RESEARCH ARTICLE

“Culture and psychedelic psychotherapy: Ethnic and racial themes from three black women therapists”

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The promise that Psychedelic Medicine holds for debilitating, treatment-resistant, disorders rests as much upon novel explanations of illness as it does upon novel treatments. If actualized, Psychedelic Medicine will revolutionize health care and theories of healing. Psychedelic medicine’s *unintended* consequences may prove to be just as far-reaching, as non-ordinary states of consciousness, induced by psychedelics, raise fundamental questions about knowledge, our place in the world, and about reality itself. In particular, such states reveal the anthropocentric fiction of an ontologically distinct Self at the heart of individual, social and ecological malaise. As the testimonies of the three authors (who, though trained therapists, assumed the role of clients in this study) reveal, psychedelic healing is an inextricably embodied process, informed by historical, social and cultural factors, and tied to community both present and past, visible and invisible. Healing occurs, at least in part, through the remembrance of and re-connection with “things past”—a recovering and interweaving of one’s personal narrative with one’s collective narrative, including embodied collective trauma.

That the authors at the center of this study are African American women was not incidental to their psychedelic experiences, any more than it is accidental to their everyday embodied ways of being. The “I” at the center of their experiences is not an unchanging entity or substance, but a historically, culturally, and socially constituted one. And, as the experiences revealed, it is one powerfully shaped by the experience of racialized oppression.

Psychedelics make short work of our pretense to self-sufficiency by removing protective shields, often forcefully, and leaving us exposed. While this can be a place of radical vulnerability, it is also, as the testimonials here show, the ground out of which healing emerges. With the presence of a skilled therapist, we can come to identify fear as nothing more than the desperate pleas of the disintegrating illusory Self, and we can come to experience the death of this Self as the condition for authentic connection with others. Wholeness, not annihilation, emerges in its wake, along with feelings of connectedness, love and security.

While this is the *promise* of psychedelics, it is not guaranteed. Despite the great hopes of the pharmaceutical industry, as well as a cultural predilection for “quick-fixes”, healing is not simply a function of the psychedelic substance ingested. Research continues to mount confirming the centrality of “set and setting” to therapeutic outcomes. The more we learn about the states of hyper-suggestibility and receptivity that psychedelics are apt to occasion, the more the role of the therapeutic encounter takes center-stage. Healing hinges, at least in part, on being seen, and on having one’s experience heard and validated in ways that go beyond discursive communication. At a minimum, the therapist needs to bear non-judgemental witness to the life of the other, and resist adding their own interpretative layers onto the unfolding experiences.

A slip up here can be momentous. We saw for instance when, during the psychedelic session, author-Therapist # 1 despaired of her inability to effectively communicate her challenging experiences, the therapist accompanying her suggested, “Maybe there is a part of you that doesn’t want to be understood.” This was hurtful as it invalidated what Therapist # 1 was struggling so hard to communicate, and because it was wrong. It was damaging not only to the therapeutic bond, but to the healing potential of the experience itself. The misstep emerged from under-estimating the impact that everyday (and racially informed) lived experiences can have on the psychedelic journey.

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Being a Black woman was at the very center of the psychedelic experience for the three author-therapists. While each experienced some displacement of the Self, none transcended their lived, racialized body to awaken to some disembodied reality—idealized in much of the psychedelic literature. Instead, their racialized and gendered bodies weighed them down. In the words of one woman, “What can I do to speed up my body? My body is slowing me down”. Cultural trauma, like the force of gravity, kept pulling the women back to the earth of actual embodied experience—to a degree that the observing therapists seemed ill-prepared for.

The psychedelic journey did not provide the author-therapists the experience of a deracinated, disembodied self. Instead, it provided them something of perhaps greater value—the possibility of witnessing, with self-compassion, the impact of trauma on their own lives, and of linking their own individual experiences within the larger narrative of racial and cultural trauma. The psychedelic experience provided each a longitudinal, transgenerational perspective of their own lives, connecting them to healing presence of ancestors and to their rich, though challenging, cultural history. This seems like a remarkable gift, and points to the enormous potential of these therapies. But it also points to the need for therapists to be properly prepared and trained, lest they do more harm than good.

Another striking feature of the article is the assertive appearance of spirituality in the testimonials of the author-therapists. On one hand, this should not be surprising given that, since the 1960s, studies have revealed spirituality to be a common feature of psychedelic experiences, and positively associated with healing. Still, in *this study*, it is university based therapist-researchers (albeit in the role of patients/clients), who invoke the language of the sacred. This is unusual. I suggest it is also significant, and indicative of the paradigm-shattering power of Psychedelic Medicine. And yet I also wonder if some of the difficulties that the author-therapists experienced may have emerged from the broader societal discomfort with spirituality. While the language of the “supernatural” may be expected to make an appearance in religious settings, or be tolerated in private, it is not expected to show up in the halls of science.

One of the defining characteristics of Modernity is its rejection of a sacred worldview as superstitious and ignorant. Science, Modernity’s primary epistemological arm, shuns metaphysics in its relentless search for truth within physical, material reality. The institutions of liberal, secular society (law, academe, medicine) evince the same discomfort with the non-material and prefer to locate agency within social or political dynamics, never spiritual ones. Moreover, until recently, psychiatry routinely discredited dramatic spiritual experiences as deeply pathological (Hufford, 2008).

Psychedelic medicine endangers this well-ordered system by destabilizing deeply rooted cultural assumptions; it threatens to alter the very rules of the epistemological game. Psychedelic experiences lead to a direct perception of spiritual realities that possess both a veridical and noetic quality. The experiences are often too forceful, and the knowledge too meaningful, to be dismissed as illusory or reduced to mere metaphor.

Equally striking from the perspective of anthropology is the specific nature of the spiritual experiences articulated in the article, and their patent connection with African Traditional Religions (ATRs). Two of the authors had direct, poignant, encounters with ancestors; one described being offered a bird’s eye view of her “ancestral history”, while soaring on a *lapa* (African wrap skirt). It is significant that healing came in the form of a reconnection with African ancestral traditions, which themselves have been the object of cultural chauvinism and racist discrimination. Ancestors play an important role in African Traditional Religions, as they do in many traditions worldwide. But in 19th century Africa, their popular veneration signified primitivity and irrationality to the governing colonial authorities, as they did to the Christian missionaries who sought to replace them with more “acceptable” objects of piety. By the late 19th century, expressions of African religiosity became *scientifically* stigmatized within the prevailing paradigm of cultural evolution. Early scholars of comparative religion (including the “Father” of Anthropology E.B. Tylor, 1870) adjudged them to be the lowest form of human religiosity. The impact of centuries-long discrimination is evident in the academic discipline of Religious Studies, which remains dominated by Christian understandings of religion and which continues to marginalize the study of African Traditional Religions—a negation which, it can be argued, reinforces colonist discourses (Cupples & Grosfoguel, 2018; Turyatunga, 2019). African religions, if studied at all, are usually done so as expressions of “culture” within anthropology courses, reinforcing their delegitimization as viable spiritual paths. Today traditional African religions are marginalized within most African communities as well,¹ as the latter share the colonialist view of traditional religions as pre-modern and irrational (Olupona, 2014).

Religious traditions carry a people’s most fundamental beliefs about the world, about themselves, and about their destiny. The near disappearance and widespread stigmatization of traditional African spiritualities could not have occurred without profound and long-lasting consequences, and surely constitutes an important, albeit under-explored, dimension of the cultural trauma carried by Africans and African Americans.

Given their history, the appearance of African Traditional Religions during the psychedelic experiences of the three African American women therapists is noteworthy. The willingness of the women to write about their African spiritual heritage, including their connection with their ancestors, is courageous, and serves as a pointed challenge to post-Enlightenment contempt for the non-material, and long standing Eurocentric chauvinisms against African spirituality in particular. Importantly, it also points to a key dimension of the healing process itself. Although inevitably fraught with pain, healing is a process of “making whole”². It

¹That today are largely Christianized or Islamized.

²Healing, in the words of the psychologist Marion Woodman, “making whole”.

is borne of the encounter with the previously disparaged or denied, whether on the psychological, interpersonal or cultural level.

Psychedelic experiences are problematizing hitherto dominant ways of knowing and being. They take direct aim at those post-Enlightenment knowledge disciplines that rest upon the fiction of an objective, detached, disembodied and deracinated Self. Indirectly, but no less authoritatively, they undermine Eurocentric claims to universalism by exposing its cultural chauvinism and historical contingency. Psychedelic Medicine may be the catalyst for the emergence of both a new paradigm of knowing and of healing, where deeply rooted epistemological biases are exposed and cultural traumas healed. But, as the accounts of the three women pointedly revealed, psychedelic therapies are not without their challenges and dangers. While vulnerability and pain are inescapably at the heart of all healing and meaning-making processes, they may be foregrounded within the psychedelic encounter, underscoring the importance of the careful creation of suitable contexts for healing, and the need for skilled culturally-sensitive therapists. If, as the research suggests, the therapeutic encounter is the crucible where

psychedelic healing begins, the urgency of getting it right cannot be overstated.

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