

Social Work and Psychedelics: Transformative Practice and Perspectives

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Background

- Psychedelics are gaining academic and public attention with the media reporting on their potential for mental health treatments and self-care (Pollan, 2018; Soares et al., 2022).
- Legislative changes are underway in Canada and the United States (Government of Alberta, 2021; Herrington, 2023).
- Social workers may support clients who use therapeutic psychedelics in integrating their experiences into daily life (Pilecki, 2021).
- There is a limited understanding of how social workers perceive and integrate this approach into their practice.
- To date, only a handful of studies have explored the implications of psychedelics for the social work profession and the knowledge, attitudes, and professional responses of social workers (Ellow, 2022, Hutchison & Bressi, 2020).

Research Aim & Questions

This study aimed to investigate the motivations and methods of social workers integrating therapeutic psychedelics into their practice, along with factors contributing to best practices in delivering and coordinating psychedelic-assisted therapy ethically by answering the following research questions:

- 1) In what ways are Canadian social workers engaging with the therapeutic use of psychedelics in their current professional practice and what is their motivation for doing so?
- 2) What are the best practices for engaging with therapeutic psychedelics in social work practice, as informed by the experiences and perspectives of social workers in a real-world setting?
- 3) What training and support are needed for ethical practice with the therapeutic usage of psychedelics?

Key Findings & Recommendations

The study's results demonstrate how Canadian social workers engage with therapeutic psychedelics while adhering to existing regulations. The approaches used include harm reduction and substance-specific interventions, which vary depending on the regulatory limitations. Engagement with therapeutic psychedelics is primarily influenced by legal constraints. Motivations for engagement include addressing limitations in standard trauma treatments and aligning with personal and professional values.

Recommendations

- Adherence to an ethical framework and a community code of conduct is crucial.
- An extensive informed consent process is crucial, alongside strong clinical decision-making skills for unforeseen situations.
- Conscious and responsible use of self during therapeutic sessions.
- Robust training programs with experiential components.
- Regular clinical supervision and case consultation are deemed essential for ethical practice.

Methodology

Multiple Case Study

- A case study is "an empirical method that investigates a contemporary phenomenon (the "case") in depth and within its real-world context, especially when the boundaries between phenomenon and context may not be evident" (Yin, 2017).
- A Multiple case study design was chosen for this exploratory research to obtain a comprehensive understanding due to the ability to yield more robust findings and facilitate cross-case comparisons (Yin, 2017).

Sample

- Participants were recruited using a purposive technique with maximum variation sampling. The sample had a range of backgrounds and experiences, including variations in approach, setting, or therapeutic substance to make it heterogenic.
- The sample size was three cases, with each case representing an individual social worker and their unique context

Inclusion / Exclusion Criteria

- Individuals who are currently registered social workers in Canada and over 22 years of age were eligible to participate. They are interacting with psychedelics professionally, within their scope of practice or considering training to do so.

Data Collection

- Data was collected from September 2023 to January 2024
- Sources of data included semi-structured interviews, with two conducted with each participant.
- Documentary data was collected including psychedelic therapy training curricula, and module outlines, along with press releases, and legislative items.

Data Analysis

- Data were organized into case files, coded, and categorized into broad themes using content and thematic analysis.
- A summary description was written for each case and then a cross-case analysis was completed comparing contexts and themes.

Research Rigour:

- The study worked to establish credibility by using multiple data sources and to confirm the analysis of findings by comparing and contrasting the individual cases.
- Member reflections were used to ensure that the interpretation of the preliminary findings was considered accurate and fair by participants.
- A process of reflexivity was used throughout the research journey to continually reflect on the researcher's role, biases, values, and relationships. This was primarily achieved through journaling, bracketing, and transparently acknowledging any relevant biases or motivations.

Multidisciplinary Opportunities

Interdisciplinary Collaboration

- Foster partnerships with psychiatrists, psychologists, nurses, and other healthcare professionals involved in psychedelic therapy to provide comprehensive care to clients.

Case Consultation

- Offer social work expertise in case consultations to multidisciplinary teams, providing insights into psychosocial factors, family dynamics, cultural considerations, and community resources.

Patient Screening

- Collaborate with medical professionals to conduct thorough patient screenings, including assessments of mental health history, substance use, trauma exposure, and social support systems.

Therapeutic Integration

- Work closely with clients to facilitate the integration of psychedelic experiences into daily life, addressing emotional processing, meaning-making, and behavioural change.

Advocacy and Policy Change

- Advocate for policy reforms that support the responsible and equitable use of psychedelic therapy, addressing issues related to regulation, licensure, reimbursement, and access to care.

The University of Calgary Conjoint Faculty Research Ethics Board Has Approved This Study (R E B 2 3 - 0 0 8 2)

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