

**SB 1009.pdf**

Uploaded by: Amy Johnson

Position: FAV

## Support of SB 1009

Good Day. My name is Amy Johnson, I have been an independently licensed clinical social worker in Maryland and Washington, DC for over 13 years. I have been living and raising a family in Silver Spring, MD for the past 15 years. My professional area of focus is working with adult trauma survivors, supporting folks in understanding, meaning making and finding healthy, holistic paths beyond the painful lived experience of complex trauma(s). I have worked in a variety of mental healthcare settings including Community Mental Health, Rape Crisis Advocacy, Hospice and Palliative Care, Couples and Sex Therapy, Grief Counseling and over the past 3 years as a Psychedelic Harm Reduction & Integration Therapist and Coach. It is with this decade of direct services experience with trauma survivors that I provide this written testimony in support of SB 1009.

We are living through a Psychedelic Renaissance; however, the enthusiasm of these now more widely available modalities and interventions must be couched in the lived experience of those taking the medicine and facing an unregulated system of care.

A Personal share: I've been asked many times over the past few years to share client stories, but I think it more profound to share my own. Following a sexual assault in 2021 I was overwhelmed and unmoored; I couldn't eat, couldn't sleep, couldn't work. As a trauma-informed victim services provider I knew all the right people to seek support from, but unable to work I couldn't afford them, or because of our personal connection was unable to work with them. 10 years in complex, trauma-informed mental healthcare and I too fell through the gaps. I developed destabilizing symptoms, the worst of which were spontaneous vomiting, losing 30lbs in 6 weeks, and experienced near constant suicidal imagery; I was terrified. I could barely function and was consumed with ruminating thoughts around panic, shame, and an unshakable fear.

After reaching out to many providers, I made a last-ditch effort and contacted a ketamine clinic. I met criteria for care, was given IV ketamine, left alone in a medical office room for about 2 hours and asked to come back when ready. Despite my questions, (what was ready, how long will I need to do this, will I be ok?) - the medicine worked. After 3 treatments the more alarming of my symptoms relented, I could eat, I began to sleep through the night, no more imagery. While grateful for the care (and I am deeply grateful for the care), it was not enough. No longer suicidal I had to recommit to my life; putting the pieces back together truly is the hardest part of trauma recovery. To do this I needed an integration therapist or coach, and I could not find any. Over time, as my system settled and I began to heal I entered Psychedelic Studies with the goal of becoming the provider I needed, BIPOC and trauma informed. Throughout my training, community organization, interdisciplinary care models, dismantling of oppressive systems, mindfulness, the values of time and attention came into ever greater focus.

I truly believe psychedelic medicines hold the potential to support the healing of many, but it is the interpersonal healing work, community reconnections, collaborative care designs, dedication of trauma-informed supports and the time it takes to develop new, healthier patterns that is just as important as the medicine we ingest. For so many, like me, the medicine is the beginning of a healing journey. I believe SB 1009 is a beginning, and I encourage you all to vote in favor of this renaissance.

Respectfully Submitted,

Amy Johnson, LCSW-C/LICSW, PHRI

03/13/2024

# **A Coop Testimony 2024 Senate.pdf**

Uploaded by: Andrew Coop

Position: FAV

Good afternoon. My name is Andrew Coop, and I hold a doctorate (PhD) from the University of Bristol in the UK. I have worked on the chemistry and pharmacology of substances with the potential for abuse my whole career for which I received significant NIH funding. I am now the Associate Dean for Graduate Programs at the University of Maryland School of Pharmacy. My recent focus has been overseeing six courses in our Masters in Medical Cannabis Science and Therapeutics program, including a course on medical psychedelics, and I have worked with the US Department of Justice as an expert witness in criminal trials concerned with psychedelics.

**I support SB1009 - Task Force on Responsible Use of Natural Psychedelic Substances.**

Natural psychedelic substances have been used for millennia, and rose to wide prominence in the middle of the last century. Although associated with the counterculture, much research was performed on the agents, especially at institutions in Maryland. Several psychedelic substances are already FDA approved showing they can be safely used. The natural psychedelic substances named in this Bill have all shown to be beneficial in the treatment of a wide range of mental health conditions, including PTSD, depression, substance use disorder (including smoking), and also for the treatment of chronic pain. These are areas of critical need, as current treatments can lack efficacy, and many of our fellow citizens of Maryland suffer tremendously.

Importantly, there are clinical trials funded by the National Institutes of Health (NIH) concerned with the safety and beneficial effects of psychedelics, demonstrating the potential seen by the federal government. A search showed 54 such trials in Maryland. Studies have shown a safety profile that is almost unheard of, and low abuse potential (read: addition, dependence); many states already have religious exemptions for dimethyltryptamine and the widespread use shows their safety.

One area where education is critical is the difference between the natural source (plant, such as peyote) and the active substance (mescaline). An analogy illustrative of this is coffee/caffeine: coffee comes from coffee beans (plant), but the active substance is caffeine.

Scientists have shown the effects are almost certainly due to what is called neurogenesis and neuroplasticity, after activating the brain's serotonin system – this is the same system through which many currently approved antidepressants work. Mental health conditions are chronic diseases of the brain, where connections between brain cells (neurons) are different - psychedelics create both new neurons and “correct” connections between the neurons. This is fascinating science, and explains why so many mental health conditions can be treated with natural psychedelic substances.

Product quality is a critical component of safe access to these medications by all citizens of Maryland – we need regulations to prevent unregulated (and potentially unsafe) products. The program we created at the University of Maryland shows my commitment to education, and education is a critical component of this Bill. I fully support SB1009.

Sincerely,



Andrew Coop, Ph.D.  
Professor and Associate Dean for Graduate Programs  
University of Maryland School of Pharmacy  
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410 706 2029  
[acoop@rx.umaryland.edu](mailto:acoop@rx.umaryland.edu)

Home Address:  
9462 Ridgeview Drive  
Columbia, MD 21046

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Resources:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6851782/>  
<https://www.science.org/doi/full/10.1126/sciadv.abp8283>  
<https://pubmed.ncbi.nlm.nih.gov/32098487/>  
<https://reporter.nih.gov/search/GQyhb6SXwEG-8OMfl18azA/project-details/10187739>  
News release: <https://www.hopkinsmedicine.org/news/newsroom/news-releases/johns-hopkins-medicine-receives-first-federal-grant-for-psychedelic-treatment-research-in-50-years>  
<https://psychedelicinvest.com/psychedelic-laws/>  
<https://nida.nih.gov/news-events/meetings-events/2022/01/nih-workshop-psychedelics-therapeutics-gaps-challenges-opportunities>  
<https://journals.sagepub.com/doi/abs/10.1177/0269881114548296?journalCode=jopa>  
<https://jamanetwork.com/journals/jamapsychiatry/article-abstract/2772630>  
<https://www.nature.com/articles/s41591-021-01336-3>  
<https://www.nature.com/articles/s41593-023-01316-5>  
<https://www.nature.com/articles/s41386-022-01389-z>  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10661823>  
<https://clinicaltrials.gov/search?term=psychedelic&locStr=Maryland&country=United%20States&state=Maryland&checkSpell=>

**FAV - SB1009 - MCA.docx.pdf**

Uploaded by: Andrew Garrison

Position: FAV



Thursday, March 14, 2024

The Honorable Pamela Beidle  
Chair, Senate Finance Committee  
3 East  
Miller Senate Office Building  
Annapolis, MD 21401

**RE: Senate Bill 1009 – Task Force on Responsible Use of Natural Psychedelic Substances - FAV**

Dear Chair Beidle -

Senate Bill 1009 (SB1009), establishes a task force to study the responsible use of natural psychedelic substances. This task force is tasked with studying and making recommendations in a report to the General Assembly on or before December 15, 2025. As introduced, a seat on this task force is allocated to the Maryland Cannabis Administration (MCA), and the MCA is additionally responsible for staffing the task force. The MCA supports the efforts, research, and report outlined in SB1009.

The MCA believes that it is well positioned to staff and support the task force. The MCA led the State's recent transition from a medical cannabis program to the adult-use program and has the necessary experience in developing regulatory frameworks for substances that have previously been banned, restricted, or otherwise highly regulated under federal and State law.

I hope this information is useful. If you have any questions or would like to discuss this further, please contact me at (410) 487-8069 or [william.tilburg@maryland.gov](mailto:william.tilburg@maryland.gov) or Andrew Garrison, Chief of the Office of Policy and Government Affairs at (443) 844-6114 or [andrew.garrison@maryland.gov](mailto:andrew.garrison@maryland.gov).

Sincerely,

A handwritten signature in blue ink that reads "William Tilburg". The signature is written in a cursive style and is followed by a long, horizontal flourish.

Will Tilburg, JD, MPH  
Director, Maryland Cannabis Administration

cc: Members of the Senate Finance Committee

# **2024-03-13 Dr. Brian Peacock - Written Testimony S**

Uploaded by: Brian Peacock

Position: FAV



Brian C. Peacock, Psy.D.  
620 Reedbird Avenue  
Baltimore, MD 21225

Peacock Psychology, LLC  
1414 Key Highway, Suite 300P  
Baltimore, MD 21230

Esteemed Members of The Maryland Senate:

My name is Dr. Brian Peacock, and I am a licensed clinical psychologist in Maryland. In addition to serving patients hospitalized in mental health crises and providing diagnostic evaluations, **I have dedicated my research to understanding the role that psychedelic-assisted treatments have in advancing mental health treatment.** I reviewed more than 1,100 scientific articles to understand the effects of psychedelic medicines, their safety profile, and their effectiveness for different conditions. As an expert in psychedelic-assisted treatments, I unconditionally support SB1009 to establish a task force to investigate the responsible use of natural psychedelic substances in Maryland. **My research shows these compounds offer significant mental health benefits to Marylanders while posing minimal risk. At this time, it is prudent to investigate how these medicines can be responsibly made available.**

The task force established by SB1009 will investigate four specific natural psychedelic substances: psilocybin and psilocin (derived from magic mushrooms), non-psychoactive mescaline (derived from cacti), and dimethyltryptamine (derived from many plants, some of which are likely in your backyard). Each of these compounds has been used for millennia by indigenous people with **medical studies from the last century demonstrating an extraordinary safety record**, far better than most pharmaceuticals. Hundreds of clinical studies from leading research institutions—including Johns Hopkins University, University of Maryland, and the VA—have shown these natural psychedelics to be **extremely effective for treating intractable mental health conditions including severe depression, suicidality, substance use disorders, pain conditions, headache disorders, and anxiety in terminal cancer patients, among others.** Some natural psychedelics have also been shown to increase general well-being, even when taken in low doses that do not impair cognition or produce perceptual effects (micro-dosing).

At present, the only psychedelic that is legally available in Maryland is ketamine, a synthetic Schedule-III drug prescribed for treatment-resistant depression and other mental health indications. Ketamine is fast-acting, producing fast results. Unfortunately, these results do not last, and re-administration is needed. While ketamine treatment has been life-changing and life-saving for many patients, I have serious concerns regarding the addictive potential and cognitive damage caused by long-term, ongoing ketamine treatment. Still, ketamine fulfills a vital role in treating otherwise debilitating and intractable mental health conditions. **SB1009 gives providers and patients alternate treatment options that are equally or more effective than ketamine but are more durable, have fewer side effects, and show little to no potential for addiction.** I urge you to consider the importance of having options regarding the choice of psychedelic-assisted treatment, given the uniqueness of each patient suffering from mental distress.

**The natural psychedelic substances to be investigated by the task force are non-addictive and are in fact anti-addictive in many cases.** With an ongoing opioid crisis in Maryland, natural

psychedelics are poised to be part of the solution. A major driver of the opioid crisis is the unavailability of effective medications for chronic pain other than opioids. Psilocybin shows significant promise in relieving debilitating pain conditions while presenting minimal risks. **Psilocybin alters pain perception by helping to reshape synapses to better cope with pain while reducing inflammation. As a treatment for addiction, psilocybin is effective in treating alcoholism and tobacco use disorder.** Other natural psychedelics show incredible promise in helping patients to discontinue opioid use while minimizing withdrawal symptoms.

**Based on my extensive research and experience as a mental health clinician, I believe that SB1009 is an essential step in improving the mental health care available to Marylanders.** I am asked by patients all the time how they can obtain the psychedelic-assisted treatments that they desperately need. **Sadly, I have few options to offer beyond ketamine or expensive travel to jurisdictions** where psychedelic treatments are legal. As you consider this issue, remember that **SB1009 is only a task force** from which experts in healthcare, law enforcement, veteran affairs, indigenous policy, and others will generate recommendations for future legislation. The task force will make an informed recommendation considering the safety and risks of psychedelic availability and the advantages. **For the benefit of your constituents, I urge you to vote ‘yes’ to SB1009.**

Sincerely,

Dr. Brian C. Peacock

Licensed Clinical Psychologist (Maryland #07046)

# **OSE Support for Task Force on Responsible Use of N**

Uploaded by: Courtney Davis

Position: FAV



March 13, 2024

Honorable Chair Pamela Beidle  
Chair, Senate Finance Committee  
3 East  
Miller Senate Office Building  
Annapolis, Maryland 21401

Dear Chair Beidle, Vice Chair Klausmeier, and Members of the Senate Finance Committee:

Testimony in support of SB1009 - Task Force on Responsible Use of Natural Psychedelic Substances. This bill establishes a task force to study the responsible use of natural psychedelic substances and make recommendations regarding any changes to state law needed to create a Maryland Natural Psychedelic Substance Access Program that enables broad, equitable, and affordable access to psychedelic substances. The Office of Social Equity supports the goals of this task force and specifically would like to see the task force recommend a framework for psychedelics that includes input from members of the indigenous community and other marginalized groups.

Our office is currently charged with supporting an adult-use cannabis market that encourages full participation from communities that have been disproportionately impacted by the war on drugs. In line with this dedication, we are willing to extend our support to the task force, facilitating a seamless transition from the classification of a controlled substance to one that addresses the distinct needs of Maryland.

I hope this information is useful. If you would like to discuss this further, please contact me at (443) 610-1666 or [audrey.johnson1@maryland.gov](mailto:audrey.johnson1@maryland.gov) or Courtney Davis, Deputy Director at (443) 610-1730 or [courtney.davis@maryland.gov](mailto:courtney.davis@maryland.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "Audrey Johnson". The signature is fluid and cursive, with a long horizontal stroke at the end.

Audrey Johnson  
Executive Director, Office of Social Equity

**SB1009\_MHAMD\_FAV.pdf**

Uploaded by: Dan Martin

Position: FAV

**SB 1009 Task Force on Responsible Use of Natural Psychedelic Substances**

Finance Committee

March 14, 2024

**Position: SUPPORT**

Mental Health Association of Maryland (MHAMD) is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health and substance use disorders (collectively referred to as behavioral health). We appreciate the opportunity to provide this testimony in support of Senate Bill 1009.

SB 1009 establishes a task force to study and make recommendations related to the use of natural psychedelic substances.

In 2015, MHAMD launched [BrainFutures](#), a national nonprofit dedicated to improving human outcomes by assessing and advancing practical applications of new scientific understanding of the brain. BrainFutures brings together diverse stakeholders, policymakers, funders, innovators and influencers to accelerate national adoption of effective practices for both brain health optimization and the treatment of mental health and substance use disorders.

In 2021, BrainFutures launched a three-part issue brief series and coalition-building effort focused on psychedelic-assisted therapy.<sup>1</sup> These therapies hold promise for treating some of the most intractable mental health conditions, including post-traumatic stress disorder, depression, and alcohol use disorder. With studies at top research institutions like Johns Hopkins, New York University, and Imperial College London showing compelling results, psychedelic medicine is rapidly gaining broad public attention.

At the same time, the complexity of issues surrounding the equitable adoption of these treatments – in particular, around how to ensure successful adoption within the behavioral health field – is significant. Professional practice guidelines, training standards, and unified reimbursement strategies that will enable providers to receive equitable reimbursement from payers for delivering psychedelic-assisted therapy are all major policy areas that must be considered and defined.

The task force established by SB 1009 could help determine how best to responsibly advance the use of psychedelic substances in a responsible, safe, equitable, and data driven manner. For this reason, MHAMD supports this bill and urges a favorable report.

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<sup>1</sup> <https://www.brainfutures.org/mental-health-treatment/psychedelic-assisted-therapy-pat/>

# **FAV SB1009 - David Selleh.pdf**

Uploaded by: David Selleh

Position: FAV

## **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  
MA, NCC, Licensed Clinical Professional Counselor  
13609 Lewisdale Rd,  
Clarksburg, MD 20871

**SB1009 FAV.pdf**

Uploaded by: Deborah Servetnick

Position: FAV

**SB1009 FAV**

**Deborah Servetnick, 2916 Smith Avenue,  
Pikesville, MD 21208**

I am Deborah Servetnick. I live in Pikesville. I hold a Masters in Education, I've been a death doula since the AIDS epidemic, and I founded the nonprofit ServeMedicine.

I'm asking for your support of SB 1009.

I was diagnosed with Stage 3 breast cancer in 2011, and in 2012 I was a participant in the JHU Psilocybin in Cancer Study. I got so sick from my treatment, I wanted to die. I stopped chemo against medical advice - the side effects were awful - I couldn't walk, I could barely finish a sentence, I couldn't hold a pen or type which made returning to my job as a Baltimore County high school teacher traumatic. Chemo and radiation side effects lasted years; some I have to this day.

I was hard to live with, and when my 12 year old daughter and I were Christmas shopping she said, "Mom, I know you wanna die because you keep walking in front of the cars."

I knew I needed help.

It's been 12 years and I know that JHU psychedelic study saved my life. My life is nothing like it was before my diagnosis. My family told me I was easier to live with, chemo brain improved, and I felt joy. I stopped living with the fear of cancer.

We have decades of studies demonstrating how beneficial psychedelics can be in resolving anxiety and depression, treating PTSD, and in making people feel connected to spirit and nature. But

studies cannot accommodate all who have a life threatening illness or EOL diagnosis.

Had I stayed on chemo I would be dead.

Psychedelics help me see the value of my life; they didn't give me the side effects that I had from the treatment and they didn't require me to use them for an extended period of time. Those of you who are using medicine requiring a daily dose or multiple doses a day would be surprised to see how efficacious psychedelic medicine can be and how sustainable the results of treatment are.

Psychedelics are still classified Schedule 1. Let's not make the same mistake we did with cannabis taking decades to move forward.

# **Eileen Brewer Testimony SB 1009.pdf**

Uploaded by: Eileen Brewer

Position: FAV

## **Support for SB1009**

Good afternoon. My name is Eileen Brewer, I live in Columbia Maryland and I'm here to ask you to support SB 1009. I am the board president of Clusterbusters, a nonprofit organization that supports people with cluster headache, one of the most painful conditions known to medicine. For the past 20 years, Clusterbusters has been collaborating with researchers at leading universities, including Harvard and Yale, to prove that psychedelic substances like psilocybin are some of the most effective treatments for cluster headache. Because of our education and work, thousands of people with cluster headache are safely and effectively taking natural psychedelic medicines in their homes.

Psychedelics are substances that, when ingested by people, cause altered perceptions. Many who try them say that they come away with a deeper understanding of the world and their place in it. The substances listed in this bill include psilocybin, a compound in some mushrooms, mescaline, a compound in some cacti, and DMT, a compound found in humans, some other animals, and many plants.

These substances are basically impossible to overdose on and the risk of addiction is very low. However, they are powerful and there are many considerations for how safe access can be implemented. A Task Force of experts is an effective way to review research and approaches of other states and make recommendations for Maryland policies.

Public support for psychedelic access is widespread and growing. In these partisan times, it's noteworthy that many of the psychedelic bills in other states have garnered bipartisan and overwhelming support. The House version of this bill passed yesterday 136-1.

I'm not just a policy advocate for psychedelic substances, they have transformed my life. I am sitting before you today without pain after living with it constantly and relentlessly for more than 30 years. I tried to take my life twice during that time to escape the suffering. I didn't have much of a life during those times anyway. The work of Clusterbusters and others in the psychedelic space combined with personal exploration led me to find a treatment that works and a life worth living, but I had to break the law to do it. No one should have to risk going to jail for trying to heal. Prohibition and the War on Drugs is a failed experiment and we need to now look to common sense education and policies to help people have safe access to treatments for

medical and mental health purposes, as well as the freedom of spiritual and personal growth that some find with these substances.

# **FAV Testimony for SB1009-Task Force on Responsible**

Uploaded by: Hannah Glassman

Position: FAV



## **FAV Testimony for SB1009-Task Force on Responsible Use of Natural Psychedelic Substances**

My name is Hannah Glassman, I'm a resident of Columbia, MD, an active duty military spouse, and a practicing licensed psychotherapist trained in psychedelic assisted therapies. I support SB1009.

Personally, a psychedelic experience saved my life. It bought me time to recover from a life threatening eating disorder and a planned suicide. This eventually led me to helping others heal.

Eating disorders and many other mental illnesses are rooted in psychological rigidity. Clinical trials overwhelmingly show that psychedelics increase psychological flexibility.

Marylanders have been and are seeking therapy with these substances for a range of mental health conditions. Under the current laws, as a licensed psychotherapist, I can only act to reduce harm. I prepare clients for their independent use of psychedelics and then I help them make sense of what they've experienced. Unfortunately, I cannot be there with my clients when they take these substances, despite their desire for support. When I reply "I cannot legally do that" to their request, sometimes they "go underground" and work with a facilitator that may not be adequately trained and where there is no oversight of the work they do.

Harm can occur without proper education for patients and training for facilitators. While I believe that people can safely independently use psychedelics, they are at risk of harm while in an altered state. For example, they may consent to something they otherwise would not. Therapists and facilitators working with people under the influence of psychedelics should be properly trained and a review board should be able to investigate complaints. The Task Force created by the bill will study and make recommendations for training and oversight requirements that will increase the safety and efficacy of psychedelic-assisted therapy.

The Task Force will also be responsible for recommending a system that enables broad, equitable, and affordable access to natural psychedelic substances. This approach is critical to ensure that underserved, over-incarcerated, and chronically traumatized communities in Maryland will have access to psychedelic medicines. This is an opportunity to help marginalized communities heal, including veterans.

This isn't a partisan issue as data shows both Republicans and Democrats overwhelmingly believe making these substances accessible is "morally right." Freedom to heal in our own country is morally right, yet many veterans have to leave the country to get the treatment they need to survive, that they deserve.

I worry about my husband's future care once he leaves the Navy. I won't speak to his current or past struggles publicly, but I can certainly say that I would feel much more comfortable knowing these substances could be treatment options when others have failed or have disappointed. I worry about my friends and family with combat trauma and traumatic brain injuries, some with early onset dementia due to special operations work. Without a task force, I worry that help won't get to them soon enough.

**FAV Testimony for SB1009-Task Force on Responsible Use of Natural Psychedelic Substances**

In closing, I am in full support for establishing a task force to protect Marylanders from undue harm while investigating the potential benefit for Maryland's biological, social, psychological, and fiscal health. Please vote in favor of SB1009.

Thank you all for your attention and consideration.

Hannah Glassman, LMSW  
10709 Faulkner Ridge Circle, Columbia, Maryland, 21044

**SB1009.pdf**

Uploaded by: Ilona Kabara

Position: FAV



**Mission:** *To improve public health in Maryland through education and advocacy*

**Vision:** *Healthy Marylanders living in Healthy Communities*

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**SB1009: Task Force on Responsible Use of Natural Psychedelic Substances**

**Hearing Date: 03/14/24**

**Committee: Finance**

**Position: SUPPORT**

Chair Beidle, Vice Chair Klausmeier, and Members of the Finance Committee:

Thank you for this opportunity to testify in support of SB 1009, sponsored by Senator Feldman. SB 1009 is a proposed bill that will establish the Task Force on Responsible Use of Natural Psychedelic Substances. This task force's purpose is to study and make recommendations about the use of natural psychedelic substances. The importance of this task force is underscored when looking at how prevalent the usage of natural psychedelics is. In a 2022 study looking at data from the National Survey on Drug Use and Health (NSDUH), it was found that psychedelic usage has increased from 0.9% in 2002 to 4% in 2019.<sup>1</sup> This statistic is striking as it demonstrates that psychedelics are being increasingly used amongst the U.S. population.

In addition, the majority of those who reported the use of psychedelics were individuals between the ages of 18 and 25. It was also observed that an individual's perception of perceived risk has declined across all age groups examined.<sup>1</sup> Instilling a task force is pertinent in promoting safe and informed use. Since the majority of those who reported usage are teenagers and young adults, this is especially crucial as long-term risks are associated with these substances.<sup>2</sup>

Regulations are also needed as psychedelic substances are becoming more commonplace and less stigmatized in the medical industry. "Psychedelic medicine" is finding a place in psychology as medical professionals employ psychedelics to treat conditions such as depression, anxiety, and post-traumatic stress disorder.<sup>3</sup> Psychedelics also have been implemented in improving one's well-being and promoting spirituality (e.g., ayahuasca).<sup>4</sup> Ultimately, a task force is needed to make recommendations for safe clinical practice and promote safe handling of these substances in cultural and spiritual settings.

In conclusion, the Maryland Public Health Assembly strongly encourages the Maryland General Assembly to pass this bill. The implementation of this bill would be crucial in promoting safe, controlled, and informed access to natural psychedelic substances.

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*The Maryland Public Health Association (MdPHA) is a nonprofit, statewide organization of public health professionals dedicated to improving the lives of all Marylanders through education, advocacy, and collaboration. We support public policies consistent with our vision of healthy Marylanders living in healthy, equitable, communities. MdPHA is the state affiliate of the American Public Health Association, a nearly 145-year-old professional organization dedicated to improving population health and reducing the health disparities that plague our state and our nation.*

**Maryland Public Health Association (MdPHA)**

**PO Box 7045 • 6801 Oak Hall Ln • Columbia, MD 21045-9998 GetInfo@MdPHA.org**

**[www.mdpha.org](http://www.mdpha.org) 443.475.0242**

**References:**

<sup>1</sup>New Study Estimates Over 5.5 Million U.S. Adults Use Hallucinogens. (2022, August 18). Columbia University Mailman School of Public Health. <https://www.publichealth.columbia.edu/news/new-study-estimates-over-5-5-million-u-s-adults-use-hallucinogens>

<sup>2</sup>Buffo, J. (2020). Long-Term LSD Side Effects: Bad Trips, Overdosing, & Microdosing. American Addiction Centers. <https://americanaddictioncenters.org/lsd-abuse>

<sup>3</sup>Tupper, K. W., Wood, E., Yensen, R., & Johnson, M. W. (2015). Psychedelic medicine: a re-emerging therapeutic paradigm. Canadian Medical Association Journal, 187(14), 1054–1059. <https://doi.org/10.1503/cmaj.141124>

<sup>4</sup>National Institute on Drug Abuse. (2023, April). Psychedelic and Dissociative Drugs. National Institute on Drug Abuse. <https://nida.nih.gov/research-topics/psychedelic-dissociative-drugs>

# **Harrison supporting SB1009.pdf**

Uploaded by: JOHN HARRISON

Position: FAV

## **In favor (FAV) of SB1009**

John Harrison  
17212 Hobble Bush Ct  
Derwood, MD 20855

Hello, my name is John Harrison. I am in favor of SB1009.

I've been a Maryland resident for 43 years. I am 66 years old and recently retired from the federal government after devoting 24 years of my life protecting public health and safety.

Just prior to realizing our hard-earned retirement dreams, my wife and I were defrauded out of my federal government retirement fund, plus the value of our home, which was already paid off. The moment I realized that we lost all of that money (over \$1.2M) and that our life-long retirement plans suddenly vanished, I became so distraught that I started shaking uncontrollably. With the help of my wife, I soon met with a psychiatrist who immediately prescribed Prozac and Gabapentin.

With no initial relief from those medications, the psychiatrist continued to increase the dose of both. With each dosage increase, my situation continued to worsen, and ending my life became an increasingly attractive solution. I could no longer bear the level of anger, anxiety, guilt, personal failure, resentment, regret, etc., and the side effects of the medications destroyed all remaining sources of joy.

Desperate for any help, I went to a local cannabis dispensary. But because of my security clearance, I could not risk taking any of the dispensary's potentially helpful products because I would have to continue to work for many more years just to pay the bills, and the next drug test would end my ability to do so. If that happened, there's no telling what I would have done, or how many other souls would have been severely impacted. Fortunately, the dispensary employee shared with me that he had treatment-resistant depression which he was finally able to overcome through the use of psilocybin mushrooms, something that my employer's drug test would not detect. Finally, a gleam of hope.

So, there I was, a faithful public servant entrusted with protecting public health and safety on a national scale, having to seek out an uncontrolled illegal substance from some stranger, who by selling me psilocybin would also be committing an illegal act, of which I would be complicit. On the other hand, this nation's health care system failed me once again, but this time my life was at stake, and this appeared to be the only viable option left, so I pursued it while deeply regretting having to do so.

Luckily, I found a wonderful person who at great personal risk responsibly administers psilocybin during a deeply spiritual ceremony. She assured me that this sacred plant medicine would reveal to me what I needed to know about my life and what is truly most important. And it did! The revelations during this sacred ceremony were quite vivid, cathartic, and life-saving. This also introduced me to microdosing psilocybin (which is taking psilocybin at sub-perceptible levels) which just made me want to get things done and to live life more fully! A true gift from mother earth except that it has been deemed to provide no beneficial medical use. I imagine that millions of this nation's citizens would disagree.

There is a growing culture in Maryland that is recognizing the benefits of responsible and properly administered doses of psilocybin, along with realizing the benefits of microdosing. And, more and more highly worthwhile citizens of Maryland are consciously willing to take the legal risks of using psilocybin. That's because the benefits to the person consuming psilocybin are so great. And please recognize that those benefits, in the form of motivation and compassion, ripple out to all those around that person.

Because of my past experience with psilocybin, I became a more grateful, loving, positive, and supportive person, and we finally started enjoying our retirement.

Please give this matter your utmost consideration and please vote in favor of SB1009. Thank you.

# **Testimony MD senate.pdf**

Uploaded by: John Rhead

Position: FAV

## Supporting SB1009

I moved to Maryland from California in 1971, intending to stay only a few years before returning to either California or Colorado. I am still here.

What drew me to Maryland over 50 years ago was the Maryland psychiatric Research Center (MPRC), the only research facility in the United States for the use of psychedelic compounds that had survived Richard Nixon's "War on Drugs." I had just finished my PhD in psychology at Stanford and was fascinated by the amazing research results using psychedelics that had come out in the preceding 10 years. I worked there for 6 years, until the psychedelic research was discontinued in 1971. During that time I was a state employee, advancing from Psychologist I, Doctorate to Psychologist III, Doctorate while picking up a various certification and licensure credentials.

One of the requirements for working as a psychologist in the psychedelics research program (called "Clinical Sciences" at the time) at MPRC was having a personal LSD session conducted by two of the existing staff clinicians. That experience, combined with the published scientific results of the research being conducted at MPRC, cemented my interest in doing research with psychedelics and my belief that such research could result in the alleviation of suffering for a number of conditions.

I left the MPRC in 1977 and since then have been a program director at a private psychiatric hospital, worked as a psychological consultant in the state prison system, provided family therapy at a state-run school for emotionally disturbed children, been on the faculty of the University of Maryland School of Medicine, and have had my own private practice for over 40 years.

Although I have refused to provide direct psychedelic-assisted psychotherapy to my private practice clients, I have supported them when they have chosen to undertake some work with psychedelics as an adjunct to their ongoing psychotherapy with me. My decision to refrain over the years from providing psychedelic-assisted psychotherapy has been based primarily on my desire to protect my psychology license.



Since the recent renaissance in research with psychedelics all of the positive outcomes my MPRC colleagues and I published 50 years ago have been replicated and enormously expanded. Not only have positive outcomes been documented for a wide variety of mental health issues, but treatment procedures have been refined and expanded, leading to even better outcomes.

The one caveat I want to offer has to do with the treatment procedures mentioned above. While many people report taking psychedelics alone or with friends and having positive experiences, I think this is risky. I recommend that a competent professional assist in the preparation for the psychedelic journey, be present during the journey itself, and assist in subsequent sessions to help integrate the powerful experiences that the journey produced. I believe that only in this way can we maximize the long-term positive results of this kind of treatment.

John C. Rhead, Ph.D.

5405 Purlington Way

Baltimore, MD 21212

# Supporting HB0548.pdf

Uploaded by: Lauren Going

Position: FAV

## **Supporting HB0548**

Good afternoon,

My name is Lauren Going, LCSW-C. I am in support of SB1009 in its current format.

I've been a Maryland resident for 19 years and own a home in Baltimore City. I am a licensed clinical social worker and own a psychedelic assisted therapy practice- Inner Path Wellness- in Baltimore city. We are the first psychedelic assisted therapy practice in Baltimore. I am also a psychedelic assisted therapist and psychedelic integration specialist.

I opened Inner Path Wellness and went into this work because I have seen psychedelic assisted therapy be an extremely effective treatment for PTSD, Major Depressive Disorder, and Anxiety Disorders, among many other hard to treat mental health conditions. In doing this work, I have witnessed profound shifts and positive changes in my clients. I have dedicated my life to this work because I have witnessed firsthand the healing potential of these medicines. In order for these medicines to continue to benefit those in need, we are in need of education around the safe use of psychedelics as well as safe access.

These medicines have the potential for great healing. I believe they will change the mental health field by providing treatments that not only treat symptoms but also help people get to the root of their suffering. But anything that has great power also has the ability to cause harm. It is essential that a task force is created to oversee the rollout of access to these medicines and the psychedelic assisted therapy field.

I beg you to vote in favor of SB1009 to help revolutionize mental health care in the state of Maryland by providing the education and access that is needed to utilize these medicines safely and effectively.

Thank you,

Lauren C. Going LCSW-C

**SB1009Testimony.pdf**

Uploaded by: Mark Huslage

Position: FAV

## **Supporting SB1009**

Greetings, Senators and interested parties.

I'm writing in support of Senate Bill 1009, which would establish a task force regarding natural psychedelic substances. I've been a resident of Baltimore, Maryland for 25 years and work as a social worker in the field of brain injury. I am also a founding member of the Baltimore Psychedelic Society (BPS), which has a membership of over 2000 individuals. I was first introduced to psychedelics by way of Johns Hopkins Psilocybin Research in 2010. I speak both for myself and those whose stories I've heard in my work with BPS. These are stories of hope, healing and freedom that reflect the remarkable nature of psychedelics and their capacities. If one would but listen to these firsthand accounts, their perspective on psychedelics would change dramatically.

My own experience at Hopkins would change the course of my life toward one of greater meaning and aligned purpose. Coming out of a divorce and feeling demoralized and psychologically stuck at age 50, the psychedelic experience provided visions and messages that cut right to the core of my psyche and offered renewed possibilities. A primary vision was that of my father, who I had suddenly lost at age 10, showing up in my consciousness, realer than real. His felt presence, a deeply perceived embrace, and his beautiful words to me left an indelible mark that brought great closure to a long-held wound. And, more importantly, realigned my being toward a life well-lived, as I followed his words to me: "Mark, don't hide...go seek". Fourteen years later, this experience continues to serve as a north star.

So, I fully support this current approach to bringing psychedelics into the mainstream by way of a fully representative task force. These are powerful substances that require careful and robust consideration before deciding on how they should be introduced to the general populace. The current laws serve only to keep a masterful tool like this out of reach for millions of people who can benefit. May we find a way to introduce psychedelic care safely, securely, and optimally to the people of Maryland. Given its proven ability to positively impact depression, anxiety, addiction, PTSD and other mental health conditions...  
IT IS TIME!

Let's bring the best to Maryland. Take good care.

Mark Huslage, LCSW-C

**SB1009 testimony.pdf**

Uploaded by: Nicholas Marinelli

Position: FAV

Nicholas Marinelli  
211 Charles St  
Rockville, MD 20850  
District 17

Testimony in support of Bill SB1009, Task Force on Responsible Use of Natural Psychedelic  
Substances  
13 March 2024

Greetings,

I strongly support bill SB1009's mission to establish a task force on responsible use of psychedelic substances. Psychedelics have been in use by indigenous cultures for thousands of years, and modern research has shown overwhelming evidence of the efficacy of psychedelics in treating various psychological and neurological conditions. Maryland's own Johns Hopkins is one of the many highly-esteemed research institutions exploring this field, and the data they've produced speaks for itself. It's time for Maryland to embrace a safe and beneficial approach to psychedelic legislation.

There are obviously many different facets to consider when considering legislation of this nature; I feel that the composition of the task force proposed in SB1009 is an excellent cross-section of disciplines and perspectives, so they would be well equipped to comprehensively address each of those facets.

A handwritten signature in blue ink, appearing to read "Nick Marinelli", is written over a faint, light blue circular watermark or seal.

Nicholas Marinelli

**2023\_0313\_SB1009 SEN FIN\_ WEXLER.pdf**

Uploaded by: Pamela Wexler

Position: FAV



**FAV**  
**SB 1009**  
**Task Force on Responsible Use of Natural Psychedelic Substances**

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Statement to Senate Finance Committee  
14 March 2024  
Pamela Wexler, Esq.

I am an educator and attorney, born and raised in Baltimore, and a 1989 honors graduate of the University of Maryland School of Law. I am a longtime UM faculty member and adjunct, most recently teaching Cannabis Law and Policy for the School of Pharmacy Cannabis MS program. I am among the founding cohort of the Psychedelic Bar Association, and in an individual capacity, engage with *Marylanders for Beneficial Psychedelics*, a grass-roots coalition that has formed around the idea of accessible and affordable psychedelics for all Marylanders.

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I am in **support** of **HB 0548**. My statement seeks to offer detail about the current legal and practical context, specifically with respect to what is happening at the federal level and in other states, and seeks to answer threshold questions;

- why any state should move to regulate psychedelics;
- why Maryland should move forward during this legislative session; and
- why the task force approach found in SB 1009 is appropriate.

**IT IS APPROPRIATE FOR MARYLAND TO REGULATE PSYCHEDELICS**

Maryland's experience with regulating Cannabis already has provided a picture of the overwhelming societal costs from misguided drug prohibition. Epitomized in the schedules found in the Controlled Substances Act of 1970 ("CSA"), decades of misinformation and stigma has left us with laws that do not accurately reflect the potential therapeutic benefits or harms of various substances, and policies that do not reflect a modern understanding of drug use and harm.

Not until late 2023 – *thirty-seven years* after California voters approved the first state medical marijuana program and months after Kentucky had become the 37th state to legalize medical marijuana – did the U.S. Department of Health and Human Services finally acknowledge that marijuana has generally accepted medical value.

Like Cannabis, psychedelics have been swept up in this misguided war on drugs, entirely prohibited and classified under the CSA as having no accepted medical use.<sup>1</sup>

Despite this federal prohibition, the Food and Drug Administration has designated psilocybin a “breakthrough therapy” for major depressive disorder and treatment-resistant depression, and earlier this year, the Agency extended priority review to a new drug application ("NDA") for

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<sup>1</sup> HHS recommendation to Reschedule Marijuana, Congressional Research Service, September 13, 2023.

MDMA<sup>2</sup> administered in tandem with talk therapy, setting the stage for the first psychedelic to be available via prescription later this year.<sup>3</sup>

Only state action can cure this deep misalignment between science and federal law. If all Marylanders are to have options for legally access psychedelics – it is incumbent Maryland lawmakers move forward.

### **IT IS APPROPRIATE FOR MARYLAND TO MOVE FORWARD ON PSYCHEDELICS THIS SESSION**

If the pace at which psychedelics are being rehabilitated in the public sphere seems dizzying, that's because it is.

Only 11 state legislatures – just 20% – have never taken up a proposal related to psychedelics.

That same number of states – 11 – have in just the past three years appropriated funds to support research on psychedelic-assisted therapies, including as this Committee is aware, Maryland's 2022 Alternative Therapies Fund to study the effectiveness of using psychedelics to treat post-traumatic stress disorder and traumatic brain injury.

Beyond Oregon and Colorado where legal and regulated access to certain psychedelics is available or underway, two other states, Minnesota and Nevada, have authorized task forces akin to the one called for in SB 1009; both will deliver recommendations to their respective legislatures by December 2024.

So far this session, five state legislatures are considering bills to explore and regulate psychedelics that pattern the working group/task force model employed in SB 1009.<sup>4</sup>

### **THE TASK FORCE APPROACH IS UNIQUELY SUITED TO REGULATING PSYCHEDELICS**

While task forces are often derided for being inefficient and ineffective, especially if there is no plan for implementation of its work, a task force is precisely what is called for here – which of course is why they are proving so successful and continue to be modeled.

Even in OR where the legal access covers just one psychedelic substance - psilocybin - the licensing and use rules were developed over a two-year, collaborative advisory board process with widespread representation.

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<sup>2</sup> 3,4-methylenedioxymethamphetamine; AKA ecstasy, molly

<sup>3</sup> "FDA Accepts, Grants Priority Review of NDA for MDMA-Assisted Therapy for PTSD," Psychiatric Times, February 5, 2024.

<sup>4</sup> In addition to Maryland, bills in Alaska, New Mexico, Massachusetts and Hawaii contemplate processes that use task forces or advisory boards to advise the legislature and make recommendations. For more information about recent bills, see [my personal psychedelic legislation tracker](#); see also [Psychedelic Alpha](#) which includes a state-by-state history of legislative activity regarding psychedelics.

Regulating psychedelics is about more than licensing sales, collecting taxes and expunging criminal records.

Psychedelics is a paradigm shift, and tackling any novel, complex issue demands a collaborative process.

In the case of psychedelics which depends on access to up-to-date research and insights on emerging scientific developments, a task force offers an ideal platform for the development of evidence-based policymaking.

I look forward to further supporting a task force to study and make recommendations on how all Marylanders can access the benefits of psychedelic substances, and respectfully urge the Committee to vote favorably on SB 1009.

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**Pamela Wexler, Esq.**

*admitted to practice law in Maryland and the District of Columbia*

pamela@wexleresq.com

**202 744 6443**

# **RichardTreloarTestimony.pdf**

Uploaded by: Richard Treloar Jr

Position: FAV

## **RICHARD TRELOAR TESTIMONY**

Hi my name is Richard Treloar and I am speaking in support of HB 0548.

I was a K-9 Military Police Officer for the US Army from 2012 to 2017. During my service I deployed to Iraq along with Patrol Explosives Detection Dog, Santy.

I experienced a lot of trauma during my service to my country. After completing my time, I reached out to the VA for help. I was diagnosed with PTSD, Depression, Anxiety and a range of other mental health conditions.

I was really struggling. I was sad, I had trouble sleeping, and I was withdrawing from my friends and family. It got so bad that my wife had to intervene when I put a loaded gun against my temple.

I was desperate to find a treatment that would work for me, so I reached out to my friend Scott, who is on the panel here today. He understood the problems I was experiencing and he had witnessed my panic attacks. Scott educated me about psilocybin from mushrooms and how it may be able to help me.

I decided to try microdosing and took two small pills of dried and ground mushrooms before I went to bed. I was amazed at how different I felt the next day. For the first time in a long time I felt happy. I was able to have a positive attitude about life. I no longer felt all the stress and anxiety. I finally found an effective treatment for my mental health challenges.

Mushrooms have been a blessing and a miracle for me. These natural medicines have completely changed my life. The mushrooms are

giving me greater control over my emotions and I'm now managing life's challenges instead of feeling crushed by them.

When I first started, I would dose about every 5 days. As I got better, I spaced out the mushrooms more and more. Now I just microdose when I am starting to feel a little bit triggered. Usually every 4-6 weeks. Because mushrooms are non-addictive, I don't take them any more than I absolutely need to.

Again, mushrooms are my miracle and saved my life. I ask you to vote in support of HB 0548 and begin the process to expand legal access to these important medicines. Thank you.

# **Scott Williams Testimony.pdf**

Uploaded by: Scott Williams

Position: FAV

Scott Williams Testimony

### **Supporting HB0548**

Good afternoon Health and Government Operations Committee and distinguished staff.

My name is Scott Williams. I've been a Maryland resident for 22 years and own a home in District 30A. I am here to testify in support of HB548 in its current format. I first want to thank all Delegate sponsors for their leadership in bringing this bill to help solve our mental health crisis.

Quick background on me: I had a neglected childhood, moved out at 15 and homeless by 19.

After hearing I was going to be a father, it motivated me to get computer training and move to DC and start a lucrative IT career during the dot com boom. Despite all this improvement, I was miserable, suffering from major depression and suicidal ideation from years of childhood trauma. Over the next two decades I met with dozens of psychiatrists, psychologists, and therapists looking for relief without success.

About 5 years ago, at wits end, I temporarily moved to Hawaii hoping that might help. After two weeks I found no improvement, crying in bed all day thinking about suicide to end my suffering. As a last ditch effort I started researching alternative therapies unavailable in the US and came across Psilocybin, also known as magic mushrooms. Which just so happens to grow naturally in Hawaii. The morning after taking my first 200mg microdose, I woke up and noticed a 180 degree difference in ambition and mental clarity to the point I started singing in the shower like I won the lottery. That was the day I saved my own life.

For the next 6 months I took a dose every third day to ensure it was effective but not build a tolerance. Since then I only take it a couple times a month now that my serotonin levels have balanced. Let me be clear, when I microdose at this level, I have zero impairment. In fact, I have increased my focus, motivation and productivity at work.

I'm also happy to report I've had little to no recurring symptoms of depression in the last 5 years. I'm now retired at 45 and spend my time spreading education and awareness to pay it forward. I've educated 16 people about psychedelic medicines with a 100% success rate including 2 veterans (one of which you will hear from today)

I beg you to pass HB548 and start the process of effectively treating the 50% of Marylanders who suffer from mental illness. Thank you for your time.



**SB1009.pdf**

Uploaded by: Tegy Thomas

Position: FAV

March 13, 2024

Testimony for SB1009

My name is Tegy Thomas, I live in North Potomac, MD and am a constituent of District 15. I am a technology entrepreneur, parent, and well-being advocate. I am also an immigrant of India, who came to the United States as young child and subsequently experienced many forms of trauma, racism, and discrimination throughout my lived experiences. I have lived in India, New York City, New Jersey, and Washington, DC.

I attended the Horizons Psychedelic Conference in New York City in 2021 as well as the Washington, DC National Psychedelic Conference in Washington, DC in 2022. I encountered different psychedelic integration therapists, facilitators/guides, “shamans”, as well as different psychedelic societies in Maryland, Washington, DC and Virginia, but also experienced a lot of harm, racism and discrimination during my experiences within these groups and practitioners.

I urge and request the Maryland Task on Responsible Use of Natural Psychedelic Substances to have someone who has experience, representation, and is an advocate from an underserved community as well as a survivor of trauma, racism, and discrimination.

I want to address the following facts:

- “Racism is a Serious Threat to the Public’s Health” – CDC
- “As the nation looks at its long, cruel history of systemic racism, the National Association of Social Workers (NASW) acknowledges that our profession and this association have not always lived up to our mission of pursuing social justice for all. NASW apologizes for supporting policies and activities that have harmed people of color.” - Jun 17, 2021
- “American Psychiatric Association (APA), the oldest national physician association in the country, is taking an important step in addressing racism in psychiatry.” Jan 18, 2021
- “The American Psychological Association failed in its role leading the discipline of psychology, was complicit in contributing to systemic inequities, and hurt many through racism, racial discrimination, and denigration of people of color, thereby falling short on its mission to benefit society and improve lives. APA is profoundly sorry, accepts responsibility for, and owns the actions and inactions of APA itself, the discipline of psychology, and individual psychologists who stood as leaders for the organization and field.” - October 29, 2021
- “Nurses report seeing or hearing racism and experiencing discrimination from almost 80% of their patients, according to a survey released on Wednesday by the Robert Wood Johnson Foundation. Asian, Black and Latino nurses are significantly more likely to experience racist microaggressions than their White peers, and they told researchers that patients frequently use racial slurs or question their credentials. Six in 10 nurses also reported they face discrimination from their colleagues as well, according to the survey. Of the nurses who have experienced racism or discrimination, 9 in 10 said it has affected their well-being and mental health. And even though an overwhelming majority of nurses faced some form of racism, few reported the incidents. Just 1 in 4 nurses

reported the discrimination they saw or experienced to management, the survey said.” - May 31, 2023 / CBS News

- “In 2005, the Institute of Medicine—a not-for-profit, non-governmental organization that now calls itself the National Academy of Medicine (NAM)—released a report documenting that the poverty in which black people disproportionately live cannot account for the fact that black people are sicker and have shorter life spans than their white complements. NAM found that “racial and ethnic minorities receive lower-quality health care than white people—even when insurance status, income, age, and severity of conditions are comparable.” By “lower-quality health care,” NAM meant the concrete, inferior care that physicians give their black patients. NAM reported that minority persons are less likely than white persons to be given appropriate cardiac care, to receive kidney dialysis or transplants, and to receive the best treatments for stroke, cancer, or AIDS. It concluded by describing an “uncomfortable reality”: “some people in the United States were more likely to die from cancer, heart disease, and diabetes simply because of their race or ethnicity, not just because they lack access to health care.” – American Bar Association, Khiara M. Bridges is a professor of law and professor of anthropology at Boston University. She is the author of *Reproducing Race: An Ethnography of Pregnancy as a Site of Racialization* (2011) and *The Poverty of Privacy Rights* (2017).

My mother is a retired registered nurse from India and New York City. She is a member of the 1199SEIU union. I have educational as well as professional experiences in pharmacy, physical therapy, and other forms of mental health advocacy. I also have led a team as well as participated in attempting to create a mental health app during the 2020 MIT-COVID19 Hackathons. I have been a part of different advocacy organizations like Vision Zero/Families for Safe Streets in New York City, Montgomery County, MD, Alexandria, VA as well as organizations like National Alliance on Mental Illness and Decoding Dyslexia-MD.

I forward in the passing of SB1009 and continued progress to address trauma, racism, and discrimination within the psychedelic community here in Maryland.

Thank you,  
Tegy Thomas

# Supporting SB1009.pdf

Uploaded by: Thomas Wisdom

Position: FAV

Supporting SB1009  
Full Support (FAV)

Thomas Wisdom  
23360 Bear Creek Rd  
Bend Or 97701

Good Afternoon,

My name is Thomas Wisdom and I am writing to provide my full support for SB1009.

The use of psychedelic medicines have been a critical part of my own healing. As a veteran of the Marine Corps and war in Afghanistan I have spent many years processing my own mental health struggle with depression. At one time this led me to be medicated on traditional psychiatric drugs. These stripped me of my ability to function in everyday life. I have also dealt with myriad other aspects of mental health including survivors guilt, imposter syndrome and substance dependence. I have worked with many different talk therapy modalities throughout the years. All with limited to no success. It wasn't until my first guided experience with psilocybin did I gain access to the tools needed to help myself heal.

Through the supervised use of psychedelic medicine these tools gave me control of my life and the ability to gain back hope for the future. These substances have allowed me to open doors into my own traumas and ideas about who I am and do the work needed in order to be the best human I can be. Without the insights and healing that psychedelics have given me I am not sure I would be alive today to provide this testimony.

Continued study of and access to these treatments is critical to helping people from all walks of life live as fulfilled a life as they can. Ensuring their equitable and affordable use will allow us as Americans to no longer just treat mental illness with ineffective substances but actually start healing people.

With the strongest conviction I hope you choose to pass the SB1009 and provide healing treatments to all those that need them.

Thank you,

Thomas Wisdom

**SB1009 Testimony - Tim Hamilton.pdf**

Uploaded by: Timothy Hamilton

Position: FAV

Adapted from my [Ignite Annapolis presentation](#) entitled “Ego Trip: Attacking depression one mushroom at a time” from September 2023.

It was four years ago in October that I sat alone at my kitchen table in the early hours of the morning and calmly decided to take my own life. Had my young son not stumbled into the kitchen at that exact moment to get a drink of water at that moment, I wouldn't be here today.

So, what brought me to that point? Like 8% of the country's population, I have clinical depression. I first noticed it ten years ago and thought it was just seasonal depression, but then suicidal thoughts began to pop into my head...every once in a while, at first...but then started to increase in frequency over time. And after about a year, they were relentless. I couldn't think about anything else. I was a ticking timebomb and I had to get help.

After a time, the suicidal impulses were nonstop; every waking moment. I tried everything...I got counseling, I exercised, changed my diet, meditated, journaled, I even did TMS, where you go into a clinic and get little shocks to your temple every ten seconds for an hour. I did that every day for three months. Nothing helped. Then I turned to medication. But not only were the side effects horrible, but it didn't even work particularly well. After a few months, I stopped.

Then I read Michael Pollan's book, “How to Change Your Mind,” which was on the New York Times Bestseller list. It was about the new science of psychedelics, specifically psilocybin mushrooms, and how they were completely upending every aspect of mental health. And all kinds of top-notch research facilities were in on it...NIH, UC Berkley, NYU, and, right in our own backyard, Johns Hopkins, which was leading the revolution. They found that psilocybin mushrooms are highly effective...not marginally effective, or moderately effective...but HIGHLY effective at treating depression, anxiety, OCD, PTSD, sexual trauma, addiction...the list goes on and on.

So, after searching high and low, I bought a full dose of psilocybin mushrooms at a dispensary in Washington D.C. I rented an AirBNB in town, checked in, ground the mushrooms up into a powder, made a tea out of them, and off I went. Forty-five minutes later, the walls started to breath in and out, the shadows were dancing, and the area rug was rippling like pond. Before the trip, there was a part of me that was terrified that, by the end of the night, I'd be running down Main Street naked and screaming. But I was in complete control and completely lucid the entire time. I lay on the couch, put headphones on, and listened to Simon and Garfunkel. The harmonies were the most beautiful thing I had ever heard in my life.

They were ribbons of euphoric light gently weaving in and out of the darkness while the musical notes cascaded over me like a trillion stars. I started crying. A little at first. And then I was sobbing. Now I'm an atheist, but I felt a presence in my head that I can only describe as an entity. And that entity embraced me and took all of the corrosive, rotting shit in my brain that I had accumulated over my life...self-loathing, guilt, fear, loneliness. I could spend the next ten hours telling you about the details of my trip that night, but when it was over, my mind was at peace for the first time in my life. The suicidal thoughts had vanished. They were completely gone.

Was my experience typical? According to Johns Hopkins, of all the people who have participated in psilocybin studies, over two thirds rated their experience among the top five events in their lives, including the birth of their child. And here's an interesting tidbit: among those for whom religion is an important part of their lives, nearly all reported that the psilocybin trip deepened their faith and brought them closer to God. Yet, psilocybin mushrooms are listed as a schedule one drug along with heroin. Right now, psilocybin mushrooms are legal in Oregon and Washington, decriminalized in twelve cities, and nine states have pending legislation to either legalize or decriminalize it. This has the potential to drastically improve the lives of tens of millions of people in this country.

I'm a regular middle-age, middle class professional and father of two. I don't go to concerts on mushrooms. I don't party it up on weekends with friends. It's not another way to escape my everyday problems the way that drinking used to provide. I took mushrooms to treat my depression because nothing else worked for me and, again, I tried everything under the sun. I have no problem with pharmaceutical companies. Frankly, they do some great work. But they are not making progress fast enough in the realm of mental health. There are people reading this right now who are grappling with depression, anxiety, and maybe even addiction. You all know who you are and you know how good you are at hiding it. There is something that can help. Psilocybin mushrooms saved my life. It's made me a better father, a better husband, and a better person and it can do the same for everyone.



**SB1009 Garden FAV.pdf**

Uploaded by: Tyahna Arnold

Position: FAV



The Garden International, LLC  
11890 Old Baltimore Pike, Ste G  
Beltsville, MD 20705  
info@thegarden.farm  
301) 957-4258

March 14, 2024

**Senate Bill 1009- Task Force on Responsible Use of Natural Psychedelic Substances  
House Health, and Government Operations Committee**

**Position: Support**

Dear Chair, Vice-Chair, and Members of the Committee:

The Garden International is a mushroom farm located in Prince George’s County. At The Garden, our mission is to ‘plantify’ the world. We strive to build restorative, and sustainable systems that work in harmony with nature. We feel strongly that the tides are turning, and it is time to cultivate ecosystems that feed local communities and the economy. The Garden International writes to support Senate Bill 1009– Task Force on Responsible Use of Natural Psychedelic Substances. If enacted, the legislation will contribute to our mission of the good use of natural resources to contribute to the health and wellbeing of the Earth and all its inhabitants.

Senate Bill 1009 would enforce public health and safety by establishing a task force to study the responsible use of these substances is timely and necessary. There is a growing body of scientific research indicating the potential benefits of psychedelic substances in treating a range of mental health disorders, including depression, PTSD, and substance use disorders, among others. By focusing on naturally derived substances and excluding peyote to respect Native American traditions, the bill thoroughly navigates the complex landscape of psychedelic substances.

The comprehensive composition of the task force, as outlined in the bill, ensures a multifaceted approach to the study. Including representatives from various sectors--- healthcare, law enforcement, academia, and directly affected individuals—promises a balanced and thorough examination of issues at hand. This diversity is crucial for crafting policies that are not only scientifically sound but also socially equitable and culturally sensitive.

The potential benefits of responsibly integrating natural psychedelic substances into our healthcare and social systems are immense. Not only could this lead to breakthroughs in the treatment of challenging mental health conditions, but it could also contribute to a more nuanced, informed public discourse on drug use and addiction.

This bill establishes necessary measures to significantly improve our approach to public health, substance use treatment, and drug policy reform. By establishing the Task Force on Responsible Use of Natural Psychedelic Substances, Maryland can pave the way for responsible, evidence-

based innovations that benefit all members of our society. Therefore, we respectfully request a favorable report on Senate Bill 1009.

For more information call or email:

Therese M. Hessler, Ashlar Government Relations | 301-503-2576 | [therese@ashlargr.com](mailto:therese@ashlargr.com)

**SB1009\_Fox\_FAV-2024-03-14.pdf**

Uploaded by: Valory Fox

Position: FAV

Attn: Senate Finance Committee

March 14th 2024

Testimony for SB1009

**Position: FAVORABLE**

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Dear Chair Beidle and Members of the Committee,

I live in District 32, and I'm writing today as someone who cares deeply about issues of mental health and someone who's had a lifelong struggle with it.

We're in a mental health crisis, the age of communication has made our world impossibly complicated, overwhelming, and rapidly changing. There is a deep human cost to this mental health crisis, as well as a deep economic one.

And yet the most promising treatments for many mental health conditions are currently illegal. Multiple studies have shown a single dose of Psilocybin can cause improvement of symptoms in conditions such as Major Depressive Disorder that last for months or years.

Now this can sound hard to believe. We're used to taking medications that we're indefinitely dependent on, and we often view these drugs as merely recreational.

These compounds, however, belong to a rare group of drugs called psychoplastogens. This means they heighten neuroplasticity, the brain's ability to change on a neurological level. It's not hard to see the utility for that, especially administered alongside other therapy. It presents the chance of rapidly healing in ways that would otherwise be physiologically impossible.

We are missing out on the chance for treatments that help someone resolve the underlying problem, rather than numbing the symptoms. But first, we need to collect the facts and have tangible recommendations based on solid assessment and evidence, and that's what this bill does.

For these reasons, I urge a favorable report on SB1009.

- Valory Fox

# **Testimony for SB 1009.pdf**

Uploaded by: Zachary Larson-Rabin

Position: FAV

Good day. My name is Zachary Larson-Rabin, and I am writing in support of the Natural Psychedelics Task Force bill SB 1009. I hold a Ph.D. in plant genetics from the University of Wisconsin-Madison and have worked in both research and industry in the U.S. and overseas. Although I am originally from Iowa, my wife was born and raised in Baltimore, and we have chosen to make our lives here, raising our children as Marylanders. Our family is committed to public service, particularly on issues such as working to ensure access to appropriate interventions for critical medical needs. My father-in-law, who himself served in the Maryland Department of Human Services for over 30 years, suffered from Alzheimer's and was helped by a cannabinoid-based medication when very little else worked—medication that would not have been available had this legislative body not moved to decriminalize cannabis. I have personally been helped, mentally and even spiritually, by psychedelics, and I would like others in Maryland to be able to access the same benefits.

My family and I moved back to Maryland 10 years ago, and I am regularly encouraged by witnessing how Maryland's state legislature is often at the leading edge of beneficial progress. I believe that this bill to create a task force to evaluate how the state might engage with psychedelics is an example of such progress-oriented action.

It should be clear to all lawmakers that action should be taken to review and address the legal status of psychedelics, as well as developing a plan for remedying the criminal status of psychedelics-related victims of the drug war. There is broad public interest in psychedelics due to the many recent health-related psychedelic discoveries, publicized in the mainstream media. People learn about these developments and ask whether their own health issues could benefit. There is also growing interest within the U.S. government for psychedelic-assisted healing, including, for example, the treatment of post-traumatic stress disorder suffered by military combat veterans. Moreover, the Food and Drug Administration has designated the active ingredient of psychedelic mushrooms as a “breakthrough therapy” for its usefulness in treating Major Depressive Disorder. As state legislatures around the country create their own psychedelics-related task forces and laws, many Marylanders are wondering whether our state will meet the challenge.

SB 1009 is well-crafted to develop a capable task force with a broad scope of psychedelics-related issues to consider. Such a task force will be able to take a methodical and comprehensive approach to evaluating the current scientific knowledge of the safety and effectiveness of the different psychedelic medicines, as well as considering the best practices by other states, before making recommendations to the Maryland legislature. The task force will be charged with considering whether Maryland should create a licensed psychedelic access framework, perhaps like that of the state of Oregon, which recently set up a licensing scheme for psilocybin mushroom growers, therapeutic usage centers, and psychedelic therapeutic facilitators. The task force would also be charged with considering a novel approach, the Psychedelic Users Permit. This pioneering permitting concept would require Marylanders to complete an educational course before receiving an identification card that allows them buy psychedelics within the state. Even without a permit, however, the educational component is vital—psychedelics are generally quite safe if used according to known best practices, but the information vacuum caused by the drug war has resulted in limited public knowledge of those best practices.

I urge the Committee to vote to establish this task force to recommend how Maryland can integrate the benefits of psychedelics into our state, while reducing the risks involved therein. Please give your support to SB 1009.

With respect,

Zach Larson-Rabin, Ph.D.

Rockville, MD 20850



**Amendment\_SB1009\_5F92C232-5FE5-475F-BF82-1D44B1135**

Uploaded by: Brian Feldman

Position: FWA



**SB1009/853625/1**

AMENDMENTS  
PREPARED  
BY THE  
DEPT. OF LEGISLATIVE  
SERVICES

14 FEB 24  
11:42:41

BY: Senator Feldman  
(To be offered in the Finance Committee)

AMENDMENT TO SENATE BILL 1009  
(First Reading File Bill)

On page 2, in line 7, strike “federally recognized”; and in line 8, strike “in the State”.

**UpdatedAmendment\_SB1009\_52F916A6-B195-4BDF-BD73-FE**

Uploaded by: Brian Feldman

Position: FWA



**SB1009/823224/1**

AMENDMENTS  
PREPARED  
BY THE  
DEPT. OF LEGISLATIVE  
SERVICES

13 MAR 24  
15:05:43

BY: Senator Feldman  
(To be offered in the Finance Committee)

AMENDMENTS TO SENATE BILL 1009  
(First Reading File Bill)

On page 1, in line 9, strike “means” and substitute “includes”; in line 10, strike “and”; in the same line, after “mescaline” insert “, and any other substance determined by the Task Force to be a natural psychedelic substance”.

On page 2, in line 7, strike “federally recognized”; in line 8, strike “in the State”; in line 21, strike “and”; and in line 23, after “substances” insert “;

(xii) one individual with experience with the pharmacology of natural psychedelic substances; and

(xiii) one physician with experience with the appropriate use of psychedelic substances and other integrative medical practices”.

On page 4, in line 10, strike “2025” and substitute “2026”.

**Carrington 2024 sb1008 hb548 psy drug task force.p**

Uploaded by: Darrell Carrington

Position: FWA



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*Integrity.Passion.Results*  
Since 2008

## **Senate Bill 1009 and House Bill 548 - Task Force on Responsible Use of Natural Psychedelic Substances**

### **SUPPORT w\AMENDMENTS**

Carrington & Associates, LLC supports Senate Bill 1009 and its cross-file, House Bill 548, which seek to establish the Task Force on Responsible Use of Natural Psychedelic Substances. These bills are essential in promoting scientific research, exploring potential benefits, and addressing risks associated with the responsible use of natural psychedelic substances.

Our firm acknowledges the importance of studying and understanding the impact of natural psychedelic substances on public health and well-being. By establishing a task force comprised of diverse stakeholders, including representatives from various sectors and communities, these bills ensure comprehensive analysis and informed decision-making.

However, Carrington & Associates, LLC regrets that we did not have an opportunity to present this proposed amendment to the House Bill Sponsor, Del. Guzzone, before the bill was presented to the committee. We had intended to propose an amendment to include an additional member from the Maryland cannabis industry, recognized by the state through educational partnerships during the implementation of the medical cannabis program. We trust the committee to consider this proposed amendment and ensure the representation of all relevant stakeholders.

For the foregoing reasons, Carrington & Associates, LLC respectfully requests the committee and the Maryland General Assembly to pass Senate Bill 1009 and House Bill 548 with the proposed amendments. We believe that this legislation will facilitate informed policymaking, promote public health and safety, and advance our understanding of natural psychedelic substances.

Please feel free to contact Darrell Carrington, Managing Director, [darrell.carrington@verizon.net](mailto:darrell.carrington@verizon.net) or 732-763-7398 if you have any questions or require additional information.

# **Psychedelic use SB1009 Mar 14.pdf**

Uploaded by: Eric Sterling

Position: FWA

STATEMENT OF  
**ERIC E. STERLING, J.D.<sup>1</sup>**  
SUBMITTED TO  
THE MARYLAND SENATE  
FINANCE COMMITTEE  
SENATOR PAMELA BEIDLE, CHAIR  
SENATOR KATHERINE KLAUSMEIER, VICE CHAIR  
MARCH 14, 2024

**IN SUPPORT WITH AMENDMENTS OF  
SB 1009**  
Concerning  
**Task Force on Responsible Use of Psychedelic Substances**

Chair Beidle, Vice Chair Klausmeier, and Senators, thank you for scheduling this hearing on SB 1009 and reading my statement in support of the bill. I commend Senator Brian Feldman for his foresight and wisdom in developing and introducing this bill.

The Task Force (hereafter, T.F.) authorized by this bill would advance Maryland's ability to research and use the relatively safe but powerful psychedelic compounds that occur in nature. Research in the past 20 years has increasingly demonstrated the value in mental health of these compounds, and builds upon a body of research, much of which was conducted in Maryland in the 1960s and 1970s supported by State and Federal grants. Before I set forth my argument in favor of the bill, I will spell out the important need for a definitional amendment.

The definition in SB 1009 of "natural psychedelic substances" should be changed.

The definition confuses policy matters with the definition, and is illogical and counterproductive. As drafted it could limit the scope of appropriate research by the Task Force as it carries out its responsibilities and frustrate the goal of protecting indigenous use of peyote growing in the wild.

- (1) The term, "natural psychedelic substances" mistakenly begins by referring to "naturally-derived" compounds. **What the bill actually intends to cover are "naturally occurring" compounds** – i.e. compounds that occur in nature and are found in various plants or fungi.

In the plainest sense, "naturally derived" means that when an organism ingests the plant or fungi which contains the naturally occurring compound, the digestive system of the organism "derives" the compound and introduces it to the bloodstream. As defined in the bill, a *laboratory process* that chemically or mechanically *derives* (i.e., extracts) the compound from the plant or fungi is not a "natural derivation." The definition facially excludes laboratory-extracted compounds which, presumably, are the intended source of these materials, and, certainly excludes the laboratory synthesis of these compounds. **Permitting the laboratory synthesis of these compounds is critically important in order to protect the natural sources of these compounds, especially peyote.**



- (2) The exclusion of peyote from the term “natural psychedelic substances” awkwardly, inappropriately, and counter-productively puts an important policy matter into the definition. Peyote contains mescaline. Peyote is the sacrament of the Native American Church of North America and the Wixarika people of Mexico (also known as the Huichol people). The Wixarika have been using peyote in their worship at least since the 16<sup>th</sup> century, and one of their central rituals is the annual pilgrimage across the desert in Mexico to harvest peyote from its historic wild sites of growth for use in worship. However, the use of peyote in the United States became popularized after the 1969 publication of the book by Carlos Castaneda, *The Teachings of Don Juan: A Yaqui Way of Knowledge* (much of which has been debunked as fraudulent by C. Jay Fikes, Ph.D, *Carlos Castaneda, Academic Opportunism, and the Psychedelic Sixties* (1993)).
- (3) The use of peyote (a Schedule I controlled dangerous substance) by Native Americans in their worship was specifically protected by Congress in the American Indian Religious Freedom Act Amendments of 1994 (P.L. 103-344, Oct 6, 1994, 108 Stat. 3125, (42 U.S.C. 1996a)).

**The key point is that traditional peyote growth sites are being devastated by poachers to obtain peyote for non-sacramental use by persons outside the religious groups whose use is protected by law. The objective in this bill of excluding peyote from the term “natural psychedelic substances” is to prohibit the T.F. from recommending any policies that would further endanger the traditional sources of sacramental peyote.** I support that objective, but this is a policy restriction on the T.F. recommendation power, not a definitional issue. The current definition is counter-productive in that it could prevent the T.F. from recommending penalties under Maryland law for the distribution of peyote that was plundered from the traditional sites of peyote growth that the sponsors desire to protect.

I emphatically support the importance of preventing the T.F. from recommending that natural peyote be any source of mescaline for any legal purpose in Maryland. Peyote takes decades to grow before it can be harvested. Any program that would encourage the further despoilation of peyote sources would be wrong.

#### Arguments for the Task Force -- Mental Health:

The nation’s crisis in mental health services and the epidemic-like spread of suicide and suicide-attempts calls for **expansion of the treatment capacity of the mental health community**. Most of the valuable medications for mental health only alleviate symptoms of conditions such as depression, anxiety, obsessive-compulsive disorder, post-traumatic stress disorder, etc. Sadly, the conditions frequently endure for years, decades or lifetimes resulting in long-term treatment regimens involving hundreds of hours of treatment for a single individual.

- (1) **Psychedelic medications have the potential to accelerate treatment of many conditions and thus expand the nation’s mental health treatment capacity.** It is not an exaggeration that many persons who have received treatment with psychedelic medications are considered by themselves and their therapists to be “cured.” **Expansion of the availability of psychedelic medication could thus result in profound cost savings in health expenditures by the public and private sector, and individuals.**

- (2) **Psychedelic medications also have the capacity to prevent suicide and are forecast to save thousands or tens of thousands lives per year.** There are now about 50,000 suicides per year. In 2021, an estimated 1.7 million persons made a suicide attempt, according to the CDC.<sup>2</sup>
- (3) This is an extremely important issue for the nation’s military veterans. **“In 2021, 6,392 Veterans died by suicide.** . . . When looking at increases in rates from 2020 to 2021, the age- and sex-adjusted **suicide rate among Veterans increased by 11.6%**, while the age- and sex-adjusted suicide rate among non-Veteran U.S. adults increased by 4.5%.”<sup>3</sup>
- (4) Just a couple of months ago, the U.S. Department of Veterans Affairs announced it is undertaking research on the use of psychedelic medication. U.S. Veterans Affairs Secretary Denis McDonough said the move represents **“an important step to explore the efficacy of a potential new set of promising treatments that could improve the health and quality of life for veterans.”**<sup>4</sup>

Maryland’s long history supporting research with psychedelic medication:

- (1) In the 1960s and 70s psychedelic materials were widely considered a promising potential modality to treat mental illness. Maryland’s Spring Grove State Hospital was the home of the Maryland Psychedelic Research Center, the most important of the very few institutions where research into the therapeutic research use of psilocybin was conducted for the treatment of substance use disorders, schizophrenia, anxiety, and other severe personality disorders, under the auspices of the U.S. National Institute of Mental Health. The results of that research were being published in the most prestigious journals such as *JAMA* and the *Archives of General Psychiatry*. The research continued for many years. The last legal administration of psilocybin for research purposes in the United States -- before the full impact of political, legal and financial obstructions to such research due to the “war on drugs” -- were at the Maryland Psychedelic Research Center in the Spring of 1977.<sup>5</sup>
- (2) The story of this important research has been lost due to the extravagance of the “noise and glare” created by notorious LSD-popularizer Dr. Timothy Leary. Leary, once a Harvard University psychologist, became a “Pied Piper” of psychedelics, and fueled a media and political circus that popularized casual, recreational, and “political” use of LSD and similar psychedelics that obliterated the record of the serious scientific research.<sup>6</sup> **LSD is not a “natural psychedelic substance.”**
- (3) Beginning in 1999, researchers at Johns Hopkins University resumed research with psilocybin focusing on its potential for mystical and spiritual experiences. This research was published in 2006 in the journal *Psychopharmacology*.<sup>7</sup> A wide variety of other research continues at Johns Hopkins Center for Psychedelic and Consciousness Research (<https://www.hopkinsmedicine.org/psychiatry/research/psychedelics-research>) in the treatment of addiction (e.g. nicotine and tobacco), anxiety and depression and other matters.

HB 548, as reported by the Health and Government Operations Committee, somewhat amended the definition. It is something of an improvement. I urge the Finance Committee adopt a favorable report with amendments.

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<sup>1</sup> Eric E. Sterling has lived in Maryland 31 years and in the 18<sup>th</sup> legislative district over 26 years. He most recently has served on the Advisory Commission on Policing of Montgomery County (2020-2024, Chair 2022-2024). In 2013, he was appointed by Governor Martin O'Malley to a four-year term on the Maryland Medical Cannabis Commission where, as chair of the Policy Committee, he was the principal author in 2015 of the regulations creating the medical cannabis industry in Maryland ([COMAR Title 10, Subtitle 62](#)). He was Executive Director of the Criminal Justice Policy Foundation (1989-2020). From 1979 to 1989 he was Assistant Counsel, U.S. House of Representatives, Committee on the Judiciary, responsible for drug abuse matters among many other issues. In Montgomery County, he has also served for 10 years on the Alcohol and Other Drug Abuse Advisory Council including three years as chair. He graduated from Haverford College with a B.A. in Religion in 1973 and received a J.D. from Villanova University Law School in 1976.

In 1990, he was a key adviser of Reuben Snake and the Native American Religious Freedom Project that helped enact the American Indian Religious Freedom Act Amendments of 1994, P.L.103-344 (Oct. 6, 1994) regarding use of peyote, and organized peyote worship in Greenbelt Park under the auspices of the National Park Service and the Native American Church of North America. He participated in the Pacific Symposia on Psychedelic Drugs at the Esalen Institute (which led to his cameo appearance in the motion picture about psilocybin mushrooms, *Fantastic Fungi* (2019), streaming on *Netflix*). He is the author of "Law Enforcement Against Entheogens: Is it Religious Persecution?" in Robert Forte (ed.), *Entheogens and the Future of Religion*, Council on Spiritual Practices, San Francisco, 1997.

<sup>2</sup> Centers for Disease Control and Prevention, "Suicide Data and Statistics," <https://www.cdc.gov/suicide/suicide-data-statistics.html>, accessed Feb. 19, 2024.

<sup>3</sup> U.S. Department of Veterans Affairs, "2023 National Veteran Suicide Prevention Annual Report," <https://www.mentalhealth.va.gov/docs/data-sheets/2023/2023-National-Veteran-Suicide-Prevention-Annual-Report-FINAL-508.pdf> at p. 5, accessed Feb. 19, 2024.

<sup>4</sup> Leo Shane, III, "VA plans research on using psychedelics to treat PTSD, depression," *Military Times*, Jan. 5, 2024, accessed Feb. 19, 2024. <https://www.militarytimes.com/veterans/2024/01/05/va-plans-research-on-using-psychedelics-to-treat-ptsd-depression/>

<sup>5</sup> Michael Pollan, *How to Change Your Mind*, Penguin Press, 2018, p. 52-58.

<sup>6</sup> President Richard Nixon in 1971 called Timothy Leary "the most dangerous man in America." Id. 58.

<sup>7</sup> Griffiths, R.R., W.A. Richards, U. McCann, and R. Jesse, "Psilocybin can Occasion Mystical-Type Experiences Having Substantial and Sustained Personal Meaning and Spiritual Significance." *Psychopharmacology* 187, no. 3 (2006) 268-83. doi:10.1007/s00213-006-0457-5. <https://pubmed.ncbi.nlm.nih.gov/16826400/> accessed Feb. 19, 2024.

**testimony SB 1009 psychedelics.pdf**

Uploaded by: Joseph Hobelmann

Position: FWA

*MDDCSAM is the Maryland state chapter of the American Society of Addiction Medicine whose members are physicians and other health providers who treat people with substance use disorders.*

## **SB 1009 Task Force on Responsible Use of Natural Psychedelic Substances**

### **SUPPORT WITH AMENDMENTS**

Finance Committee March 14, 2024

Dear Chair Beadle and members of the committee,

We have changed our position from 'Oppose' to 'Support with Amendments' for this Senate version. **The amendments below are also proposed by the Maryland Public Health Association (MdPHA).**

We are providing information on risks (1) because risks are often underestimated during enthusiasm for a new therapy, and (2) to illustrate that a **psychedelics Task Force must be unconstrained and free to consider all scenarios, not legally bound to make recommendations regarding changes needed to create a "Maryland Natural Psychedelic Substance Access Program" a priori.**

**We share the excitement about expected benefits of psychedelics** enumerated by other proponents. Though generally safe, harms have been reported in a minority of those using psychedelics. (Raison). Long-term adverse experiences following psychedelic use **can persist for weeks, months or years.** (Evans) After ingesting psilocybin mushrooms, 2.6% behaved in a physically aggressive or violent manner, **2.7% received medical help**, and of those whose experience occurred more than a year earlier, **7.6% sought treatment for enduring psychological symptoms.** (Carbonaro) Psychedelics have **the potential to be addicting.** (Prekupec) (Flameling). **Hallucinogen-associated ER visits and hospitalizations each increased by over 50%** in California from 2016 to 2022. (Garel). Some individuals believe that their psychedelic use had contributed to **suicidal ideation, aggressive or impulsive behavior and/or misuse of benzodiazepines and opiates.** (Raison) Since 2013 over 4,000 psilocybin-involved exposures among adolescents and young adults, were reported to the National Poison Data System. This number was initially stable, but **tripled from 2019 to 2022 among adolescents and more than doubled among young adults, compared to 2018.** (Farah 2024) The American Psychiatric Association has urged caution in their 2022 Position Statement on psychedelics excerpted below. (APA)

**Psychedelic-associated harms have not yet been adequately studied, especially in naturalistic settings.** (Raison) (Evans).

### **MDDCSAM AND MdPHA PROPOSED AMENDMENTS:**

Starting at page 3, line 3:

The Task Force shall: (1) study:

- (i) existing laws, policies, and practices relating to the use of natural psychedelic substances;
- (ii) the best available science and data on public benefits of responsible legal access to and use of natural psychedelic substances;

(iii) opportunities to maximize public benefits of if responsible legal access to and use of natural psychedelic substances becomes available.

(iv) the best available data on potential risks of responsible legal access to and use of natural psychedelic substances;

Whether or not potential benefits outweigh potential risks of legal access to and use of natural psychedelic substances, compared to decriminalization of these substances alone; and

(v) opportunities to mitigate potential risks of legal access to and use of natural psychedelic substances; and potential risks and benefits of legal access to and use of natural psychedelic substances limited to Food and Drug Administration (FDA)-approved substances and indications when available vs. legal access to these substances and indications beyond those approved by the FDA.

(vi) barriers health care practitioners and facilitators may encounter relating if legal access to natural psychedelic substances becomes available, including barriers relating to insurance, restrictions by licensing and credentialing entities, zoning, advertising, and financial services

The Task Force shall . . .

(2) make recommendations regarding whether or not a mechanism for legal access to natural psychedelics is advisable, including any changes to State law, policy, and practices that would be needed to create such a mechanism ~~a Maryland Natural Psychedelic Substance Access Program~~ that enables broad, equitable, and affordable access to psychedelic substances, including:

(i) permitting requirements, including requirements regarding education and safety;

(ii) access to treatment and regulated support; and

(iii) production of natural psychedelic substances; restrictions by licensing and credentialing entities, zoning, advertising, and financial services.

## **RATIONALE:**

The FDA's scientific process for establishing drug safety and efficacy has only been bypassed when "medical cannabis" was established (for good reason) by state legislatures as a back-door means of legalizing a substance already widely used illegally. This has reduced devastating legal consequences, but required state legislators to establish pseudo-medical indications (Burnett) without scientific considerations of harms that have resulted (e.g., increases in cannabis use disorder).

Compared to cannabis, psychedelics are used illegally by far fewer people. Also, serious legal consequences can and should be addressed by decriminalization now, possibly with a system of state-licensed retailers. **The need for the state to determine approval of substances, indications and precautions, bypassing the FDA process at this time, is not clear and should be determined by the Task Force.**

**Unlike cannabis, FDA approval of psychedelics appears imminent** with several phase II and phase III clinical trials completed or underway. Compass Pathways, Ltd. and Usona Institute, have received FDA “breakthrough” designation for psilocybin to treat depression. Half-a-dozen ongoing clinical trials are listed on the ClinicalTrials.gov website.

Unlike state legislatures, the FDA has the expertise to weigh scientific evidence for safety and efficacy. Unlike state legislatures, the FDA is **far less susceptible to ongoing commercial and political influence that tends to grow as commercial interests expand**. Several companies, some valued at over a billion dollars, have emerged to compete in the psychedelics market. (Raison). Alcohol and tobacco corporations continue to exert influence over laws and regulations. (Barry) (WHO) **Legalized cannabis, along with its important benefits, will lead to a powerful consolidated market, and has already led to a small army of cannabis providers promoting and initiating long-term treatment for various conditions without evidence of effectiveness, likely to result in harms to some patients**. Patients get much or most of their medical cannabis advice from dispensary staff (“budtenders”) with no expertise and an incentive to make sales. A study of dispensaries found that nearly 70% recommended cannabis products to manage nausea in the first trimester of pregnancy contrary to medical society recommendations. (Dickson)

**We strongly support all of the bill’s decriminalization provisions, which can and should be enacted now.**

With these amendments, we urge a favorable report.

Respectfully,

Joseph A. Adams, MD, FASAM, board-certified in internal medicine and addiction medicine

David A. Gorelick, MD, PhD, DLFAPA, FASAM, board-certified in psychiatry and addiction medicine

#### **REFERENCES:**

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 "...given growing public interest and commercial interest, ... there is the risk that use of psychedelics for purported clinical goals may outpace evidence-based research and regulatory approval.

"There is currently inadequate scientific evidence for endorsing the use of psychedelics to treat any psychiatric disorder except within the context of approved investigational studies. APA supports continued research and therapeutic discovery into psychedelic agents with the same scientific integrity and regulatory standards applied to other promising therapies in medicine..."

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# **UNF on SB1009 vmcavoy.pdf**

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Position: UNF

SB 1009 Senator Feldman

UNFavorable on

Task Force on Responsible (LOL) Use of Natural Psychedelic Substances

vince mcavoy baltimore md

Senators of Finance,

Bills such as Senator Feldman's SB1009 are irresponsible. It is important for people who hold your seats to have insights deeper than the general public. The common drug user cares not about societal concerns – they hear that more drugs are being made available through Annapolis flawed legislation and simply want access to drugs. You may have heard America is going through unparalleled levels of drug addiction. Your bills should only be dealing with stopping all flows of drugs. The burden you accepted means to work for the people, in spite of their baser unrepentant choices. Yet Annapolis works more like shop owners to the kids in drug candy stores. What kind of beings are you that you all keep pushing drugs?

Marijuana has been unleashed on Maryland for less than a year. Lawlessness, crime, worst ever child and adult suicide rates, unending addiction, endless social decay/coarseness proliferate in Maryland. Sheriffs testify to the crime, violent group aggression and problems detailed by ongoing complaints by businesses around dope dispensaries.

Since the permissive effort toward legalization in my state, Maryland (and particularly the Baltimore region) has seen horrible changes due to use of marijuana products. Increased crime. Increased robbery and carjackings. The stench of marijuana on the roads from early in the morning to very late. Large stores we all shop in reeking after only 1 or 2 individuals exhale inside a WholeFoods or a Marshall's.

<https://www.cnn.com/2023/09/06/health/marijuana-traffic-accidents-wellness/index.html>

Are you delegates not reading the harm drug have caused society in just the past 5 years? You should be stopping harm, not trying to find more ways for the dope industry to profit off of harming Marylanders. Marijuana is now THE number one drug of addiction in America. It is the number TWO cause of deaths on highways. This notion of "medical use" (much less the misnomer "responsible use") for psychedelic drugs is in direct defiance of the U.S. Constitution and federal supremacy on such matters.

These are Schedule I drugs, having no proven medical benefits. You are paid to be the gatekeepers against industry preying on Marylanders.

**Chairman Andy Harris Issues Statement In Response To Study Showing Recreational Marijuana Users Commonly Struggle With Cannabis Use Disorder August 31, 2023 Washington, D.C.**

Congressman Andy Harris M.D. (MD-01), Chairman of the House Appropriations Subcommittee on Agriculture, Rural Development, Food and Drug Administration, and Related Agencies released the following statement in response to the Journal of the American Medical Association Network Open (JAMA) study showing 21% of recreational cannabis users struggle with cannabis use disorder (CUD) after cannabis became legal. According to the National Health Institute, clinicians characterize cannabis use disorder as a problematic use of cannabis. Common symptoms include: 1. A persistent desire or unsuccessful efforts to cut down or

control cannabis use. 2. A great deal of time is spent in activities necessary to obtain cannabis, use cannabis, or recover from its effects. 3. Craving, or a strong desire or urge to use cannabis. According to the study, recreational cannabis users experienced a more severe form of CUD whereas the disorder was still <https://harris.house.gov/media/press-releases/chairman-harris-issues-statement-responsestudyshowing-recreational-marijuana>  
<https://www.sciencedirect.com/science/article/abs/pii/S0001457519310267>

### **Public Stench, Foul Behavior**

In public, this stench serves as indicators of the products where vaping and smoking marijuana blunts occurs. Unlike decades ago, this stench is often near children now. The widespread use of psychedelics places children inside vehicles on the road at perilous risk. The health hazards which children experience would be of particular concern for most responsible adults. In addition to the short- and long-term physical, moral, mental and social harm being imposed on children – on MERE CHILDREN – where psychedelics are used, this exposure of psychedelics and extremely high-potency THC products means that children are being herded into unsafe environments.

### **Parens Patriae**

And now to expand to another drug or drugs which will make people unsafe even walking across the street, operating any equipment, or being near children?!?

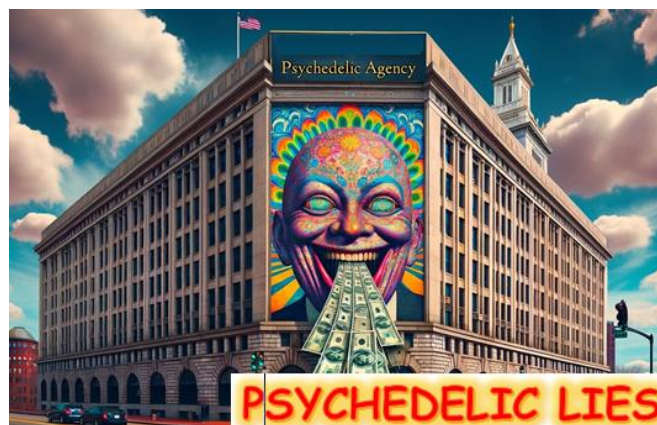
This is a joke.

This attraction to recreationally killing braincells, increasing the risk of mental illness and psychedelic/marijuana psychosis gives both secular and non-secular reasons to ban using drugs, not find excuses to allow their use. The use of marijuana brings self-damage and damage of children's lives due to drug use.

Think of the stories of people who end up in Emergency Rooms due to psychedelic drug use, including extreme THC marijuana products. Are they stress-free? Are they effectively battling anxiety? No. They're worse.

These are the horrible outcomes for use of LSD

It can also trigger panic attacks, psychotic episodes, disturbing anxiety, paranoia, pain, and a feeling of dying or going insane.



### **Drug / Pharmaceutical Bribery Coercing Lawmakers**

So who's perpetuating these lies without valid medical/psychological data to support such flawed claims about any benefit to these hallucinogens? The psychedelic industry. You

Senators have a responsibility which you shrugged off when it came to SB516(2023). Don't you think it's about time your consciences caught up with responsible-acting to allay this evil of drug use/ drug experimentation/ drug marketing in Maryland? I do. Families who've ever had someone end up in the E.R. from these poisons feel the same way.

### **The Catechism Condemns Drug Use for Recreational Purposes**

The Catechism categorically condemns recreational drug use as sinful and harmful to the individual, noting: "The use of drugs inflicts very grave damage on human health and life..." The Catechism's pronouncement condemning recreational drug use, calls it "a scourge", and proclaiming that there is "no room for illicit drugs, for alcohol abuse, [or] other forms of addiction ". It further points out how drug addiction is "a new form of slavery", and those who abuse drugs have "lost their freedom." There are serious, suicide-inducing, harmful side effects from psychedelic and marijuana use, especially on young users. It is also prohibited by federal law. The Church unequivocally condemns the use of drugs (including marijuana) for purely recreational purposes. Stop endorsing drugs for Marylanders.

humbly  
~vince