

FAVORABLE SB1009

My name is David Jun Selleh. I am a resident of Montgomery County, District 9A. I am a Licensed Clinical Professional Counselor, holding a Master of Arts Degree in Clinical Mental Health Counseling. I have organized and facilitated a variety of psychedelic education, harm-reduction, and peer-support events at the community level. I provide Psychedelic-Assisted Psychotherapy in Baltimore, MD, with sliding scale fees on a limited basis. I am also the son of a retired US Army Colonel, who served from 1978-2017.

I urge the committee to support SB1009 and the creation of Maryland's Task Force on Responsible Use of Natural Psychedelics.

In my work as a psychedelic-informed psychotherapist I have witnessed the utility of psychedelics as a tool for facilitating and accelerating healing, growth, and change. I have also personally experienced healing within my family system through psychedelics, which helped repair in the aftermath of a suicidal and treatment-resistant depressed brother, a high-conflict divorce, and the impact of my father's multiple deployments following the events of September 11th, 2001.

Psychedelic treatment options are coming--and by many definitions they are already here. Psychedelic substances have been used for millennia by global cultures in healing ceremonies. More recently, the FDA designated psilocybin as a "breakthrough therapy" for treatment-resistant depression. The Department of Defense is funding psychedelic research for military and veterans with PTSD and Traumatic Brain Injury. The scientific and medical communities currently have a wealth of research illustrating the safety and benefits of psychedelic treatment for suicidality, drug and alcohol addiction, chronic headache and pain, anxiety, eating disorder, and more. Psychedelics are considered the "cutting edge" in medical and mental health treatments. Furthermore, legislation increasing access to psychedelic substances has already been enacted in Colorado, Oregon, and Washington D.C., and numerous local jurisdictions, each with vastly different models of

Psychedelics work by helping the brain create new connections and change, called "neuroplasticity." Psychedelics are not addictive, and have been used to treat addiction. There is no lethal dose. There is no hangover, no withdrawal, and no dependence. Psychedelic-related injury is due solely to the dangers of lack of testing, impurities in supply, bad actors abusing power in the absence of above-ground treatment options, and lack of education of safe and appropriate environments for psychedelic use. Given emerging and ever-increasing support, many Marylanders want these new and promising treatment options.

Psychedelic medicine is not an "if," but indeed an inevitability. While the support of psychedelic medicines is already here, some have raised important concerns about *how* access and regulation will be implemented. Some have concerns about the medical industry inadvertently reducing access for people with lower socioeconomic status or limited insurance coverage, or pigeonholing patients into standardized treatment regimens that may not fit for everyone. Some

have concerns about the commodification of naturally occurring plants and fungi, and how private ownership and distribution for profit within the existing medical-industrial complex impacts the inalienable rights of humans to engage with nature and exert autonomy over their own brains, bodies, and consciousness. Some have concerns about the systems for appropriately licensing and supervising psychedelic treatment facilitators. Some have concerns about ensuring justice for, and restoring opportunities to, the people and marginalized communities who have been unjustly incarcerated or otherwise penalized for offenses that are inconsistent with the state of current science. Some have concerns about the significant population of people currently utilizing psychedelic substances responsibly but lacking proper education (about risks and benefits, safe and appropriate environments for psychedelic use), or a safe, controlled, and regulated market.

In service of addressing these and other concerns, Task Forces have been implemented in 6 other states, are being considered in 6 more, and illustrate the bipartisan support for these cutting edge treatment options. Task Forces have the distinct benefits of considering a diverse range of perspectives, ensuring inclusive understanding, and representing multiple interests, including public health, mental health, research, veteran affairs, law enforcement, drug policy, religious use, underserved communities, and more. Given Maryland's standing as a leading state for psychedelic clinical research, a Task Force would also enable Maryland to leverage *in-state* expertise. A Task Force is the best way to maximize public benefit, mitigate risks, and to research and recommend what model is best for the unique needs of Maryland.

I urge the committee to vote favorably on Senate Bill 1009 and support the creation of Maryland's Task Force on Responsible Use of Natural Psychedelics.

Thank you.

A handwritten signature in black ink, appearing to read 'DS', with a long horizontal flourish extending to the right.

David Jun Selleh
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