

## FINAL REPORT

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# Survey on Psychedelic Therapy Curricula in Academia

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**Presented by:**

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BrainFutures

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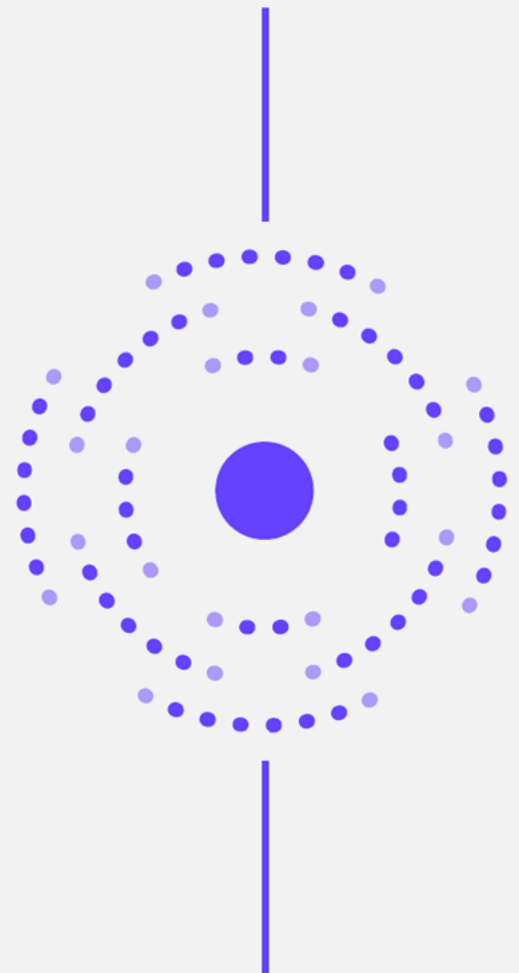
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# Introduction

Psychedelic therapy is a treatment using psychedelic substances in which the drug's effects, both biological and psychological, play a significant role in facilitating a psychotherapeutic intervention (Guss, et al., 2020).<sup>1</sup> Understanding how psychedelic therapy is being taught in various postsecondary educational training contexts will assist interested program administrators in exploring how they can add different types of psychedelic therapy-related curricular offerings to their current academic programs. Such psychedelic therapy-related curricular offerings include 1) course content, 2) courses, 3) entire program tracks and certification programs, or 4) any other training opportunities that include psychedelic therapy-related learning objectives, content, or instruction such as clinical experiences.

Accordingly, to better understand the current curricular landscape surrounding psychedelic therapy within academic programs, BrainFutures engaged NORC at the University of Chicago (NORC) to conduct the Survey on Psychedelic Therapy Curricula in Academia (henceforth referred to as the Survey). The Survey included the development and administration of a survey about the implementation of psychedelic therapy-related curricula across various academic training contexts. Specifically, the Survey examined several critical areas related to psychedelic therapy curricula, including:

**BrainFutures** is a national nonprofit dedicated to accelerating the equitable access of effective, evidence-based, neuroscientific interventions that enhance mental health and wellbeing.

- 1) The current level of implementation of and interest in psychedelic therapy-related curricula;
- 2) The demand for open-source psychedelic therapy curricula;
- 3) Key factors associated with implementing psychedelic therapy-related curricula in various training programs; and
- 4) Individual knowledge, attitudes, and experiences related to psychedelic therapy.

The Survey was sent to a sample of higher education faculty and administrators across the United States who are involved in the training of those entering various fields where psychedelic therapy may be included as a therapeutic modality practiced by professions such as counseling, marriage and family therapy, nursing, pharmacy, psychiatry, psychology, pharmacology, and social work. Findings in the following report will be limited to a subsample of respondents from counseling/social work, psychology, and nursing academic programs ( $n = 363$ ).<sup>2</sup> This is due to the

<sup>1</sup> Given shifting norms within the field of psychedelic medicine, this report uses psychedelic therapy and psychedelic-assisted therapy (PAT) interchangeably.

<sup>2</sup> Throughout the report, respondents from counseling/social work, psychology, and nursing programs may also be referred to as counseling/social work respondents, psychology respondents, and nursing respondents, respectively.

small number of survey participants representing the other academic programs (see Table 1). Findings in the supplemental *Item Frequencies and Percentages Report* include results from the total survey sample ( $N = 418$ ). Insights from this Survey can be used to inform a variety of academic stakeholders interested in the development of psychedelic therapy-related curricular offerings.

## Methodology

NORC collaborated with BrainFutures to provide research support with regards to the development of the survey instrument, sampling, survey administration, data analysis, and reporting. This section describes the methodologies employed during each phase of the study.<sup>3</sup>

## Survey Instrument

During the first stage of survey development, six in-depth interviews were conducted with academic leaders currently involved in the training of those entering fields where psychedelic therapy may be used as a treatment modality. These interviews informed the development of items included in the final instrument. The final instrument was also supplemented by existing measures identified through a review of the current literature on attitudes towards psychedelics, psychedelic therapy, and psychedelic medicine (e.g., Barnett et al., 2018; Kucsera, 2022; Luoma et al., 2023). The final survey instrument examined several critical areas related to psychedelic therapy curricula across the following four sections:

### **Section 1: Current Landscape and Potential for Psychedelic Therapy-Related Curricula**

- Current Psychedelic Therapy-Related Curricular Landscape
- Assessing the Potential for Open-Source Psychedelic Therapy Curricula

### **Section 2: Program-Specific Attitudes and Needs**

- Relevant Resources and Barriers to Curricular Implementation
- Perception of Current Faculty Needs and Abilities

### **Section 3: Attitudes About Psychedelic Therapy Curricula, Psychedelic Therapy, and Psychedelics**

- Attitudes Towards the Development and Implementation of Psychedelic Therapy-Related Curricula
- Attitudes About Psychedelic Therapy and Psychedelics

### **Section 4: Psychedelic Therapy-Related Background, Familiarity, and Experiences**

<sup>3</sup> NORC abides by the American Association for Public Opinion Research's (AAPOR's) Transparency Initiative to help ensure consistent access to background information and methods related to our research. This section meets and exceeds the high reporting standards set by AAPOR.

- Professional Concerns Surrounding Psychedelic Therapy
- Background and Familiarity with Psychedelic Therapy and Psychedelics
- Familiarity with Psychedelics and Previous Psychedelic Therapy Educational Experiences

## Study Population and Sampling

The Survey was conducted to understand the perceptions and experiences of higher education faculty and administrators as they relate to psychedelic therapy-related curricular implementation. The Survey's sample was derived in two stages. In the first stage, a representative sample of federally recognized postsecondary education institutions was selected from the U.S. Department of Education's (USED) Integrated Postsecondary Education Data System (IPEDS). Institutions were eligible for selection if they were a) active, b) 4-year or above, c) degree-granting, d) offering undergraduate or graduate degrees/certificates, e) open to the public, and f) participating in Federal Title IV programs. This resulted in a sample of 2,707 unique institutions. A further eligibility criterion was applied to restrict the institutional sample to only those that granted bachelor's, post-bachelor's degrees, and post-baccalaureate certificates in the target academic fields of psychology, psychiatry, social work, counseling, nursing, pharmacy, or pharmacology. This resulted in a final institutional sample of 1,894.

The second stage of sampling involved identifying all targeted academic fields at the 1,894 institutions from the first sampling stage. This resulted in 4,908 programs or departments teaching the targeted fields. The list of programs or departments by sample institutions was used to identify academic leaders to participate in the Survey. Academic leaders included program directors, chairs, deans, and other higher education faculty and administrators involved in the training of those in the targeted academic fields. These individuals were identified through manual review of each institution's online website. In this manual review and web-scraping process, NORC staff identified the appropriate academic leaders and recorded their name, title, and email address resulting in a list of 4,908 individuals to invite to participate in the psychedelic therapy Survey.

## Survey Administration

The Survey was programmed as a self-administered online instrument in the Qualtrics survey software. **The sample of 4,908 academic leaders from the 1,894 academic institutions were invited by email to participate in the survey with a personalized email message.** Data collection began on April 2, 2024, and was closed on July 1, 2024. The invitation email and all subsequent reminders included a unique survey link for each prospective participant. After this initial email

invitation, a total of thirteen email reminders were sent between April 9, 2024, and June 28, 2024, to individuals initially invited and who had not yet completed the Survey.<sup>4</sup>

## Data Quality Review

Once the Survey closed, cases that did not consent to participate and those that were part of NORC's internal testing were removed. The remaining 561 cases were reviewed for completeness. NORC reviewed these cases using two criteria<sup>5</sup> to determine survey completeness:

- High item nonresponse:** NORC reviewed cases in which more than half of the Survey's 96 eligible items were skipped. The 96 items excluded demographic- and employment-related items or items that not all respondents received, such as non-required "other/specify" write-in items and items with response-specific logic. A total of 124 cases were removed from the final dataset where respondents skipped more than half of the 96 core survey items.
- Straight-lining:** NORC closely examined responses to each of the Survey's grid items (i.e., a collection of survey items arranged in a single grid or matrix) to examine straight-lining (i.e., respondents providing the exact same survey responses for all items within a single survey grid or matrix, which can suggest a likelihood for lower-quality responses). Cases where respondents provided the exact same survey responses for all items within a single survey grid or matrix and made case-by-case decisions on which cases to remove based on the

**Table 1. Survey Response Rates by Academic Program.**

Academic Program	Completion Rate	Invited	Complete Surveys
<b>Total Sample</b>	8.5%	4,908	418
<b>Counseling</b>	8.8%	525	46
<b>Nursing</b>	5.8%	1,573	91
<b>Pharmacology</b>	1.8%	109	2
<b>Pharmacy</b>	8.1%	160	13
<b>Psychiatry</b>	8.0%	87	7
<b>Psychology</b>	9.2%	1,614	148
<b>Social Work</b>	9.3%	840	78
<b>Other/Blanks</b>	N/A	N/A	33

<sup>4</sup> NORC sent email reminders on 4/9/24, 4/16/24, 4/25/24, 5/1/24, 5/8/24, 5/15/24, 5/22/24, 5/30/24, 6/5/24, 6/12/24, 6/20/24, 6/24/24, and 6/28/24

<sup>5</sup> After reviewing median survey completion time data to identify speeders (i.e., survey respondents who completed the Survey in an unreasonably short amount of time and who were, therefore, more likely to provide lower-quality responses), NORC staff determined that due to the nature of the questions (i.e., some required knowledge of program- and colleague-specific information), some respondents took days if not weeks to complete the survey. As a result, the median survey completion time is highly skewed, making it difficult to determine a reliable estimate. Therefore, a time to complete criterion was not included in the data quality review.

pattern or extent of the straight-lining across grid items were reviewed. A total of 19 cases were removed from the final data set for straight-lining responses.

A total of 418 of the reviewed 561 cases were determined to be complete and were included in the final dataset and subsequent data file used in analysis.

## Survey Response

After data quality review, the final dataset included 418 cases across 348 colleges/universities for an overall survey completion rate of 8.5 percent. Table 1 provides the response rates by respondents' academic program. Table 2 provides a summary of the respondents' current psychedelic therapy-related curricular implementation status based on their academic discipline. Of note, around a quarter of nursing (24.7%) and social work (20.0%), a third of psychology (31.3%) and counseling (29.5%), and half of pharmacy (61.5%), pharmacology (50.0%), and psychiatry (50.0%) respondents indicated their programs had implemented psychedelic therapy-related curricula in at least one way. Moreover, less than a quarter of psychology (21.8%) and psychiatry (16.7%), around a third of social work (37.3%), nursing (32.9%), and pharmacy (30.8%), and about half of pharmacology (50.0%) and counseling (45.5%) respondents indicated their programs had not yet implemented psychedelic therapy-related curricula but were interested.

The supplemental *Item Frequencies and Percentages Report* provides a comprehensive, item-by-item description of the counts and percentages of *all* survey responses for all cases in the final dataset shown in total and by the current state of psychedelic therapy-related curricula in their program [i.e., psychedelic therapy implemented; psychedelic therapy not implemented (but interest); and psychedelic therapy not implemented (and no interest)].

**Table 2. Psychedelic Therapy Implementation Status by Academic Program.**

Academic Program	Psychedelic Therapy Implementation Status					
	Psychedelic Therapy Implemented (n = 116)		Psychedelic Therapy NOT Implemented (but interest) (n = 121)		Psychedelic Therapy NOT Implemented (and no interest) (n = 154)	
	%	Count	%	Count	%	Count
<b>Total Sample</b>	29.7%	116	30.9%	121	39.4%	154
<b>Counseling</b>	29.5%	13	45.5%	20	25.0%	11
<b>Nursing</b>	24.7%	21	32.9%	28	42.4%	36
<b>Pharmacology</b>	50.0%	1	50.0%	1	-	-

Table 2. Psychedelic Therapy Implementation Status by Academic Program.

Academic Program	Psychedelic Therapy Implementation Status					
	Psychedelic Therapy Implemented (n = 116)		Psychedelic Therapy NOT Implemented (but interest) (n = 121)		Psychedelic Therapy NOT Implemented (and no interest) (n = 154)	
	%	Count	%	Count	%	Count
Pharmacy	61.5%	8	30.8%	4	7.7%	1
Psychiatry	50.0%	3	16.7%	1	33.3%	2
Psychology	31.3%	46	21.8%	32	46.9%	69
Social Work	20.0%	15	37.3%	28	42.7%	32
Another Area	47.4%	9	36.8%	7	15.8%	3

Note. Table excludes any missing values.

## Back-Coding Survey Responses

Seventeen items pertaining to employment characteristics or psychedelic therapy included “other/specify” response options to capture a full range of possible response options. For these items, respondents were given the option to write in responses. These open text responses were reviewed and back-coded using the survey’s existing response options or using a new category if applicable (e.g., another role, another academic program, another psychedelic).<sup>6</sup>

## Data Analyses

The survey data were cleaned and prepared for data analyses (i.e., transformed and recoded variables, coded missing data) and a survey codebook was created that describes the dataset layout, variables, and response coding (see the **Survey on Psychedelic Therapy Curricula in Academia Codebook**). The following analyses were conducted:

**Initial descriptive statistics and comparisons.** Initial descriptive and comparative analyses included the following findings from the **Item Frequencies and Percentages Report**: Counts and percentages for all items’ response options were calculated for the overall sample as well as for

<sup>6</sup> NORC back-coded write-in responses for: 1) academic role (21 responses), 2) academic area for deans (38 responses), 3) academic program for deans (2 responses), 4) primary academic program for deans (0 responses), 5) academic program for respondents (40 responses), 6) primary academic program for respondents (8 responses), 7) ways PAT curricula was implemented (22 responses), 8) interest in expanding PAT curricula (6 responses), 9) what would help in expanding PAT (3 responses), 10) interest in implementing PAT curricula (22 responses), 11) helpful factors in considering PAT curricula (39 responses), 12) ways open-source PAT was implemented (1 response), 13) curricular contexts for open-source PAT (14 responses), 14) incentives (9 responses), 15) awareness of psychedelics (21 responses), 16) source of PAT knowledge (37 responses), and 17) source for future PAT knowledge (3 responses).



three comparison groups: 1) psychedelic therapy implemented, 2) psychedelic therapy not implemented (but interest), and 3) psychedelic therapy not implemented (and no interest) (see the supplemental *Item Frequencies and Percentages Report* for comprehensive findings).

**Cross-group statistical comparisons.** For the primary analyses in this report, a subset of 363 cases from the final sample file were identified and examined. As detailed above, this subset included respondents who were affiliated with counseling/social work ( $n = 124$ ), psychology ( $n = 148$ ), or nursing ( $n = 91$ ) academic programs. Specifically, using respondents' self-reported affiliation in either a counseling/social work, psychology, or nursing academic program, a series of statistical analyses were conducted to determine whether respondents' survey responses differed by their academic program. This was done with Chi-square tests of independence and Analysis of Variance (ANOVA).<sup>7</sup> Specifically, Chi-square tests of independence were used to conduct between-group analyses with nominal measures, while ANOVAs were used to conduct between-group analyses with measures that used Likert-type response scales. Lastly, in instances where respondents could select more than one option (e.g., select all that apply), multiple response analyses were conducted, a frequency analysis used when data include more than one response per respondent. Throughout the report, findings explain survey responses for the overall subsample ( $n = 363$ ) outlined above (i.e., respondents affiliated with counseling/social work, psychology, or nursing academic programs) as well as any program-level differences that were observed (i.e., when a particular academic programs' survey responses were significantly lower or higher than another academic program).

## Findings

### Section 1: Current Landscape and Potential for Psychedelic Therapy-Related Curricula

The Survey asked respondents various questions about whether their academic program had implemented any psychedelic therapy-related curricula, the factors that helped or hindered this process, as well as the potential for open-source psychedelic therapy-related curricula. The following findings reflect responses from those affiliated with counseling/social work, psychology, or nursing academic programs ( $n = 363$ ).

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<sup>7</sup> A Bonferroni correction was applied to lower the  $p$ -value threshold for statistical significance given the number of concurrent statistical comparisons.

## Current Psychedelic Therapy-Related Curricular Landscape

Overall, slightly over a quarter (26.2%) of counseling/social work, psychology, and nursing respondents indicated their academic program has incorporated psychedelic therapy into their curricula in some way. When broken down by academic program, 22.6% of counseling/social work, 31.1% of psychology, and 23.1% of nursing respondents indicated their program has incorporated psychedelic therapy into their curricula in some way. Table 3 explains the different ways psychedelic therapy-related curricula was implemented based on respondents' academic program. Of note, respondents from counseling/social work (7.3%) and nursing (7.7%) programs indicated that their programs have psychedelic therapy-specific content integrated into a required graduate- or professional-level course(s), with 55.6% and 71.4% of these respective populations indicating this began 1 to 2 years ago. Moreover, 18.2% of respondents from psychology programs indicated their programs have psychedelic therapy-specific content integrated into an elective undergraduate course(s), with 66.7% of this population indicating this began three or more years ago. See Table 3 on the subsequent page.

**Table 3. Summary of Psychedelic Therapy-Related Curricular Implementation by Academic Program.**

Item	Overall Subsample (n = 363)		Counseling/Social Work (n = 124)		Psychology (n = 148)		Nursing (n = 91)	
	%	Count	%	Count	%	Count	%	Count
Has your academic program already incorporated any of the following into its curriculum? <sup>a, b, c</sup>								
PAT-specific content integrated into an elective undergraduate course(s)	<b>9.1%</b>	<b>33</b>	3.2%	4	18.2%	27	2.2%	2
PAT-specific content integrated into a required graduate- or professional-level course(s)	<b>5.0%</b>	<b>18</b>	7.3%	9	1.4%	2	7.7%	7
PAT-specific content integrated into an elective graduate- or professional-level course(s)	<b>4.4%</b>	<b>16</b>	4.8%	6	4.7%	7	3.3%	3
PAT-specific content integrated into a required undergraduate course(s)	<b>2.8%</b>	<b>10</b>	0.8%	1	2.7%	4	5.5%	5
PAT-specific practicum training	<b>1.9%</b>	<b>7</b>	2.4%	3	2.0%	3	1.1%	1
PAT-specific trainings that are not part of program curricula or continuing education-related offerings	<b>1.9%</b>	<b>7</b>	2.4%	3	1.4%	2	2.2%	2
Elective graduate- or professional-level course(s) primarily focused on PAT	<b>1.7%</b>	<b>6</b>	2.4%	3	1.4%	2	1.1%	1
PAT-specific didactic sessions	<b>1.7%</b>	<b>6</b>	-	-	1.4%	2	4.4%	4
PAT-specific program track	<b>1.1%</b>	<b>4</b>	0.8%	1	0.7%	1	2.2%	2
Elective undergraduate course(s) primarily focused on PAT	<b>1.1%</b>	<b>4</b>	-	-	2.0%	3	1.1%	1
PAT-specific continuing education courses or continuing education units (CEUs)	<b>0.8%</b>	<b>3</b>	1.6%	2	0.7%	1	-	-
Required undergraduate course(s) primarily focused on PAT	<b>0.3%</b>	<b>1</b>	-	-	-	-	1.1%	1
Required graduate or professional-level course(s) primarily focused on PAT	<b>0.3%</b>	<b>1</b>	-	-	0.7%	1	-	-
PAT certification program	-	-	-	-	-	-	-	-
None of the above	<b>73.8%</b>	<b>268</b>	77.4%	96	68.9%	102	76.9%	70
Incorporated another way	<b>4.1%</b>	<b>15</b>	3.2%	4	7.4%	11	-	-

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

<sup>c</sup> PAT = Psychedelic-Assisted Therapy.

**Among respondents whose programs *have* implemented psychedelic therapy into their curricula:**

**Factors that aided psychedelic therapy implementation.** Respondents whose programs *have* already implemented psychedelic therapy into their curricula were asked what type of influence, if any, various factors had in achieving this goal. In particular, respondents answered questions about the influence of their own, as well as their colleagues', awareness of psychedelic therapy as a treatment modality and interest in incorporating psychedelic therapy into students' training. Respondents also indicated the influence of their students' and academic fields' awareness of psychedelic therapy as a treatment modality and interest in incorporating psychedelic therapy into students' training.

Findings suggest the influence of the aforementioned factors on the implementation of psychedelic therapy into respondents' academic program differed based on respondents' academic program. Specifically, respondents from nursing programs indicated their program colleagues' awareness of psychedelic therapy as a treatment modality played a significantly greater role in the implementation of psychedelic therapy-related curricula into their academic programs compared to respondents from counseling/social work programs. For instance, whereas 38.1% of respondents from nursing programs indicated their program colleagues' awareness of psychedelic therapy as a treatment modality had *a great deal* of influence in implementing psychedelic therapy-related curricula into their academic programs, only 11.5% of respondents from counseling/social work programs shared this sentiment.

Respondents from nursing programs also indicated that their field's interest in incorporating psychedelic therapy into students' training played a significantly greater role in the implementation of psychedelic therapy-related curricula into their academic programs than respondents from psychology programs. Indeed, while 42.1% of respondents from nursing programs indicated that their field's interest in incorporating psychedelic therapy into students' training had *quite a bit* of influence in implementing psychedelic therapy-related curricula into their programs, only 17.5% of respondents from psychology programs shared this belief.

**Interest in expanding current psychedelic therapy curricula.** Respondents whose programs *have* already implemented psychedelic therapy into their curricula were asked in what ways they would be interested in expanding their current psychedelic therapy-related curricula (see Table 4). Overall, a majority (60.4%) of respondents whose programs *have* implemented psychedelic therapy into their curricula indicated their program is also currently interested in expanding or further developing their curricula in at least one way. When broken down by academic program, 70.4% of counseling/social work, 52.3% of psychology, and 65.0% of nursing respondents indicated their programs are currently interested in expanding their psychedelic therapy-related

curricula. In examining the specific ways, if any, programs were interested in expanding their psychedelic therapy-related curricula, a third (33.3%) of respondents from counseling/social work programs indicated their programs are currently interested in integrating psychedelic therapy-specific content into a required graduate- or professional-level course(s). Nearly a third (31.8%) of respondents from psychology programs indicated their programs are currently interested in integrating psychedelic therapy-specific content into an elective undergraduate course(s). Furthermore, a quarter (25.0%) of respondents from nursing programs indicated their programs are currently interested in including a psychedelic therapy certification program. See Table 4 on the subsequent page.

**Table 4. Interest in Expanding Psychedelic Therapy-Related Curricula Among Programs with Existing Psychedelic Therapy Curricula.**

Item	Overall Subsample (n = 91)		Counseling/ Social Work (n = 27)		Psychology (n = 44)		Nursing (n = 20)	
	%	Count	%	Count	%	Count	%	Count
Is your academic program currently interested in expanding or further developing your PAT-related curriculum by including any of the following in its existing curriculum? <sup>a,b,c,d</sup>								
PAT-specific content integrated into an elective undergraduate course(s)	20.9%	19	14.8%	4	31.8%	14	5.0%	1
PAT-specific content integrated into a required graduate- or professional-level course(s)	16.5%	15	33.3%	9	2.3%	1	25.0%	5
PAT-specific continuing education courses or continuing education units (CEUs)	16.5%	15	33.3%	9	9.1%	4	10.0%	2
PAT-specific practicum training	14.3%	13	29.6%	8	4.5%	2	15.0%	3
PAT-specific content integrated into a required undergraduate course(s)	12.1%	11	18.5%	5	6.8%	3	15.0%	3
PAT-specific content integrated into an elective graduate- or professional-level course(s)	12.1%	11	22.2%	6	11.4%	5	-	-
PAT certification program	11.0%	10	14.8%	4	2.3%	1	25.0%	5
Elective undergraduate course(s) primarily focused on PAT	9.9%	9	11.1%	3	6.8%	3	15.0%	3
PAT-specific didactic sessions	9.9%	9	11.1%	3	9.1%	4	10.0%	2
Elective graduate- or professional-level course(s) primarily focused on PAT	8.8%	8	18.5%	5	2.3%	1	10.0%	2
PAT-specific trainings that are not part of program curricula or continuing education-related offerings	7.7%	7	11.1%	3	6.8%	3	5.0%	1
PAT-specific program track	6.6%	6	11.1%	3	-	-	15.0%	3
Required graduate or professional-level course(s) primarily focused on PAT	2.2%	2	3.7%	1	-	-	5.0%	1
Required undergraduate course(s) primarily focused on PAT	-	-	-	-	-	-	-	-
None of the above	39.6%	36	29.6%	8	47.7%	21	35.0%	7
Interested in expanding another way	1.1%	1	3.7%	1	-	-	-	-

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Only respondents with academic program that implemented psychedelic therapy-related curricula received this item (n = 95).

<sup>c</sup> Table excludes any missing values.

<sup>d</sup> PAT = Psychedelic-Assisted Therapy.

**Factors helpful in expanding existing psychedelic therapy-related curricula.** Respondents whose programs *have* already implemented psychedelic therapy-related curricula reported on factors that would be helpful in expanding or further developing their programs' psychedelic therapy-related curricula (see Table 5). Of note, three-fourths (74.7%) of respondents indicated that free access to psychedelic therapy-related curricula would be helpful in further developing or expanding psychedelic therapy-related curricula in their academic program. This belief was widely held among most respondents from counseling/social work (85.7%), psychology (69.6%), and nursing (71.4%) programs. Moreover, about two-thirds (66.3%) of respondents indicated that training opportunities for faculty (e.g., conferences, workshops/webinars, applied training programs, clinical opportunities, certification programs) would be helpful in further developing or expanding their program's psychedelic therapy-related curricula. This belief, too, was widely held among a majority of respondents from counseling/social work (85.7%), psychology (52.2%), and nursing (71.4%) programs.

**Table 5. Helpful Resources for Expanding Psychedelic Therapy Among Programs that have Implemented Psychedelic Therapy.**

Item	Overall Subsample (n = 95)		Counseling/Social Work (n = 28)		Psychology (n = 46)		Nursing (n = 21)	
	%	Count	%	Count	%	Count	%	Count
Which of the following would be helpful in further developing or expanding PAT-related curricula for your academic program? <sup>a,b,c,d</sup>								
Free access to PAT-related curricula	74.7%	71	85.7%	24	69.6%	32	71.4%	15
Training opportunities for faculty (for example, conferences, workshops/webinars, applied training programs, clinical opportunities, certification programs)	66.3%	63	85.7%	24	52.2%	24	71.4%	15
Additional research related to PAT as a treatment modality	65.3%	62	75.0%	21	67.4%	31	47.6%	10
FDA approval of a drug associated with PAT	55.8%	53	53.6%	15	60.9%	28	47.6%	10
Support or guidance from professional associations (for example, the American Psychological Association)	49.5%	47	53.6%	15	45.7%	21	52.4%	11
Curriculum development funding	44.2%	42	35.7%	10	50.0%	23	42.9%	9
Standardized guidelines for PAT-related clinical	34.7%	33	53.6%	15	13.0%	6	57.1%	12

Item	Overall Subsample (n = 95)		Counseling/ Social Work (n = 28)		Psychology (n = 46)		Nursing (n = 21)	
	%	Count	%	Count	%	Count	%	Count
application								
Standardized guidelines for PAT-related instruction	32.6%	31	42.9%	12	23.9%	11	38.1%	8
Standardized guidelines for PAT-related course design	27.4%	26	39.3%	11	13.0%	6	42.9%	9
Ability to earn a certificate through PAT-related curricula	21.1%	20	32.1%	9	10.9%	5	28.6%	6
Standardized guidelines for PAT-related student evaluation	17.9%	17	32.1%	9	4.3%	2	28.6%	6
None of the above	1.1%	1	-	-	2.2%	1	-	-
Another way	3.2%	3	3.6%	1	2.2%	1	4.8%	1

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Only respondents with academic program that implemented psychedelic therapy-related curricula received this item (n = 95).

<sup>c</sup> Table excludes any missing values.

<sup>d</sup> PAT = Psychedelic-Assisted Therapy.

**Openness to incorporating new treatment modalities.** Respondents whose counseling/social work, psychology, and nursing programs *have* implemented psychedelic therapy-related curricula were asked about how the openness of various stakeholders to new treatment modalities might impact the development or expansion of psychedelic therapy-related curricula in their programs. Notably, there were no program-level differences in how open respondents' academic programs or department colleagues are to incorporating new content that teaches emerging areas of treatment and research. With that being said, nearly three-fourths (74.5%) of respondents indicated their academic programs and/or department colleagues are either *quite a bit* (38.3%) or *a great deal* (36.2%) open to curricula that teach emerging areas of treatments and research.

Findings revealed that the openness of the specific college or school that respondents' program was housed in differed based on respondents' academic program. Specifically, respondents from nursing programs indicated that the college or school in which their academic program is housed is significantly more open to curricula that teach emerging areas of treatments and research than respondents from psychology programs. Indeed, while nearly half (45.0%) of nursing respondents indicated the college or school in which their academic program is housed is *a great deal* open to curricula that teach emerging areas of treatments and research, only 13.2% of psychology respondents shared this sentiment.

**Impact of external stakeholders on expansion.** Respondents whose programs *have* already implemented psychedelic therapy-related curricula were asked the extent to which external



factors, such as licensure and accreditation requirements, would impact the expansion of psychedelic therapy-related curricula in their academic programs. Compared to respondents from psychology programs, respondents from counseling/social work and nursing programs indicated their programs would be significantly more likely to expand their current psychedelic therapy-related curricula if psychedelic therapy-related questions were included on licensure examinations. Notably, while a majority of respondents from counseling/social work (51.9%) and nursing (63.2%) programs indicated it would be *extremely likely* for their academic programs to expand their current psychedelic therapy-related curricula if psychedelic therapy-related questions were included on licensure examinations, less than a quarter of respondents from psychology programs (20.0%) shared this belief.

This same pattern is observed when examining the impact of accreditation requirements on the inclusion of additional psychedelic therapy-related content in respondents' programs. Specifically, compared to psychology respondents, counseling/social work and nursing respondents indicated their programs would be significantly more likely to expand upon their current psychedelic therapy-related curricula if the inclusion of psychedelic therapy-related content in their curricula was required for accreditation. In fact, while most counseling/social work (85.7%) and nursing (70.0%) respondents indicated their programs would be *extremely likely* to expand their current psychedelic therapy-related curricula under these circumstances, only 39.5% of psychology respondents held this belief.

### **Among respondents whose programs *have not* implemented psychedelic therapy into their curricula:**

**Factors that hindered psychedelic therapy implementation.** Respondents whose programs *have not* implemented psychedelic therapy-related curricula were asked about the factors that may have hindered them from doing so. Similar to those who *have* already implemented psychedelic therapy-related curricula in their programs, these respondents answered questions about the influence of their own, as well as their colleagues', awareness of psychedelic therapy as a treatment modality and interest in incorporating psychedelic therapy into students' training. Respondents also indicated the influence of students' and their academic fields' awareness of psychedelic therapy as a treatment modality and interest in incorporating psychedelic therapy into students' training.

Findings revealed no significant differences between academic programs in the influence of the aforementioned factors on the implementation of psychedelic therapy-related curricula in respondents' academic programs. Of note, however, respondents from counseling/social work (30.9%), psychology (27.8%), and nursing (32.7%) programs similarly noted that their field's interest in incorporating psychedelic therapy into students' training only *somewhat* played a role in their programs not implementing psychedelic therapy-related curricula. Furthermore, a sizable

number of respondents from counseling/social work (53.4%), psychology (61.7%), and nursing (47.5%) programs indicated students' interest in incorporating psychedelic therapy into their training played *very little* to *no role* in their programs not currently implementing any psychedelic therapy-related curricula.

**Interest in implementing psychedelic therapy curricula.** Respondents whose programs *have not* implemented psychedelic therapy-related curricula were asked the ways, if any, their programs were currently interested in doing so (see Table 6). Overall, nearly half (42.2%) of these respondents indicated their program was currently interested in incorporating psychedelic therapy-related content in at least one way. When broken down by academic program, 52.7% of counseling/social work, 31.7% of psychology, and 43.8% of nursing respondents indicated their program was currently interested in incorporating psychedelic therapy-related content. In examining the most popular ways respondents' programs were currently interested in incorporating psychedelic therapy-related curricula, 18.7% of counseling/social work respondents indicated their programs were currently interested in incorporating psychedelic therapy-specific continuing education courses or continuing education units (CEUs). Furthermore, 12.9% of psychology respondents indicated their programs were interested in integrating psychedelic therapy-specific content into an elective undergraduate course(s). In addition, 14.1% of nursing respondents indicated their programs were interested in integrating psychedelic therapy-specific content into a required graduate- or professional-level course(s).

**Table 6. Interest in Incorporating Psychedelic Therapy Among Programs that have not Implemented Psychedelic Therapy.**

Item	Overall Subsample (n = 256)		Counseling/ Social Work (n = 91)		Psychology (n = 101)		Nursing (n = 64)	
	%	Count	%	Count	%	Count	%	Count
Is your academic program currently interested in incorporating any of the following into its curriculum? a,b,c,d								
PAT-specific continuing education courses or continuing education units (CEUs)	10.2%	26	18.7%	17	3.0%	3	9.4%	6
PAT-specific didactic sessions	9.8%	25	13.2%	12	6.9%	7	9.4%	6
PAT-specific trainings that are not part of program curricula or continuing education-related offerings	9.8%	25	14.3%	13	6.9%	7	7.8%	5
PAT-specific content integrated into an elective undergraduate course(s)	9.4%	24	9.9%	9	12.9%	13	3.1%	2
PAT-specific content integrated into a required graduate- or professional-level course(s)	9.0%	23	11.0%	10	4.0%	4	14.1%	9
Elective undergraduate course(s)	8.2%	21	11.0%	10	6.9%	7	6.3%	4

**Table 6. Interest in Incorporating Psychedelic Therapy Among Programs that have not Implemented Psychedelic Therapy.**

Item	Overall Subsample (n = 256)		Counseling/ Social Work (n = 91)		Psychology (n = 101)		Nursing (n = 64)	
	%	Count	%	Count	%	Count	%	Count
primarily focused on PAT								
Elective graduate- or professional-level course(s) primarily focused on PAT	7.8%	20	13.2%	12	5.0%	5	4.7%	3
PAT-specific content integrated into a required undergraduate course(s)	7.0%	18	6.6%	6	7.9%	8	6.3%	4
PAT-specific content integrated into an elective graduate- or professional-level course(s)	7.0%	18	12.1%	11	5.0%	5	3.1%	2
PAT-specific practicum training	4.3%	11	7.7%	7	2.0%	2	3.1%	2
PAT certification program	2.3%	6	2.2%	2	3.0%	3	1.6%	1
Required undergraduate course(s) primarily focused on PAT	1.2%	3	1.1%	1	1.0%	1	1.6%	1
Required graduate or professional-level course(s) primarily focused on PAT	1.2%	3	2.2%	2	1.0%	1	-	-
PAT-specific program track	0.8%	2	1.1%	1	1.0%	1	-	-
None of the above	57.8%	148	47.3%	43	68.3%	69	56.3%	36
Interested in incorporating PAT another way	2.3%	6	3.3%	3	3.0%	3	-	-

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Only respondents with academic program has not implemented psychedelic therapy-related curricula received this item (n = 268).

<sup>c</sup> Table excludes any missing values.

<sup>d</sup> PAT = Psychedelic-Assisted Therapy.

### Factors that would aid in considering the adoption of psychedelic therapy-related curricula.

When it comes to the specific factors or resources that would aid counseling/social work, psychology, and nursing programs in considering the adoption of psychedelic therapy-related curricula if they had not yet done so, nearly a quarter (22.5%) indicated that training opportunities for faculty (e.g., conferences, workshops/webinars, applied training programs, clinical opportunities, certification programs) would be helpful for them and their colleagues. This was closely followed by free access to psychedelic therapy-related curricula (20.6%) and additional research related to psychedelic therapy as a treatment modality (12.7%). When broken down by academic program, findings revealed that respondents from counseling/social work programs were similarly most likely to cite training opportunities for faculty (29.5%), free access to psychedelic therapy-related curricula (15.8%), and additional research related to psychedelic

therapy as a treatment modality (11.6%) as important factors that would be helpful in considering psychedelic therapy-related curricula for their academic program. Interestingly, respondents from psychology programs indicated that training opportunities for faculty (17.6%) and free access to psychedelic therapy-related curricula (17.6%) were equally important in considering psychedelic therapy-related curricula for their academic program, with additional research related to psychedelic therapy as a treatment modality following close behind (16.7%). Lastly, respondents from nursing programs indicated that free access to psychedelic therapy-related curricula (31.4%) would be helpful in considering psychedelic therapy-related curricula for their academic program, followed by training opportunities for faculty (20.0%), additional research related to psychedelic therapy as a treatment modality (8.6%), and support or guidance from professional associations (8.6%).

**Likelihood of implementation within three years.** Respondents whose counseling/social work, psychology, and nursing programs *have not* implemented psychedelic therapy-related curricula were asked about the likelihood their programs would implement any psychedelic therapy-related curricula within the next three years. Respondents from counseling/social work and nursing programs indicated their programs would be significantly more likely to implement psychedelic therapy-related content into their curricula within the next three years than respondents from psychology programs. Of note, nearly a third of respondents from counseling/social work (32.5%) and nursing (29.8%) programs indicated their programs were *likely* to implement psychedelic therapy-related curricula within the next three years, while over a third of respondents from psychology (39.4%) programs indicated it was *extremely unlikely*.

**Openness to and ease of incorporating new treatment modalities.** Respondents whose counseling/social work, psychology, and nursing programs *have not* implemented psychedelic therapy-related curricula were asked about how the openness of various stakeholders to new treatment modalities and the ease of implementing psychedelic therapy-related curricula might impact the development and implementation of psychedelic therapy-related curricula in their programs. Notably, there were no program-level differences in how open respondents' academic programs or department colleagues are to incorporating new content that teaches emerging areas of treatment and research. With that being said, over a third of respondents (36.6%) indicated their academic programs and/or department colleagues are *quite a bit* open to curricula that teach emerging areas of treatments and research.

Findings revealed that the openness of the specific college or school that respondents' program was housed in did not differ based on respondents' academic program. With that being said, half (50.5%) of respondents indicated the college or school in which their academic program is housed is either *quite a bit* (32.2%) or *a great deal* (18.2%) open to curricula that teaches emerging areas of treatments and research.

Lastly, when it came to the ease of implementing psychedelic therapy-related curricula relative to any other new curricula, no differences were observed based on respondents' academic program. However, over half of respondents (57.0%) indicated that the ease or difficulty of implementing psychedelic therapy-related curricula relative to any other new curricula in their program would be either *about the same* (28.5%) or *somewhat difficult* (28.5%).

**Impact of external stakeholders on implementation.** Respondents whose counseling/social work, psychology, and nursing programs *have not* implemented psychedelic therapy-related curricula indicated the extent to which external factors, such as licensure and accreditation requirements, would impact the likelihood of their program implementing psychedelic therapy-related curricula. Findings revealed that respondents from counseling/social work and nursing programs were significantly more likely than respondents from psychology programs to indicate that their academic programs would implement psychedelic therapy-related curricula if psychedelic therapy-related questions were included on licensure examinations. Indeed, while over half of respondents from counseling/social work (51.2%) and nursing (56.5%) programs indicated their programs would be *extremely likely* to implement psychedelic therapy-related curricula if psychedelic therapy-related questions were included on licensure examinations, less than a third of respondents from psychology (27.9%) programs indicated their programs would be *extremely likely* to do so.

Moreover, respondents from counseling/social work programs were significantly more likely than respondents from psychology programs to indicate that their academic programs would implement psychedelic therapy-related curricula if the inclusion of psychedelic therapy-related content in their curricula was required for accreditation. In fact, while over three-fourths (78.9%) of respondents from counseling/social work programs indicated their programs would be *extremely likely* to implement psychedelic therapy-related curricula if the inclusion of psychedelic therapy-related content in their curricula was required for accreditation, only 58.2% of respondents from psychology programs indicated their programs would be *extremely likely* to do so.

## Assessing the Potential for Open-Source Psychedelic Therapy Curricula

All respondents from counseling/social work, psychology, and nursing programs were asked about their experiences with, or interest in incorporating, open-source psychedelic therapy curricula (i.e., freely available resources individuals can use for the development and/or implementation of psychedelic therapy-related training/curricula). Overall, nearly all respondents (97.6%) indicated their academic program is not currently using any existing open-source psychedelic therapy curricula. When broken down by academic program, 97.5% of counseling/social work, 98.5% of psychology, and 96.3% of nursing respondents indicated their academic programs are not currently using any existing open-source psychedelic therapy curricula. Among the 2.4% of respondents who indicated their program *is* currently using existing open-source psychedelic

therapy-curricula, 42.9% indicated their program integrated the content into required undergraduate coursework.

In further probing those who indicated their academic program *is not* currently using any existing model psychedelic therapy curricula, nearly all (93.0%) were not aware of the existence of any open-source psychedelic therapy curricula (e.g., curricula offered by Penn Nursing Modules), or relatedly, model (e.g., curricula offered by Columbia School of Social Work) psychedelic therapy curricula. When broken down by academic program, 92.8% of counseling/social work, 92.4% of psychology, and 94.5% of nursing respondents who indicated their program *is not* currently using any existing open-source psychedelic therapy curricula also indicated they were not aware of the existence of any open-source or model psychedelic therapy curricula.

Despite respondents' overall lack of awareness of any open-source or model psychedelic therapy curricula, program-level differences were observed regarding the extent to which respondents' programs were interested in incorporating existing open-source psychedelic therapy curricula into their programs. Specifically, respondents from counseling/social work and nursing programs were significantly more likely than respondents from psychology programs to indicate that their academic programs are currently interested in incorporating existing open-source psychedelic therapy curricula into their program. In particular, over half of respondents from counseling/social work (56.9%) and nursing (55.6%) programs indicated their programs were either *somewhat* or *quite a bit* interested in incorporating existing open-source psychedelic therapy curricula into their program, while over half of respondents from psychology (60.0%) programs indicated their programs had *very little* interest or were *not at all* interested in incorporating existing open-source psychedelic therapy curricula into their programs.

Respondents were asked about the specific curricular contexts their academic programs would be interested in incorporating existing open-source psychedelic therapy curricula into (see Table 7). About a third (32.7%) of respondents from counseling/social work programs indicated their programs would be interested in incorporating existing open-source psychedelic therapy curricula into an elective graduate- or professional-level course(s) or psychedelic therapy-specific continuing education courses/continuing education units (CEUs). About a third (32.8%) of respondents from psychology programs indicated their programs would be interested in incorporating existing open-source psychedelic therapy curricula into an elective undergraduate course(s). Lastly, about a third (32.9%) of respondents from nursing programs indicated their programs would be interested in incorporating existing open-source psychedelic therapy curricula into a required graduate- or professional-level course(s). See Table 7 on the subsequent page.

**Table 7. Ways Programs Would be Interested in Incorporating Open-Source Psychedelic Therapy Curricula.**

Item	Overall Subsample (n = 320)		Counseling/Social Work (n = 113)		Psychology (n = 131)		Nursing (n = 76)	
	%	Count	%	Count	%	Count	%	Count
In what curricular contexts, if any, would your academic program be interested in incorporating existing open-source PAT curricula? <small>a,b,c,d</small>								
PAT-specific content integrated into an elective undergraduate course(s)	<b>25.9%</b>	<b>83</b>	23.0%	26	32.8%	43	18.4%	14
PAT-specific content integrated into an elective graduate- or professional-level course(s)	<b>21.9%</b>	<b>70</b>	32.7%	37	17.6%	23	13.2%	10
PAT-specific continuing education courses or continuing education units (CEUs)	<b>21.6%</b>	<b>69</b>	32.7%	37	9.9%	13	25.0%	19
PAT-specific content integrated into a required graduate- or professional-level course(s)	<b>21.3%</b>	<b>68</b>	26.5%	30	9.9%	13	32.9%	25
PAT-specific content integrated into a required undergraduate course(s)	<b>19.1%</b>	<b>61</b>	15.9%	18	14.5%	19	31.6%	24
PAT-specific trainings that are not part of program curricula or continuing education-related offerings	<b>17.8%</b>	<b>57</b>	24.8%	28	12.2%	16	17.1%	13
PAT-specific didactic sessions	<b>14.4%</b>	<b>46</b>	12.4%	14	12.2%	16	21.1%	16
Elective graduate- or professional-level course(s) primarily focused on PAT	<b>13.8%</b>	<b>44</b>	21.2%	24	7.6%	10	13.2%	10
Elective undergraduate course(s) primarily focused on PAT	<b>11.3%</b>	<b>36</b>	7.1%	8	18.3%	24	5.3%	4
PAT certification program	<b>10.9%</b>	<b>35</b>	12.4%	14	6.9%	9	15.8%	12
PAT-specific practicum training	<b>10.3%</b>	<b>33</b>	12.4%	14	6.1%	8	14.5%	11
Required graduate or professional-level course(s) primarily focused on PAT	<b>2.8%</b>	<b>9</b>	4.4%	5	1.5%	2	2.6%	2
PAT-specific program track	<b>1.6%</b>	<b>5</b>	1.8%	2	1.5%	2	1.3%	1
Required undergraduate course(s) primarily focused on PAT	<b>1.6%</b>	<b>5</b>	-	-	1.5%	2	3.9%	3
None of the above	<b>17.2%</b>	<b>55</b>	9.7%	11	23.7%	31	17.1%	13
Another curricular context	<b>1.9%</b>	<b>6</b>	2.7%	3	2.3%	3	-	-

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Only respondents with academic program is not currently using any open-source psychedelic therapy-related curricula received this item (n = 325).

<sup>c</sup> Table excludes any missing values.

<sup>d</sup> PAT = Psychedelic-Assisted Therapy.

## Section 2: Program-Specific Attitudes and Needs

The Survey asked about relevant program- and federal-level factors that may have impacted whether respondents' programs implemented psychedelic therapy-related curricula. The Survey also examined respondents' views of their colleagues' and academic programs' awareness and abilities regarding psychedelic therapy.

### Relevant Resources and Barriers to Curricular Implementation

**Resources and barriers.** Respondents answered a series of items examining relevant resources and barriers potentially faced regarding the implementation, or lack thereof, of psychedelic therapy-related curricula in their programs. Findings suggest that respondents from counseling/social work, psychology, and nursing programs did not differ across programs in their beliefs about a) whether their existing program curricular structure could accommodate additional or alternative curricula, b) whether their program colleagues are aware of any psychedelic therapy-related curricula that exists outside of their program, c) whether there are currently sufficient federal regulations pertaining to the use of psychedelics, d) whether their program colleagues know how to find open-access psychedelic therapy-related curricula outside of their program, and e) whether their program colleagues are aware of any existing psychedelic therapy-related curricula outside of their program that was developed using diverse cultural understandings.

Despite observing no program-level differences in the aforementioned items, 58.2% of respondents at least *somewhat agreed* that their existing program curricular structure can accommodate additional or alternative curricula. Furthermore, 47.1% of respondents at least *somewhat agreed* that colleagues in their program are aware that psychedelic therapy-related curricula exists outside of their program. In addition, 23.4% of respondents at least *somewhat agreed* that there are currently sufficient federal regulations pertaining to the use of psychedelics. Similarly, 22.6% of respondents at least *somewhat agreed* that colleagues in their program know how to find open-access psychedelic therapy-related curricula that exists outside of their program. Lastly, 16.8% of respondents at least *somewhat agreed* that colleagues in their program are aware of existing psychedelic therapy-related curricula outside of their program that has been developed using diverse cultural understandings and experiences.

Respondents did differ based on their academic program in their belief that curriculum development funding would be useful in developing psychedelic therapy-related curricula for their academic program. Specifically, respondents from counseling/social work programs were significantly more likely than respondents from psychology and nursing programs to agree that curriculum development funding would be useful in developing psychedelic therapy-related curricula for their academic programs. Whereas 68.4% of respondents from counseling/social work programs at least *agreed* or *strongly agreed* that curriculum development funding would be



useful in developing psychedelic therapy-related curricula for their academic program, only around half of respondents from psychology (47.8%) and nursing (55.3%) programs shared this belief.

## Perception of Current Faculty Needs and Abilities

**Proportion of capable faculty.** Respondents from counseling/social work, psychology, and nursing programs were asked about their perception of the number of faculty within their academic program that are a) interested in learning more about psychedelic therapy, b) capable of teaching psychedelic therapy-related courses, and c) capable of training students in how to administer psychedelic therapy. Findings revealed no program-level differences in the proportion of faculty who can teach introductory- or advanced-level courses on topics related to psychedelic therapy. Of note, however, 79.2% of respondents indicated that either *not too many* or *none* of the faculty in their program are capable of teaching an introductory-level course on topics related to psychedelic therapy, and 91.8% of respondents indicated that either *not too many* or *none* of the faculty in their program are capable of teaching an advanced-level course on topics related to psychedelic therapy. Taken together, these insights underscore the fact that very few respondents think their programs are prepared to teach courses related to psychedelic therapy.

Interestingly, respondents did differ in their perception of how many faculty in their programs are capable of training students in how to administer psychedelic therapy. Specifically, compared to respondents from counseling/social work and psychology programs, respondents from nursing programs indicated there was a significantly greater proportion of faculty in their programs that are capable of training students in how to administer psychedelic therapy. Indeed, whereas 9.0% of nursing respondents indicated *about half* of the faculty in their programs are capable of training students in how to administer psychedelic therapy, only 3.4% of counseling/social work and 0.7% of psychology respondents indicated *about half* of their faculty are capable of training students in how to administer psychedelic therapy.

Lastly, both counseling/social work and nursing respondents indicated there was a significantly greater proportion of faculty in their programs that are interested in learning more about psychedelic therapy than psychology respondents. Indeed, whereas 13.7% of counseling/social work and 20.3% of nursing respondents indicated that *most* of the faculty in their programs are interested in learning more about psychedelic therapy, only 4.7% of psychology respondents indicated that *most* faculty in their academic programs are interested in learning more about psychedelic therapy.

**Psychedelic therapy-related activities among faculty.** Respondents provided insight into specific psychedelic therapy-related activities faculty in their programs have participated in over the last year (see Table 8). Notably, 22.2% of respondents from counseling/social work programs indicated that over the last year, faculty in their programs attended workshops/trainings on

psychedelic therapy. Furthermore, 20.2% of respondents from psychology programs indicated that over the last year, faculty in their programs have attended academic lectures on psychedelic therapy. Finally, 9.3% of respondents from nursing programs indicated that over the last year, faculty in their programs have given academic lectures on psychedelic therapy.

**Table 8. Participation in Psychedelic Therapy-Related Activities Among Program Faculty.**

Item	Overall Subsample (n = 253)	Counseling/Social Work (n = 90)	Psychology (n = 109)	Nursing (n = 54)
Please indicate which of the following activities any faculty in your academic program have participated in over the last year? <sup>a,b,c</sup>				
Attended academic lectures on PAT	17.8%	20.0%	20.2%	9.3%
Attended workshops/trainings on PAT	15.4%	22.2%	13.8%	7.4%
Given academic lectures on PAT	12.6%	7.8%	18.3%	9.3%
Conducted research on topics related to PAT	9.1%	6.7%	11.9%	7.4%
Attended academic conferences on PAT	5.9%	6.7%	5.5%	5.6%
Participated in experiential learning sessions to have a drug-induced psychedelic experience	5.5%	4.4%	7.3%	3.7%
Participated in PAT-specific didactic sessions	4.3%	7.8%	0.9%	5.6%
Taught workshops/trainings on PAT	3.2%	3.3%	2.8%	3.7%
Facilitated a PAT session as a mental health professional	2.8%	1.1%	4.6%	1.9%
Received PAT in a supportive environment	2.4%	2.2%	2.8%	1.9%
Participated in a PAT-specific practicum training	1.2%	1.1%	-	3.7%
Participated in a clinical trial for PAT	0.8%	-	1.8%	-
None of the above	61.7%	57.8%	59.6%	72.2%

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

<sup>c</sup> PAT = Psychedelic-Assisted Therapy.

**Program incentives.** Respondents provided insight into which incentives their academic programs would be willing and/or able to use to encourage faculty to learn more about psychedelic therapy (see Table 9). Respondents overwhelmingly (70.7%) indicated that their academic programs would be willing and/or able to offer funding for training opportunities to encourage faculty to learn more about psychedelic therapy. When broken down by academic program, findings indicated that 77.7% of counseling/social work, 64.1% of psychology, and 71.6% of nursing respondents believed their programs would be willing and/or able to offer this incentive. See Table 9 on the subsequent page.

**Table 9. Program Incentives to Learn More About Psychedelic Therapy.**

Item	Overall Subsample (n = 317)	Counseling/Social Work (n = 112)	Psychology (n = 131)	Nursing (n = 74)
Which of the following incentives, if any, would your academic program be willing and/or able to use to encourage faculty to learn more about PAT? <sup>a,b,c</sup>				
Funding for training opportunities (e.g., courses, workshops)	<b>70.7%</b>	77.7%	64.1%	71.6%
Monetary support/stipend	<b>66.2%</b>	71.4%	60.3%	68.9%
Course releases	<b>42.9%</b>	42.0%	43.5%	43.2%
Professional recognition	<b>23.7%</b>	22.3%	19.1%	33.8%
None of the above	<b>13.6%</b>	10.7%	17.6%	10.8%
Another incentive	<b>1.9%</b>	0.9%	1.5%	4.1%

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

<sup>c</sup> PAT = Psychedelic-Assisted Therapy.

**Program hiring decisions.** Respondents provided insight into the type of faculty members their programs would need or be likely to hire to teach introductory- and advanced-level courses on psychedelic therapy. For example, when it comes to teaching an introductory-level course on psychedelic therapy (see Table 10), three-fourths of respondents (76.8%) indicated that their programs would need to hire contingent faculty members (e.g., adjunct instructors or lecturers).

**Table 10. Hiring Needs for Introductory-Level Courses on Psychedelic Therapy.**

Item	Overall Subsample (n = 263)	Counseling/Social Work (n = 95)	Psychology (n = 113)	Nursing (n = 55)
Which of the following types of faculty members would your academic program need to hire to teach an introductory-level course on PAT? <sup>a,b,c</sup>				
Contingent faculty (adjunct instructors, lecturers, or faculty)	<b>76.8%</b>	88.4%	72.6%	65.5%
Early career faculty	<b>47.5%</b>	44.2%	54.0%	40.0%
Senior faculty	<b>16.3%</b>	12.6%	11.5%	32.7%

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

<sup>c</sup> PAT = Psychedelic-Assisted Therapy.

When broken down by academic program, 88.4% of counseling/social work, 72.6% of psychology, and 65.5% nursing respondents highlighted the need to hire contingent faculty members to teach introductory-level courses on psychedelic therapy. Notably, over three-fourths of respondents

(79.5%) also indicated that their programs would be *likely* to hire contingent faculty for this role as well (see Table 11). This suggests there is little discrepancy between respondents who believe their programs would *need* to hire to teach these courses versus who their programs would *likely* hire to do so.

**Table 11. Likely Hiring Choice for Introductory-Level Courses on Psychedelic Therapy.**

Item	Overall Subsample (n = 264)	Counseling/Social Work (n = 97)	Psychology (n = 116)	Nursing (n = 51)
Which of the following would your academic program likely hire to teach an introductory-level course on PAT? <sup>a,b,c</sup>				
Contingent faculty (adjunct instructors, lecturers, or faculty)	<b>79.5%</b>	84.5%	81.0%	66.7%
Early career faculty	<b>40.9%</b>	37.1%	46.6%	35.3%
Senior faculty	<b>18.2%</b>	19.6%	12.1%	29.4%

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

<sup>c</sup> PAT = Psychedelic-Assisted Therapy.

When it comes to teaching an advanced-level course on psychedelic therapy, 83.9% of counseling/social work respondents indicated their programs would *need* to hire contingent faculty, 55.7% of psychology respondents indicated their programs would *need* to hire early career faculty, and 52.8% of nursing respondents indicated their programs would *need* to hire senior faculty (see Table 12). Notably, however, when asked what their programs would *likely* do, only psychology respondents diverged from their stated needs. Specifically, though a majority (55.7%) of respondents from psychology programs indicated they would *need* to hire an early career faculty member to teach advanced-level courses on psychedelic therapy, 68.0% indicated their program would *likely* hire contingent faculty members (see Table 13).

**Table 12. Hiring Needs for Advanced-Level Courses on Psychedelic Therapy.**

Item	Overall Subsample (n = 246)	Counseling/Social Work (n = 87)	Psychology (n = 106)	Nursing (n = 53)
Which of the following types of faculty members would your academic program need to hire to teach an advanced-level course on PAT? <sup>a,b,c</sup>				
Contingent faculty (adjunct instructors, lecturers, or faculty)	<b>64.6%</b>	83.9%	54.7%	52.8%
Early career faculty	<b>41.9%</b>	32.2%	55.7%	30.2%
Senior faculty	<b>35.4%</b>	34.5%	27.4%	52.8%

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

<sup>c</sup> PAT = Psychedelic-Assisted Therapy.

**Table 13. Likely Hiring Choice for Advanced-Level Courses on Psychedelic Therapy.**

Item	Overall Subsample (n = 264)	Counseling/ Social Work (n = 97)	Psychology (n = 116)	Nursing (n = 51)
Which of the following would your academic program likely hire to teach an advanced-level course on PAT? <sup>a,b,c</sup>				
Contingent faculty (adjunct instructors, lecturers, or faculty)	66.8%	75.6%	68.0%	49.0%
Early career faculty	38.5%	32.2%	49.5%	27.5%
Senior faculty	30.7%	31.1%	19.4%	52.9%

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

<sup>c</sup> PAT = Psychedelic-Assisted Therapy.

## Section 3: Attitudes About Psychedelic Therapy Curricula, Psychedelic Therapy, and Psychedelics

The Survey sought to elicit an understanding about respondents' attitudes regarding the development and implementation of psychedelic therapy-related curricula, as well as the risks and benefits associated with psychedelic therapy and psychedelic use more broadly. Moreover, the Survey examined differences in stigma towards psychedelic therapy and psychedelic use overall, particularly when it comes to respondents' attitudes towards practitioners/researchers and experiential learning (i.e., undergoing a drug-induced psychedelic experience to better understand the effects of psychedelics).

### Attitudes Towards the Development and Implementation of Psychedelic Therapy-Related Curricula

**Curriculum development.** With regards to who should have access to psychedelic therapy-related curricula, findings suggest that respondents in nursing programs were significantly more likely than respondents in psychology programs to agree that psychedelic therapy-related curricula should include courses that can be cross-listed with other related disciplines. Notably, while over half (53.5%) of respondents from nursing programs either *agreed* or *strongly agreed* that psychedelic therapy-related curricula should include courses that can be cross-listed with other related disciplines, only 37.0% of respondents from psychology programs *agreed* or *strongly agreed* with this belief.

There were also notable differences in who should be involved in the development of psychedelic therapy-related curricula. For example, respondents from counseling/social work programs were significantly more likely than respondents from psychology and nursing programs to agree that psychedelic therapy-related curricula should account for cultural and historical perspectives. Indeed, with regards to cultural perspectives, while 74.1% of respondents from counseling/social work programs *strongly agreed* that psychedelic therapy-related curricula should account for cultural perspectives, less than half of respondents from psychology (45.0%) and nursing (44.4%) programs *strongly agreed* with this belief. Regarding historical perspectives, while more than half of respondents from counseling/social work programs (52.9%) *strongly agreed* that psychedelic therapy-related curricula should take into account historical perspectives, only about a quarter of respondents from psychology (25.4%) and nursing (24.7%) programs *strongly agreed* with this belief.

Respondents from counseling/social work programs were also more likely than respondents from psychology and nursing programs to believe that indigenous psychedelic practitioners should be involved in the development and implementation of this curricula. For instance, while 40.7% of counseling/social work respondents *strongly agreed* that indigenous psychedelic practitioners should be involved in the development and implementation of psychedelic therapy-related curricula, only 15.3% of psychology and 20.9% of nursing respondents *strongly agreed* with this belief.

Relatedly, respondents from counseling/social work programs were also more likely than respondents from psychology programs to believe that underground psychedelic practitioners should be involved in the development and implementation of psychedelic therapy-related curricula. In particular, nearly a quarter of respondents from counseling/social work (24.3%) programs either *agreed* or *strongly agreed* that underground psychedelic practitioners should be involved in the development and implementation of psychedelic therapy-related curricula, whereas only 9.6% of respondents from psychology programs either *agreed* or *strongly agreed* with this sentiment.

## Attitudes About Psychedelic Therapy and Psychedelics

**Risks, benefits, and future potential.** Respondents from counseling/social work, psychology, and nursing programs were asked a series of questions about the potential risks, benefits, and promise associated with the use of psychedelics in the treatment of psychiatric disorders. Findings revealed that respondents overwhelmingly agreed that the use of psychedelics shows promise in treating psychiatric disorders, with over three-fourths (79.0%) at least *somewhat agreeing* with this belief.

With that being said, respondents did vary in their beliefs regarding the safety of using psychedelics and the need for further research into the topic. For example, though

counseling/social work respondents from did not differ from psychology respondents in their belief that the use of psychedelics is unsafe even under medical supervision, nursing respondents were significantly more likely than counseling/social work respondents to believe that the use of psychedelics is unsafe even under medical supervision. Notably, however, respondents from counseling/social work (79.1%), psychology (71.3%), and nursing (61.3%) programs overwhelmingly *disagreed to some extent* that the use of psychedelics is unsafe even under medical supervision (71.4%).

Lastly, respondents from counseling/social work programs were marginally more likely than both respondents from psychology and nursing programs to believe that the use of psychedelics for the treatment of psychiatric disorders deserves further research. In particular, while 58.3% of respondents from counseling/social work programs *strongly agreed* that the use of psychedelics deserves further research for the treatment of psychiatric disorders, less than half of respondents from psychology (44.4%) and nursing (40.0%) programs *strongly agreed* with this belief.

**Perceptions of practitioners and researchers.** Respondents from counseling/social work, psychology, and nursing programs were asked a series of questions about their perceptions of practitioners and researchers associated with psychedelic medicine. Findings revealed that respondents generally did not differ based on their academic program in their perceptions of practitioners associated with psychedelic medicine or those who study that topic. For instance, respondents generally *disagreed to some extent* (49.8%–82.4%) or *neither agreed nor disagreed* (11.3%–31.9%) that a) clinicians who offer psychedelic therapy have unethical practices, b) psychedelic therapy is just an excuse for people to take drugs, c) psychedelic medicine and psychedelic therapy is pseudoscience, d) psychedelic medicine and psychedelic therapy are not legitimate career paths, and e) clinicians associated with psychedelic medicine are part of the counterculture.

Conversely, respondents generally *agreed to some extent* (44.1%–70.2%) or *neither agreed nor disagreed* (24.2%–49.1%) that a) those advocating for the use of psychedelic therapy should be more transparent about the potential risks and benefits, b) clinicians who offer psychedelic therapy are well-read and well-educated, and c) clinicians who offer psychedelic therapy are respondent to hard-to-treat patients. With that being said, respondents were somewhat split over their concern about the motivations of some individuals getting involved with psychedelic therapy, with 34.2% of respondents *disagreeing to some extent* with this statement and 42.4% of respondents *agreeing to some extent* with this statement.

Noting the non-significant findings above, there were a few specific instances where respondents differed based on their academic program. For example, respondents from counseling/social work programs were significantly more likely than respondents from psychology programs to agree that clinicians who offer psychedelic therapy are innovative. For instance, whereas 72.0% of

respondents from counseling/social work programs at least *somewhat agreed* that clinicians who offer psychedelic therapy are innovative, only 65.7% of respondents from psychology programs at least *somewhat agreed* with this belief.

Furthermore, with regards to the existing research on psychedelics and psychedelic therapy, respondents from psychology and nursing programs were significantly more likely than respondents from counseling/social work programs to agree that such published research is biased and lacks scientific rigor. Notably, however, respondents from counseling/social work (59.1%), psychology (46.2%), and nursing (37.3%) programs generally *disagreed to some extent* (48.1%) or *neither agreed nor disagreed* (34.7%) with this sentiment overall.

**Experiential learning.** Respondents from counseling/social work, psychology, and nursing programs were asked a series of questions about their attitudes towards experiential learning, whereby individuals would undergo a drug-induced psychedelic experience to better understand the effects of psychedelics. Findings suggest that respondents did not differ based on their academic program in their attitudes regarding experiential learning opportunities. This includes things such as whether academic programs should provide students and faculty interested in teaching about, conducting research on, or practicing psychedelic therapy, the option to participate in an experiential learning session. Of note, however, respondents generally *disagreed to some extent* (42.0%–56.4%) or *neither agreed nor disagreed* (24.8%–27.9%) with that notion that programs should provide students and faculty the option to participate in an experiential learning session, regardless of the reason.

Respondents also did not differ based on their academic program in the belief that those who engage in experiential learning are better positioned to teach, practice, or conduct research on psychedelic therapy than those who do not have firsthand experience using psychedelics. Similar to above, respondents generally *disagreed to some extent* (42.0%–49.4%) or *neither agreed nor disagreed* (24.3%–26.5%) with the belief that those who engage in experiential learning are better positioned to teach, practice, or conduct research on psychedelic therapy than those who do not have firsthand experience using psychedelics.

## Section 4: Psychedelic Therapy-Related Background, Familiarity, and Experiences

The Survey examined topics related to respondents' personal background, familiarity, and experiences related to psychedelics and/or psychedelic medicine. Survey items asked about their personal concerns regarding any association with psychedelic therapy or psychedelics, their personal knowledge about the risks, benefits, and policies related to psychedelic medicine and psychedelics overall, as well as where they get their information from regarding psychedelic therapy.



## Professional Concerns Surrounding Psychedelic Therapy

**Career concerns.** Respondents indicated their concerns pertaining to their career (e.g., keeping a job, finding a job, career growth) if they were to express a professional interest to various individuals about psychedelic medicine or psychedelic therapy (e.g., colleagues within their academic field, students in their classes, colleagues in their academic program). Findings generally revealed that respondents were either *unconcerned to an extent* (46.2%–62.6%) or *neither concerned nor unconcerned* (19.7%–25.8%) about what would happen to their career if they were to express a professional interest about psychedelic medicine or psychedelic therapy to various individuals.

Notably, respondents only differed in their career concerns if they were to express a professional interest in psychedelic medicine or psychedelic therapy to their professional mentors. Specifically, respondents in nursing programs reported a greater concern about their career than respondents in counseling/social work or psychology programs if they were to express to professional mentors an interest in psychedelic medicine or psychedelic therapy. With that being said, respondents from counseling/social work (66.6%), psychology (67.3%), and nursing (48.9%) programs were still generally *unconcerned* overall (62.6%).

**Professional reputation.** Though respondents generally did not differ in their career concerns for expressing a professional interest in psychedelic medicine or psychedelic therapy, this was not the case when it came to their concerns about their professional reputation. Specifically, in addition to having concerns about their professional reputation for expressing an interest in these topics to their professional mentor, there were program differences in levels of concern when expressing these interests to colleagues within their field, students inside and outside of their program, as well as students in their classes. Specifically, respondents from nursing programs were significantly more concerned about their professional reputation than respondents from counseling/social work programs if they were to express a professional interest in psychedelic medicine or psychedelic therapy to colleagues in their field, students inside and outside of their program, students in their classes, and professional mentors. With that being said, respondents from counseling/social work (62.8%–70.0%), psychology (58.3%–63.7%), and nursing (50.1%–53.9%) programs were still generally *unconcerned* overall (59.4%–62.0%).

**Viewed as an illegal drug user.** Findings revealed program-level differences in respondents' concerns about whether they would be viewed by others as an illegal drug user if they expressed a professional interest in psychedelic medicine or psychedelic therapy. Following a similar pattern as above, respondents from nursing programs were significantly more concerned than respondents from counseling/social work programs that colleagues within their academic program as well as their professional mentors (marginal) would think they use drugs illegally if they expressed a professional interest in psychedelic medicine or psychedelic therapy. Of note, whereas a majority

of respondents from counseling/social work (60.0%) and psychology (53.1%) programs were *unconcerned to an extent* about being viewed as an illegal drug user by colleagues within their academic program, an equal number of respondents from nursing programs indicated they were either *concerned* (39.9%) or *unconcerned (39.3%) to an extent*. Similarly, whereas a majority of respondents from counseling/social work (59.1%) and psychology (56.2%) programs were *unconcerned to an extent* about being viewed as an illegal drug user by their professional mentors, a relatively similar number of respondents from nursing programs indicated they were either *concerned* (35.9%) or *unconcerned (42.6%) to an extent*.

**Discouraged from expressing interest.** Respondents from counseling/social work, psychology, and nursing programs were asked whether they had been discouraged from expressing an interest in psychedelic medicine or psychedelic therapy from various individuals (see Table 14). Overall, nearly a quarter (22.0%) of respondents from counseling/social work, psychology, and nursing programs indicated they had been discouraged from expressing an interest in psychedelic medicine or psychedelic therapy by at least one individual. Of this smaller population, over half (55.0%) indicated they had been discouraged from expressing an interest in psychedelic medicine or psychedelic therapy from the general public. When broken down by academic program, about two-thirds (65.6%) of counseling/social work respondents and about half of psychology (48.0%) and nursing (47.8%) respondents who indicated they had been discouraged from expressing an interest in psychedelic medicine or psychedelic therapy, indicated they had been discouraged by the general public. See Table 14 on the subsequent page.

**Table 14. Discouraged from Expressing Interest in Psychedelic Medicine or Psychedelic Therapy.**

Item	Overall Subsample (n = 80)	Counseling/Social Work (n = 32)	Psychology (n = 25)	Nursing (n = 23)
Have you ever been discouraged from expressing interest in psychedelic medicine or PAT by any of the following individuals? <sup>a,b,c</sup>				
The general public	55.0%	65.6%	48.0%	47.8%
Academic leaders at my institution	27.5%	18.8%	36.0%	30.4%
Colleagues at my institution	20.0%	15.6%	24.0%	21.7%
Colleagues within my academic program(s)	18.8%	21.9%	16.0%	17.4%
Colleagues within my field	17.5%	18.8%	16.0%	17.4%
Professional mentors	12.5%	6.3%	8.0%	26.1%
Students in my classes	11.3%	3.1%	20.0%	13.0%
Colleagues outside of my field	10.0%	6.3%	8.0%	17.4%
Colleagues outside of my academic program(s)	8.8%	12.5%	4.0%	8.7%
Colleagues outside of my institution	6.3%	3.1%	12.0%	4.3%
Students in my program(s)	6.3%	-	12.0%	8.7%
Academic leaders outside of my institution	5.0%	3.1%	8.0%	4.3%
Students outside of my program(s)	3.8%	3.1%	4.0%	4.3%
Students outside of my classes	1.3%	-	-	4.3%

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

<sup>c</sup> PAT = Psychedelic-Assisted Therapy.

## Background and Familiarity with Psychedelic Therapy and Psychedelics

**Personal knowledge of psychedelic therapy, psychedelics, and related policies.** Respondents from counseling/social work, psychology, and nursing programs were asked a series of questions about their background and familiarity with psychedelic therapy, psychedelics, and related policies. Findings revealed respondents did not differ based on their academic program in their personal knowledge of the potential risks, side effects, and benefits associated with psychedelic therapy, or the potential benefits associated with psychedelic use, with only a small portion of respondents indicating they feel *quite a bit* or *a great deal* knowledgeable (14.7%–16.9%). However, findings revealed that respondents differed in their personal knowledge regarding the potential risks and side effects associated with psychedelic use. Specifically, respondents in psychology programs indicated they were significantly more knowledgeable about the potential risks and side effects

associated with psychedelic use than respondents in nursing programs. Of note, whereas 59.4% of psychology respondents indicated they were at least *somewhat* knowledgeable of the potential risks and side effects associated with psychedelic use, less than half of nursing (46.6%) respondents indicated they were at least *somewhat* knowledgeable of these potential risks and side effects.

With regards to policy awareness, respondents were asked about how knowledgeable they believed they, as well as others (e.g., colleagues in their field), were about the differences between the medical use of psychedelics (e.g., psychedelic therapy), the legalization of psychedelics, and the decriminalization of psychedelics. Both counseling/social work and psychology respondents believed they were more knowledgeable than nursing respondents about the differences between the medical use of psychedelics, the legalization of psychedelics, and the decriminalization of psychedelics. Indeed, whereas 28.3% of counseling/social work and 21.0% of psychology respondents indicated they were at least *quite a bit* knowledgeable about these differences, only 11.1% of nursing respondents indicated they were at least *quite a bit* knowledgeable about these differences.

Furthermore, respondents from psychology programs were significantly more likely than respondents from nursing programs to believe colleagues in their field of practice were knowledgeable about these differences. In particular, whereas 50.3% of respondents from psychology programs indicated colleagues in their field of practice were at least *somewhat* knowledgeable of these differences, only 30.1% of respondents from nursing programs indicated colleagues in their field of practice are at least *somewhat* knowledgeable of these differences.

Lastly, respondents from nursing programs were significantly more likely than respondents from counseling/social work programs to believe the average adult in the general public knows the differences between the medical use of psychedelics, the legalization of psychedelics, and the decriminalization of psychedelics. With that being said, respondents from counseling/social work (94.1%), psychology (93.8%), and nursing (87.2%) programs all generally believed that the general public knew either *very little* (58.7%) or *nothing at all* (33.5%) about the differences between the medical use of psychedelics, the legalization of psychedelics, and the decriminalization of psychedelics overall.

## **Familiarity with Psychedelics and Previous Psychedelic Therapy Educational Experiences**

**Familiarity with psychedelics.** Respondents indicated their familiarity with a variety of psychedelics (see Table 15). Of note, nearly all respondents (96.3%) indicated they had heard of LSD (lysergic acid diethylamide; also referred to as acid). When broken down by academic program, 92.4% of counseling/social work, 99.3% of psychology, and 96.7% of nursing

respondents indicated they had heard of LSD. Most (86.8%) respondents had also heard of psilocybin or psilocin (also referred to as magic mushrooms or shrooms). When broken down by academic program, 85.7% of counseling/social work, 93.9% of psychology, and 76.7% of nursing respondents indicated they had heard of psilocybin or psilocin.

**Table 15. Familiarity with Different Psychedelics.**

Item	Overall Subsample (n = 356)	Counseling/Social Work (n = 119)	Psychology (n = 147)	Nursing (n = 90)
Which of the following psychedelics have you heard of? <sup>a,b</sup>				
LSD (Lysergic acid diethylamide; also referred to as acid)	<b>96.3%</b>	92.4%	99.3%	96.7%
Ketamine (also referred to as special k)	<b>93.3%</b>	94.1%	94.6%	90.0%
MDMA (3, 4-Methylenedioxy-methamphetamine; also referred to as ecstasy or molly)	<b>88.5%</b>	86.6%	96.6%	77.8%
Psilocybin or psilocin (also referred to as magic mushrooms or shrooms)	<b>86.8%</b>	85.7%	93.9%	76.7%
DMT (N, N-Dimethyltryptamine; other forms include ayahuasca, mescaline, and 5-MeO-DMT)	<b>60.1%</b>	57.1%	70.1%	47.8%
I have not heard of any of these	<b>1.4%</b>	2.5%	0.7%	1.1%
Another psychedelic(s)	<b>3.9%</b>	5.0%	4.8%	1.1%

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

**Participation in psychedelic therapy-related activities.** Respondents indicated whether they had personally engaged in various psychedelic therapy-related activities, such as facilitating a psychedelic therapy session, participating in a clinical trial for psychedelic therapy, receiving psychedelic therapy in a supportive environment, attending academic lectures on psychedelic therapy, or participating in a psychedelic therapy-specific practicum training or didactic session (see Table 16). Though most respondents (80.2%) indicated they had not participated in any of the aforementioned psychedelic therapy-related activities, 17.8% of respondents indicated they have at least attended academic lectures on psychedelic therapy. When broken down by academic program, 22.0% of counseling/social work, 15.8% of psychology, and 15.6% of nursing respondents indicated they have attended academic lectures on psychedelic therapy.

**Table 16. Participation in Psychedelic Therapy-Related Activities.**

Item	Overall Subsample (n = 354)	Counseling/Social Work (n = 118)	Psychology (n = 146)	Nursing (n = 90)
Which of the following activities have you participated in? <sup>a,b,c</sup>				
I have attended academic lectures on PAT	17.8%	22.0%	15.8%	15.6%
I have participated in PAT-specific didactic sessions	4.8%	8.5%	1.4%	5.6%
I have received PAT in a supportive environment	2.5%	3.4%	1.4%	3.3%
I have participated in a PAT-specific practicum training	1.1%	2.5%	0.7%	-
I have facilitated a PAT session as a mental health professional	0.8%	0.8%	0.7%	1.1%
I have participated in a clinical trial for PAT	-	-	-	-
None of the above	80.2%	75.4%	82.2%	83.3%

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

<sup>c</sup> PAT = Psychedelic-Assisted Therapy.

**Specialized training in psychedelic therapy-related topics.** Respondents from counseling/social work, psychology, and nursing programs were asked whether they had received any specialized training in areas related to psychedelic therapy. Overall, nearly all respondents (97.8%) indicated they did not have specialized training in areas related to psychedelic therapy. When broken down by academic program, 96.0% of counseling/social work, 98.0% of psychology, and 100.0% of nursing respondents indicated they did not have specialized training in areas related to psychedelic therapy.

**Positive or negative experience with psychedelic therapy.** Respondents from counseling/social work, psychology, and nursing programs were asked whether they have a friend or relative who has had a positive or negative experience with psychedelic therapy. Overall, slightly over a quarter (28.5%) of respondents indicated they have a friend or relative who has had a positive experience with psychedelic therapy. When broken down by academic program, slightly over a third of counseling/social work (34.2%) respondents, slightly over a quarter of psychology (27.9%) respondents, and slightly less than a quarter of nursing (21.8%) respondents indicated they have a friend or relative who has had a positive experience with psychedelic therapy. With regards to negative experiences with psychedelic therapy, 10.1% of respondents indicated they have a friend or relative who has had a negative experience. When broken down by academic program, 8.5% of counseling/social work, 11.7% of psychology, and 9.5% of nursing respondents indicated they have a friend or relative who has had a negative experience with psychedelic therapy.

**Table 17. Source(s) of Current Knowledge on Psychedelic Medicine and/or Psychedelic Therapy.**

Item	Overall Subsample (n = 354)	Counseling/Social Work (n = 118)	Psychology (n = 146)	Nursing (n = 90)
From which of the following sources have you obtained information on psychedelic medicine and/or PAT? a,b,c				
Peer-reviewed journal article(s)	<b>54.8%</b>	55.1%	57.5%	50.0%
News or magazine-based media (digital or print)	<b>31.1%</b>	32.2%	35.6%	22.2%
Conference (in-person or virtual)	<b>27.4%</b>	33.9%	27.4%	18.9%
Internet-based media (e.g., Wikipedia, Reddit, blog)	<b>22.9%</b>	22.0%	27.4%	16.7%
Textbook	<b>17.5%</b>	10.2%	27.4%	11.1%
Podcast	<b>16.9%</b>	18.6%	17.8%	13.3%
Academic talks/lectures at other institutions	<b>15.8%</b>	16.1%	17.1%	13.3%
Films and/or documentaries	<b>13.8%</b>	18.6%	10.3%	13.3%
Patient experience or case study	<b>13.6%</b>	7.6%	16.4%	16.7%
Webinar	<b>13.6%</b>	12.7%	11.0%	18.9%
Social media (e.g., Facebook, Instagram etc.)	<b>10.5%</b>	13.6%	9.6%	7.8%
Academic talks/lectures at my institution	<b>9.9%</b>	11.0%	10.3%	7.8%
Didactic sessions	<b>4.5%</b>	7.6%	3.4%	2.2%
Psychedelic research involvement	<b>2.8%</b>	3.4%	3.4%	1.1%
Formal training program (e.g., MAPS, CIIS)	<b>1.1%</b>	3.4%	-	-
Practicums	<b>0.6%</b>	0.8%	0.7%	-
None of these	<b>13.6%</b>	12.7%	8.2%	23.3%
Another source(s)	<b>8.5%</b>	12.7%	8.2%	3.3%

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

<sup>c</sup> PAT = Psychedelic-Assisted Therapy.

**Sources of information and interest in learning more.** Respondents from counseling/social work, psychology, and nursing programs were asked to indicate the sources in which they obtained information on psychedelic medicine and/or psychedelic therapy through the years (see Table 17). A majority (54.8%) of respondents indicated they obtained information on psychedelic medicine and/or psychedelic therapy from peer-reviewed journal articles. When broken down by academic program, 55.1% of counseling/social work, 57.5% of psychology, and 50.0% of nursing respondents indicated they obtained information on psychedelic medicine and/or psychedelic

therapy from peer-reviewed academic journals. Many respondents (31.1%) also indicated they obtained information on psychedelic medicine and/or psychedelic therapy from news or magazine-based media (digital or print). When broken down by academic program, 32.2% of counseling/social work, 35.6% of psychology, and 22.2% of nursing respondents indicated they obtained information about psychedelic medicine and/or psychedelic therapy from news or magazine-based media (digital or print).

**Table 18. Source(s) to Learn More About Psychedelic Medicine and/or Psychedelic Therapy.**

Item	Overall Subsample (n = 353)	Counseling/Social Work (n = 119)	Psychology (n = 145)	Nursing (n = 89)
I'd be interested in learning more about psychedelic medicine and/or PAT via: <sup>a,b,c</sup>				
Peer-reviewed journal article(s)	<b>68.8%</b>	69.7%	70.3%	65.2%
Conference (in-person or virtual)	<b>52.1%</b>	68.1%	41.4%	48.3%
Webinar	<b>43.9%</b>	55.5%	33.8%	44.9%
Academic talks/lectures at other institutions	<b>36.8%</b>	47.1%	33.1%	29.2%
Academic talks/lectures at my institution	<b>32.6%</b>	38.7%	28.3%	31.5%
Podcast	<b>26.9%</b>	32.8%	22.8%	25.8%
Textbook	<b>25.8%</b>	25.2%	30.3%	19.1%
Patient experience or case study	<b>25.8%</b>	37.0%	12.4%	32.6%
Formal training program (e.g., MAPS, CIIS)	<b>22.7%</b>	36.1%	8.3%	28.1%
Films and/or documentaries	<b>21.0%</b>	31.9%	13.1%	19.1%
Psychedelic research involvement	<b>15.9%</b>	19.3%	10.3%	20.2%
News or magazine-based media (digital or print)	<b>15.0%</b>	18.5%	15.9%	9.0%
Didactic sessions	<b>13.9%</b>	23.5%	4.1%	16.9%
Internet-based media (e.g., Wikipedia, Reddit, blog)	<b>10.5%</b>	11.8%	11.0%	7.9%
Practicums	<b>7.9%</b>	14.3%	2.8%	7.9%
Social media (e.g., Facebook, Instagram etc.)	<b>7.4%</b>	7.6%	6.2%	9.0%
None of these	<b>10.2%</b>	5.0%	13.1%	12.4%
Another source(s)	<b>0.8%</b>	-	2.1%	-

<sup>a</sup> Respondents could select multiple responses, so total percentages can exceed 100% and are therefore not reported.

<sup>b</sup> Table excludes any missing values.

<sup>c</sup> PAT = Psychedelic-Assisted Therapy.



Lastly, respondents were asked how interested they were in learning more about psychedelic medicine and/or psychedelic therapy, as well as the sources they would use to do so. With regards to their interest, findings revealed that respondents from counseling/social work programs were significantly more interested in learning more about psychedelic medicine and/or psychedelic therapy than respondents from psychology and nursing programs, and that respondents from psychology and nursing programs did not differ from each other in their level of interest in learning more about psychedelic medicine and/or psychedelic therapy. Of note, nearly three-fourths of counseling/social work (72.6%), half of psychology (50.4%), and slightly less than half of nursing (48.3%) respondents indicated they were at least *somewhat interested* in learning more about psychedelic medicine and/or psychedelic therapy.

In examining the specific ways respondents intend to learn more about psychedelic medicine and/or psychedelic therapy, a majority (68.8%) indicated they would be interested in reading peer-reviewed journal articles (see Table 18). When broken down by academic program, 69.7% of counseling/social work, 70.3% of psychology, and 65.2% of nursing respondents indicated they would be interested in learning more about psychedelic medicine and/or psychedelic therapy through peer-reviewed journal articles. A large portion (52.1%) of respondents also indicated they would be interested in learning more about psychedelic medicine and/or psychedelic therapy at conferences (in-person or virtual). Specifically, 68.1% of counseling/social work, 41.4% of psychology, and 48.3% of nursing respondents indicated they would be interested in learning more about psychedelic medicine and/or psychedelic therapy at conferences. Many respondents (43.9%) also indicated they would be interested in learning more about psychedelic medicine and/or psychedelic therapy through webinars. Specifically, 55.5% of counseling/social work, 33.8% of psychology, and 44.9% of nursing respondents indicated they would be interested in utilizing this method to learn more about psychedelic medicine and/or psychedelic therapy.

## Conclusion

The findings of this study offer important insights into the current landscape and potential of psychedelic therapy-related curricula in higher education. As mental health challenges escalate and the interest and research in psychedelic interventions grows, the need for training future providers grows. This report explores the implementation and interest in psychedelic therapy-related curricula but also the barriers, opportunities, and demand for open-source materials. These insights can be fruitful for academic stakeholders who want to ensure future healthcare professionals are prepared for the emerging field of psychedelic medicine and therapy. These insights may help shape curriculum development, influence policy discussions, and potentially contribute to broader efforts aimed at making innovative mental health treatments accessible to those in need.

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# Appendix A: Survey on Psychedelic Therapy Curricula in Academia

## Survey on Psychedelic Therapy Curricula in Academia

On behalf of BrainFutures, a national non-profit committed to addressing barriers to equitable access of evidence-based treatments supporting mental health and wellbeing, NORC at the University of Chicago (NORC) is administering the following survey about the implementation of psychedelic-assisted therapy (PAT)-related curricula across various academic training contexts. This survey is being sent to a sample of academic leaders, including program directors, chairs, deans, and other higher education administrators involved in the training of those entering the fields of counseling, marriage and family therapy, nursing, pharmacy, psychiatry, psychology, and social work.

**What is psychedelic-assisted therapy (PAT)?** PAT is a particular mode of using psychedelic substances in which the effects of the drug, both biological and psychological, play a significant role in facilitating a psychotherapeutic intervention (Guss et al., 2020).

**What are PAT-related curricula?** PAT-related curricula include 1) course content, 2) courses, 3) entire program tracks and certification programs, or 4) any other training opportunities that include PAT-related learning objectives, content, or instruction such as clinical experiences.

**This survey seeks** to advance BrainFutures' understanding of several critical areas related to PAT curricula, including 1) the current level of implementation of and interest in PAT-related curricula, 2) key factors associated with implementing PAT-related curricula in various training programs, 3) individual knowledge, attitudes, and experiences related to PAT, and 4) the demand for open-source PAT curricula. BrainFutures will use findings from this study to inform a variety of academic stakeholders interested in the development of open-source PAT-related offerings.

This survey should take you about 20-25 minutes to complete. This is a confidential survey. All survey data will be de-identified so that there will be no link between your survey response and your name, academic program, institution, or other personally identifiable information. The results will be summarized so that no individual can be identified. Your decision to participate in this survey is voluntary. You can stop taking the survey at any time, and you are not required to answer any questions you do not want to answer. Refusal to take part in or withdrawing from this study will involve no penalty.

If you have any questions or concerns, you may contact the research team at [PATsurvey@norc.org](mailto:PATsurvey@norc.org). You can also visit the study's website for additional information: <https://www.norc.org/research/projects/survey-psychedelic-assisted-therapy-higher-education.html>.

By entering the survey, you are granting consent to participate in this research. If you wish to participate in this survey, select the "I AGREE" button. If you do not wish to participate in this survey, select the "I DISAGREE" button. You can leave the survey and come back, and your answers will be saved so that you

can pick up from where you left off. After making a selection, press the continue button on the bottom of the page.

- I AGREE and want to participate in the survey. (1)
- I DISAGREE and do NOT want to participate in the survey. (2)

*Skip To: End of Survey If Survey on Psychedelic-Assisted Therapy Curricula in Academia On behalf of BrainFutures, a nat... = I DISAGREE and do NOT want to participate in the survey.*

**ACROLE The first few questions ask about aspects related to your current roles at your institution.**

In what role(s) do you currently serve? (Select all that apply.)

- Advisory board for academic program (1)
- Assistant or associate dean (2)
- Dean (3)
- Department chair (4)
- Head of program track or concentration (5)
- Program director (6)
- Program faculty (7)
- Program staff (8)
- Other (please specify): (9) \_\_\_\_\_

*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... = Assistant or associate dean*

*Or The first few questions ask about aspects related to your current roles at your institution. In w... = Dean*

DACAREA What area(s) do you oversee?

\_\_\_\_\_

---

*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... = Assistant or associate dean*

*Or The first few questions ask about aspects related to your current roles at your institution. In w... = Dean*

*And If*

*The first few questions ask about aspects related to your current roles at your institution. In w... = Advisory board for academic program*

*Or The first few questions ask about aspects related to your current roles at your institution. In w... = Head of program track or concentration*

*Or The first few questions ask about aspects related to your current roles at your institution. In w... = Program director*

*Or The first few questions ask about aspects related to your current roles at your institution. In w... = Program faculty*

*Or The first few questions ask about aspects related to your current roles at your institution. In w... = Program staff*

DACPROG In addition to your role(s) noted in the previous question, what academic program(s) do you currently work in? (Select all that apply.)

- Counseling (1)
  - Marriage and family therapy (2)
  - Nursing (3)
  - Pharmacy (4)
  - Psychiatry (5)
  - Psychology (6)
  - Social work (7)
  - Other (please specify): (8) \_\_\_\_\_
-

*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... = Assistant or associate dean*

*Or The first few questions ask about aspects related to your current roles at your institution. In w... = Dean*

*And If*

*If In addition to your role(s) noted in the previous question, what academic program(s) do you currently work in? (Select all that apply.) q://QID4/SelectedChoicesCount Is Greater Than 1*

DACPRIM In the previous question, you indicated that you are currently affiliated with more than one academic program. What is your **primary** academic program? (Select one.)

- Counseling (1)
- Marriage and family therapy (2)
- Nursing (3)
- Pharmacy (4)
- Psychiatry (5)
- Psychology (6)
- Social work (7)
- Other (please specify): (8) \_\_\_\_\_

*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... != Dean*

*Or The first few questions ask about aspects related to your current roles at your institution. In w... != Assistant or associate dean*

*And The first few questions ask about aspects related to your current roles at your institution. In w... = Advisory board for academic program*

*And The first few questions ask about aspects related to your current roles at your institution. In w... = Department chair*

*And The first few questions ask about aspects related to your current roles at your institution. In w... = Head of program track or concentration*

*And The first few questions ask about aspects related to your current roles at your institution. In w... = Program director*

*And The first few questions ask about aspects related to your current roles at your institution. In w... = Program faculty*

*And The first few questions ask about aspects related to your current roles at your institution. In w... = Program staff*

*And The first few questions ask about aspects related to your current roles at your institution. In w... = Other <em>(please specify)</em>:*

ACPROG In what academic program(s) do you currently work? (Select all that apply.)

- Counseling (1)
- Marriage and family therapy (2)
- Nursing (3)
- Pharmacy (4)
- Psychiatry (5)
- Psychology (6)
- Social work (7)
- Other (please specify): (8) \_\_\_\_\_

*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... != Assistant or associate dean*

*Or The first few questions ask about aspects related to your current roles at your institution. In w... != Dean*

*And If*

*If In what academic program(s) do you currently work? (Select all that apply.)  
q://QID6/SelectedChoicesCount Is Greater Than 1*

ACPRIM What is your **primary** academic program? (Select one.)

- Counseling (1)
- Marriage and family therapy (2)
- Nursing (3)
- Pharmacy (4)
- Psychiatry (5)
- Psychology (6)
- Social work (7)
- Other (please specify): (8) \_\_\_\_\_

ACTEN What is your current tenure status?

- Tenured (1)
- On Tenure track but not tenured (2)
- Not on tenure track, but this institution has a tenure system (3)
- No tenure system at this institution (4)

### **Current Curricular Landscape**

#### **Current PAT-related Curricular Landscape**

The next set of questions ask about the current PAT-related curricular landscape within your **primary academic program** as well as a variety of related institutional and program-level factors. If you are affiliated with more than one academic program, respond relative to the program that you consider your *primary* academic program.

Once again, PAT-related curricula include 1) course content, 2) courses, 3) entire program tracks and certification programs, or 4) any other training opportunities that include PAT-related learning objectives, content, or instruction such as clinical experiences.

Please answer the following questions to the best of your ability. There are no right or wrong answers.

---



Q1 Has your academic program already incorporated any of the following into its curriculum? (Select all that apply.)

- PAT certification program (1)
- PAT-specific program track (2)
- PAT-specific content integrated into a *required* undergraduate course(s) (3)
- PAT-specific content integrated into an *elective* undergraduate course(s) (4)
- PAT-specific content integrated into a *required* graduate- or professional-level course(s) (5)
- PAT-specific content integrated into an *elective* graduate- or professional-level course(s) (6)
- Required* undergraduate course(s) *primarily* focused on PAT (7)
- Elective* undergraduate course(s) *primarily* focused on PAT (8)
- Required* graduate- or professional-level course(s) *primarily* focused on PAT (9)
- Elective* graduate- or professional-level course(s) *primarily* focused on PAT (10)
- PAT-specific practicum training (11)
- PAT-specific didactic sessions (12)
- PAT-specific continuing education courses or continuing education units (CEUs) (13)
- PAT-specific trainings that are not part of program curricula or continuing education-related offerings (14)
- Other (*please specify*): (15) \_\_\_\_\_
- ☒ None of the above (16)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = PAT certification program*

Q2a When was the \${Q1/ChoiceDescription/1} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = PAT-specific program track*

Q2b When was the \${Q1/ChoiceDescription/2} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = PAT-specific content integrated into a <em>required </em>undergraduate course(s)*

Q2c When was the \${Q1/ChoiceDescription/3} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = PAT-specific content integrated into an <em>elective </em>undergraduate course(s)*

Q2d When was the \${Q1/ChoiceDescription/4} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

---

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = PAT-specific content integrated into a <em>required </em>graduate- or professional-level course(s)*

Q2e When was the \${Q1/ChoiceDescription/5} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

---

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = PAT-specific content integrated into an <em>elective </em>graduate- or professional-level course(s)*

Q2f When was the \${Q1/ChoiceDescription/6} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

---

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = <em>Required</em> undergraduate course(s) <em>primarily </em>focused on PAT*

Q2g When was the \${Q1/ChoiceDescription/7} implemented in your academic program?

- Less than 1 year ago (1)
  - 1-2 years ago (2)
  - 3 or more years ago (3)
-

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = *Elective* undergraduate course(s) *primarily* focused on PAT*

Q2h When was the \${Q1/ChoiceDescription/8} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = *Required* graduate- or professional-level course(s) *primarily* focused on PAT*

Q2i When was the \${Q1/ChoiceDescription/9} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = *Elective* graduate- or professional-level course(s) *primarily* focused on PAT*

Q2j When was the \${Q1/ChoiceDescription/10} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = PAT-specific didactic sessions*

Q2k When was the \${Q1/ChoiceDescription/11} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

---

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = PAT-specific didactic sessions*

Q2l When was the \${Q1/ChoiceDescription/12} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

---

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = PAT-specific continuing education courses or continuing education units (CEUs)*

Q2m When was the \${Q1/ChoiceDescription/13} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

---

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = PAT-specific trainings that are not part of program curricula or continuing education-related offerings*

Q2n When was the \${Q1/ChoiceDescription/14} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

*And Has your academic program already incorporated any of the following into its curriculum? (Select... = Other<em> (please specify)</em>:*

Q2o When was the \${Q1/ChoiceTextEntryValue/15} implemented in your academic program?

- Less than 1 year ago (1)
- 1-2 years ago (2)
- 3 or more years ago (3)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

Q3 What type of influence, if any, did the following factors have in implementing PAT-related curriculum in your academic program?

**Grid items:**

- *My own* awareness of PAT as a treatment modality (1)
- *My own* interest in incorporating PAT into students' training (2)
- *My program colleagues'* awareness of PAT as a treatment modality (3)
- *My program colleagues'* interest in incorporating PAT into students' training (4)
- *My field's* awareness of PAT as a treatment modality (5)
- *My field's* interest in incorporating PAT into students' training (6)
- *Students'* awareness of PAT as a treatment modality (7)
- *Students'* interest in incorporating PAT into their training (8)

**Response options:**

- None at all (1)
- Very little (2)
- Somewhat (3)
- Quite a bit (4)
- A great deal (5)
- Don't know (6)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

Q4 Is your academic program *currently* interested in expanding or further developing your PAT-related curriculum by including any of the following in its existing curriculum? (Select all that apply.)

- PAT certification program (1)
- PAT-specific program track (2)
- PAT-specific content integrated into a *required* undergraduate course(s) (3)
- PAT-specific content integrated into an *elective* undergraduate course(s) (4)
- PAT-specific content integrated into a *required* graduate- or professional-level course(s) (5)
- PAT-specific content integrated into an *elective* graduate- or professional-level course(s) (6)
- Required* undergraduate course(s) *primarily* focused on PAT (7)
- Elective* undergraduate course(s) *primarily* focused on PAT (8)
- Required* graduate- or professional-level course(s) *primarily* focused on PAT (9)
- Elective* graduate- or professional-level course(s) *primarily* focused on PAT (10)
- PAT-specific practicum training (11)
- PAT-specific didactic sessions (12)
- PAT-specific continuing education courses or continuing education units (CEUs) (13)
- PAT-specific trainings that are not part of program curricula or continuing education-related offerings (14)
- Other (please specify): (15) \_\_\_\_\_
- ☒ None of the above (16)

Display This Question:

If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above

Q5 Which of the following would be helpful in further developing or expanding PAT-related curricula for your academic program? (Select all that apply.)

- Free access to PAT-related curricula (1)
- Additional research related to PAT as a treatment modality (2)
- Curriculum development funding (3)
- FDA approval of a drug associated with PAT (4)
- Ability to earn a certificate through PAT-related curricula (5)
- Standardized guidelines for PAT-related course design (6)
- Standardized guidelines for PAT-related instruction (7)
- Standardized guidelines for PAT-related clinical application (8)
- Standardized guidelines for PAT-related student evaluation (9)
- Training opportunities for faculty (for example, conferences, workshops/webinars, applied training programs, clinical opportunities, certification programs) (10)
- Support or guidance from professional associations (for example, the American Psychological Association) (11)
- Other (please specify): (12) \_\_\_\_\_
- ☒ None of the above (13)

Display This Question:

If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above



Q6 What is the likelihood your academic program would expand its current PAT-related curricula if PAT-related questions were included on licensure examinations?

- Extremely unlikely (1)
- Unlikely (2)
- Likely (3)
- Extremely likely (4)
- Don't know (5)

---

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... != None of the above*

Q7 What is the likelihood your academic program would expand its current PAT-related curricula if the inclusion of PAT-related content in your curricula was required for accreditation?

- Extremely unlikely (1)
- Unlikely (2)
- Likely (3)
- Extremely likely (4)
- Don't know (5)

---

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... = None of the above*

Q8 Is your academic program *currently* interested in incorporating any of the following into its curriculum?  
(Select all that apply.)

- PAT certification program (1)
- PAT-specific program track (2)
- PAT-specific content integrated into a *required* undergraduate course(s) (3)
- PAT-specific content integrated into an *elective* undergraduate course(s) (4)
- PAT-specific content integrated into a *required* graduate- or professional-level course(s) (5)
- PAT-specific content integrated into an *elective* graduate- or professional-level course(s) (6)
- Required* undergraduate course(s) *primarily* focused on PAT (7)
- Elective* undergraduate course(s) *primarily* focused on PAT (8)
- Required* graduate- or professional-level course(s) *primarily* focused on PAT (9)
- Elective* graduate- or professional-level course(s) *primarily* focused on PAT (10)
- PAT-specific practicum training (11)
- PAT-specific didactic sessions (12)
- PAT-specific continuing education courses or continuing education units (CEUs) (13)
- PAT-specific trainings that are not part of program curricula or continuing education-related offerings (14)
- Other (*please specify*): (15) \_\_\_\_\_
- ☒ None of the above (16)

Display This Question:

If Has your academic program already incorporated any of the following into its curriculum? (Select... = None of the above

Q9 What type of influence, if any, have the following factors played in your academic program not currently implementing any PAT-related curricula?

**Grid items:**

- *My own* awareness of PAT as a treatment modality (1)
- *My own* interest in incorporating PAT into students' training (2)
- *My program colleagues'* awareness of PAT as a treatment modality (3)
- *My program colleagues'* interest in incorporating PAT into students' training (4)
- *My field's* awareness of PAT as a treatment modality (5)
- *My field's* interest in incorporating PAT into students' training (6)
- *Students'* awareness of PAT as a treatment modality (7)
- *Students'* interest in incorporating PAT into their training (8)

**Response options:**

- None at all (1)
- Very little (2)
- Somewhat (3)
- Quite a bit (4)
- A great deal (5)
- Don't know (6)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... = None of the above*

QZ What is the likelihood your academic program will implement any PAT-related curricula within the next 3 years?

- Extremely unlikely (1)
- Unlikely (2)
- Likely (3)
- Extremely likely (4)
- Don't know (5)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... = None of the above*

*And If*

*What is the likelihood your academic program will implement any PAT-related curricula within the... = Unlikely*

*Or What is the likelihood your academic program will implement any PAT-related curricula within the... = Extremely unlikely*

*Or What is the likelihood your academic program will implement any PAT-related curricula within the... = Don't know*

QZ\_1 If your academic program were to implement any PAT-curricula, how long do you think this process would take?

- Less than 1 year (1)
- 1-2 years (2)
- 3 or more years (3)
- Don't know (4)

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... = None of the above*

QZ\_2 Which factors or resources would be helpful for you and your colleagues in considering PAT-related curricula for your academic program?

- Free access to PAT-related curricula (1)
- Additional research related to PAT as a treatment modality (2)
- Curriculum development funding (3)
- FDA approval of a drug associated with PAT (4)
- Ability to earn a certificate through PAT-related curricula (5)
- Standardized guidelines for PAT-related course design (6)
- Standardized guidelines for PAT-related instruction (7)
- Standardized guidelines for PAT-related clinical application (8)
- Standardized guidelines for PAT-related student evaluation (9)
- Training opportunities for faculty (for example, conferences, workshops/webinars, applied training programs, clinical opportunities, certification programs) (10)
- Support or guidance from professional associations (for example, the American Psychological Association) (11)
- Other (please specify): (12) \_\_\_\_\_
- None of the above (13)

QZ\_3 How open to *any* curricula that teach emerging areas of treatments and research are the following audiences that review and approve new curricula at your institution?

**Grid items:**

- Your academic program or department colleagues (1)
- The college or school in which your academic program is housed (2)

**Response options:**

- Not at all (1)
- Very little (2)
- Somewhat (3)
- Quite a bit (4)
- A great deal (5)
- Don't know (6)

---

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... = None of the above*

QZ\_4 Compared to implementing any new curricula in your academic program, how easy or difficult would the process be to implement PAT-related curriculum?

- Very easy (1)
- Easy (2)
- Somewhat easy (3)
- About the same (4)
- Somewhat difficult (5)
- Difficult (6)
- Very difficult (7)
- Don't know (8)

---

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... = None of the above*

QZ\_5 What is the likelihood your academic program would implement PAT-related curricula if PAT-related questions were included on licensure examinations?

- Extremely unlikely (1)
- Unlikely (2)
- Likely (3)
- Extremely likely (4)
- Don't know (5)

---

*Display This Question:*

*If Has your academic program already incorporated any of the following into its curriculum? (Select... = None of the above*

QZ\_6 What is the likelihood your academic program would implement PAT-related curricula if the inclusion of PAT-related content in your curricula was required for accreditation?

- Extremely unlikely (1)
- Unlikely (2)
- Likely (3)
- Extremely likely (4)
- Don't know (5)

### **Relevant Resources and Barriers to Curricular Implementation**

The following questions ask about some of the factors that may have impacted the implementation of a PAT-related curricula in your **primary academic program**. If you are affiliated with more than one academic program, respond relative to the program that you consider your primary academic program.

---

Q10 Colleagues in my academic program are aware that PAT-related curricula exists outside of our program.

- Strongly disagree (1)
  - Disagree (2)
  - Somewhat disagree (3)
  - Neither agree nor disagree (4)
  - Somewhat agree (5)
  - Agree (6)
  - Strongly agree (7)
  - Don't know (8)
-

Q11 Colleagues in my academic program know how to find open-access PAT-related curriculum that exists outside of our program (i.e., freely available resources individuals can use for the development and/or implementation of PAT-related training/curricula).

- Strongly disagree (1)
  - Disagree (2)
  - Somewhat disagree (3)
  - Neither agree nor disagree (4)
  - Somewhat agree (5)
  - Agree (6)
  - Strongly agree (7)
  - Don't know (8)
- 

Q12 Colleagues in my academic program are aware of existing PAT-related curriculum outside of our program that has been developed using diverse cultural understandings and experiences.

- Strongly disagree (1)
  - Disagree (2)
  - Somewhat disagree (3)
  - Neither agree nor disagree (4)
  - Somewhat agree (5)
  - Agree (6)
  - Strongly agree (7)
  - Don't know (8)
- 

Q13 Our existing program curricular structure can accommodate additional or alternative curricula.

- Strongly disagree (1)
  - Disagree (2)
  - Somewhat disagree (3)
  - Neither agree nor disagree (4)
  - Somewhat agree (5)
  - Agree (6)
  - Strongly agree (7)
  - Don't know (8)
-

Q14 There are currently sufficient federal regulations pertaining to the use of psychedelics.

- Strongly disagree (1)
  - Disagree (2)
  - Somewhat disagree (3)
  - Neither agree nor disagree (4)
  - Somewhat agree (5)
  - Agree (6)
  - Strongly agree (7)
  - Don't know (8)
- 

Q15 Curriculum development funding (for example, grants) would be useful in developing PAT-related curricula for my academic program.

- Strongly disagree (1)
- Disagree (2)
- Somewhat disagree (3)
- Neither agree nor disagree (4)
- Somewhat agree (5)
- Agree (6)
- Strongly agree (7)
- Don't know (8)

### **Potential for Open-source Curricula**

#### **Assessing the Potential for Open-source PAT Curricula**

Next, we are interested in better understanding your **primary academic program's** views and experiences with regards to open-source PAT (i.e., freely available resources individuals can use for the development and/or implementation of PAT-related training/curricula). If you are affiliated with more than one academic program, respond relative to the program that you consider your primary academic program.

---

QX Is your academic program currently using any existing *open-source* PAT curriculum?

- Yes (1)
  - No (2)
  - Don't know (3)
-



**Display This Question:**

*If Is your academic program currently using any existing open-source PAT curriculum? = Yes*

QX\_1 In what types of curricular contexts have any existing open-source PAT curricula been incorporated in your academic program? (Select all that apply.)

- PAT certification program (1)
- PAT-specific program track (2)
- PAT-specific content integrated into a *required* undergraduate course(s) (3)
- PAT-specific content integrated into an *elective* undergraduate course(s) (4)
- PAT-specific content integrated into a *required* graduate- or professional-level course(s) (5)
- PAT-specific content integrated into an *elective* graduate- or professional-level course(s) (6)
- Required* undergraduate course(s) *primarily* focused on PAT (7)
- Elective* undergraduate course(s) *primarily* focused on PAT (8)
- Required* graduate- or professional-level course(s) *primarily* focused on PAT (9)
- Elective* graduate- or professional-level course(s) *primarily* focused on PAT (10)
- PAT-specific practicum training (11)
- PAT-specific didactic sessions (12)
- PAT-specific continuing education courses or continuing education units (CEUs) (13)
- PAT-specific trainings that are not part of program curricula or continuing education-related offerings (14)
- Other (please specify): (15) \_\_\_\_\_
- None of the above (16)

*Display This Question:*

*If Is your academic program currently using any existing open-source PAT curriculum? = No*

*Or Is your academic program currently using any existing open-source PAT curriculum? = Don't know*

QX\_2 Are you aware of the existence of any open-source PAT curricula (e.g., Columbia School of Social Work, Yale Psychiatry, or Penn Nursing Modules)?

- Yes (1)
- No (2)
- Don't know (3)

*Display This Question:*

*If Is your academic program currently using any existing open-source PAT curriculum? = No*

*Or Is your academic program currently using any existing open-source PAT curriculum? = Don't know*

QX\_3 To what extent is your academic program currently interested in incorporating existing open-source PAT curricula (i.e., freely available resources that can be used for the development and/or implementation of PAT-related training/curricula)?

- Not at all (1)
- Very little (2)
- Somewhat (3)
- Quite a bit (4)
- A great deal (5)
- Don't know (6)

*Display This Question:*

*If Is your academic program currently using any existing open-source PAT curriculum? = No*

*Or Is your academic program currently using any existing open-source PAT curriculum? = Don't know*

QX\_4 In what curricular contexts, if any, would your academic program be interested in incorporating existing open-source PAT curricula? (Select all that apply.)

- PAT certification program (1)
- PAT-specific program track (2)
- PAT-specific content integrated into a *required* undergraduate course(s) (3)
- PAT-specific content integrated into an *elective* undergraduate course(s) (4)
- PAT-specific content integrated into a *required* graduate- or professional-level course(s) (5)
- PAT-specific content integrated into an *elective* graduate- or professional-level course(s) (6)
- Required* undergraduate course(s) *primarily* focused on PAT (7)
- Elective* undergraduate course(s) *primarily* focused on PAT (8)
- Required* graduate- or professional-level course(s) *primarily* focused on PAT (9)
- Elective* graduate- or professional-level course(s) *primarily* focused on PAT (10)
- PAT-specific practicum training (11)
- PAT-specific didactic sessions (12)
- PAT-specific continuing education courses or continuing education units (CEUs) (13)
- PAT-specific trainings that are not part of program curricula or continuing education-related offerings (14)
- Other (*please specify*): (15) \_\_\_\_\_
- ☒ None of the above (16)

### **Perception of Current Faculty Needs and Abilities**

The next set of questions ask about the experiences, needs, and abilities of the faculty within your **primary academic program**. If you are affiliated with more than one academic program, respond relative to the program that you consider your primary academic program.

---

QP\_1 In your opinion, what proportion of faculty in your academic program are capable of teaching an introductory-level course on topics related PAT?

- None (1)
  - Not too many (2)
  - About half (3)
  - Most (4)
  - All (5)
  - Don't know (6)
- 

QP\_2 In your opinion, what proportion of faculty in your academic program are capable of teaching an advanced-level course on topics related to PAT?

- None (1)
  - Not too many (2)
  - About half (3)
  - Most (4)
  - All (5)
  - Don't know (6)
- 

QP\_3 In your opinion, what proportion of faculty in your academic program are capable of training students how to administer PAT?

- None (1)
  - Not too many (2)
  - About half (3)
  - Most (4)
  - All (5)
  - Don't know (6)
-

QP\_4 In your opinion, what proportion of faculty in your academic program are interested in learning more about PAT?

- None (1)
  - Not too many (2)
  - About half (3)
  - Most (4)
  - All (5)
  - Don't know (6)
-

QP\_5 Please indicate which of the following activities *any* faculty in your academic program have participated in over the last year (*Select all that apply*):

- Given academic lectures on PAT (1)
  - Attended academic lectures on PAT (2)
  - Attended academic conferences on PAT (3)
  - Attended workshops/trainings on PAT (4)
  - Taught workshops/trainings on PAT (5)
  - Conducted research on topics related to PAT (6)
  - Participated in experiential learning sessions to have a drug-induced psychedelic experience (7)
  - Facilitated a PAT session as a mental health professional (8)
  - Participated in a clinical trial for PAT (9)
  - Received PAT in a supportive environment (10)
  - Participated in a PAT-specific practicum training (11)
  - Participated in PAT-specific didactic sessions (12)
  - None of the above (13)
  - Don't know (14)
-

QP\_6 Which of the following incentives, if any, would your academic program be willing and/or able to use to encourage faculty to learn more about PAT? *(Select all that apply.)*

- Monetary support/stipend (1)
  - Course releases (2)
  - Professional recognition (3)
  - Funding for training opportunities (e.g., courses, workshops) (4)
  - Other *(please specify)*: (5) \_\_\_\_\_
  - None of the above (6)
  - Don't know (7)
- 

QP\_7 Which of the following types of faculty members would your academic program need to hire to teach an introductory-level course on PAT *(Select all that apply)*:

- Contingent faculty (e.g., adjunct instructors, lecturers, or faculty) (1)
  - Early career faculty (2)
  - Senior faculty (3)
  - Don't know (4)
-

QP\_8 Which of the following types of faculty members would your academic program need to hire to teach an advanced-level course on PAT (*Select all that apply*):

- Contingent faculty (e.g., adjunct instructors, lecturers, or faculty) (1)
  - Early career faculty (2)
  - Senior faculty (3)
  - Don't know (4)
- 

QP\_9 Which of the following would your academic program likely hire to teach an introductory-level course on PAT (*Select all that apply*):

- Contingent faculty (e.g., adjunct instructors, lecturers, or faculty) (1)
  - Early career faculty (2)
  - Senior faculty (3)
  - Don't know (4)
- 

QP\_10 Which of the following would your academic program likely hire to teach an advanced-level course on PAT (*Select all that apply*):

- Contingent faculty (e.g., adjunct instructors, lecturers, or faculty) (1)
  - Early career faculty (2)
  - Senior faculty (3)
  - Don't know (4)
- 

### **Attitudes Towards the Development and Implementation of PAT-Related Curricula**



The next set of questions will just be asking about **your own** personal experiences, attitudes, and perceptions related to the development and implementation of PAT-related curricula.

QA\_1 Please indicate the extent to which you agree or disagree with the following statements about PAT.

### Grid items

- R1 research institutions that have the highest performance metrics in research and development areas (e.g., amount spent on research, level of research activity, number of research personnel, number of grants awarded) should lead the development and implementation of PAT-related curricula (1)
- Professional organizations should lead the development and implementation of PAT-related curricula (2)
- It would be easier to adopt another academic program's curriculum on PAT than to create our own (3)
- Outdated course content (e.g., ineffective treatment modalities) should be removed from course material to make room for content on PAT (4)
- PAT-related curricula should be standardized within a given academic discipline (5)
- PAT-related curricula should differ across academic disciplines (6)
- PAT-related curricula should include courses that can be cross-listed with other related disciplines (7)
- PAT-related curricula should take into account different cultural perspectives (8)
- PAT-related curricula should take into account historical perspectives (9)
- Underground psychedelic practitioners (e.g., therapists engaged in illicit psychedelic-assisted therapy) should be involved in the development and implementation of PAT-related curricula (10)
- Indigenous psychedelic practitioners should be involved in the development and implementation of PAT-related curricula (11)

Response options:

- Strongly disagree (1)
- Disagree (2)
- Somewhat disagree (3)
- Neither agree nor disagree (4)
- Somewhat agree (5)
- Agree (6)
- Strongly agree (7)
- Don't know (8)

---

### **Background and Familiarity with PAT and Psychedelics**

Part of this study's purpose is to understand your knowledge and awareness related to PAT more broadly. Next, we will be asking about your own understanding of PAT, your awareness of policies related to PAT/psychedelics, as well as your experiences with any PAT-related training.

Some questions will ask about using psychedelics to treat a medical or therapeutic indication. Other questions will ask about the legalization and decriminalization of psychedelics. For reference, the legalization

of psychedelics refers to the process of removing all legal prohibitions against psychedelics. The decriminalization of psychedelics refers to the removal of criminal sanctions against the use or possession of psychedelics. Legalization and decriminalization are not related to therapeutic or medical use of psychedelics but an increasingly common policy focus among states and cities nationally.

As a reminder, your answers are completely confidential, and there are no right or wrong answers.

---

QB\_1 How knowledgeable do you feel about the potential risks and side effects associated with PAT?

- Not at all (1)
  - Very little (2)
  - Somewhat (3)
  - Quite a bit (4)
  - A great deal (5)
  - Don't know (6)
- 

QB\_2 How knowledgeable do you feel about the potential therapeutic benefits associated with PAT?

- Not at all (1)
  - Very little (2)
  - Somewhat (3)
  - Quite a bit (4)
  - A great deal (5)
  - Don't know (6)
- 

QB\_3 How knowledgeable do you feel about the potential risks and side effects associated with psychedelic use?

- Not at all (1)
  - Very little (2)
  - Somewhat (3)
  - Quite a bit (4)
  - A great deal (5)
  - Don't know (6)
-

QB\_4 How knowledgeable do you feel about the potential benefits associated with psychedelic use?

- Not at all (1)
  - Very little (2)
  - Somewhat (3)
  - Quite a bit (4)
  - A great deal (5)
  - Don't know (6)
- 

QB\_5 How knowledgeable are you about the differences between the medical use of psychedelics (for example, PAT), the legalization of psychedelics, and the decriminalization of psychedelics?

- Not at all (1)
  - Very little (2)
  - Somewhat (3)
  - Quite a bit (4)
  - A great deal (5)
  - Don't know (6)
- 

QB\_6 How knowledgeable do you think other colleagues in your field of practice are about the differences between the medical use of psychedelics (for example, PAT), the legalization of psychedelics, and the decriminalization of psychedelics?

- Not at all (1)
  - Very little (2)
  - Somewhat (3)
  - Quite a bit (4)
  - A great deal (5)
  - Don't know (6)
- 

QB\_7 How knowledgeable do you think other colleagues in your academic program are about the differences between the medical use of psychedelics (for example, PAT), the legalization of psychedelics, and the decriminalization of psychedelics?

- Not at all (1)
  - Very little (2)
  - Somewhat (3)
  - Quite a bit (4)
  - A great deal (5)
  - Don't know (6)
-

QB\_8 How knowledgeable do you think the average adult in the general public is about the differences between the medical use of psychedelics (for example, PAT), the legalization of psychedelics, and the decriminalization of psychedelics?

- Not at all (1)
- Very little (2)
- Somewhat (3)
- Quite a bit (4)
- A great deal (5)
- Don't know (6)

QB\_9 Do you have specialized training in areas related to PAT (e.g., trainings/certifications from the Multidisciplinary Association for Psychedelic Studies (MAPS) or the California Institute of Integral Studies (CIIS))?

- Yes (1)
- No (2)

### **Professional Concerns Surrounding PAT**

This study also seeks to understand academic leaders' diverse perspectives about potential career-related concerns in light of the topic of PAT. These next questions ask about your own levels of career-related concerns, if any, associated with your views on psychedelic medicine or PAT.

Please respond to the statements below. There are no right or wrong answers.

QC\_1 To what degree would you be concerned about your career (for example, keeping your job, finding a job, career growth) if you expressed a professional interest in psychedelic medicine or PAT to each of the following individuals:

#### **Grid items:**

- Academic leaders at my institution (1)
- Academic leaders outside of my institution (2)
- Colleagues at my institution (3)
- Colleagues outside of my institution (4)
- Colleagues within my academic program(s) (5)
- Colleagues outside of my academic program(s) (6)
- Colleagues within my field (7)

- Colleagues outside of my field (8)
- Students in my program(s) (9)
- Students outside of my program(s) (10)
- Students in my classes (11)
- Students outside of my classes (12)
- Professional mentors (13)
- The general public (14)

**Response options:**

- Very unconcerned (1)
- Somewhat unconcerned (2)
- Unconcerned (3)
- Neither concerned nor unconcerned (4)
- Concerned (5)
- Somewhat concerned (6)
- Very concerned (7)
- Don't know (8)

---

QC\_2 To what degree would you be concerned about your professional reputation if you expressed a professional interest in psychedelic medicine or PAT to each of the following individuals:

**Grid items:**

- Academic leaders at my institution (1)
- Academic leaders outside of my institution (2)
- Colleagues at my institution (3)
- Colleagues outside of my institution (4)
- Colleagues within my academic program(s) (5)
- Colleagues outside of my academic program(s) (6)
- Colleagues within my field (7)
- Colleagues outside of my field (8)
- Students in my program(s) (9)
- Students outside of my program(s) (10)
- Students in my classes (11)
- Students outside of my classes (12)
- Professional mentors (13)
- The general public (14)

**Response options:**

- Very unconcerned (1)
- Somewhat unconcerned (2)
- Unconcerned (3)
- Neither concerned nor unconcerned (4)
- Concerned (5)
- Somewhat concerned (6)
- Very concerned (7)
- Don't know (8)

QC\_3 To what degree would you be concerned that each of the following individuals would think you used drugs illegally if you practiced psychedelic medicine or PAT?

**Grid items:**

- Academic leaders at my institution (1)
- Academic leaders outside of my institution (2)
- Colleagues at my institution (3)
- Colleagues outside of my institution (4)
- Colleagues within my academic program(s) (5)
- Colleagues outside of my academic program(s) (6)
- Colleagues within my field (7)
- Colleagues outside of my field (8)
- Students in my program(s) (9)
- Students outside of my program(s) (10)
- Students in my classes (11)
- Students outside of my classes (12)
- Professional mentors (13)
- The general public (14)

**Response options:**

- Very unconcerned (1)
  - Somewhat unconcerned (2)
  - Unconcerned (3)
  - Neither concerned nor unconcerned (4)
  - Concerned (5)
  - Somewhat concerned (6)
  - Very concerned (7)
  - Don't know (8)
-

QC\_4 Have you ever been discouraged from expressing interest in psychedelic medicine or PAT by any of the following individuals (*Select all that apply*):

- Academic leaders at my institution (1)
- Academic leaders outside of my institution (2)
- Colleagues at my institution (3)
- Colleagues outside of my institution (4)
- Colleagues within my academic program(s) (5)
- Colleagues outside of my academic program(s) (6)
- Colleagues within my field (7)
- Colleagues outside of my field (8)
- Students in my program(s) (9)
- Students outside of my program(s) (10)
- Students in my classes (11)
- Students outside of my classes (12)
- Professional mentors (13)
- The general public (14)

---

### **Attitudes About PAT and Psychedelics**

PAT and PAT-related curricula involve the therapeutic use of psychedelics. As such, this study seeks to understand academic leaders' perceptions about the potential benefits and risks associated with the use of psychedelics more broadly. These next questions will ask you about your own perceptions about the use of psychedelics. For these questions, you **do not** need to answer on behalf of your professional or academic role.

As a reminder, your answers are completely confidential, there are no right or wrong answers, and you are not required to answer any questions.

---

QT\_1 Please indicate the extent to which you agree or disagree with the following statements about the use of psychedelics.

The use of psychedelics...

**Grid items:**

- ...increases the risk for subsequent psychiatric disorders (1)
- ... increases the risk for long-term cognitive impairment (2)
- ...is unsafe even under medical supervision (3)
- ...shows promise in treating psychiatric disorders (4)
- ...may improve outcomes when used during psychotherapy (5)
- ...deserves further research for treatment of psychiatric disorders (6)

**Response options:**

- Strongly disagree (1)
  - Disagree (2)
  - Somewhat disagree (3)
  - Neither agree nor disagree (4)
  - Somewhat agree (5)
  - Agree (6)
  - Strongly agree (7)
  - Don't know (8)
- 

QT\_2 Please indicate the extent to which you agree or disagree with the following statements about PAT.

**Grid items:**

- Clinicians who offer psychedelic-assisted therapy (e.g., preparation, integration, harm-reduction) have unethical practices (1)
- The published research on psychedelics and/or psychedelic-assisted therapy is biased and lacks scientific rigor (2)
- Psychedelic-assisted therapy is just an excuse for people to take drugs (3)
- Psychedelic medicine and psychedelic-assisted therapy is pseudoscience (4)
- Psychedelic medicine and psychedelic-assisted therapy are not legitimate career paths (5)
- Clinicians associated with psychedelic medicine are part of the counterculture (6)
- Those advocating for the use of psychedelic-assisted therapy should be more transparent about its potential risks and benefits (7)
- I'm concerned about the motivations of some individuals getting involved with psychedelic-assisted therapy (8)



- Clinicians who offer PAT (e.g., preparation, integration, harm-reduction) are well-read and well-educated (9)
- Clinicians who offer PAT (e.g., preparation, integration, harm-reduction) are innovative (10)
- Clinicians who offer PAT (e.g., preparation, integration, harm-reduction) are respondent to hard-to-treat patients (11)

**Response options:**

- Strongly disagree (1)
- Disagree (2)
- Somewhat disagree (3)
- Neither agree nor disagree (4)
- Somewhat agree (5)
- Agree (6)
- Strongly agree (7)
- Don't know (8)

---

### **Experiential Learning**

The next set of questions are about experiential learning. Broadly, experiential learning is the practice of learning through personal experience and reflection. Within the context of psychedelics and PAT, experiential learning includes having individuals undergo a drug-induced psychedelic experience to better understand the effects of psychedelics.

---

QE\_1 Please indicate the extent to which you agree or disagree with the following statements about experiential learning.

Please indicate the extent to which you agree or disagree with the following statements about experiential learning.

**Grid items:**

- Academic programs should provide students who are interested in teaching about PAT the option to attend an experiential learning session so they can undergo a drug-induced psychedelic experience (1)
- Academic programs should provide students who are interested in practicing PAT the option to attend an experiential learning session so they can undergo a drug-induced psychedelic experience (2)
- Academic programs should provide students who are interested in conducting research on PAT the option to attend an experiential learning session so they can undergo a drug-induced psychedelic experience (3)
- Academic programs should provide faculty who are interested in teaching about PAT the option to attend an experiential learning session so they can undergo a drug-induced psychedelic experience (4)

- Academic programs should provide faculty who are interested in practicing PAT the option to attend an experiential learning session so they can undergo a drug-induced psychedelic experience (5)
- Academic programs should provide faculty who are interested in conducting research on PAT the option to attend an experiential learning session so they can undergo a drug-induced psychedelic experience (6)
- Students and faculty who have firsthand experience using psychedelics are better positioned to teach courses on PAT than those who do not have firsthand experience using psychedelics (7)
- Students and faculty who have firsthand experience using psychedelics are better positioned to practice PAT than those who do not have firsthand experience using psychedelics (8)
- Students and faculty who have firsthand experience using psychedelics are better positioned to conduct research on PAT than those who do not have firsthand experience using psychedelics (9)

**Response options:**

- Strongly disagree (1)
- Disagree (2)
- Somewhat disagree (3)
- Neither agree nor disagree (4)
- Somewhat agree (5)
- Agree (6)
- Strongly agree (7)
- Don't know (8)

---

**Familiarity with Psychedelics and Previous PAT Educational Experiences**

The following questions ask about your awareness of different psychedelics as well as your own and close acquaintances' past experiences, if any, learning about or experiencing PAT.

For these questions, you **do not** need to answer on behalf of your professional or academic role. As a reminder, your answers are completely confidential, there are no right or wrong answers, and you are not required to answer any questions.

---

QF\_1 Which of the following psychedelics have you heard of? *(Select all that apply.)*

- LSD (Lysergic acid diethylamide; also referred to as acid) (1)
- MDMA (3, 4-Methylenedioxymethamphetamine; also referred to as ecstasy or molly) (2)
- Ketamine (also referred to as special k) (3)
- Psilocybin or psilocin (also referred to as magic mushrooms or shrooms) (4)
- DMT (N, N-Dimethyltryptamine; other forms include ayahuasca, mescaline, and 5-MeO-DMT) (5)
- Other *(please specify)*: (6) \_\_\_\_\_
- I have not heard of any of these (7)
- 

QF\_2 Which of the following activities have you participated in? *(Select all that apply.)*

- I have facilitated a PAT session as a mental health professional (1)
- I have participated in a clinical trial for PAT (2)
- I have received PAT in a supportive environment (3)
- I have attended academic lectures on PAT (4)
- I have participated in a PAT-specific practicum training (5)
- I have participated in PAT-specific didactic sessions (6)
- None of the above (7)
-

QF\_3 Do you have any friends or relatives who have had a positive experience with PAT?

- Yes (1)
  - No (2)
  - Prefer not to answer (3)
- 

QF\_4 Do you have any friends or relatives who have had a negative experience with PAT?

- Yes (1)
  - No (2)
  - Prefer not to answer (3)
-

QF\_5 From which of the following sources have you obtained information on psychedelic medicine and PAT  
(Select all that apply):

- Peer-reviewed journal article(s) (1)
  - Textbook (2)
  - Academic talks/lectures at my institution (3)
  - Academic talks/lectures at other institutions (4)
  - Practicums (5)
  - Didactic sessions (6)
  - Conference (in-person or virtual) (7)
  - Patient experience or case study (8)
  - Psychedelic research involvement (9)
  - Webinar (10)
  - News or magazine-based media (digital or print) (11)
  - Internet-based media (e.g., Wikipedia, Reddit, blog) (12)
  - Podcast (13)
  - Films and/or documentaries (14)
  - Social media (e.g., Facebook, Instagram etc.) (15)
  - Formal training program (e.g., MAPS, CIIS) (16)
  - Other (please specify): (17) \_\_\_\_\_
  - ☒ None of the above (18)
-

QF\_6 How interested are you in learning more about psychedelic medicine and/or PAT?

- Very uninterested (1)
  - Somewhat uninterested (2)
  - Neither interested nor uninterested (3)
  - Somewhat interested (4)
  - Very interested (5)
  - Don't know (6)
-

QF\_7 I'd be interested in learning more about psychedelic medicine and/or PAT via (Select all that apply):

- Peer-reviewed journal article(s) (1)
- Textbook (2)
- Academic talks/lectures at my institution (3)
- Academic talks/lectures at other institutions (4)
- Practicums (5)
- Didactic sessions (6)
- Conference (in-person or virtual) (7)
- Patient experience or case study (8)
- Psychedelic research involvement (9)
- Webinar (10)
- News or magazine-based media (digital or print) (11)
- Internet-based media (e.g., Wikipedia, Reddit, blog) (12)
- Podcast (13)
- Films and/or documentaries (14)
- Social media (e.g., Facebook, Instagram etc.) (15)
- Formal training program (e.g., MAPS, CIIS) (16)
- Other (please specify): (17) \_\_\_\_\_
- ☒ None of the above (18)

---

### **University Background and Demographics**

Finally, please tell us a bit about yourself and your academic role.

---

D1 Please indicate which degrees your academic program offers. If you are affiliated with more than one academic program, respond relative to the program that you consider your primary academic program.  
(Select all that apply.)

- Associate (1)
  - Bachelor's (2)
  - Master's (3)
  - Doctorate (4)
  - Professional (5)
-



D2 What year were you first employed by your current institution?

- 2024 (1)
- 2023 (2)
- 2022 (3)
- 2021 (4)
- 2020 (5)
- 2019 (6)
- 2018 (7)
- 2017 (8)
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*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... =  
Advisory board for academic program*

D3 What year did you begin your current role as a/an \${ACROLE /ChoiceDescription/1}?

- 2024 (1)
- 2023 (2)
- 2022 (3)
- 2021 (4)
- 2020 (5)
- 2019 (6)
- 2018 (7)
- 2017 (8)
- 2016 (9)
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*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... = Assistant or associate dean*

D4\_1 What year did you begin your current role as a/an \${ACROLE /ChoiceDescription/2}?

- 2024 (1)
- 2023 (2)
- 2022 (3)
- 2021 (4)
- 2020 (5)
- 2019 (6)
- 2018 (7)
- 2017 (8)
- 2016 (9)
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*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... = Dean*

D4\_2 What year did you begin your current role as a/an \${ACROLE /ChoiceDescription/3}?

- 2024 (1)
- 2023 (2)
- 2022 (3)
- 2021 (4)
- 2020 (5)
- 2019 (6)
- 2018 (7)
- 2017 (8)
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*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... =  
Department chair*



D4\_3 What year did you begin your current role as a/an \${ACROLE /ChoiceDescription/4}?

- 2024 (1)
- 2023 (2)
- 2022 (3)
- 2021 (4)
- 2020 (5)
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- 2018 (7)
- 2017 (8)
- 2016 (9)
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*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... = Head of program track or concentration*

D4\_4 What year did you begin your current role as a/an \${ACROLE /ChoiceDescription/5}?

- 2024 (1)
- 2023 (2)
- 2022 (3)
- 2021 (4)
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*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... =  
Program director*

D4\_5 What year did you begin your current role as a/an \${ACROLE /ChoiceDescription/6}?

- 2024 (1)
- 2023 (2)
- 2022 (3)
- 2021 (4)
- 2020 (5)
- 2019 (6)
- 2018 (7)
- 2017 (8)
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*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... =  
Program faculty*

D4\_6 What year did you begin your current role as a/an \${ACROLE /ChoiceDescription/7}?

- 2024 (1)
- 2023 (2)
- 2022 (3)
- 2021 (4)
- 2020 (5)
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*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... =  
Program staff*



D4\_7 What year did you begin your current role as a/an \${ACROLE /ChoiceDescription/8}?

- 2024 (1)
- 2023 (2)
- 2022 (3)
- 2021 (4)
- 2020 (5)
- 2019 (6)
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- 2017 (8)
- 2016 (9)
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*Display This Question:*

*If The first few questions ask about aspects related to your current roles at your institution. In w... = Other  
<em>(please specify)</em>:*

D4\_8 What year did you begin your current role as a/an \${ACROLE /ChoiceTextEntryValue/9}?

- 2024 (1)
- 2023 (2)
- 2022 (3)
- 2021 (4)
- 2020 (5)
- 2019 (6)
- 2018 (7)
- 2017 (8)
- 2016 (9)
- 2015 (10)
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D5 What year did you begin your current profession at any institution?

- 2024 (1)
- 2023 (2)
- 2022 (3)
- 2021 (4)
- 2020 (5)
- 2019 (6)
- 2018 (7)
- 2017 (8)
- 2016 (9)
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**End of Block: University Background and Demographics**

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## ABOUT NORC

NORC at the University of Chicago conducts research and analysis that decision makers trust. As a nonpartisan research organization and a pioneer in measuring and understanding the world, we have studied almost every aspect of the human experience and every major news event for more than eight decades. Today, we partner with government, corporate, and nonprofit clients around the world to provide the objectivity and expertise necessary to inform the critical decisions facing society.



## ABOUT BrainFutures

BrainFutures is a national nonprofit dedicated to accelerating the equitable access of effective, evidence-based, neuroscientific interventions that enhance mental health and well-being. The organization provides objective research analyses, supports real-world implementation of these interventions, and develops strategies for policy change. Over the past three years, BrainFutures has focused primarily on the emerging field of psychedelics, helping key stakeholders prepare for the wide scale adoption and integration of psychedelic therapy into our healthcare system. BrainFutures has produced numerous issue briefs on psychedelics, laying the groundwork for their acceptance into mainstream healthcare.

### BrainFutures Funders

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