Károli University, Institute of Psychology

ERPB-BP\$2636 Psychedelic Psychotherapy

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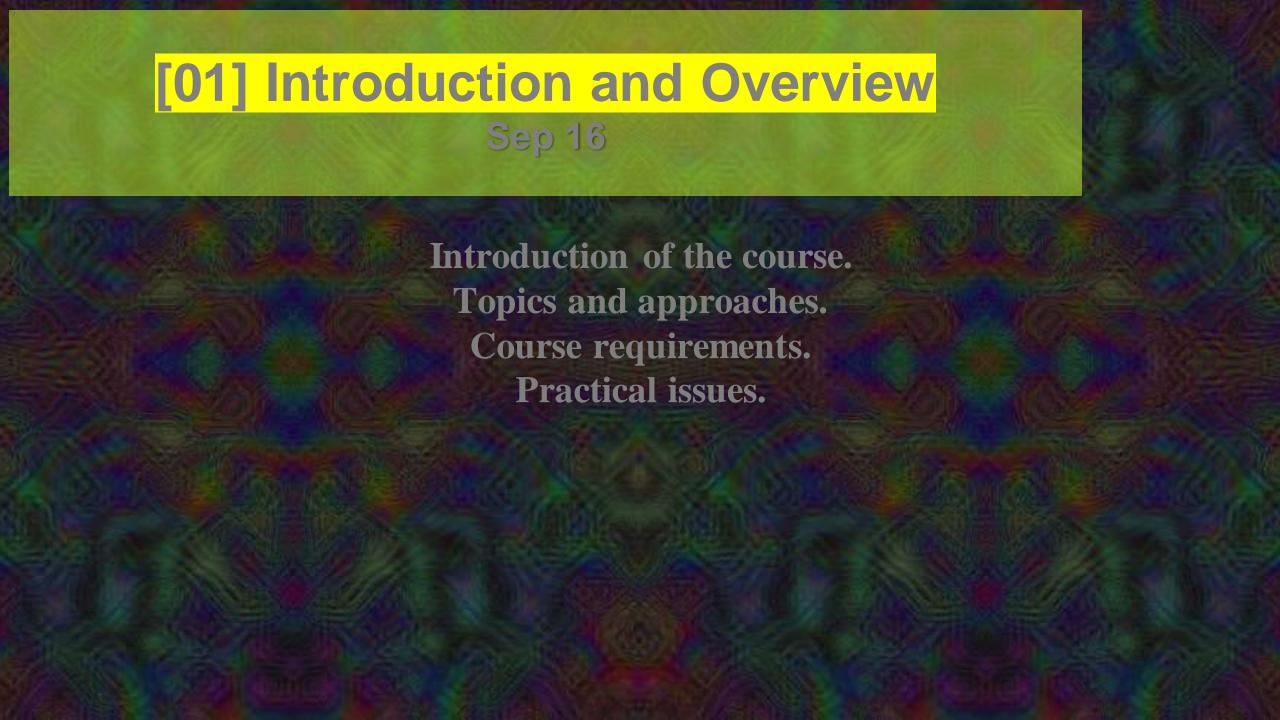


Psychedelic Psychotherapy presentations (12 x 1.5 h)

[01] Sep 16	Introduction and Overview
[02] Sep 23	Altered State Assisted Therapies
[03] Sep 30	The Broader Context of Psychedelics
[04] Oct 07	Psychedelics: Substance Information
[05] Oct 14	Psychology of Psychedelic Experience
[06] Oct 21	Psychedelics: Research, Experiments, Healing
[07] Nov 11	Psychedelic-Assisted Psychotherapies: Theory
[08] Nov 18	Psychedelic-Assisted Psychotherapies: Practice I (MDMA)
[09] Nov 25	Psychedelic-Assisted Psychotherapies: Practice II (psilocybin, ketamine)
[10] Dec 02	Psychedelic-Assisted Psychotherapies: Practice III (LSD, ibogaine, ayahuasca)
[11] Dec 09	Psychedelic Experience Integration
[12] Dec 16	Summary and Outlook

Course Topics

- altered states of consciousness; psychedelics
- transpersonal psychology; trauma processing and regression
- psychedelic research, experiments and healing
- psychometric measuring; addictions and dependence; assisted psychotherapies; ethics
- psychedelic and psycholytic therapies; therapist training; therapy protocols
- MDMA, psilocybin, ketamine, LSD, ibogaine, ayahuasca
- psychedelic experience integration



[02] Altered State Assisted Therapies Sep 23

Altered states of consciousness (ASC): definitions and phenomena.

Spontaneous, pathological and induced states.

Physiological, pharmacological and psychological inductions.

Altering subsystems of consciousness.

Therapeutic applications of ASC.

[03] The Broader Context of Psychedelics Sep 30

Hallucinations: definitions and phenomena.
Hallucinogens: dissociative, deliriant, psychedelic.
Other related substances.
Purposes of substance use.
The drug instrumentalisation hypothesis.
Psychonaut subculture.
Biohacking.

[04] Psychedelics: Substance Information Oct 07

History, physiology, psychology and phenomenology of psychedelics and related substances:

ayahuasca cannabis DMT ibogaine ketamine LSD

MDMA
muscimol
psilocybin
salvinorin A
LSA
mescaline

[05] Psychology of Psychedelic Experience Oct 14

Psychoeducation.
Theories and models.
Set and setting.
Intention and integration.
Deconditioning agents.
Transpersonality and spirituality.
Entheogens.

Trauma processing and regression.
Stanislav Grof and the perinatal matrix.
Metaphysical considerations.

[06] Psychedelics: Research, Experiments, Healing Oct 21

The dawn, golden age, pause and renaissance of psychedelic research.

Early results.

Current research directions.

Psychometric measuring instruments.

Treatments of addictions and dependence.

Hospice use: end-life anxiety.

[07] Psychedelic Assisted Psychotherapies: Theory Nov 11

Ethical principles.
Psychedelic and psycholytic therapies.
Lay and underground therapies.
Therapist training process.
Therapy protocols: MAPS, Johns Hopkins, Kenézy hospital.

[08] Psychedelic Assisted Psychotherapies: Practice I

Nov 18

MDMA

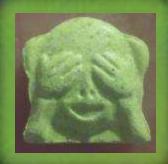














[09] Psychedelic Assisted Psychotherapies: Practice II

Nov 25



Psilocybin Ketamine



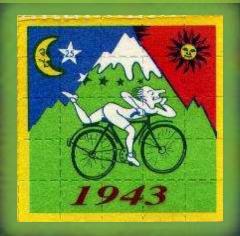


[10] Psychedelic Assisted Psychotherapies: Practice III

Dec 2



LSD Ibogaine Ayahuasca













[11] Psychedelic Experience Integration Dec 09

Client groups. Conditions and environment of client-work. Search for meaning, apprehension. The lived body experience. Psychedelic 'bypass' and ego inflation. Non-pathologising language use. Transference and counter-transference. Data protection.

Psychedelic Experience Integration

- not psychedelic-assisted therapeutic session, but "post-work"
- in ideal case: paired with "pre-work" (preparation)
- in ideal case: as part of a longer client relationship
- in ideal case: soon after the experience

Client groups

e.g.: integration of an ayahuasca ceremony

e.g.: talking about psychedelic use with self-knowledge intention

e.g.: making sense of an unintended/unexpected/difficult trip

e.g.: knowledgeable/educated preparation for a trip + its post-work



- safe setting! ("hold the space")
- trust (based on previous fame/merits)
- safety measures, both directions
- data recording, data protection, discretion
- defining the limits of competence

Search for meaning, apprehension

- knowing the client's life situation, life problems
- client-side ideology/world-view/human-ideal/metaphysics
- visions, symbols, archetypes
- questions asked and answers received
- focusing on intuitive processes
- deconditioning, change of attitude/behaviour
- + transfer to everyday life: self-monitoring, old and new routines

The lived body experience

- the body as a memory storage
- preverbal (perinatal, infant) experiences
- one-time, non-understood, non-reflected childhood experiences
- body temperature, skin contact, olfactory and oral experiences, nutrition
- ("gut") feelings, preferences, disgusts, fears etc.
- blocks, inhibitions, automatisms etc.
- passively/subconsciously held self-defence mechanisms
- traumas, dissociations, depersonalisation-derealisation
- source of joy, well-being, openness, nearing, trust

Psychedelic 'bypass' and ego inflation

- actually "spiritual bypass": over-emphasized importance
- negligence of other, more important (laborious) areas
- experience-centrism, experience-overloading, experience-repetition
- quantitative (self-)measurement, hierarchies, "levels"
- direction is ego-inflation instead of ego-dissolution
- identity-building mainly in social, for-profit environment
- megalomania, increased feeling of 'gnosis', obsessive transfer of 'knowledge' (to others)

Non-pathologising language use

- - "narcotic", "abuse", "deviance", "unreal" etc.
- drug demonising, attributing malicious agency
- + knowledge of traditional healing frameworks
- + e.g. transfer of knowledge about medicinal plants
- + e.g. usage of psychointegration agents
- + e.g. experiencing altered states with autognostic intentions
- + accepting others' subjective realities

Transference and counter-transference

- transference: patient's feelings (toward others) projected on the therapist
- counter-transference: therapist's feelings (toward others or as reaction) in the direction of the patient
- anger, distrust, "parentising", "guruising", erotica, paranoia etc.
- delusions, exaggerations, errors from under-/overratings

Data protection

- both directions!
- potential drug crime consequences for the client
- data recording: notes, audio records (symmetry recommended)
- data marking: identification (by voice/information), code/mark
- data storing: password-protected disk/partition/file container/zip
- unencrypted storage in the cloud = no data protection!
- no "shady" stuff (in the presence of witnesses / if recorded!)
- self-defense of personal (non-role) information
- professional discretion: collegial sharing of cases e.g. pseudonymous
- obligations by law to report (not to denunciate!) in certain cases

Thank you for your attention!



Next (last) lecture:

[12] Summary and Outlook

Dec 16 Thursday 10:45