deep societal fear of hallucinogens (Johnson et al. 2018).

The introduction of recreational exploration of psychedelics in the 1960’s generated concern. LSD consumption was the main societal concern, but the societal fear labeled all psychedelics like psilocybin mushrooms and peyote as harmful. Many people who tried psychedelics did not understand the importance of having a prepared and positive state of mind, also known as the “set”, and being in a comfortable and peaceful environment, also known as the “setting” (Wesson 2011; Zinberg 1984). A lack of understanding of how to take psychedelics coupled with the rapidly increasing recreational experimentation resulted in many “bad trips” (Wesson 2011; Zinberg 1984). During the early 1960’s many people ended up in psychiatric hospitals and some put themselves in dangerous situations, causing bodily harm and even death (Wesson 2011). The media focused on the most sensational stories, excluding the many scientific studies suggesting the therapeutic benefits of psilocybin and other psychedelics (Pollan 2018; Wesson 2011). For example, the media reported a person on an airplane flight under the influence of LSD who attempted to gain access to the pilot’s cabin; with another example of an article focusing on a person who committed suicide after experiencing flashbacks from LSD use (Bracco 2019). The media’s negative portrayal was mainly about LSD, however the coverage also affected people’s perceptions of other psychedelics like psilocybin. Media stories targeted white middle-class society describing LSD as an urban
issue that threatened the white middle-class family (Bracco 2019). Authors used language to promote fear and to discourage use, such as claiming LSD caused permanent personality changes and psychological damage (Bracco 2019). An article titled “LSD: Problem for Both Science and Law” described LSD as being a danger to society, particularly targeting college students. The article emphasized the risks for college students using the substance, claiming that LSD was a major problem on college campuses, and stating that most students had experimented with it. Within media publications there was disagreement over harsher drug laws and whether making the substance illegal would make more people want to consume it. Also, publications highlighted differing positions regarding the medicinal uses of psychedelics; comments from the Food and Drug Administration (FDA) claimed that LSD had no medicinal qualities while in the same article Robert F. Kennedy stated that the government did have a medical interest in LSD. Overall, the media coverage framed LSD as a threat and discredited any positive research with LSD (Bracco 2019). Consequently LSD, and other psychedelics such as psilocybin mushrooms and peyote were seen as a threat to American society. By 1965 the distribution of psilocybin was made illegal, shutting down the Indocybin company, and most clinical research with psychedelics came to a halt due to new regulations and restrictions (Johnson et al. 2018). In 1970 President Nixon placed psychedelics, such as psilocybin, LSD, and mescaline, as a Schedule 1 drug under the Controlled Substance Act (CSA) (Johnson et al. 2018). Schedule 1 represents the most restricted class of controlled substances as they are defined as having no medical benefits and a high risk for abuse and dependence (Kossman 2016).
In 1972 Nixon declared the War on Drugs which heightened the severity of drug laws, increasing punishments for the use, possession, and distribution of Schedule 1 drugs (Marlan 2019). The War on Drugs was a direct attack on civil rights and antiwar groups and was used as a justification to disrupt and arrest protestors, not to protect society from the dangers of drugs and those who use them (Drug Policy Alliance 2020). This was admitted years later in an interview with Nixon’s aide, John Ehrlichman:

You want to know what this was really all about. The Nixon campaign in 1968, and the Nixon White House after that, had two enemies: the antiwar left and black people. You understand what I’m saying. We knew we couldn’t make it illegal to be either against the war or black, but by getting the public to associate the hippies with marijuana and blacks with heroin, and then criminalizing both heavily, we could disrupt those communities. We could arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news. Did we know we were lying about the drugs? Of course we did (Drug Policy Alliance 2020).

While the creation of drug scheduling in the Controlled Substances Act created a criminal label for certain substances, the War on Drugs imposed a criminal identity on the people using those substances. The Nixon Administration spent over 100 million dollars on anti-drug campaigns with the intention of influencing attitudes towards drugs and those who use them (Siff 2018). Before 1970 citizen polling about drug use did not rank as a top concern, yet from 1971 to 1973 drug use was ranked as the 2nd and 3rd most pressing mainstream issue - Nixon’s anti-drug campaign worked (Siff 2018). Public support for criminalizing certain substances was needed in order for Nixon to establish harsh policing and surveillance tactics, such as no-knock warrants and wiretaps (Siff 2018).
Consequently, those who take psilocybin mushrooms are treated as criminals because of the politically driven drug war.

**Process of reclassification.**

The labeling of psilocybin mushrooms as a Schedule 1 drug had no scientific backing, as it claimed the fungi had no therapeutic value, was dangerous to use in medicine, and was highly addictive. These claims have been proven false in a multitude of past and current clinical studies focusing on the therapeutic effects of psilocybin (Johnson et al. 2014, 2018; Sewell, Halpern & Pope 2006; De Veen et al. 2017; Grob et al. 2011; Griffiths et al. 2008, 2011; Vargas et al. 2020; Carhart-Harris et al. 2016, 2018; MacLean, Johnson & Griffiths 2011). To reclassify psilocybin as a prescription drug, the Food and Drug Administration (FDA) requires a succession of approved clinical trials (Kossman 2016). Phase three clinical trials are the final requirement, lasting up to four years and requiring 300 to 3,000 participants. Assuming the phase three trials are successful the final decision is made by the Drug Enforcement Administration (DEA) (Kossman 2016). At this time, providing enough evidence promoting the safety and benefit of including psilocybin in medicine has been the primary focus of much current research. It is noteworthy that this reclassification would be for synthetic psilocybin, not the psilocybin mushroom itself.

The next section provides a brief overview of pioneering studies with psilocybin which has created the backbone for present day research.
Scientific Research Involving Psilocybin

Both early and contemporary scientific research exploring psilocybin mushrooms has involved synthesized psilocybin. There has been some controversy with using synthetic psilocybin due to the possibility of limiting the fungi’s full healing potential (Matsushima et al. 2009). Nonetheless there has been much scientific research providing evidence on the therapeutic potential of psilocybin (Griffiths et al. 2008; 2011; MacLean, Johnson & Griffiths 2011; Grob et al. 2011; Ross et al. 2016; Carhart-Harris et al. 2016). I will explore some of the early and recent studies accomplished with synthesized psilocybin. Many contemporary psilocybin studies are double-blind and ensure that the selected participants are thoroughly screened for psychological and physical health, along with having no family history of psychological disorders (Griffiths et al. 2008, 2011; MacLean, Johnson & Griffiths 2011). Though strict guidelines and screenings for psilocybin experimentation were lacking during earlier studies, more current research on psilocybin effects have produced similar findings (Deveen et al. 2017).

Early psilocybin research.

Timothy Leary, George Litwin, and Ralph Metzner (1963) concluded from their own research and a review of the literature that psilocybin was non-addictive, that psilocybin’s effects increased sensitivity to the surroundings, and that psilocybin was not a stimulant, with most participants quietly sitting through their experience (Leary, Litwin & Metzner 1963). In the early 1960s some investigators classified psilocybin as
psychotomimetic, while other investigators reported psilocybin to produce mystical and spiritual experiences. Leary, Litwin, and Metzner (1963) suggested that the attitude of the researcher with his/her subjects was an important variable in influencing subject experience, along with the type of setting in which the study occurred. They suggested a comfortable, natural setting such as a living room with a couch and music instead of a clinical setting. An early study focusing on psilocybin’s effect on volunteers in a supportive setting found psilocybin to have no lasting physiological outcomes; this included a pregnant mother whose baby and herself were in good health a year after the study. They found no negative psychological effects up to six months after the study, and no evidence for psychological or physical dependence, although most of the subjects wanted to experience psilocybin again (Leary, Litwin & Metzner 1963). Early studies found that psilocybin effects, when taken in a supportive setting and with a positive state of mind (set), were reported by participants to be personally and spiritually significant (Leary, Litwin & Metzner 1963; Doblin 1991).

Walter Pahnke (1969) created a questionnaire to measure the psychedelic experience through identifying five significant psychological experiences reached with psychedelics such as psilocybin: a fear-based experience; experiencing unconscious or previously avoided memories; having the ability to see problems from an outside perspective to solve them; changes in visual, audial and physical sensations and perceptions; and lastly, the mystical experience which was described within nine categories. For Pahnke (1969) the nine categories of a mystical experience were: unity, limitlessness of time and space, an elevated mood and emotion, deep feelings of
sacredness, personal insight, realizing contradictions, unable to fully express the experience, temporary peak experience, and a positive and permanent change in the person’s emotional and mental health. The Mystical Experience Questionnaire used within present psychedelic research is partially based on Pahnke’s nine categories (Griffiths et al. 2008).

Although there are many early studies with psilocybin, I will include only one more. A noteworthy study is Timothy Leary’s Concord Prison Experiment, conducted between 1961 and 1963, involving 32 inmates (Doblin 1998). This study is a reminder to be aware of the “halo effect”, where researchers are biased in what they report during their study because of the results they want to see (Metzner 1998). The study claimed to prove psilocybin assisted therapy would reduce the rate of recidivism. During a 34 year follow up study the recidivism results were found to be misleading. Doblin (1998) found a much higher percentage of participants returned to prison for new crimes, when Leary reported they had returned for minor parole violations, arguing psilocybin had decreased participant criminal involvement. Two participants agreed to participate in the 34 year follow up interviews and they both said psilocybin had benefited them personally and they did not have any long-term negative effects. Neither of them took psilocybin again after the study which is consistent with claims that psilocybin is non-addictive. The research suggested that psilocybin assisted therapy, coupled with post-release support, such as locating housing and work, made a significant difference in reducing recidivism (Doblin 1998).
Recent research with psilocybin.

The remainder of the studies I discuss focus on recent findings with psilocybin, mainly structured around psilocybin assisted therapy. The studies explore the reduction of depression and anxiety, microdosing, the mystical experience, challenging experiences, and abuse potential.

Psilocybin-assisted therapy.

Psilocybin-assisted therapy provides a professionally supervised and supportive space for a person to therapeutically benefit from psilocybin (Grob et al. 2011; Sloshower et al. 2019). The session occurs in a practitioner’s office where capsules that contain carefully dosed psilocybin are administered to the patient. The structure of most current research ensures a setting where participants sit or lie on a couch with an eye covering and listening to carefully chosen music complimentary to the psilocybin experience (Grob et al. 2011; Griffiths et al. 2008, 2011; MacLean, Johnson & Griffiths 2011; Carhart-Harris et al. 2016; Johnson et al. 2014). The experience lasts from six to eight hours, and a therapist is present to provide support for the patient during that time. After the psilocybin session an additional therapy appointment is made for integration of the patient's experience (Grob et al. 2011). Most current research allows enough time to manifest adequate trust and rapport between the participants and the researchers through preparation meetings, including therapy, before psilocybin sessions to foster a positive and comfortable state of mind (Griffiths et al. 2011; Grob et al. 2011; Ross et al. 2016; Carhart-Harris et al. 2016, 2018; MacLean, Johnson & Griffiths 2011). In a follow-up
study, participants reported the importance of having had a trusting relationship with the facilitating therapist for support during their psilocybin experience (Belser et al. 2017). A consistent finding in past and present research emphasizes the importance of a supportive setting (environment) and a positive set (mindset/emotional state) when taking psilocybin (Pahnke 1969; Griffiths et al. 2008, 2011; Weil 2004; Grob et al. 2011; MacLean, Johnson & Griffiths 2011; Studerus et al. 2012; Carhart-Harris et al. 2016; Zinberg 1984).

A study involving 13 volunteers who had participated in psilocybin assisted psychotherapy explored the experiences they had during their session (Belser et al. 2017). All of the participants reported having insights involving a loved one, creating space for forgiveness, and acceptance (Besler et al. 2017). Those who shared their insights with their loved one reported gaining a closer relationship, and a number of volunteers believed they gained more compassion and consideration for others in general. Some participants had deceased loved ones appear during their psilocybin experience to console and guide them – this happened more with men. Every volunteer described having significant emotional experiences ranging from bliss to grief, to varying degrees, with some participants experiencing many emotions in a small amount of time. Those who experienced acute fear or repressed trauma were able to work through those feelings and memories with the help of the facilitating therapist. The therapist did not talk them through the experience, but encouraged them to continue on their inner experience, and assured them everything was okay. Physical touch occurred when initiated by the participant, such as holding hands. Most participants had an experience of losing a sense
of self, only some felt fear and paranoia during the experience. Others were able to let go and “surrender” during the intensity of dissolution of the self, and some felt interconnection with all beings and the entirety of the universe. The volunteers who experienced ego dissolution felt empowered and gained a sense of meaning for their life, along with not feeling so alone in the world. Every participant reported gaining insight about the meaning of reality and understanding the complexities of the universe. It was difficult for many participants to describe this experience with words, but the main themes were having an interconnection with all, having a deeper connection with nature, understanding the universal law of love, and gaining new insights about old ideas. All participants concluded the psilocybin experience positively affected their life, and helped them to remember what was important to focus on. Select volunteers shared they were given tools to establish boundaries and to overcome barriers, which provided feelings of peace and freedom. Every participant but one said they would take psilocybin again if they had the opportunity, in order to gain more insight (Belser et al. 2017). Many of these reported experiences have also been identified by my informants to a varying degree during my study.

*Psilocybin’s potential in reducing anxiety and depression.*

An increase in participant anxiety while experiencing psilocybin has been reported in current research, especially with higher doses of psilocybin (Griffiths et al. 2008, 2011; Studerus et al. 2011; Carhart-Harris et al. 2016; Johnson et al. 2014). However, recent studies have produced promising evidence that psilocybin has long-term
anxiety reducing effects (Grob et al. 2011; Ross et al. 2016; Carhart-Harris et al. 2016). Recent studies involving participants experiencing end of life anxiety demonstrate that when psilocybin is used in a controlled and supportive setting, general anxiety can be decreased with lower doses for up to three months (Grob et al. 2011). A moderate dose of psilocybin coupled with therapy resulted in an immediate and enduring decrease in both anxiety and depression associated with terminal cancer for up to 6.5 months (Ross et al. 2016). In regards to depression, higher doses of psilocybin showed a greater reduction in depression with participants who had treatment resistant depression lasting up to three months (Carhart-Harris et al. 2016). Additionally, microdosing psilocybin mushrooms - a practice where miniscule amounts of psilocybin are ingested - has been a recent area of interest suggesting long-term mental health benefits, including the reduction of anxiety and depression (Stamets 2018). Some informants in my study reported significant reductions in anxiety when microdosing psilocybin mushrooms.

*The effects of microdosing psychedelics.*

A microdose self-study was administered for both LSD and psilocybin with participants microdosing every third day for a month (Fadiman & Korb 2019). The researchers found a common effect was an increased mood, with one person being able to get off of antidepressants. People suffering from bipolar disorder claimed that microdosing helped them during their depressive periods, and none of them reported mania during the microdosing month. A number of participants reported more focus and production during the microdose month. Some participants noticed a difference in their
home life by experiencing more patience and openness with family members. Some people reported a noticeable difference in relieving neuropathic pain (Fadiman & Korb 2019). Currently there is a shortage of studies regarding microdosing psilocybin mushrooms.

*The mystical experience with psilocybin.*

The term mystical experience refers to life changing experiences during the psychedelic state reached with psilocybin mushrooms, and other hallucinogens (e.g. ayahuasca & san pedro). Recent studies focusing on psilocybin assisted mystical experiences provide evidence that the mystical experience produces long lasting positive effects on an individual's state of mind, emotional state, and mannerisms (Griffiths et al. 2008; 2011; MacLean, Johnson & Griffiths 2011; Carhart-Harris et al. 2016). Participants who had a mystical experience were more likely to have long-lasting positive effects when they had received a prior low dose followed by a high dose of psilocybin (Griffiths et al. 2011). Mystical experiences have also been considered by participants as being spiritually meaningful, with many participants expressing the experience as being the most monumental in their lives (Griffiths et al. 2008; 2011; Belser et al. 2017). Even when a mystical experience is not achieved, psilocybin has been reported as being a considerably meaningful experience (Johnson et al. 2014; Ross et al. 2016). During a 14-month follow up study of psilocybin assisted mystical experiences, the most common positive aftereffect for participants were better family and friend relations, along with heightened body, mind and spiritual self-care (Griffiths et al. 2011). Evidence suggests
that the mystical experience can be more therapeutic than antidepressant medication and extensive therapy for drug abuse for as long as up to a year (MacLean et al. 2011). In fact, studies have shown promising results of reduction in both tobacco addiction (Johnson et al. 2014) and alcohol dependency (Bogenschutz et al. 2015) when treated with moderate to high doses of psilocybin. Two informants in my study also reported a reduction in tobacco use and alcohol dependency.

**Challenging experiences with psilocybin.**

Higher doses of psilocybin do increase the possibility of experiencing overwhelming fear, paranoia or delusions but can be well managed in a safe and supportive environment (Griffiths et al. 2011; Belser et al. 2017). Those who encounter challenging experiences with psilocybin often report afterwards personal development and spiritual significance, with no decrease in personal well-being (Griffiths et al. 2008; 2011; Carbonaro et al. 2016; Belser et al. 2017). Although rare, large doses of psilocybin mushrooms taken while absent of a supportive set and setting can cause long-term negative and hazardous outcomes, with hospitalizations, self-harm, and even death (Honyiglo et al. 2019). Studies have suggested that those who score high in neuroticism (less emotional stability) may be more prone to challenging experiences, therefore requiring more support for both preparation and integration to achieve positive outcomes, in conjunction with a positive set and setting (Barrett, Johnson & Griffiths 2017). This type of support is not always present or available when done recreationally.
Abuse potential of psilocybin mushrooms.

Many contemporary studies have reached the conclusion that psilocybin mushrooms are non-addictive (Hasler et al. 2004; Carhart-Harris et al. 2016; Johnson et al. 2014). A 2018 review assessed the abuse potential of psilocybin mushrooms using the eight-factor analysis of the Controlled Substance Act (CSA) (Johnson et al. 2018). Eight specific factors are used by the CSA to evaluate a substance’s probability of abuse, including public health risk, scientific knowledge, and history of the substance. These eight factors must be analyzed in order to recommend rescheduling a substance. Johnson et al.’s (2018) review suggested that there is some potential for abuse and risk associated with psilocybin mushroom use, but not enough to be labeled more restrictively than a Schedule IV substance. In fact, past research has proposed “psilocybin carried a lower risk of dependence than caffeine and amongst the lowest risks of death of all major substance abuse categories including cannabis” (Johnson et al. 2018:155) The review concluded that the therapeutic benefits of psilocybin-assisted therapy outweigh any potential societal harm (Johnson et al. 2018).

In fact, psilocybin may be anti-addictive for people struggling with tobacco and alcohol addiction. Bogenschutz et al. (2015) found that psilocybin significantly reduced alcohol consumption and craving in alcohol-dependent participants up to 36 weeks after the last dose. A study by Johnson et al. (2014) reported that psilocybin is more effective in helping tobacco addicts abstain from cigarettes than pharmacological treatments and behavioral therapy combined. The participants had the choice of completing up to three psilocybin sessions in support of abstaining from tobacco. Two participants declined the
third session, which adds to accumulating evidence that the mushroom is not addictive (Hasler et al. 2004; Carhart-Harris et al. 2016; Johnson et al. 2014).

Now that an overview of previous studies with psilocybin have been discussed, I will be moving on to the final section of my literature review, focusing on the framework used for my study.

The Framework for my Study

My research is grounded in the symbolic interactionist framework rooted in Howard Becker’s (2015[1953]) *Becoming a Marihuana User*. His work informed my analysis of how my informants were initiated into, and made sense of, their experiences with psilocybin mushrooms. Becker’s research with cannabis users recognized how it was both the physiological effects and the social understanding that identified the event of being high. I also used Norman Zinberg’s (1984) *Drug, Set, and Setting* framework for understanding drug effects and controlled drug use. Zinberg discussed how to ensure a positive set (mindset) and supportive setting (environment) as a form of social learning.

I explored two theories within the symbolic interactionist framework: the Thomas theorem and the looking-glass self theory. The Thomas theorem states that both the objective and subjective create reality (Merton 1948). One’s reality is based on the perception of that reality, so both objective reality and subjective reality create what is real for an individual. Two people viewing the same objective situation may interpret that situation differently due to their subjective (personal) lens. An example of the Thomas
theorem described by Merton (1948) is the banking system. The banking system works because people believe it does. In the past banks have failed when a large number of members withdraw their savings due to the belief that the banking system was failing. The interpretation of a bank failing created the action of members withdrawing money from that bank, which in turn did create the reality of the bank failing. Merton (1948) coined the term self-fulfilling prophecy to better understand that consequence. “If men [sic] define situations as real, they are real in their consequences” (Merton 1948:193). However, subjectively creating one’s reality does not mean the objective reality will manifest. An example is a person’s perception about their bodyweight. A person may perceive themselves to be overweight while in objective reality they are not. Their belief in being overweight will most likely not cause them to gain weight, but their personal reality is that they are overweight, which may cause them to react by joining an unnecessary weight loss program. The Thomas theorem can be a useful lens when understanding the psychedelic experience because hallucinations affect objective reality, and subjective perceptions can create meaning for that experience.

The looking-glass self theory explores the process of self-identification through one's assumptions of how others perceive them (Franks and Gecas 1992). Studies have suggested that a person’s perception of how others respond to them is more important than the actual response in creating one’s identity (Franks and Gecas 1992). For example, if a person is making a crude comment and they perceive others as thinking they are clever or funny, that person will continue with the insulting rhetoric, when in reality that person may be making others uncomfortable. The looking-glass self is a meaningful
theory to understand the psychedelic experience because a person's experience can be understood by how they imagine others to be perceiving them, which could create a meaningful experience for how that person understands themselves.

**Understanding the experience.**

Howard Becker’s (2015 [1953]) *Becoming a Marihuana User*, published in the 1950’s documents the user experience of a mind-altering substance. Becker (2015) interviewed people who took cannabis to investigate the experience and interpretations of “getting high”. Becker (2015) found in his studies from the 1950’s to the 1960’s how the interpretation of getting high differed. In the 1950’s cannabis use was not common, so there were many naive users. Becker’s early work found that people who consumed cannabis had to learn how to correctly smoke cannabis to feel the effects, how to connect those effects with the substance along with interpreting it as pleasurable or not. When a person interpreted those effects as pleasurable, and continued to use, they would become a marijuana user.

As cannabis became popularized in the 1960’s there was a widespread knowledge of how to use cannabis, and what the experiences would be like, which created expectations of what feelings were sought after. Experiences that may have been interpreted as unpleasant in the past, through this body of knowledge, could be transformed into a sought-after experience. Becker (2015) concluded even when a substance creates the same effect and feelings, the creation of knowledge around that altered experience can change from something undesirable to desirable. Much has to do
with the person’s interpretation of the experience, and outside knowledge can influence those personal interpretations. Becker’s observations on cannabis users can be helpful to explore how one may understand their experience on psilocybin mushrooms.

*Controlled use and motivation.*

Norman Zinberg’s (1984) book *Drug, Set, and Setting* explores the “social sanctions” and “rituals” associated when taking psychedelics as a form of social learning to promote a safe experience. Zinberg uses the term “social sanctions” to describe shared values on how to use psychedelics, and the term “rituals” to describe expected behavior patterns when taking psychedelics. In the psychedelic scene those who did not follow the social sanctions and rituals were looked down upon. Preparing for the psychedelic experience was a popular social sanction in order to ensure safety and to prevent a challenging experience; rituals included packing proper foods and beverages along with planning activities. Psychedelics were often taken in a group setting, and with trustworthy people who could be relied on in case a difficult experience were to occur. Agreeing on a group intention was a common ritual to somewhat control the psychedelic experience, by having a similar mindset. Having a safe and comfortable setting to take the psychedelic substance was also an important social sanction, preferably in the seclusion of nature, or the comfort of someone's home. Further, being emotionally and mentally prepared was a frequent social sanction, with rituals such as meditation to ensure a positive mood and a peaceful mind state. Zinberg (1984) additionally found that committing to taking
psychedelics infrequently was a prevalent social sanction, and adopting rituals of doing psychedelics only once a month or on special occasions was a common practice.

The motivation to take psychedelics may be influenced by peer selection more than peer socialization. Recent studies observing social influences with cannabis use suggests that those who are interested in taking cannabis seek out peers with similar interests (peer selection), instead of being influenced by peers (peer socialization) (Becker and Curry 2014). Alcohol consumption is the opposite, where peer socialization is the guiding factor in consuming alcohol (Becker and Curry 2014). Psychedelics, such as psilocybin mushrooms are more similar to cannabis, so peer selection may be a more common factor with motivation to use.

Zinberg (1984) found a difference in motivation between older and younger individuals who took psychedelics. Older individuals, who had taken psychedelics in the 1960s, believed psychedelics should be taken for spiritual and personal growth. Having a personal intention was of importance in order to learn about oneself and the world. On the other hand, younger individuals who had taken psychedelics for no more than five years believed in taking psychedelics for recreational purposes for pleasure and enjoyment. Zinberg (1984) concluded that older individuals may feel the need to justify taking psychedelics because of the negative reputation it had in the 1960s and 1970s, reflecting the historical context of that time. Zinberg (1984) hypothesized that recreational use may continue to grow and be accepted in the psychedelic scene as the perceived danger of psychedelics lessened with time. Zinberg’s expectations are becoming fulfilled, as there is a current decriminalization movement underway in the
United States, with Denver Colorado being the first city to decriminalize psilocybin mushrooms in 2019 (Marlan 2019).

Although psilocybin mushrooms are still illegal, decriminalization removes felony charges for cultivation, possession, and distribution. Organizations for decriminalization have been assisting in the acceleration of the movement, such as Decriminalize Nature, a social welfare organization created in May 2019 to ensure access for healing and expansion of consciousness for all human beings (Decriminalize Nature 2020). Decriminalize Nature believes that all humans have the right to have a relationship with nature’s plants and fungi, without interference from authorities or pharmaceutical companies (Decriminalize Nature 2020). Decriminalize Nature warns against the legalization of psilocybin for clinical use only because many people still would not be able to access psilocybin, and the mushroom itself would still be illegal. An important part of decriminalization is for society to understand the experience and influence of a substance in order for it to be socially acceptable and seen as benign. Part of normalizing a substance is through community sharing of user experience and reason for use, in which I hope this thesis contributes.

Concluding Thoughts

This literature review has explored the long journey of psilocybin mushrooms from prehistoric times to the present. To reiterate, psilocybin mushrooms were criminalized with no scientific backing, consequently research on the therapeutic
qualities of psilocybin has been unjustly underdeveloped. Psilocybin shows to be promising in reducing depression and anxiety while increasing general well-being, especially when coupled with psychotherapy. Psilocybin may help the quality of interpersonal relationships and may encourage a compassionate worldview. Psilocybin is shown to be non-addictive, and relatively safe, especially when taken in a supportive setting with a positive set. Even though difficult experiences may arise, they can be well managed in a supportive setting. With symbolic interactionism as a guiding framework, Becker explores the experience of first-time marijuana users, and Zinberg explores how those who take psychedelics maintain their use in a controlled way along with user motivation and experience. In the upcoming chapters I will be using Becker and Zinberg as a guide for exploring my research.

In the next chapter I will be introducing my research methods. I will be sharing how I got interested in studying psilocybin mushrooms, how I located and recruited informants, how I analyzed the data and what questions I asked. Lastly, I provide a graph demographic describing my informants.
METHODS

The healing experiences produced with psilocybin mushrooms and other psychedelic substances has been a lifelong interest of mine. I was first introduced to psilocybin mushrooms when I was 15 and first took them with the intention of exploring what it means to have a psychedelic experience. After my first experience, I was made aware of the healing potential that psilocybin mushrooms had, but I did not have the knowledge to access those potentials. The illegality of psilocybin mushrooms makes it difficult to learn from those who hold traditional wisdom on how to take psilocybin in a therapeutic way in order to heal and to understand consciousness (Powell 2011).

When I was 26 I had my first therapeutic psychedelic experience in a healing and supportive ceremony guided by a shaman (healer). I traveled to Brazil where ayahuasca is legal, in order to experience a therapeutic ceremony. Psychedelic ceremonies are designed to provide a safe and supportive setting and space for deep healing from past trauma, whether it be emotional, psychological, or physical. The ceremonies I have attended both abroad and in the US, have had from three to over 30 attendees situated in a circle with an altar in the middle. The ceremonies have usually been indoors, with some being outdoors around a fire. The ceremonies begin with the shaman calling in the four cardinal directions along with calling for the presence of spirit guides and ascended masters to assist the shaman and attendees during the ceremony. The shaman guides the ceremony with different songs, and provides personal support and guidance when needed.
For me, psilocybin mushrooms along with ayahuasca and san pedro, when taken as part of a therapeutic ceremony, have helped me overcome depression, anxiety, and addiction - much of which stemmed from childhood trauma. My sense of well-being has increased substantially, and I have endless gratitude for the psychedelic plants and fungi that have helped me get to where I am. The inspiration for this study was to explore the motivations and experiences of other people who have taken psychedelics on multiple occasions over time. In order to narrow my study, I chose psilocybin mushrooms because they have been the focus of decriminalization efforts in recent years (Decriminalize Nature 2020; Marlan 2019).

Locating Psilocybin Consumers

I recruited my informants through convenience and snowball sampling. I shared recruitment information about the study through email and through social media private messaging with individuals knowledgeable about psilocybin mushrooms. Those contacted participated or recommended other known psilocybin consumers to participate. There were three inclusion criteria for participation: (1) Over 18 years of age; (2) Have taken psilocybin mushrooms over 10 times and for at least three years; and (3) Intend to continue taking psilocybin mushrooms.

I identified these criteria on the assumption that taking psilocybin mushrooms at least 10 times over a three-year period would be satisfactory to understand the motivation and experience of those who choose to continue taking psilocybin. Research has shown
that the majority of those who take psilocybin mushrooms do not do so compulsively (Johnson et al. 2018), and those who take psychedelics long-term take them more infrequently as time goes on (Zinberg 1984). Therefore, the recruitment requirements did not include a timeframe of the last time psilocybin was ingested, as long as the informant planned on partaking again.

I was born and raised in Humboldt County, California. The majority of those recruited were people in my community who knew me personally or knew of me. There was a level of trust already established with knowing I was a safe person with whom they could share their experiences. The importance of having rapport in the community being researched is a common and necessary research strategy to collect rich data (Johnson 2017). When creating the interview guide, I was aware of my own biases about the therapeutic benefits of psilocybin mushrooms, so I took extra care with my wording and questions to not influence my informants’ answers during the interview. None of my questions revolved around taking psilocybin mushrooms for therapeutic or spiritual advancement, and I only spoke about it if the informant mentioned it during the interview.

During the recruitment process there were six individuals I contacted who I knew took psilocybin but they ignored my invitation or told me that they had never taken psilocybin mushrooms. They were all women. Psilocybin mushrooms are both illegal and stigmatized, and historically women associated with drug use have been harshly stigmatized (Muehlmann 2018). The disinterest for these women to participate could be due to the double stigma of being a woman who also takes psychoactive mushrooms.
Once I identified interested and qualified participants, I sent a consent form through the postal service or email for the informant to read, sign, and send back to me. The consent form informed my informants what kind of questions I would ask them during the interview, and I told them they could opt out of the interview at any time. I assured informants that their identity would be kept confidential and they were asked to pick a pseudonym.

Due to COVID-19 related public health restrictions, face-to-face interviews were not an option. Instead, I conducted interviews over Zoom or by phone. Twenty-three people initially showed interest in the study and ultimately 18 of those participated in the study. There were five participants who were not comfortable sharing information about their psilocybin experiences online or over the phone. They told me that they did not want to put themselves and their families at risk with the possibility of having their involvement in illegal activities intercepted by law enforcement. They would have gladly met with me face-to-face; therefore, COVID-19 restricted the number of informants for my study.

**Interview Administration**

I designed the interview to last from 30 minutes up to two hours depending on the informant’s answers. The shortest interview was 20 minutes and the longest interview was 128 minutes, with the average interview lasting 51 minutes. All interviews were audio recorded. During the interview I used a pseudonym selected by my informants.
I conducted the interviews between November 6, 2020 and February 17, 2021. I designed the interviews to be one-time in-depth and semi-structured. During the interview I encouraged open dialog and storytelling to get a deeper understanding of the informant’s experience with and motivation for taking psilocybin mushrooms. I used a focused set of questions to guide the in-depth interviews (see Appendix A) but there was also room for new themes to emerge in response to what my informants shared. All of my informants were open and honest about their experiences with psilocybin mushrooms and provided deep insights and clarifications when I asked follow up questions. After the interview I asked for personal recommendations for additional interviewees. Most informants provided recommendations of who else would be interested in being interviewed.

Analyzing the Data

Following the interview, I wrote a short summary highlighting the most prominent topics and themes covered during the interview. As the interviews progressed new questions emerged. During transcription and analysis of the data there were questions I felt were important enough to ask follow-up questions of previously interviewed informants. I contacted three informants after the interview to get more clarity on their experiences. I transcribed the interviews using the online transcription tools, Descript and Otter-ai. After the transcription was completed, I deleted the interview
audio file from both the digital voice recorder and the online transcription tool and then edited the transcripts.

I used the online service Atlas.ti to assist with analyzing the data. I had no pre-existing theories of why people took psilocybin during the interview process, but I sought to explore the experience my informants had with psilocybin mushrooms along with their motivation to continue taking psilocybin. The online system allowed me to see the common words and phrases used, and the possible linkages between codes I developed. I used grounded theory to develop codes to better understand the data, and as I coded each interview, I also wrote memos to better understand the links between those codes (Charmaz 2014). Coding is the process of closely examining the data by creating labels for pieces of data in order to categorize and summarize that data (Charmaz 2014). I used memos to jot down my ideas and assumptions throughout the coding process to better understand what the data was saying. My hope was to collect rich and meaningful data from the interviews, and to capture the most seemingly important messages from my informants. “Seeing research participants’ lives from the inside often gives a researcher otherwise unobtainable views” (Charmaz 2014: 24). My intention with obtaining the views of those who take mushrooms is to contribute to our understanding of experiences with psychedelic mushrooms. My informants shared very sensitive information, and I wanted to do my best to represent that information to correctly portray those who take mushrooms. The most prominent themes and differences will be explored in detail in the next chapter. I removed any identifying information about my informants.
**Interview Questions**

During the interviews I covered the following topics: introduction to taking psilocybin mushrooms, motivation to continue use, memorable experiences, body sensations, thought patterns, difficult experiences and how to navigate those experiences, preferred set and setting, preparation for the experience, and integration after the experience for meaning making.

From the interviews I sought to explore the motivations behind taking psilocybin mushrooms on a long-term basis. I wanted to know how my interviewees were introduced to psilocybin mushrooms, the context and expectations when taking mushrooms, quantity consumed, and how they made sense of the experience, along with how their experience shaped subsequent choices about future consumption. I also wanted to know about any preparations made beforehand to promote a positive experience; how informants defined a particular experience as either positive or negative; how they believed psilocybin mushrooms affect their body, mind and emotions; and to describe their next day experience. I also was interested in what the perfect psilocybin experience would look like. I was particularly interested in the preferred set and setting and what short-term and long-term effects they would like to achieve. My last area of interest was how the psilocybin experience has changed for them throughout the years and if taking psilocybin mushrooms has personally affected them.
Those who take Psilocybin Mushrooms Long-Term - Who are They?

As can be seen in Table 1, most of my informants identified as male and single (61%), and all but one participant was European-American. My informants ranged in age from 26 to 67 with a mean age of 38 years old. Almost everyone was employed (94%), rented their homes (61%), and did not have children (77%). Half of my informants had attended at least some college (50%), with three attaining degrees (16.6%). Most of my informants were living in California (94%) at the time of the interview.

Tables

Table 1: Interview Participants

<table>
<thead>
<tr>
<th></th>
<th>N</th>
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<tbody>
<tr>
<td><strong>Gender Identity</strong></td>
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<td>11.1%</td>
</tr>
<tr>
<td>Widow(er)</td>
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<td>11.1%</td>
</tr>
<tr>
<td></td>
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<td>%</td>
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<tr>
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<td>Dropped Out Received GED</td>
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<td>Dropped Out No GED</td>
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<td>College Graduate</td>
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<tr>
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</tr>
<tr>
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</tr>
<tr>
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</tr>
<tr>
<td>Oregon</td>
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</tr>
</tbody>
</table>

All of my informants tried psilocybin mushrooms for their first time with a trusted friend or a group of friends with the majority first partaking in their teens, when they were between 13 and 19 years old (88.8%). Half of my informants have taken psilocybin mushrooms over 50 times (50%), and take them sporadically, with the majority ingesting mushrooms one to three times a year (61.1%). There were two outliers: one informant took it weekly and another took a four-year break due to life circumstances.

Now that my informants have been described, the next chapter will be describing what my informants shared with me about their psilocybin mushroom experiences, and their motivations for continuation.
DATA ANALYSIS

Motivations and Experiences with Psilocybin Mushrooms

Through the analysis of interview data seven themes emerged. My analysis starts with how my informants first became interested in trying psilocybin mushrooms, followed by their first mushroom experience. In most cases my informants had been intrigued by mushrooms long before they tried them for the first time. My analysis explores my informants' significant experiences on psilocybin, along with significant difficult experiences. All of my informants talked about the importance of a positive set (mindset) and supportive setting (environment) when taking mushrooms to increase the potential of having a positive experience. The last two areas of interest I explored in the interviews included the motivations my informants had to continue taking psilocybin mushrooms, followed by the exploration of how taking psychedelic mushrooms has affected them personally.

“Trying something new, trying something different”.

My informants shared many motivations for first-time experiences taking psilocybin mushrooms. For most, the desire for a new experience was the motivating factor, which was piqued by positive stories heard from other people, especially friends.

Havok is a 41-year-old male who has taken psilocybin over 100 times. He described his motivation in this way: “[taking] mushrooms was something I wanted to try
because I heard stories and I had friends from grade school that I still stayed friends with, and they talked about how much fun it was.” Havok had his first psilocybin mushroom experience with two trusted friends at the beach. His friends had both taken mushrooms in the past, so he felt safe trying mushrooms with them. Havok stated: “I didn’t have much concern because I knew my friends had been doing it for a while. And of course, me being an adult already, they’ve had a lot more experience with it.” For all my informants, the first-time experience with psilocybin mushrooms was with a trusted friend or a group of friends. My informants’ interest in psilocybin may have been influenced by peer selection more than peer socialization. Peer socialization is when adolescents follow their peers’ beliefs and behaviors in order to fit in, and peer selection is when adolescents seek out peers with similar beliefs and behaviors (Becker and Curry 2013).

Most of my informants described their interest in psilocybin mushrooms piquing in their teenage years. H.T. is a 35-year-old male who had taken psilocybin mushrooms between 20 to 30 times. H.T. described his interest in taking mushrooms as stemming from being a teenager in high-school. He described his high-school years as years of experimentation with mind altering substances. He was raised by parents who were open about their past experiences with psychedelics, so altering consciousness was not a new idea for him. H.T. shared:

It's just something that I guess always just seemed attractive. I mean, part of it was also about being in high school and, yeah, something to do; “Oh, let's do this!” And I've been always intrigued by substances and altered mind states. And I mean, I guess you could say too, my parents, they were hippies in the 60s, and they did a lot of acid and hallucinogens. I guess growing up, I heard the stories,
but I don't know that that really had so much to do with me wanting to do that. I would say just me being in high school and yeah, just wanting to get to try mushrooms.

Although H.T. discounted the possibility that his parents contributed to his interest in psychedelics, their openness to sharing experiences likely piqued his interest to try mushrooms. H.T. described his interest in trying mind altering substances during his high school years as extending beyond psilocybin mushrooms and LSD, but currently he prefers psychedelics compared to other substances. Five other informants also described their parents, or other close family members, as being influential in their decision to try mushrooms by sharing positive past experiences and some family members even offered to share their mushroom supply. On the other hand, most of my informants described their parents as disliking psychedelics and disapproving of their choice to take psilocybin mushrooms. Due to judgement, many of those informants do not talk about their mushroom experiences with their parents or with other judgmental family members.

Many informants described their early interest in expanding and exploring their consciousness as influencing their decision to try psilocybin mushrooms. Summer is a 32-year-old female who has taken mushrooms between 20 to 30 times. She described her interest in this way:

I was introduced by a friend that I met through art classes in high school. And yeah, I was interested, as an adolescent in any sort of expansion of consciousness, so that curiosity was there, before I was presented with an opportunity. So once the opportunity came my way I took advantage.

As an adolescent, Summer sought out like-minded peers with whom to experiment with mind-altering substances. This supports my earlier suspicion that my informants’ early
interest in mushrooms, and exploration of the psychedelic experience with friends, had to do with peer selection more than peer socialization. Beyond experimentation with peers, some informants shared their interest as being born from the desire for self-betterment, especially those suffering from depression, anxiety, or PTSD.

Alex is a 30-year-old male who has taken psilocybin 100 times and became interested in psilocybin mushrooms during his time in the military. He said that psychedelics are a substance of interest in the military because they do not show up on drug tests, so they are widely available. Another motivating factor for Alex to try mushrooms was to find a solution to help him reduce depression:

So, you know, just the depression side and trying something new, trying something different. I was on a bunch of antidepressants out of the army, and like it took the good and the bad away from me. It was like the good times were like, “meh,” the bad times were like, “meh” too. So yeah, I was looking into alternate things. I tried THC, CBD, and then I tried out LSD. Then psilocybin, and that is kind of how I ended up there.

Alex says that taking psilocybin mushrooms is like a “mental reset” for him, and has allowed him to let go of anger and regret, along with helping him learn how to forgive. Psilocybin has assisted him with healing from PTSD and depression. Alex shared that ingesting psilocybin mushrooms has helped him to function in this world.

A common theme among my informants was that taking psilocybin mushrooms significantly reduced feelings of depression and anxiety. Aziza is a 67-year-old female who has taken psilocybin mushrooms over 100 times and described microdosing.

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1 Microdosing is a practice where miniscule amounts of psilocybin, or other psychedelic, are ingested which may provide long-term mental health benefits; whereas macrodosing produces the psychedelic effect.
psilocybin to manage her lifelong suffering of anxiety. When Aziza was first introduced to mushrooms, she was experimenting with other mind-altering substances, without knowing the possible therapeutic effects.

... my older brother, interestingly enough, introduced me to all of the psychedelics except Ayahuasca. He was very significant in my early teenage years. He was the first one to introduce me to the mushrooms. And I can't remember if I stole them out of his pocket, or if he gave them to me. I was 13. LSD was my first psychedelic. I had a really dear best friend back then, and we did it all together.

Most of my informants shared that psilocybin mushrooms provided their first experience with psychedelics, but five of my informants said their interest to try mushrooms stemmed from their past experiences with LSD.

“Everything Just Seemed More Beautiful Than They Were Before”.

Sixteen out of 18 of my informants took psilocybin mushrooms for their first time during their teenage years. The first-time experience was described as full of fun and laughter. Bill is a 36-year-old male who has taken mushrooms over 200 times and described his first experience in this way: “I was laughing, a lot of laughing and, you know, breathing and just being appreciative of everything. Everything was just so cool, and funny, and different.” The onset of the experience was described by most with a slight feeling of nausea. Bobby is a 37-year-old male who has taken mushrooms over 10 times and described such a feeling: “The very first feeling I can remember is a nauseous feeling, just an upset stomach. Just not feeling like myself. But after a while that [nausea] went away.”
For some, the body was described as feeling light, warm, and tingly. Heather is a 28-year-old female who has taken psilocybin mushrooms around a dozen times and shared: “It [my body] felt warm and tingly, and my limbs felt lighter and they kind of felt like they were floating.” Colors were described as more vibrant and the surrounding environment was described as having a melting or water-like flowing appearance as described by Heather: “[E]verything was a little distorted and the colors were vibrant. And the walls looked like they were kind of melting.”

All of my informants had an idea of what a psychoactive mushroom experience would be like, with some of my informants expecting the effects to be more intense. Heather described that expectation:

From the stories I had heard from my brothers and people I knew who had done them [mushrooms] - they made it sound a little more wild, like people were jumping out of the TV and you were actually seeing cartoon characters sitting next to you. I thought it would be more like a dream, instead of it being like reality with a tinge of fun.

Also, for all of my informants, the first psilocybin experience was positive, which inspired them to ingest mushrooms again. Alex shared: “It just was a good experience, so I didn't see why doing it again would be a bad thing. So I think I did it again a few weeks later with some friends.”

Feeling anxious before taking mushrooms for the first time was a common reported feeling among informants. Justina is a 26-year-old female who had taken mushrooms between 10 to 15 times and described feeling anxious to try psilocybin mushrooms because of a family history of mental illness. She was offered mushrooms at a party by her friends, and was able to face her fears by saying yes:
I went to a party. And one thing to know about my past family life, would be that my mom and my dad both have mental illnesses. And in regards to that, coming into my first experience with mushrooms, I was terrified because the fact that I've always heard people say like, “oh it could bring out your schizophrenia inside of you.... Your brain dabbling into that kind of thing could set things off.” Let me just tell you, I was terrified. So when coming into my first experience, I was at a party. I've known these people since high school, and we went up to their house and they were throwing a party and they had a bag of mushrooms. They offered it to me and at first I said no. I was like, “No, no, I'm good.” I was very hesitant to do that kind of thing, especially because it was psilocybin, you know, it had mental effects. But I decided to do it. I was like, “hell fuck it, why not want to try something new.” And so, I did.

Justina’s first psilocybin experience was more positive than she had expected; she had expected to possibly go insane and to feel out of control. After her initial experience she described psilocybin mushrooms to be her favorite mind-altering substance because of the calming effect psilocybin has on her, along with her gaining an increased mood state. The psilocybin mushroom experience also inspired her to see the beauty in ordinary objects, and increase her self-esteem:

I would say it kind of exceeded my expectations in that manner because it was the complete opposite, you know, I was in control, but everything just seemed more beautiful than they were before. So, the house that we were in, it was kind of a beat-up rugged house, it wasn't a middle-class house or anything. So, there were spider webs on the wall, in the bathroom especially, and looking at all these crazy things that are supposed to be kind of scary, like spider webs, cracks in the floor and stuff, just looked really cool - looking at it [the spider webs and cracks in the floor] made it more mystical, magical. Then when you look at yourself in the mirror you just feel so pretty; you feel really pretty, it makes you feel like you look really nice, and your hair is vibrant. It kind of polishes all your flaws away.

Justina’s description of her reality shifted when describing how the spider webs and cracks in the floor transformed from “scary” to “magical.” This shift in reality relates to the Thomas Theorem, coined by sociologist WI Thomas: “If men [sic] define situations as real, they are real in their consequences” (Merton 1948:193). The Thomas
theorem states that humans can understand their reality through both objective and subjective means. For Justina, the objective surroundings of spider webs and floor cracks were seen through a subjective lens of personal meaning which labeled the surroundings as magical and mystical. A change in reality was a common theme described by informants, especially in recognizing ordinary objects as beautiful. Bobby described his experience with psilocybin as: “[T]hings you don't notice on a regular day basis, you can find very beautiful… I see the good things about life, like how beautiful the sun can be, and the trees, and the beach.”

A change in my informants’ inner reality was also common, such as gaining feelings of gratitude for their lives and for others. Bill described feelings of appreciation while on mushrooms: “People just appreciate everything more on [mushrooms], art appreciation, anything, like appreciating their dog more, like ‘I have the best dog in the world,’ or having the best girlfriend.” Using the Thomas Theorem as a lens: when Bill takes psilocybin his dog and girlfriend are subjectively seen as “the best” because his perception with mushrooms is making that a reality for him. Bill is responding to objective reality (his girlfriend and dog) through personal meaning ascribed during his psilocybin experience.

Along with laughter and feelings of gratitude, some of the informants’ first-time experience instilled childlike qualities and feelings. Geronimo is a 62-year-old male who has taken mushrooms between 50 to 60 times. He described his first experience as feeling like a child again:
The first time I did it [I] was just like a giggly little kid, you know, and just
everything was so funny. And it was abstract. And so, you get these little
epiphanies and stuff, and I can't recall what they were, but, kind of what weed
does to me every once in a while, on a good day. So yeah, I was just like a giggly,
little boy with all the other boys and girls that we were hanging around at the
time. And it was just a really good experience.

John is a 44-year-old male who has taken psilocybin mushrooms over 100 times
and also shared an experience of feeling like a child again. Instead of feeling like a child
in his mind and emotions, it manifested in how his body felt and looked:

The first time it was feeling a little jumbly in my thoughts. And I would say we
played a lot of time in the playground... I remembered this, sitting on top of the
slide and it felt like my arms and my legs had shrunk. And I was like a kid again,
on the slide, which was a really strange thing, to be like, “what's happening here,
what's this experience?”

The looking glass self-theory can be used to explore Geronimo and John’s
experiences of feeling and looking like a child again. The concept of self-identity comes
from both one’s own self-analysis and how one is imagined to be perceived by others
(Franks & Gecas 1992). One’s subjective assumptions about the perceptions of others can
affect one’s behavior and beliefs about one’s self (Franks & Gecas 1992). Along with
Geronimo and John’s own perception of feeling and looking like a child again, it is
possible that they also believed their peers perceived them as a child too. Believing that
they were seen as a child could have encouraged them to act child-like even more, and to
believe that they had indeed reverted back to childhood. From my informants’
descriptions it appears that psilocybin mushrooms may open up a person to feel “giggly”
and happy - similar to a child's experience. Part of growing up is experiencing the
hardship of assuming adult responsibilities and the child-like joys and pleasures may be lost in the hustle and bustle of daily life.

Some informants described their first-time experience as being difficult to understand because it was a novel experience. Zinberg (1984) explored how those taking psychedelics for the first time in the 1960s were pioneers in finding out the meaning of a psychedelic experience. Psychedelics were so new that there was nobody to explain what might be experienced during the altered psychedelic state. In the 1950s cannabis was similar in being a new experience in society. Becker (2015) described first-time cannabis smokers having to learn what the effects of cannabis were, and then to learn how to like those effects. During an interview with Dustin, a 31-year-old male who had taken mushrooms between 20 to 30 times, a similar phenomenon arose with understanding his first psilocybin experience. Dustin explained his first experience was difficult to understand at the time, because he and his friends had not yet been introduced to the proper language to describe the psychedelic experience.

You're kind of experiencing new stimuli, which is hard to describe. We're all used to relating to stimuli through very common language. When there's new stimuli, how do you relate to that? It's not common, and then you have to explain things that don't necessarily have words. I mean, or you haven't been introduced to those words, like tracers². You know, you're tripping³, and you've seen your hand and you can see the frames that are hammered and, oh, that's tracers. But I've learned that language now, when I was 15 I wasn't having that yet. So I learned more, obviously, over the last 15 years to be able to make those distinctions, linguistically. But it was interesting trying to relate to that experience without having those language skills.

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² Tracers are described during a psychedelic experience as seeing a train behind moving objects; this effect can be seen in long exposure photography.
³ Tripping is a term used to describe being under the influence of mushrooms and other psychedelics.
Dustin used the word *hammered* to explain how tracers look. Throughout the years he has learned how to better articulate and understand his psychedelic experiences, although there may always be altered states of consciousness that cannot be explained verbally.

*“Seeing Myself as a Part of the Bigger Universal Puzzle”.*

The psilocybin experience allowed many of my informants to have the ability to see themselves and the world in new ways. Kit is a 42-year-old male who has taken mushrooms over 500 times and disclosed: “I would equate eating mushrooms to what some people see when they find religion, like realizing there's something bigger than you in this world. And that could be a little mushroom that grows out of a tree.” Some informants shared that a psilocybin experience helped them to make big life decisions. John shared such an experience:

As I was leaving the football field, like stumbling back home with [my friend], there was like a wind or a bird or something that would make the fence chirp [chirping sound]. And so I put my ear right up next to the pole and it was like, I got this insight that I needed to move to Hawaii. And then I moved to Hawaii afterwards. I don't know if it's [move to Hawaii] from that insight or whatever. But there was also a sense of like, I didn't know if it was me, a higher consciousness, an external being or independent agent or something [else] that was happening, but I felt that there's a dialogue happening and that the insights that I was getting from those dialogues were worth pursuing.

The Thomas Theorem can help to unpack John’s experience and the outcomes of his experience, because the outcome of a situation depends on the person’s perception of that situation, which creates their reality. John believed the insight from his psilocybin mushroom experience to be worth pursuing, and it turned out it was. John shared that his
move to Hawaii was a significant choice in getting him to where he currently was by allowing him to connect with himself. Since then, he completed his doctoral dissertation on consciousness and meaning-making with psychedelics. He has also created a supportive community for people to share their psychedelic experiences for feedback and to gain deeper understanding. John’s belief in the significance of his psilocybin experience created his reality of generating a meaningful life by moving from his hometown.

Similar to John’s experience, Aziza described a mushroom experience that allowed her to see herself more clearly, which gave her the strength and the clarity she needed to leave an ashram community. Aziza was hiking in the hills of Oregon and she sat down next to a tree to rest. Next to the tree was a mushroom growing out of the ground.

I sat down, and there was that mushroom. [it] popped out and said, “eat me.” And that was truly a beautiful journey⁴. I was in tears of gratitude going, “thank you, little guys, I know you love me”.... It was like the earth says “here, you're having troubles, let me give you a gift.” And that was a beautiful, beautiful thing. It did help me make a decision, and I did leave that situation. But during the journey itself, what I was shown, which would be the best way to describe it, was that I was keeping myself small. And that it was time to move on to other lessons that would allow me to evolve more - there's more of me to discover. And that this particular set and setting, Osho in Oregon, was keeping me small. And it also gave me a lot of divine love to encourage me - “you got the love in you, let's support you with that, you’re a unique soul. Here's some extra loving juice to kind of get you over that defeated feeling or confusion.” I would say at that time, that was probably the two most important things I needed to be shown in that conjunction of my life.

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⁴ Journey is a term used to describe being under the influence of mushrooms and other psychedelics.
Aside from major life changing experiences my informants shared how mushrooms opened up certain parts of their mind, such as retrieving forgotten memories, becoming aware of the possibility to give up certain addictions, and gaining a generally deeper understanding of themselves and others.

An example of memory retrieval was described by Justina. Her motivation for taking mushrooms had been for recreational purposes during social situations with friends or at parties. She shared a memorable introspective experience with psilocybin mushrooms when she was unable to interact with her friends at a campout because of an injured ankle:

And everybody's getting up moving around, and I'm stationary because I couldn't walk. So it [the psilocybin] brought me into my own thoughts and my own self relations in my own body. So I started thinking back about memories and all these different things. Since I wasn't focusing on the party or walking around or doing things, I was just sitting there and that's when it started with my own thoughts. And I swear I would have these very visual memories, and it wasn't like I was hallucinating, it was just visual memories. And so I thought back to a certain memory when I was in my childhood, and I saw it, in my head I saw the memory, which was very visual. I was remembering details I don't think I could have remembered if I wasn't on trips, I swear. And it was like I was hallucinating, like I said, but just so visual. And so that time, just thinking back to my own, like inside myself, it like opened up a whole nother part of my brain that I didn't think I could open up. So I thought about doing like micro-dosing for like, experimental. The only reason I haven't done it is because my brother passed away last year, so I'm worried it's going to open up a very bad chapter where I'm not gonna want to be there. So that's why I haven't done it. But I have noticed, it might, you could use it in that way [therapeutically]. It was a very interesting experience.

Some informants shared how psilocybin assisted them in remembering painful past occurrences, and through that remembering they were able to let go of the sadness and anger associated with it. Though these memories may be trying in the short term, research suggests that bringing unpleasant memories into consciousness can allow one to
work through past trauma (Leary, Litwin & Metzner 1963; Pahnke, 1969; Studerus et al. 2011). As Justina suggested, there is always a chance for a particularly difficult memory to arise, and without the proper support the experience could be psychologically harmful. For that reason, much recent research involving psilocybin recommends taking it in a supportive setting and with a psychotherapist (Grob et al. 2011; Griffiths et al. 2008, 2011; MacLean, Johnson & Griffiths 2011; Carhart-Harris et al. 2016; Johnson et al. 2014). Others argue that limiting psilocybin access to psychotherapy would exclude many people from having access to the mushroom at all (Decriminalize Nature 2020).

Some of my informants explained how their psilocybin mushroom experience allowed them to have a deeper understanding about their current addictions to certain substances. Three of my informants were able to temporarily abstain from their addiction during and after a mushroom experience. Mica is a 37-year-old male who has taken mushrooms 60 to 70 times. Mica spoke about an experience where the effects of the psilocybin helped him not smoke cigarettes for a significant amount of time. He had invited his friends to a party on his property; Mica shared:

So, the interesting part with me eating potentially five grams of mushrooms, was it felt like a purge. I was walking up the hill with a six gallon jug of water to give to everybody else. As soon as I started to get too close to the fire, within like 20 feet of it, I felt warmth in front of me. And I had just been over exerting myself and felt that I sweated out 10 gallons. I sweated out 10 gallons right then, but it was a purge for my body. It was something that was able to make it so that I didn't smoke tobacco. I've been a tobacco smoker since I was fuckin 14, but I didn't smoke tobacco for 8 to 10 hours after that experience, and it was comfortable. It was not a difficult thing to do. It was the thing that was going on. There was no interest in that, which is fantastic. I mean, while high on mushrooms, I knew that it was not a helpful or beneficial thing to me. And the rest of me was willing to participate in that instead of my [cigarette smoking] habit, which was nice.
Psilocybin has been shown to contribute to a reduction in certain types of addictive behaviors. Studies have found psilocybin to be effective in helping tobacco addicts abstain from cigarettes (Johnson et al. 2014). Therapy to prepare participants for psilocybin, as well as having a supportive environment and therapists while experiencing psilocybin, were all important for obtaining positive outcomes (Johnson et al. 2014).

Beyond addiction, a recurring theme among informants was feeling a deep connection with all life forms, and seeing a bigger perspective of one’s place in the universe. John explained how his psilocybin mushroom experiences have helped him gain a deeper perspective on the interconnection of his life with all existence.

Like really seeing myself as a part of the bigger universal puzzle, if you will, which means naturally that those things are also alive and have consciousness and they need to be respected. I think there's also, you know, those two things together are really interesting, the knowing yourself better and knowing that you're part of the puzzle, it's both like giving yourself confidence while also being humble about it. It's the combination of, realizing like, yes, you're special, as much as everyone else is special, and if you weren't here, it couldn't happen. But also here's everyone else just as special and that if they weren't there, it also couldn't happen.

Informants described a sense of comfort in experiencing the interconnection of all existence, and described deeper understanding and empathy for others. Similar experiences were reported by participants in clinical psilocybin studies (Belser et al. 2017). Many informants shared their hope for all people to have access to mushrooms and for all people to have the opportunity to have a psilocybin experience. Kit believed that psilocybin mushrooms are the source of peace and coexistence:

But I think everybody should eat mushrooms. If we had people that believe in that one consciousness, everybody coming together, what else is going to do that? What else is gonna break down all bonds of the person that doesn't feel adequate [low self-esteem] to the person that feels over adequate [egotistical]?... It's a level
playing field. They're gonna be like, “Oh, man, you're not that much better than me.” You know? So I think everyone should eat mushrooms. And I mean, if there was a, you know, a world moment of silence, if there was a moment of tripping, like everybody just goes outside and hums, that would be amazing. Let me know when that is. I’ll be there.

Kit described how mushrooms could create a “level playing field” between those who have low self-esteem (inadequate) to those who are egotistical (over adequate). A common theme among my informants was how psilocybin brought them to a place of self-reflection. According to Kit, through self-reflection a balance could occur by both raising the self-esteem of the underconfident and lowering self-esteem of the over confident. Kit described the common psilocybin experience of attaining deep interconnection by saying “everybody goes outside and hums.” Some of my informants described the experience with psilocybin mushrooms as the entire Earth “vibrating” or “breathing” at the same time. Jacqueline is a 33-year-old female who has taken mushrooms between 25 to 30 times. She described her experience of interconnection as “one breath, one heartbeat”.

“Demonic Faces in my Closet”.

All informants but two described having had a significantly difficult experience while on mushrooms, although the perspective of what constituted a difficult experience differed. Having a difficult experience is always a possibility, and due to this reason, all informants described that with time a respect for psilocybin mushrooms was established. Interpretation of an experience, of course, varied. For example, some informants described a difficult experience as having certain characteristics; other informants
described experiences with similar characteristics as being a positive or therapeutic experience.

For the informants who take psilocybin mushrooms for recreational purposes, most introspective experiences were seen as negative experiences. Introspective experiences were described as experiences of self-reflection, and self-realization; in other words, seeing one’s self with more clarity. Bill stated: “some of the introspective stuff gets weird for me” and shared that “I really just want to party.” His main intention for taking psilocybin mushrooms was to have a good time with friends, while others took mushrooms for spiritual reasons and sought out introspective experiences. John shared that he takes mushrooms mainly for spiritual reasons, and described introspection as a sought-out experience. John stated that introspective experiences can be challenging, but explained: “...it's almost like those challenges are doorways and you can break through them, then on the other side of that is something even more unusual and unique and fascinating.” For John, the somewhat challenging experiences of introspection were seen as both beneficial and desirable. Despite the fact Bill did not desire introspective experiences he did acknowledge his personal benefit of having such experiences:

I know that I have worked on myself through the use of psilocybin and have bettered my character. I left things behind, realized things in my mind, changed strongly held beliefs... It's like a moral thing, you know; I'm not going to steal anymore, I'm not going to lie to people anymore, you know, what I mean? I'm gonna take these things to heart and have them be a part of who I am. I'm going to not litter ever again. You know, and I've had those types of introspective things.

For most of my informants whether the introspective experience was desired or not, they were described as personally beneficial. Recent scientific studies with
psilocybin have come to similar conclusions: those who encounter challenging experiences with psilocybin afterwards often report personal development and spiritual significance, with no decrease in personal well-being (Griffiths et al. 2008; 2011; Carbonaro et al. 2016; Belser et al. 2017). Challenging experiences were described in prior research as losing a sense of self which causes paranoia, panic, and fear; others experience strong repressed emotions from past trauma (Besler et al. 2017). Emotions of guilt, self-hatred, and self-doubt were also present during difficult experiences (Besler et al. 2017). Difficult experiences could also include difficulty moving the body and questioning one’s sanity (Gashi, Sandberg & Pedersen 2021).

Difficult experiences can lead one into dark and scary places accompanied by disturbing visions. Two of my informants described personally frightening experiences which changed their involvement with psilocybin mushrooms. Jaqueline experienced feeling like she was dying. She saw visions of people dying in hospital beds and her body felt uncomfortable: “Every time I closed my eyes, I saw lines of people in hospital beds with their eyes full of sadness and regret and their bodies being in pain, and I felt it [the pain].” Although she did not enjoy her experience she shared: “I wouldn’t want to experience that again, but it did give me some insight on what dying might feel like.” Jacqueline shared after her experience she does not take high doses of mushrooms anymore: “I would only take higher doses [of psilocybin] with a shaman present to help me if I needed help.”

Heather also shared a difficult experience while on mushrooms that she described as frightening:
I remember just getting really uncomfortable and hearing things in the house and thinking somebody was in there with me. And then I ended up seeing like faces in my closet. And so it was like demonic faces in my closet. And I just remember laying in my bed and then hearing somebody breathing, just constantly breathing. And I'd hold my breath to make sure it wasn't, I wouldn't hear myself, and it just kept going. And I was freaking out really bad. And again, I had to take myself out of that room and situation and go put myself in a different room. And that pretty much solved the majority of it. I was still uncomfortable, but I just didn't want to be in my bedroom. My bedroom seemed like it was just full of evil at that point.

Heather noted after that experience she decided to take a three-year break. She said she is presently able to take mushrooms with confidence because she learned how to change the direction of her thoughts and experience, if they were to go down a dark path. When I asked Heather how she is able to change her experience, she responded: “I back up for a second, remind myself that I’m on hallucinations and, you know, that nothing's real, to just enjoy the trip.”

Both Jacqueline and Heather shared they were in an unhappy relationship during the time they had their difficult experience with mushrooms. Having a positive mindset is an important foundation in achieving a positive experience, and being in an unhappy relationship could create a negative state of mind which would affect the psilocybin experience. Jacqueline shared how her unhappy relationship could have affected her psychedelic experience: “I wasn’t aware at the time of how unhappy I was. Looking back at it, that trip could have been symbolic for my spirit dying in such a toxic relationship.”
The set (mindset) and setting (environment) can shape the experience with psilocybin mushrooms and other psychedelics. An established set and setting provide a foundation to allow for some control over the psychedelic experience. The value of a supportive set and setting has been the focus of research since the 1960’s (Leary, Litwin & Metzner 1963). All of my informants spoke about the importance of having a positive set and a comfortable and safe setting before ingesting psilocybin mushrooms, to encourage a positive experience. A positive set was described by informants as being in a good mood, and not having anything too serious on the mind. Geronimo explained how he has a positive mindset going into a psilocybin experience, which he believes affects the outcome: “...there is this anticipation of a good time, and so with that positiveness in my head, I think that perpetuated the positiveness.” Many informants shared how psilocybin magnifies both your surroundings and what is on your mind, as H.T. explained:

You're much more hyper-focused on anything, so whether that's a feeling, whether that's a leaf you just saw. Whereas in a normal state, you could be feeling something, and you would just kind of ignore that. And that's something you would push down and just go on with your life, but in an altered state, that's something that's going to be really important, and you're super focused on that, and that has to be dealt with in that moment. The hyper-focus, it could be a good thing, it could be a negative thing, depending on what's going on. Which, that's what so much of the human mind does, is cuts out everything. Because you can't think about the suffering, you can't think about everything that's going on. And so then opening up your mind to that, which psilocybin and those types of things do, that can be upsetting.
Some informants believed that an important part of creating a positive set was to have an intention before taking mushrooms, which could be used as a point of focus during the psychedelic experience. Intentions can be shaped by surroundings, significant others and societal messages. Aziza shared: “If you don't have an intention, you're blown around in this altered state, without a direction... What's really magical is intention drives your reality.” Aziza explained how having an intention creates a foundation for the mind to focus on during the psilocybin experience. Dustin also shared his opinion about the importance of having an intention along with the importance of checking in with himself before consuming psilocybin:

I check in with myself, that's always important, I think for anybody. And I think it’s important on a psychedelic experience to set intention, whatever it be, to have an intention for that experience. Because then you can go back and look at yourself and be like, why am I doing this? And you have a reason. If you don't have a reason for why you're doing something, the set and setting can be thrown off, because you're like, “Oh, I'm just doing this.” It could be something as loose as I'm doing this for the intention of self care or the potential for more introspection, or just even having fun. It can be that loose, just as long as you have that mentality going into it. Okay, I'm doing this for a reason. You know, not just letting it do me.

When I asked Dustin to further explain what he meant by checking in with himself he responded:

I mean, if you look inward to yourself, and you find yourself in a highly anxious state, or something like that, you might want to think twice. I mean, you don't want to do it if you're having a really difficult time with yourself, because it’s not gonna probably make it any less difficult. I mean, if you look into yourself and you have chaos in your mind, and you do something that's gonna potentially create more chaos. That's not the best idea.

My informants described how the setting was an integral part of encouraging a positive psilocybin mushroom experience. A positive setting varied depending on the
person’s preference, but the most common settings identified by my informants were music festivals, and being in nature. Steph is a 36-year-old female who has taken psilocybin around 15 times and declared “I would say generally speaking outdoors is better for me. And I think that's probably a common one. Really anywhere with the trees.” Nine of my informants preferred being with trusted friends, with five preferring to be alone or with only one other person; four informants enjoyed both equally. Summer described the importance of knowing where she is going to be and who she is going to be with before consuming psilocybin mushrooms. This was a frequent desire expressed by my informants. Summer expressed:

   I like to know where I'm going to be. I like to make sure that it's a safe spot, physically, that I know my surroundings, or at least I am with somebody who does. I want to make sure that I’ll be around folks that I trust, and possibly have some good music and activities nearby.

When taking mushrooms most of my informants preferred it to be planned rather than spontaneous, and part of the planning process was to ensure a desirable setting, along with preparing the correct dose of psilocybin for the desired effect. Bill shared planning for the correct setting was integral to his psilocybin experience:

   ...part of the plan is finding a music festival I'd love and that part of the planning is: securing it [the ticket], making the [mushroom] chocolates, having everything ready to go, you show up [at the festival], you get the campsite setup, you've got everything you need there to make you secure, and comfortable. You have your things, your coolers, it's got the drinks and food you like, and get your bed laid out. That's all become very ritualistic now, and then enjoying the show with the psilocybin and taking it there to share with people… I like starting with lesser dosages [of psilocybin], and you can go up from there. You can wind up eating a gram, and be like, “I'm good”, or you can decide to keep going from there and wind up eating three grams throughout the night.
Bill’s description of ritualistically preparing his setting for his psilocybin experience was consistent with Zinberg’s (1984) account of the importance of creating a comfortable setting. Before taking psychedelics, a ritual to encourage a positive set and setting could be meditation to create peace of mind and cleaning the house to create a comfortable space (Zinberg 1984). Zinberg (1984) suggested that the set and setting was an essential part of the preparation process before taking any psychedelic, in order to ensure safety and to discourage a difficult experience. Similar to my informants, Zinberg (1984) described nature as a preferable setting for taking psychedelics, and to be in a positive state of mind. Most informants thought mushrooms should be taken sparingly and on occasion. Alex shared his opinion about people who take mushrooms often:

“I’ve known people who [claim their] microdose is like an eighth (3.5 grams) a day, and that's abusing something. It could be going into that habitual form where you don't want to be in your current state [of mind]. I believe people need to deal with their current state of mind, but to be able to help them deal with their current state [of mind], sometimes you need to go to that place where it [mushrooms] takes you.”

Alex’s description of the need to go to an altered state to help deal with the current state of mind was a common account provided by my informants for why they continue to take mushrooms. Steph explained: “I think being in that altered state [with psilocybin] allows me to better navigate my normal state.”

For many of my informants being in a social setting was desirable. Geronimo explained why he enjoys sharing the psilocybin experience with his friends. He describes the mushroom experience as full of laughter and connection:

“When I do it with friends, I seem to get to that place of laughter faster, and [the trip] is more consistent when I have friends doing it too... Cuz they're laughing
too, and then you can almost see how they’re on the outside looking into themselves. And you get that experience, and they get your experience.

Cooley’s (Franks and Gecas 1992) notion of the looking-glass self can be used as a framework to better understand Geronimo’s account of how he believes his friends see his experiences while on mushrooms, and how he sees his friends’ experiences. For Geronimo, his perception of self becomes real based on how he imagines his friends see him. As stated earlier, Geronimo experiences epiphanies while on psilocybin, and he believes his friends see him going through that process of self-reflection, and he also believes that he is witnessing his friends go through the same process of self-reflection. For Geronimo, being able to see himself through how he thinks his friends are perceiving him is an important part of his mushroom experience.

Motivation to Continue Taking Mushrooms

My informants shared different reasons for why they continued taking psilocybin mushrooms, with some motivations depending on the desired experience at that time. There were three main motivational categories that emerged: recreational, therapeutic, and spiritual enhancement. For my informants, taking mushrooms recreationally was with the intention to “get high and have fun” in a social setting. The intention of taking psilocybin mushrooms therapeutically was to increase mental-health and personal well-being. Finally, the intention of spiritual enhancement was to take psilocybin mushrooms to get clarity on life issues, gain a deeper connection with nature, and to explore their
consciousness. Seven of my informants were motivated to take mushrooms for recreational purposes only, followed by seven informants who were motivated to take psilocybin for recreational, therapeutic and/or spiritual purposes depending on the context, and four of my informants were motivated to take mushrooms for both spiritual and therapeutic purposes only. For these four informants, therapeutic benefits and spiritual enhancement went hand in hand.

Of my seven informants who took psilocybin for recreational reasons only, most of them shared that they enjoyed drinking alcohol with the mushrooms. Geronimo explained that his reason to ingest mushrooms with his friends was to have fun, and in that social setting they would mix substances: “Oftentimes we'd be drinking alcohol and smoking weed with it too, so it wasn't always just the mushrooms.” Seven of my informants like to smoke cannabis with mushrooms, and seven informants shared that they drink alcohol to get drunk while taking mushrooms. H.T. explained: “I drink a lot of alcohol. And so when I take mushrooms, yes, I am still drinking.” Most of my informants did not like mixing alcohol with psilocybin mushrooms because they believed alcohol diluted the psilocybin experience, or took off the “sacred edge.” Mica explained:

I hear people talking about liking to combine beer or drinking to help mellow out the effect for them, but for the most part, my enjoyment has been trying to be more clear and pure to one substance at a time. That's how you would actually experience it [the psilocybin]. So most of my mushroom experiences are by themselves, if not with like a small amount of alcohol that may have made me make the decision to take them.

Although some informants believed alcohol diluted the psilocybin experience, the therapeutic qualities of the mushrooms may still be present. Interestingly, all of my
informants who claimed to take psilocybin mushrooms for only recreational purposes disclosed that their well-being was enhanced because of psilocybin. Havok takes mushrooms primarily for recreational purposes, but he has experienced significant personal fulfillment after positive psilocybin experiences.

I think I just feel like life isn't as bad as I thought it is. And sometimes I probably drink in excess to probably push some type of feelings down that I don't really want to feel. And then I just, after I have a good trip, I just feel less like I want to drink or maybe I feel less... depression, and I just enjoy. It's hard to tell how long it lasts, but I just feel like life is a lot more enjoyable and I should not be down. I should stop being down on myself or being down in general.

Experiencing an elevated mood after a psilocybin mushroom experience was a recurring theme among my informants regardless of their motivation. Some of my informants took psilocybin mushrooms therapeutically as a coping mechanism. Michael is a 39-year-old male who has taken mushrooms over 100 times. When answering the question as to why he continues taking mushrooms, he responded:

I consider [mushrooms] like the medicine I need to live in this world. Because it's just, life is kind of fucked up. You know, it's not supposed to be a rat race where our lives are revolved around going to work and making money and paying bills and all that shit. It's just kind of sometimes you have to remove yourself from that.

For all of my informants, the motivation to continue taking mushrooms stems from their fulfillment from attaining their sought-after psilocybin experience; whether it be an experience of fun and laughter or an experience of introspection and inner growth. The motivation also transpires from the aftereffects of a psilocybin experience. All informants disclosed that the day after taking psilocybin, they often have a positive mood, and for some informants that positive mood lasts for weeks or months.
Long Term Impacts of Experiences with Psilocybin Mushrooms

All of my informants shared how psilocybin mushrooms have therapeutically benefited them, and most of my informants reported spiritual fulfillment. Most of my informants shared that psilocybin inspired them to be a more compassionate, mindful, loving, and understanding person. Informants also reported feeling more connected with the environment and with animals. Most informants shared how the introspective experience with psilocybin allowed self-reflection so they more easily recognize and confront personal matters. I was surprised to learn how psilocybin positively impacted those who were motivated to take the mushroom for recreational purposes only. I assumed those who took mushrooms in a party setting would not disclose meaningful insights or report an improvement in well-being. I expected only those who took mushrooms for spiritual, and therapeutic purposes to benefit therapeutically or spiritually.

Recent psilocybin research is generally conducted in a therapeutic setting, and researchers often recommend that psilocybin be taken with a psychotherapist present to prevent adverse reactions, and to facilitate therapeutic outcomes. From my sample, it seems as though when psilocybin is taken recreationally it can also be therapeutically beneficial. Interestingly, my informants who described taking mushrooms for spiritual and therapeutic reasons learned over time how to enjoy and appreciate the experience of introspection, and self-reflection. This finding relates to Becker’s (2015) work on how the marijuana user learned how to enjoy the high, and by learning how to like marijuana’s
effects they continued their use. My informants who take psilocybin for recreational purposes also learned how to enjoy the psychedelic experience, and they learned how to navigate away from a difficult experience when needed.

Mushrooms helped informants to be more appreciative of and connected to nature. Alex shared how mushrooms helped him to be more mindful in general, and inspired an interest in nature:

It's changed me, it taught me to be more peaceful. And I think a lot of my love for nature came out. After I tried it a few times and that real connectedness with nature was really a big thing that got me into more gardening, and vegetables, and watching the [non psychoactive] mycelium grow throughout [my garden]. I've tried to practice a lot more organic gardening, and obviously not dumping and picking up trash is obviously a big thing. I was a cigarette smoker, eight years ago, and I remember flicking cigarettes out my window. I wish I could take back every cigarette I flicked out that window, cuz there's got to be 1,000 or more.

From the interviews it appears as though the introspective quality of the psilocybin experience is helpful for people to see themselves with more clarity in order to recognize unhealthy life choices and inconsiderate lifestyles. As noted earlier some of my informants recognized unhealthy life choices such as smoking cigarettes and three informants disclosed how mushroom experiences inspired them to quit littering. Sarah is a 26-year-old female who has taken mushrooms over 10 times. Although Sarah takes mushrooms for recreational purposes only, she shared how psilocybin helped her to attend to personal matters that were previously left unaddressed:

It taught me that I suppress a lot of things, and that I should just learn how to deal with things. I'm very much like a bottle or I bottle things in. I'm not very emotional, and when I take mushrooms, I do get emotional, mostly happy. But, I even notice when I am on mushrooms, I still try to suppress things that I don't want to think about, and I'm still bottling. But that's an issue that I've always had, and it's just, the mushrooms are just showing me that, that I need to learn how to
deal with things. But I've always been that way, I've always been a bottler or been a non-emotional person, even as a kid.

Self-reflective experiences were described by my informants regardless of how many times they had taken psilocybin. In other words, the psilocybin experience continued to be transformative between experiences. Perhaps this would not be the case for people who had only taken mushrooms a couple of times. Whereas Sarah shared her experience of becoming aware of a personal dilemma, other respondents shared how they received tools to better themselves. Steph declared how mushroom experiences helped her gain access to personal tools for healing.

Anxiety is a big one. Like getting that shit under control is fucking crazy. So it's like having these tools almost that I've kind of not solely developed through mushroom use, but definitely have shed a light on pathways on how to do those things.

Three of my informants shared how taking psilocybin mushrooms helps them to decrease anxiety. Aziza has microdosed for the past year to alleviate anxiety and shared “the anxiety is a lot more manageable... I learned how to manage my anxiety energy.” For my informants both macrodosing and microdosing psilocybin have been helpful to keep anxiety at bay.

The stories from my informants showed the process of being interested in mushrooms, to trying it for the first time, to their long-term commitment to taking mushrooms. Hearing about their experiences with mushrooms, how they prepare for a mushroom trip, and how their experiences with psilocybin have personally impacted them has been insightful to why some people choose to take psilocybin mushrooms long-
term. In the next chapter, I reflect on the implications and limitations of my research findings as well as future research directions.
DISCUSSION

My informants, who have chosen to take psilocybin mushrooms over a long period of time enjoy the psychedelic effects of mushrooms. The experience they seek differs with personal preference, but largely the experience wanted is usually the experience received. Unsurprisingly, every one of my informants had a positive first-time experience, which led them to try mushrooms again. The positive first-time experience helped them navigate and, in some cases, redefine later difficult experiences into positive ones that were personally fulfilling. It is possible that people who do not have a first-time positive experience may not want to try psilocybin again because they do not have a positive reference point that might inspire later experimentation.

Similar to Becker’s (2015 [1953]) research on cannabis smokers, those who take psilocybin may learn to like the effects and thereby become a longer-term user. If someone does not like how the psilocybin makes them feel they most likely will not continue to take it, whereas if someone likes the feeling they will continue. Additionally, some of my informants who expressed not wanting introspective experiences learned how to change the direction of their experience to attain a fun and sociable experience. This capacity to navigate and manipulate the psychedelic experience is learned with the continuation of ingesting mushrooms. Informants were able to shift their desired psilocybin journey from a recreational to a therapeutic, or a spiritual experience. Again, consistent with Becker’s (2015) research on cannabis users, it appears as though some of my informants learned to enjoy the introspective and mind-expanding qualities that
psilocybin mushrooms have to offer. Even those who did not enjoy introspective experiences still learned to appreciate the benefits of introspection in respect to personal well-being and self-betterment. Learning how to communicate about the psychedelic experience in a way that could be understood by others was also shared. Those who have never had a psychedelic experience may not know how to express what they saw or how they felt. Words such as *tracers* and *interconnection* may be learned after the psychedelic experience, but during the experience the knowledge of those words may not yet be established. Until they learned the relevant language, they had no way to explain their experiences.

My informants also learned through their consumption of psilocybin mushrooms the importance of set and setting. Zinberg (1984) discussed the preparation of a positive set and supportive setting as a form of social learning. He uses the term “ritual” to describe expected behavior before and during a psychedelic experience, and he used the term “social sanction” as shared values on how to take psychedelics. In regards to my informants ensuring a proper set and setting they prepared their inner and outer spaces in similar ways as Zinberg (1984). For some of my informants, part of their ritual to prepare their set was to have an intention for why they were ingesting mushrooms. Creating a comfortable space (setting), such as putting up their tent and having sufficient blankets, was part of their “ritual” to encourage a positive experience. Many of my informants believed in the “social sanction” that psilocybin mushrooms should be taken in or near nature for the most beneficial outcomes. Another common “social sanction” with my informants was to not take psilocybin mushrooms too often, and being mindful of the
dose, in order to maintain control of the experience. The ways in which my informants prepare their set and setting was very similar to what Zinberg found in the early 1980s. Obviously, having the proper set and setting is an integral part of the psilocybin mushroom experience, and has not changed much throughout the years.

Zinberg (1984) also discussed the difference in motivation between younger and older individuals who take psychedelics. In his work, older people who did psychedelics in the 1960s believed psychedelics should be taken only for spiritual purposes, and younger people who had taken psychedelics less than five years believed in taking psychedelics recreationally. This was not the case for my informants. Two of my informants had started taking psychedelics in the 1960s, and their motivation for taking psilocybin was opposite of each other. My findings are not consistent with what Zinberg observed.

It is noteworthy that my informants who did not seek a spiritual or reflective experience still reported how psilocybin mushrooms had beneficially and therapeutically affected them. The therapeutic qualities of psilocybin mushrooms are active even when taken recreationally, and when mixed with other substances. In other words, even when an informant’s intention is to take mushrooms for recreation they still may be benefitting therapeutically, and spiritually. Some of my informants who took mushrooms recreationally drank alcohol concurrently. My informants reported alcohol to dilute the experience to a degree. Those who took psilocybin for spiritual or therapeutic reasons only, never mixed alcohol with the mushrooms because they did not want to dilute the experience. They also wanted to feel the full effects of the mushrooms. However, there
were a handful of informants who took psilocybin recreationally who also preferred to abstain from alcohol. Although current scientific research with psilocybin recommends psilocybin to be taken with a psychotherapist to facilitate beneficial outcomes (Griffiths et al. 2011; Grob et al. 2011; MacLean, Johnson & Griffiths 2011), my sample suggests therapeutic benefits are generated even when taken recreationally.

My research contributes to the growing body of literature on psychedelics by including the voices and experiences of those who have taken psilocybin mushrooms long-term. My informants were interested in psilocybin before trying it because of stories they heard about the psychoactive mushrooms from both friends and family. My informants appeared to seek out peers with similar interests in psychedelics. Though there is a lack of research into the effect of peer influence on the initiation of experiences with psychedelics, prior studies into the influence of peers on cannabis use reveals that the decision to try cannabis was associated with peer selection more than peer socialization (Becker and Curry 2013). I observed a similar pattern from my interviews, though my sample is not generalizable. My informants perceived their experience to be significant, and then transformed that significant experience into reality. For many of my informants, their perceptions defined the outcome of the given situation. In other words, their objective reality was determined by my informants' subjective beliefs/perceptions about that reality. The psychedelic effects of mushrooms change the objective reality, making the subjective and objective realities more fluid with each other. The visual and auditory hallucinations produced by psilocybin thin the veil between what is objectively experienced and what is subjectively experienced.
There were a number of limitations to my study. Firstly, all interviews were conducted over zoom or on the phone. Some informants disclosed their discomfort talking over these platforms and therefore, may have restricted what they shared. There were five potential informants who declined to participate due to not wanting to share sensitive information over the phone or zoom. Also, I was unable to easily observe my informant’s body language during the interview which could have added to the data. Secondly, my interview data is unreliable because no two interviews were the same. Thirdly, it is possible informants were not honest in all their answers if they believed them to be socially undesirable.

I have identified two limitations to my study that could also be recognized as strengths. My sample size is small so the results are not generalizable, but my study provides greater depth of understanding unattainable with survey methods. Also, most of my informants were from my community and either knew me or knew of me, so their answers may have been different with someone they did not know, but I was able to easily establish a rapport with informants.

I recommend further research into non-clinical use of mushrooms. My research provides a roadmap of possibilities for a more focused study into how those who take psilocybin initiate use. For example, under what circumstances is peer selection more likely than peer socialization as precipitating factors shaping the onset of experiences with psilocybin? How does one make meaning out of the psychedelic experience? How do the perceptions of significant others shape one’s experiences with psilocybin? I also
recommend further investigations into the process of learning how to enjoy the different aspects of the psychedelic experience, such as introspection.

My informants were all very open about their experiences and showed their vulnerabilities to me, for which I feel honored. From their stories, psilocybin mushrooms have appeared to make them more compassionate and mindful people. If psilocybin mushrooms have the potential to create a more compassionate and respectful society, how are they still listed as a dangerous and illegal drug? My interviews revealed that experiences with psilocybin mushrooms do not conform to the drug war propaganda of psychedelics causing insanity, addiction, and social unrest. It is my hope that my research highlights the potential benefits of psilocybin in different contexts.
REFERENCES


APPENDIX

PSILOCYBIN MUSHROOM EXPERIENCE INTERVIEW GUIDE

Interview Guide

1. Tell me a little about yourself.
   Probes: Gender, age, race/ethnicity, education, employment status, occupation, marital status, children, living situation, religion/spiritual practice

2. Where did you grow up?
   Probes: enjoyment, reason for moving or staying

3. Please describe your relationship with nature and animals.
   Probes: time spent in nature, animal friends

Transition Questions

4. I would like to talk with you about your first psilocybin mushroom experience. Can you tell me about how you were first introduced to psilocybin?
   Probes: age, setting, circumstances, preparation, expectations

5. Why did you decide to try psilocybin for the first time?
   Probes: motivations, rationalizations, concerns, influential others

6. What do you remember about your first psilocybin mushroom experience? How did you know you were feeling the psilocybin?
   Probes: physiological and sensory effects, dosage, social interactions, psychological/emotional experiences, who were you with, what were the circumstances, rewarding or difficult experience

7. After your first experience, what made you want to take psilocybin again?
   Probes: motivation, influential others, expectations, desires

8. Approximately how many times have you ingested psilocybin mushrooms?
   Probes: dosage, timespan, frequency
9. What is your preferred method of ingestion?

   Probes: raw, gel cap, tea, infused with chocolate, mixed with food

Key Questions

10. How do you prepare for a psilocybin experience?

    Probes: food, setting, activities, intentions, future commitments, planned, spontaneous

11. How do you feel the day after your psilocybin experience?

    probes: mood, thought patterns, social interactions, activities, integration, typical & non typical

12. What would a perfect psilocybin mushroom experience look like?

    Probes: setting, feeling, effects - short and long term, activities

13. How do you make sense of your psilocybin experiences?

    Probes: visually, auditorily, mentally, emotionally, general theme, thought patterns, realizations/insights, feelings, social interactions, guided (ceremony, psychotherapy), typical & non typical

14. Tell me about a particularly memorable psilocybin mushroom experience.

    Probes: rewarding, challenging, satisfying, difficult, realizations, conversations

15. How has the psilocybin experience changed for you throughout the years?

    Probes: dosage, frequency, activities, intentions, integration

16. How do you think you have been affected by taking psilocybin?

    Probes: emotionally, spiritually, intellectually, personal relations, activities, lifestyle

Ending Transition

17. How would you compare the experience of being in an altered state to a non-altered state of reality?

    probes: preference
18. What do you think the motivations are of others who take psilocybin?

As we approach the end of the interview, is there anything you would like to add?