How Spiritual Healing is Actively Suppressed in Canada



Ayahuasca and the Dysfunctional "Religious Exemption" Program

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BACKGROUND

The CSV Six-Year "Religious Exemption" Experience

This document outlines the six-year battle of the Companionship of the Sacred Vine (CSV) to legally serve ayahuasca in Canada under Health Canada's Section 56 (s.56) "religious exemption" program.

In order to legally serve ayahuasca in Canada, organizations such as the CSV have to obtain a legal "exemption" from Health Canada.

The CSV was in fact granted an exemption. Following a two and a half-year bureaucracy "review" process which failed to result in an exemption, the CSV lobbied the Health Minister's office and the exemption was finally approved on July 4, 2023. (<u>link</u>)

Despite being granted the exemption, the CSV has never been able to serve a drop of ayahuasca in Canada because of the on-going actions of the s.56 bureaucracy.

After the Health Minister intervened and the exemption was approved, bureaucrats then found a way to nullify the exemption by refusing to add a legal ayahuasca supplier to the exemption, rendering the exemption itself useless.

Far from being assisted by s.56 civil servants, the bureaucracy has actively worked to prevent the CSV from exercising its religious rights under the Health Canada "religious exemption" program.

Finally in May 2025, s.56 bureaucrats revoked the exemption even though the CSV had never been able to import or serve ayahuasca to its members. For details, refer to "The CSV Experience – the Exemption that Never Was" (19), also Appendix A (23).

From the Amazonian Jungle to the World

In the Quechua language of the north Andes, ayahuasca is the 'vine of the soul' or 'vine of the dead' and is consumed as a psychotropic beverage in both indigenous and non-indigenous ceremonies. Within its original indigenous context, ayahuasca is traditionally consumed across the upper reaches of the Amazon river system (that is, Bolivia, Brazil, Colombia, Ecuador and Peru) by over 160 indigenous ayahuasca cultures.

It is considered a spiritual medicine by healers throughout South America and around the world. Ayahuasca is a liquid produced by cooking the Banisteriopsis caapi vine (vine of the dead) and the Psychotria viridis shrub, (Chacruna) which contains trace amounts of Dimethyltryptamine (DMT) (Schultes & Hofmann, 1992).

Ayahuasca is used as a spiritual medicine in ceremonies officiated by Amazonian Indians, mestizos, and diverse NeoShamanic (New World) shamans who have learned to use it in its places of traditional origin (Labate et al., 2009; Labate & Jungaberle, 2011; Luna, 2011; Labate & Bouso, 2013).

While originating in the Amazon, ayahuasca is now used worldwide in underground or illegal ceremonies, in "grey-area" or in completely legal ceremonies depending on the specific laws of the country. There are also a number of established world-wide ayahuasca churches mostly originating in Brazil.

A 3,500 Year History

The oldest traces of ayahuasca have been found in the Azapa desert in the north of Chile, where residues of harmine have been found in hair analyzed from mummies dated between 500 and 1000 BC. (<u>link – Page 2</u>) The ayahuasca vine does not grow in the Azapa valley nor does any other harmine-containing plant which indicates commerce between the ancient populations of Chile and the Amazonian peoples.

National Geographic has also verified the use of ayahuasca to at least 1,000 years. (link).

It is generally accepted that the use of Ayahuasca predates recorded history. Shipibo Amazonian shamans have stated that ayahuasca was introduced to their ancestors by the Incas, an ancient South American people.

Shaman-Chiefs Guided Tribes

Historically, the chief of Amazonian Indian tribes was a shaman-chief who had mastered the use of ayahuasca. The shaman-chief would guide the tribe based on visions and premonitions gleaned from communal ayahuasca ceremonies. Ayahuasca would also be used as a teaching plant to help people identify healing plants and for hunters to understand the jungle environment and the habits of animals.

For one of the best resources on indigenous ayahuasca use from the early 1900s, see *The Wizard of the Upper Amazon* by F. Bruce Lamb (<u>link</u>)

Ayahuasca is Legal in Amazonian Countries

Brazil, Peru, Ecuador and Colombia recognize ayahuasca's indigenous cultural heritage and do not prosecute ceremonies.

After a 20-year investigation, in 2010 Brazil formally approved ayahuasca for religious and ritual use. Prior to 2010, ayahuasca had been illegal.

This was the culmination of a 20-year investigation involving state agencies and numerous formal committees. The investigation found that the use of ayahuasca was not associated with social disruption and even found that those using ayahuasca were healthier and more productive than average citizens.

As part of the investigation, CONFEN (Brazilian Drug Agency) members actually participated in ayahuasca ceremonies and their personal experiences reinforced the findings that ayahuasca was doing far more good than harm in Brazilian society. (<u>link</u>)

In Ecuador, Ayahuasca is used legally for traditional ceremonies. In Colombia there are no laws against using ayahuasca. "Yuruparí," an ayahuasca ritual, is recognized as intangible heritage.

Further north in Central America, Costa Rica does not regulate ayahuasca. Numerous ayahuasca retreats operate there, including Rythmia, one of the most high-end ayahuasca retreats in the world. Numerous Hollywood celebrities have attended ceremonies there. (link)

Peru Declares Ayahuasca Cultural Patrimony

In Peru, the Directorate of the National Institute of Culture has declared the knowledge and traditional uses of Ayahuasca practiced by the native Amazon communities as Cultural Patrimony of the Nation (Resolution Number 836/INC), based on the UNESCO Convention for the Safeguarding of the Intangible Cultural Heritage.

Peru states that the use of Banisteriopsis caapi and Chacruna-Psychotria plants (the traditional ayahuasca brew) structured around the ayahuasca ritual have "an extraordinary cultural history" with "religious, therapeutic and culturally affirmative" properties and is "one of the fundamental pillars of the identity of Amazonian peoples."

The institute, which is charged with documenting and protecting Peruvian cultural heritage, described ayahuasca as "a wise or teaching plant, which shows to initiates the very foundations of the world and its components."

It also stated that, when used in a traditional ritual, it "leads to a variety of effects which are always within culturally defined limits, and with religious, therapeutic, and culturally affirmative intentions." (<u>link</u>)

Christianity and other Mainstream Religions Endorse Entheogens

Ayahuasca and other entheogens provide a sacred or mystical experience that strengthens religious faith, according to mainstream religious scholars. In Canada, Fr. Geoffrey Ready at the University of Toronto, School of Theology, teaches an Orthodox Christian seminary course - *Mystical Traditions and the Sacred Journey of Transformation: Narrative, Ritual, and Entheogens.* From the course description:

As we examine the rich history of Christian mystical experience and parallels within other ancient spiritual traditions, we will recognize the special role of entheogens, or sacred fungus and plant medicines, alongside other practices, in facilitating or deepening transcendent experience. We will examine the potential role of entheogens in mystical encounters today, mindful of both ethical considerations and diverse perspectives on their usage. (link)

In Brazil people can attend Buddhist, Hindu, Christian, African-based, Shamanic and other similarly-themed religious ayahuasca centers. All co-exist quite peacefully and there are an estimated 1,000 or more ayahuasca centers in Brazil.

Other Religious Use of Entheogens (links):

Ligare: A Christian Psychedelic Society (<u>link</u>). Shefa – Jewish Psychedelic Society (<u>link</u>). Entheogens and the Ancient Mystery Religions (<u>link</u>) Enthomedia: Entheogens and human spirituality: (<u>link</u>).

Brazilian Decriminalization Experience

Brazil offers a great example for any country grappling with how to regulate ancestral medicines such as ayahuasca. After 20 years of studies, commissions and committees, *with some regulators actually participating in ceremonies*, in 2010 the Brazilian government decriminalized ancestral plant medicines for religious use. (<u>link</u>).

Based on the most reliable estimates, there are over 1,000 ayahuasca centers in Brazil, including centers affiliated with major religions, ayahuasca churches, indigenous communities, and independent groups.

What Brazil found was:

Society didn't fall apart

There is no violence or gang activities associated with ancestral medicines

Ancestral medicines have never become mainstream

Pharmaceutical Industry profits have not been affected

Spiritual healing can easily co-exist with the Pharmaceutical model

Ayahuasca churches are a net benefit to society

In Brazil people can attend Buddhist, Hindu, Christian, African-based, Shamanic and other similarly-themed ayahuasca centers. All co-exist quite peacefully.

Spiritual Healing vs. Pharmaceutical Medicines

Unless your doctor is a shaman, the ayahuasca spiritual approach to mental/emotional spiritual healing is distinctly different than pharmaceutical medicines. The Pharmaceutical model assumes any problems are related to physicality while ayahuasca shamanism assumes problems are spiritual in origin.

Pharmaceutical medicines attempt to establish a protocol that will work for a broad population base while shamanic healing maintains that individual human spirituality is the key pathway to emotional healing.

And while the pharmaceutical model uses a standard approach, shamans work with an individual's spiritual journey. This concept recognizes that true healing is brought about when the participant(s) recognize and accept their own spiritual nature.

Ayahuasca – Not a Pharmaceutical Drug

Ayahuasca cannot be distilled into a "medicine" in the Western pharmaceutical concept. The entire objective of an ayahuasca ceremony is to produce a spiritual or sacred experience. Entire religions have been inspired through the use of ayahuasca. Ayahuasca ceremonies are conducted by shamans or facilitator in a spiritual setting to produce a spiritual outcome.

Which means the idea of patenting ayahuasca for clinical use is diametrically opposed to the ceremonial use of this ancient medicine. While western studies have documented ayahuasca's healing powers, any healing done in a ceremony is produced through the spiritual experience. Ayahuasca will never be a medicine in the context of the pharmaceutical model unless medical doctors turn into shamans.

Early 1900s - Ayahuasca Churches Established

In the early 1900's the use of ayahuasca spread from traditional Indigenous Amazonian shamans to structured ayahuasca churches. Santo Daime (<u>link</u>), the União do Vegetal or UDV (<u>link</u>) and Barquinha are three of the main ayahuasca churches founded in Brazil and are now located worldwide. For an overview see (<u>link</u>)

All of these ayahuasca churches attempt to improve the human condition. For example, UDV "works for the evolution of the human being in the sense of his or her spiritual development." Santo Daime promotes a lifestyle in conformity with "Harmony, Love, Truth and Justice as well as key doctrinal values such as strength, humility, kinship, and purity of heart."

Medical Studies

With the reported therapeutic effects of ayahuasca in traditional spiritual ceremonies, the use of ayahuasca also gained the attention of western ethnobotanists, doctors, pharmacologists, clinicians and researchers.

Over the last four decades hundreds of studies have been conducted into ritual ayahuasca ceremonies and its effects on PTSD, addictions, suicidal ideation, treatment-resistant depression, childhood traumas and other serious spiritual/emotional issues. Long-term large-scale studies of regular ayahuasca users indicate the positive effects of ayahuasca spiritual healing for individuals and society. (26)

Ayahuasca is not a "Recreational" Experience

An ayahuasca ceremony can induce vomiting (la purga) and/or diarrhea. People who wish to undertake a ceremony must also prepare themselves physically and mentally with a special diet before and after ceremonies.

During a ceremony participants can be confronted with their deepest traumas or have to face their deepest fears – often referred to as "shadow work."

After the ceremony the knowledge or revelations gained in the ceremony must be incorporated into a person's life. This "integration" or ceremony follow-up can be another challenging experience and participants may require help from experienced people.

While the ceremony itself is over in hours, the integration process can potentially take several days or even weeks. It is important for people conducting ceremonies to provide an after-care program. (18)

Ayahuasca - the Spiritual Medicine of Last Resort

Most people seeking ayahuasca do so as a last resort when standard pharmaceutical interventions have failed. This is borne out in a large cross-sectional study of over 11,000 ayahuasca users where therapeutic motivation was the primary reason given for attending an ayahuasca ceremony:

Drinkers of Ayahuasca in naturalistic settings perceived remarkable benefits for their affective symptoms in this survey assessment. There is no obvious evidence of negative mental health effects being associated with long-term consumption.

Of participants reporting depression (n = 1571) or anxiety (n = 1125) at the time of consuming Ayahuasca, 78% reported that their depression was either 'very much' improved (46%), or 'completely resolved' (32%); while 70% of those with anxiety reported that their symptoms were 'very much' improved (54%), or 'completely resolved' (16%).

The Global Ayahuasca Project (link)

Long-term Societal Benefits

What people are confronted with in an ayahuasca ceremony is often very deep-seated traumas or behaviors that have come about from traumatic childhood events. In shamanic terms this would be seen as "inherited" or familial problems which must be addressed for wholistic spiritual healing in order for the person to reclaim their place in their family lineage and community.

It is well-recognized in Amazonian countries that ayahuasca is beneficial for society. These benefits are also indicated in large-scale studies. The data suggest that the study participants have high levels of general, mental, and positive health, and show excellent levels of adjustment and coping strategies, in addition to healthy lifestyles. (<u>link</u>)

Ayahuasca is not a Threat to Pharmaceutical Industry Profits

Ayahuasca will never become "mainstream" medicine. Even in countries where ayahuasca is legal pharmaceutical industry profits have never been affected by ayahuasca ceremonies.

The projected revenue of South American pharmaceutical markets is estimated to reach US \$33.85 billion in 2025. South American revenues are anticipated to exhibit an annual growth rate of 4.88%, as estimated by CAGR from 2025 to 2030. (link)

Brazil decriminalized ayahuasca in 2010 and is the only South American country ranked among the top pharmaceutical markets in the world, with a global share of approximately two percent and pharmaceutical revenues of more than \$20 billion U.S. dollars.

The Brazilian market has one of the fastest growth rates among leading pharmaceutical markets in the world, with an estimated nine percent increase in 2023 and a pharmaceutical industry that has been increasingly growing in recent years. (<u>Link</u>)

The Section 56 Dysfunctional "Religious Exemption" Program

Health Canada's Section 56 Exemption Program

If anyone wants to use a restricted drug for pharmaceutical or research purposes or, in the case of ayahuasca, for religious purposes, an "exemption" from Health Canada must be obtained. The exemption means that you will not be prosecuted for possession of the restricted substance and you will be able to legally import the substance into Canada.

All applications for exemptions, pharmaceutical and religious, are processed under the Health Canada Section 56 (s.56) exemption program.

Two "Classes" of s.56 Applicants - Pharmaceutical and Religious

There is nothing in Canadian law, Health Canada's Policies and Procedures, Ministerial orders or enabling legislation that allows bureaucracies to engage in preferential services based on pharmaceutical (industrial) vs religious applications.

However, the s.56 bureaucracy has created two "classes" of applicants. Pharmaceutical, scientific and research applications are fast-tracked and enjoy written "service standards." Religious applications are given no such consideration.

This type of preferential two-tier system is contrary to world-recognized democratic principles, Government of Canada written policies, Supreme Court of Canada rulings and Article 21 of the Canadian-led Universal Declaration of Human Rights that says everyone has a right to equal access to government services.

No "Service Standards" for Religious Applications

This is a typical email sent out from s.56 regarding religious exemption "service standards:"

Thank you for your correspondence regarding the status of your request for a subsection 56(1) religious exemption. Please be advised that *there are no service standards to render a decision on this type of exemption application*. Please note that there is no cost recovery or fees for subsection 56(1) exemption requests.

We will contact you should additional information be required to support our assessment of the application. Should you have any questions in the meantime, please do not hesitate to contact us at exemption@hc-sc.gc.ca.

Regards

Exemptions Section / Authorizations Division

Office of Controlled Substances / Controlled Substances and Cannabis Branch

Please note - all routine email correspondence from the s.56 religious exemption program is done via an anonymous email system. Emails are not signed by the responding Health Canada employee. As such, if there is a complaint with the program, individuals in the program cannot be identified.

Pharmaceutical Exemptions Given Preferential Service

There are application forms and other resources when applying for medical, scientific or research exemptions, however religious exemption applications enjoy no such web resources. There are no web pages or application forms for a religious exemption application and one would be hard-pressed to even find out about the existence of the s.56 religious exemption program.

Conversely, clinical, scientific or research applications have publicly-available resources and application forms (<u>link</u>).

The Dysfunctional "Religious Exemption" Program

It took 17 years to approve the first religious exemption application for ayahuasca in Canada. This exemption was for the Santo Daime organization, a Christian-based ayahuasca church. (<u>link</u>).

The only religious exemptions approved by Health Canada have been for a handful of Christian-based ayahuasca churches including Santo Daime and the UDV.

The Companionship of the Sacred Vice (CSV) application took two and a half-years for approval and was only approved after the CSV lobbied then-Health Minister Jean-Yves Duclos for several months. The CSV is a shamanic-based ayahuasca church that practices the Axeti Nete religion of the Shipibo people (link).

However the CSV exemption has been rendered useless as s.56 has refused to add a legal Peruvian ayahuasca exporter to the exemption. This routine request has been "under review" by s.56 for over 18 months. This means the CSV has never been able to legally import ayahuasca into Canada.

Religious Applications "Under Review" for Years

As of July 03, 2024, the s.56 program had seven active religious exemption requests. AC obtained this data through an ATI – File number A-2024-000398. (please note – an ATI was recently filed for updated information.)

Religious Exemption Application Date	Date of Approval	Number of Days "Under Review"
1. 2010-11-25	Not Approved	5,384
2. 2022-03-22	Not Approved	1,249
3. 2022-06-15	Not Approved	1,164
4. 2022-07-02	Not Approved	1,147
5. 2023-06-13	Not Approved	801
6. 2023-10-10	Not Approved	682
7. 2024-06-03	Not Approved	445

Average Time under review – Four Years, Three Months (without approvals)

The average time s.56 has had each application "under review" is four years and three months and counting. To obtain a copy of the ATI file click this (link)

Supreme Court of Canada - Undue Delays are an Abuse of Process

The Supreme Court of Canada says that it is an *abuse of process* for bureaucracies to engage in unduly protracted delays. See - Abrametz vs Law Society of Saskatchewan (SCC 29), (<u>link</u>).

The *first s.56 religious exemption* issued to an ayahuasca church in Montreal *took 17 years to process* (<u>link</u>). The CSV application took *two and a half-years* to process and was only issued after lobbying the Health Minister.

The request to add our legal ayahuasca supplier has been sitting in front of s.56 bureaucrats *for over 18 months.* It is obvious to us that this supplier will never be added to our exemption, effectively *negating issuance* of the exemption itself.

If pharmaceutical industry applicants were treated in this manner there would be a political uproar.

Safety and Legality

Ayahuasca - Physically No More Dangerous than a Cup of Coffee

The International Center for Ethnobotanical Education, Research, and Service (ICEERS) is a United Nations sanctioned NGO with UN Special Consultative Status. ICEERS studies and makes recommendations on the use of entheogens including ayahuasca.

From ICEERS Safety Fact Sheet:

Studies in both animals and healthy humans have shown that ayahuasca is a physically and psychologically safe substance when its composition is known, and when it is administered in controlled doses in appropriate environments with the necessary support.(<u>link</u>)

Ayahuasca (and Coffee) slightly raise blood pressure -

In medical terms, ayahuasca has few contraindications. Only if you have a serious cardiovascular disorder should you not take ayahuasca, as it slightly increases blood pressure. No alterations of liver function and other biochemical parameters have been observed after the administration of ayahuasca in the laboratory. Only a modulation of the immune system has been detected, but this is temporary and does not seem to have clear effects on health. (link)

Coffee (caffeine) also raises blood pressure (link)

Psychological Contraindications - Psychosis Pre-Screening

People suffering from a reality break (psychosis) such as schizophrenia or people who are hearing voices or having problems functioning in normal social situations should not take ayahuasca. Psychotic symptoms may include hallucinations, delusions, hearing voices, disordered or incoherent speech or behavior that is inappropriate for a given situation. A psychosis results in difficulties determining what is real and what is not real.

CSV screening programs for participants include mental health questionnaires and pre-ceremony interview(s) to determine if ayahuasca use is right for an individual. As well, an ayahuasca decision-making guide is available on the CSV website (<u>link</u>).

Drug Interactions – SSRIs and Others

Ayahuasca should not be taken by anyone on SSRIs (selective serotonin reuptake inhibitor) antidepressants due to the potential risk of serotonin syndrome. It is recommended to wait at least six to eight weeks after stopping SSRIs before taking ayahuasca to ensure safety. And while this interaction is theoretical, precautionary measures are in place at the CSV for anyone contemplating taking ayahuasca.

As well, the CSV recommends and makes use of the ICEERS El Faro Support Center program which answers questions about possible interactions between psychoactive plants and medical treatments or medications (<u>link</u>). This service provides an opinion as to potential problems for specific medications and results are available in a week.

DMT - the Active Ingredient

N,N-Dimethyltryptamine (DMT) found in trace amounts in the ayahuasca brew, is an endogenous psychedelic substance, meaning it is naturally produced in the human brain. Research shows DMT manufactured by the human body plays a role in the nervous system and influences dream states.

DMT synthesis is thought to occur in the pineal gland. Some theories suggest DMT levels may rise during sleep to induce the dream state. DMT may also be related to other natural changes in awareness, including near-death experiences.

StatsCan DMT Reported Deaths in Canada - (There Aren't Any)

The fatal dose of DMT has been estimated at 8,800 mg for a person weighing 80 kg. The average dose of DMT in tested ayahuasca brews has been measured at 60 mg. (<u>link</u>)

A search of the StatsCan database (<u>link</u>) failed to turn up any DMT-attributed deaths in Canada.

Legality - is it DMT or Ayahuasca?

Dimethyltryptamine (DMT) can be found in trace amounts in the ayahuasca brew. The United Nations outlawed synthetic (extracted) DMT in their 1971 Convention on Psychotropic Substances. However, they made a distinction between plant-based DMT, such as ayahuasca and synthetic or extracted DMT.

As such, ayahuasca is not categorized as DMT by the UN and has not been banned. This is also acknowledged by Health Canada in their official policies and procedures for religious exemptions (17). From the United Nations International Narcotics Control Board (UNINCB) 2010 Annual Report (Page 46, Paragraphs 284 & 285)

.....no plants are currently controlled under that (1971) Convention or under the 1988 Convention. Preparations (e.g. decoctions for oral use) made from plants containing those active ingredients are **also not under international control.**

Examples of such plants or plant material include...... ayahuasca, a preparation made from plants indigenous to the Amazon basin of South America.

Paragraphs 284 and 285 (link)

DMT is Not a "Drug of Concern" in Canada

DMT is not listed as a drug of concern in the Canadian Drugs and Substances strategy (link)

The Government of Canada Drug Analysis Service (DAS) has also not listed DMT under their list of *Main Controlled Substances* in Canada. (<u>link</u>)

However, the Canadian government does have a major concern with opioids such as heroin or pharmaceutical opioids including morphine, oxycodone and fentanyl in Canada (<u>link</u>). It is interesting to note that many people who attend ayahuasca ceremonies to treat addictions will often give up their drug of choice after a single ayahuasca ceremony and numerous addiction studies bear this out (link).

US Initiates High-Profile Arrests in Canada

Two very high-profile arrests for ayahuasca have taken place in Canada recently. Chad Gillies was arrested by a Calgary SWAT team (link) and Michael Azdich was arrested by the RCMP in Nova Scotia (link).

Mr. Gillies had received a package sent by a shaman friend and was unaware of the contents and Mr. Azdich had been conducting a women's healing circle when RCMP raided his property to make the arrest.

Both arrests involved months-long, multi-agency undercover investigations and both were initiated by United States authorities. The multi-agency task force included the United States Border Services, US Homeland Security, Canadian Border Services, the RCMP (uniformed and undercover) and in the case of Mr. Gillies also included Calgary Police Services (CPS) undercover and SWAT teams.

In order to make these arrests, US Homeland Security obtained confiscated shipments of ayahuasca from the United States Border Services (Customs), physically drove the shipment from Miami to the Canadian border, obtaineed a section 56 exemption from Health Canada to import the substance into Canada (with the assistance of the RCMP) and then physically handed it off to the investigating police force to maintain chain of custody of the evidence.

RCMP - 32 Arrests for DMT in Five Years, Two for Ayahuasca

AyahuascaCanada obtained the five-year RCMP arrest records for all DMT offences (synthetic and ayahuasca). This was done through an Access to Information (ATI) request, otherwise known as a Freedom of Information request.

The ATI document indicated 32 arrests in Canada in the past five years for all DMT offences, of which it appears that two arrests were made specifically for ayahuasca. ATI File Number – A-2024-08989 Request a copy of the file (link)

The RCMP Have no Arrest Protocols for Ayahuasca

AyahuascaCanada also filed an ATI (Freedom of Information) request to obtain the RCMP written Policies and Procedures, arrest protocols or written instructions to officers regarding enforcement of ayahuasca regulations in Canada. There aren't any. Obtain a copy of the ATI - A-2023-12379 (<u>link</u>)

No Previous DMT Arrests in Calgary

DMT isn't a policing priority in Calgary and the Calgary Police Service (CPS) made no arrests for DMT (synthetic or ayahuasca) in the year prior to Mr. Gillie's recent SWAT arrest (link), according to Rebecca Davidson, the CPS analytics manager.

Following Mr. Gillies' arrest, AC asked Davidson for "the number of arrests and seizures of DMT in Calgary in the past year; perceived public threat and policing priorities regarding DMT and statistics related to arrests, abuse and seizures of DMT in Calgary" over the past year.

The very succinct answer from Ms. Davidson - "Thank you for your research request. I have checked with our Drug Unit and we do not have data that would inform your research."

Obtain a copy of the official email (link)

No Danger to the Canadian Public - Health Canada

There is no recreational or black market for ayahuasca according to Health Canada's official Policies and Procedures for religious exemptions for ayahuasca, obtained by AyahuascaCanada through the Access to Information (Freedom of Information) Act - Health Canada File Number - A-2022-001575 /MC2. The document states:

There is no evidence of risk to public safety associated with Daime tea/Ayahuasca, in terms of illicit production and trafficking, even in countries where it has been used for centuries.

There is no evidence of widespread use and diversion in Canada

Daime tea/Ayahuasca specifically does not appear to be the object of common abuse.

Physical dependence and tolerance to Daime tea/Ayahuasca do not appear to develop.

Consumption of Daime tea/Ayahuasca induces vomiting, which limits the amount that can be ingested at one time and thus its abuse potential.

To request a copy of this ATI file (<u>link</u>).

Are Mainstream Media Reported Deaths Accurate?

In 2023 ICEERS published the results of a three-year study entitled Ayahuasca Global Consumption and Reported Deaths in the Media. As part of the study they examined media-reported deaths attributed to ayahuasca. A conclusion of the study:

To date worldwide, no forensic examination or toxicological analysis has determined the combination of Banisteriopsis caapi and Psychotria viridis or Diplopterys cabrerana (the traditional ayahuasca brew) has caused poisoning leading to death.(link)

Ayahuasca Enhances Neuroplasticity

Ayahuasca has been shown to promote neuroplasticity, the brain's ability to reorganize itself by forming new neural connections. A study by Morales-García et al. (2017) demonstrated that ayahuasca's components stimulate the growth of new neurons and synapses. This neuroplasticity can lead to long-term cognitive and emotional benefits, enhancing the brain's resilience to stress and mental health disorders. (link)

Children and Pregnant Women Take Ayahuasca

There are over 160 distinct ayahuasca cultures in the Amazon basin where the use of ayahuasca is part of the cultural heritage (<u>link</u>). In these cultures, such as Quechua. Achuar, Baniwa, Shipibo, Conibo, Huachipaeri, etc. etc. expectant mothers will often take ayahuasca up to the eighth month of pregnancy and children as young as five years old will be given age-appropriate doses of ayahuasca in ceremonies.

When a girl is born in many of these cultures, a drop of ayahuasca is often placed in their eyes to help them "see" their artisan visions when they are sewing ayahuasca-inspired tapestries as an adult.

CSV Facilitator Accreditation, Lifetime Care and Integration Programs

Any shaman or facilitator serving ayahuasca at a Companionship of the Sacred Vine (CSV) ceremony must go through a formal accreditation program before being allowed to serve. This is in place to ensure that shamans or facilitators are known and operating within standard ceremony guidelines. These guidelines are in agreement with ICEERS and other professional operating standards (link)

One of the most important considerations in the ayahuasca ceremonial process is the after-care program, something known as "integration." An ayahuasca ceremony can result in profound spiritual experiences or personal revelations. It is essential that there are experienced people available to act as an after-care resource if required. The CSV has a policy of "lifetime care" where people can access the CSV no-cost integration program at any time post-ceremony.

The Reverend Richard Brandl, a certified ayahuasca integration coach heads up the CSV integration program.

As well, the concept of the Padrino and Madrina programs are part of the CSV care program for participants. "Padrino" (Godfather) and "Madrina" (Godmother) refer to spiritual helpers or guides who have a deep understanding of ayahuasca ceremonies who are available to support participants before and after their ayahuasca ceremonies.

The other important CSV support function is the Guardian Program. These are experienced people, typically volunteers, who assist the shaman or facilitator during the ayahuasca ceremony itself. They play a crucial role in the ceremony, ensuring safety and rendering assistance to participants if required.

The CSV Experience – the Exemption That Never Was

The CSV Exemption was Approved - Then s.56 Made it Useless

After a two and a half year "review" process, the Companionship of the Sacred Vine (CSV) was formally issued an exemption on July 4, 2023. (<u>link</u>) The exemption was issued only after the CSV lobbied then Health Minister Jean-Yves Duclos for several months.

Even though the exemption was approved, bureaucrats then found a way to render the exemption useless by refusing to add a legal Peruvian exporter to the exemption (see next section).

The two and a half-year CSV application process consisted of blatantly obvious delays by anonymous bureaucrats who would often take months to respond to routine correspondence. Further, most of the information requested by bureaucrats was not required under Health Canada official Policies and Procedures for religious exemptions (<u>link</u>).

Bureaucrats Refuse to Add a Legal Ayahuasca Supplier to the CSV Exemption

Bureaucrats found a way to render the CSV exemption useless by refusing to add a legal Peruvian ayahuasca exporter to the exemption. Adding a new supplier to an exemption is a routine process. For pharmaceutical exemptions, the service standard is 45 days.

In February 2024, after finding a legal supplier, the CSV filed for an amendment. For over 18 months S.56 has refused to add this supplier to the CSV exemption and has offered no reason for their refusal.

The service standard for pharmaceutical exemptions for this type of request is 45 days. If pharmaceutical companies were subjected to these types of delays, there would be a political uproar.

Jamie Larkin Asks for a Declaration of Support

Mr. Jamie Larkin, a member of the CSV (not a spokesman) made a presentation at a City of Charlottetown Council meeting on Sept 19, 2024 asking for a declaration in support of legal ayahuasca ceremonies in Canada. His presentation was videotaped and posted on the official City of Charlottetown YouTube channel. (<u>link</u>)

The presentation sparked a public discussion and resulted in two positive mainstream media articles in the SaltWire (PostMedia) in PEI (<u>link</u>).

s.56 Revokes the (Useless) CSV Exemption

In May, 2025, citing Mr. Larkin's presentation and two sentences from a 10-minute 2023 CSV fundraising video, s.56 bureaucrats formally revoked the CSV exemption. Based on these two YouTube videos, bureaucrats said the original 60-page CSV application submitted in 2021 was "not sincere."

Please note – Mr. Larkin was not involved in the CSV application process and had no knowledge of the contents of the 60-page CSV application.

Bureaucrats have never provided disclosure as to what part(s) of the YouTube videos were in dispute with what part(s) of the 60-page application. In a legal proceeding of this nature disclosure of this information would be automatic, according to CSV legal counsel Brendan Miller.

Despite the CSV not being in contravention of any of the terms of the exemption and never serving a drop of ayahuasca in Canada, in May, 2025, s.56 revoked the CSV exemption.

Please note – the Health Minister's office and senior s.56 bureaucrats were well aware of the existence of the CSV fund-raising video BEFORE the exemption was approved in 2023. The YouTube fund-raising video was posted online several months before the CSV exemption was approved and was part of the CSV lobbying campaign.

Mr. Larkin is a member of the CSV but is not a spokesman. He had no knowledge of the contents of the original CSV application and was simply exercising his right to free speech as a Canadian citizen. For further information on the revocation (<u>link</u>).

Christian-based Ayahuasca Churches Allowed to Operate

Christian-based ayahuasca churches are the only organizations that have been allowed to legally serve ayahuasca in Canada.

In 2023 when the CSV exemption was approved, it was the only legal shamanic church in Canada. All other exemptions have been issued to Christian-based ayahuasca churches such as Santo Daime (SD) and Uniao de Vegetal (UDV).

RECOMMENDATIONS

Benefits of Spiritual Healing

Far from being a danger to the Canadian public, ayahuasca is of net benefit to Canadian society. There are cost-savings to the Canadian health care system associated with ayahuasca spiritual healing. Numerous studies point out that ayahuasca users are more family and community oriented and are better adjusted within society both mentally and physically (<u>link</u>).

According to Health Canada documents ayahuasca poses no danger to the Canadian public and there is no diversion of ayahuasca into black markets ($\underline{17}$). Ayahuasca is recognized as having an excellent safety profile that far exceeds legal and illegal substances available in Canada.

The RCMP have no arrest protocols for ayahuasca. The two most recent arrests for ayahuasca in Canada were initiated by US authorities, not Canadian.

Summary Points

Ayahuasca is inherently safe

Spiritual Healing provides numerous societal benefits

An ayahuasca ceremony is not a "recreational" experience

There is no societal danger posed by ayahuasca ceremonies

There are no enforcement problems associated with the use of ayahuasca

All CSV members must pass a physical and mental health checklist and a pre-ceremony interview for suitability

Screening for ayahuasca/medications contradictions for applicants is part of the CSV safety program

The CSV maintains a lifetime pre and post-ceremony support programs for all of our members

Two Policy Changes Required

The first policy change is to immediately stop prosecuting people for the non-crime of religious ayahuasca use. The 2nd policy change would be to allow religious use of ayahuasca in Canada to legitimate ayahuasca churches, including shamanic churches.

Dismantle the Discriminatory s.56 Religious Exemption Program

To any neutral observer, it should be patently obvious that the s.56 program is not operating as it was intended by Parliament.

The s.56 religious exemption program consists of civil servants ostensibly hired to assist Canadians to exercise their religious rights. However, the truth is they actively suppress the religious freedoms of non-Christian ayahuasca churches.

S.56 is prima facie discriminatory, providing prompt service standards for pharmaceutical (industrial) applicants while putting religious applications "under review" without decisions for years, contrary to Canadian and world democratic principles.

Given the history and on-going actions of this federal government program, the s.56 religious exemption program should be immediately dismantled.

The Ideal Solution - the Brazilian Model

The conclusion of Brazil's 20-year regulatory review concluded that there was no need for state intervention in what are religious matters.

Since 2010, Brazil's de-regulation of religious ayahuasca ceremonies has provided a functional model and legalization has caused no societal problems. In fact, decriminalization has been of net benefit to Brazilian society.

For Detailed Recommendations, We Should Talk

The CSV and AyahuascaCanada are the Canadian experts on NeoShamanic (New World) ayahuasca ceremonies. We are available for consultation on policy changes, please do not hesitate to reach out to the representatives named below.

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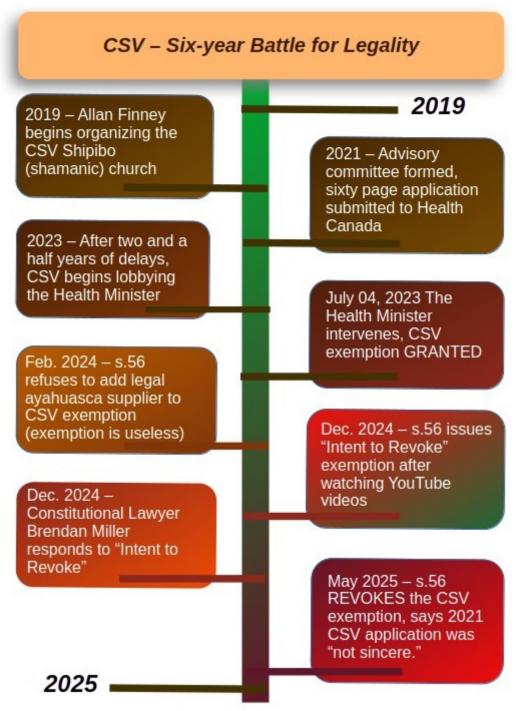
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APPENDIX A The Six-Year CSV Timeline



Organizational Year - 2020

Allan Finney formed an advisory committee consisting of Shipibo Elders, Canadian and International facilitators and then opened up the website for membership applications (an important requirement.) He also consulted with legal representatives and other s.56 applicants prior to writing and submitting the 60-page CSV exemption application.

Application Submitted – January, 2021

The 60-page CSV application was formally submitted in January 2021. The application was an extensive document outlining CSV shamanic practices and providing historical and cultural context.

One legal reviewer called it "bulletproof." A copy of the application is available for review, please contact Allan Finney (<u>link</u>).

Exemption Granted - July 4, 2023

After two and a half years of blatant delays by the s.56 bureaucracy, the CSV started lobbying Health Minister Jean-Yves Duclos about the atrocious treatment of the CSV application. After three months of lobbying, the CSV exemption was finally granted.

February 2024 - s.56 Refuses to Add a Legal Supplier (Exemption is Useless)

In order to legally import ayahuasca into Canada, a supplier with the legal export paperwork in Peru is required. After finally finding a legal exporter who could provide all the required documents (a rare find), the CSV asked s.56 to add this supplier to the CSV exemption, which they have refused to do, rendering the CSV exemption useless. They have provided no reason for this refusal.

"Intent to Revoke" Issued - December 2024

Despite the CSV never importing or serving a drop of ayahuasca in Canada, the s.56 bureaucrats took exception to a presentation made to Charlottetown City Council by a member of the CSV – Mr. Jamie Larkin (not an official spokesman). A video of his presentation was posted on the City of Charlottetown official YouTube channel (<u>link</u>).

Citing Mr. Larkin's video and a two-year-old ten-minute CSV fund-raising video, bureaucrats issued an "Intent to Revoke" (ITR) the CSV exemption.

Please note – the fund-raising video *was posted online three months BEFORE s.56 granted the exemption in 2023.* The Health Minister's office and senior s.56 bureaucrats were well aware of the existence of this video prior to approving the CSV exemption.

The CSV was given two weeks to respond to the Intent to Revoke.

Brendan Miller Responds to ITR - December 2024

Mr. Brendan Miller, a highly-regarded Constitutional and Human Rights Lawyer was retained to respond to the "Intent to Revoke," In his submission, *he cited constitutional violations, abuse of process, non-compliance with the CDSA, non-disclosure and other illegal actions* of the s.56 bureaucrats.

Bureaucrats Revoke the CSV Exemption – May 2025

Based on two YouTube Videos, cited as "proof" that the CSV was "not sincere" in its original application, s.56 bureaucrats formally revoked the CSV exemption. *The bureaucrats never responded to Mr. Miller's request for disclosure* outlining what part(s) of the original CSV application were in dispute with the YouTube videos.

Please note - Mr. Larkin is not a CSV spokesman and had no knowledge of the contents of the original 2021 CSV application. He was exercising his right to free speech as a Canadian citizen.

The legal process - The only legal way to revoke an exemption is if the organization that had been granted the exemption is not complying with the conditions outlined in the written (legal)

exemption agreement. As the CSV was never able to import or serve ayahuasca in Canada, there is no way it could have been in contravention of any of the conditions specified in the exemption document.

Further, none of the conditions of the exemption specified that CSV members could not speak about legal ayahuasca ceremonies in Canada. The CSV would have no way to police this even if it were part of the exemption agreement. The CSV does not censor its members.

APPENDIX B - Ayahuasca Studies

The CSV Does Not Endorse Ayahuasca as a "Medical Therapy"

The CSV maintains that ayahuasca cannot be separated from the sacred traditional ceremony. And while scientific or medical studies (below) point to the therapeutic effect of ayahuasca, the CSV maintains that the traditional spiritual ceremony is the mechanism.

The CSV does not offer ayahuasca in a clinical setting and provides spiritual ceremonies based on traditional Shipibo-Conibo ceremonies.

Please note - This is a small sample of a large volume of ayahuasca studies that have been published in English in various government, medical and pharmacological journals. Non-English studies dating back over four decades can also be found in institutions such as the University of Madrid in Spain and in other South American medical and pharmacological journals.

Much of the initial interest from western researchers, pharmacologists, ethnobotanists and clinicians started with healing information generated by Ayahuasca churches.

1. Takiwasi - Center for the Rehabilitation of Drug Addicts and Research on Traditional Medicines

See – (TW link)

One of the original evidence-based South American ayahuasca mental health centers is Takiwasi located in Tarapoto, Peru which has over 30 years of practical and clinical experience. Their focus is on Drug Addiction Rehabilitation and Traditional Medicine.

From their website - Takiwasi is considered the oldest institution to combine the use of psychotherapy and medicinal plants for the treatment of mental health. With over three decades of experience in this field, our model, in perfect balance between medicine, psychology and spirituality, has been the subject of study in more than 60 international research projects, articulating an interdisciplinary academic community made up of scientific institutions of world excellence.

Results

Over 30 years of clinical experience indicate that the interaction between traditional Amazonian medicine, psychotherapy and spirituality, proposed by the therapeutic model of the Takiwasi Center, turns out to be very successful in the treatment of addictions and other mental health disorders. We believe that the articulation of these different therapeutic approaches greatly benefits the outcome of the treatment and thus is showing a path to follow in the global search for mental well-being and good living.

It is the initial vocation of the Takiwasi Center to associate clinical practice with research as it appears in its full name: Center for the Rehabilitation of Drug Addicts and Research on Traditional Medicines. Since the beginning of its operation, the Takiwasi Center has permanently evaluated its activities, its patient population and the results of its therapeutic interventions (Giove 1996, 2002; Mabit, 2007; Mabit & González, 2013) in order to constantly improve its model. A study published

by Dr. Rosa Giove in 2002 shows that in a group of 100 former patients contacted two years after leaving the Center, the recovery rate is 54%, reaching 67% considering only those patients who completed the treatment receiving therapeutic discharge.

2. The Therapeutic Potentials of Ayahuasca: Possible Effects against Various Diseases of Civilization

(National Library of Medicine <u>link</u>)

As a sacrament, ayahuasca is still a central element of many healing ceremonies in the Amazon Basin and its ritual consumption has become common among the mestizo populations of South America. Ayahuasca use amongst the indigenous people of the Amazon is a form of traditional medicine and cultural psychiatry.

During the last two decades, the substance has become increasingly known among both scientists and laymen, and currently its use is spreading all over in the Western world. In the present paper we describe the chief characteristics of ayahuasca, discuss important questions raised about its use, and provide an overview of the scientific research supporting its potential therapeutic benefits.

A growing number of studies indicate that the psychotherapeutic potential of ayahuasca is based mostly on the strong serotonergic effects, whereas the sigma-1 receptor (Sig-1R) agonist effect of its active ingredient dimethyltryptamine raises the possibility that the ethnomedical observations on the diversity of treated conditions can be scientifically verified. Moreover, in the right therapeutic or ritual setting with proper preparation and mindset of the user, followed by subsequent integration of the experience, ayahuasca has proven effective in the treatment of substance dependence.

This article has two important take-home messages: (1) the therapeutic effects of ayahuasca are best understood from a bio-psycho-socio-spiritual model, and (2) on the biological level ayahuasca may act against chronic low-grade inflammation and oxidative stress via the Sig-1R which can explain its widespread therapeutic indications.

3. Research on Traditional Indigenous Medicine within an intercultural medicine model

(Nierka A.C. link)

The Nierika Institute of Intercultural Medicine promotes scientific research on the therapeutic potential of the ceremonial use of sacred plants in therapeutic contexts and their interdisciplinary and intercultural integration in public health. The institute brings together researchers in psychology, medical anthropology, ethno-psychiatry and pharmacology, to collaborate in developing a multidisciplinary and intercultural scientific approach to the study of sacred plants.

Recent studies conducted in other countries indicate that participation in indigenous peyote and ayahuasca ceremonies can have clinically positive effects on different mental conditions in patients receiving treatment with these plants. The integration of ayahuasca rituals in different psychotherapeutic treatment models has proven to be effective for patients with substance dependence problems, depression, eating disorders, post-traumatic stress and complicated grief, among other conditions.

Currently, the Nierika cultural institute collaborates in the ATOP project (Ayahuasca Treatment Outcomes Project), an international research project that evaluates the effectiveness of Ayahuasca in the treatment of addictions, depression and anxiety; AC is also collaborating on an international study evaluating the effects of ceremonial use of Ayahuasca in the treatment of eating disorders with Laurentian University, and the University of British Colombia, as well as UNAM

4. Ayahuasca and Public Health: Health Status, Psychosocial Well-Being, Lifestyle, and Coping Strategies in a Large Sample of Ritual Ayahuasca Users PubMed (link)

This study involved a sample of long-term ritualistic ayahuasca users in Spain. To our knowledge, this is the first study to assess regular ayahuasca users from a communitarian public health perspective. The data suggest that the study participants had high levels of general, mental, and positive health, and showed excellent levels in terms of adjustment and coping strategies, in addition to having healthy lifestyle habits. Study results do not suggest the possible effects of ayahuasca, but they show how the ritualistic use of a drug considered a hallucinogen is not associated with negative consequences in terms of adjustment or physical and psychological health.

5. New Insights into the Chemical Composition of Ayahuasca

National Library of Medicine (NIH <u>link</u>)

Recently, ayahuasca has captured the attention of the scientific community as part of the "renaissance of psychedelic studies". Several reports highlight its potential therapeutic applications in clinical and nonclinical settings for the treatment of depression, grief, eating disorders and substance use disorders (SUDs). In addition, preclinical studies have shown that DMT, β -carbolines, and ayahuasca preparations present antidepressant-like effects in animal models and that administration of the beverage can block ethanol (alcohol) preference in an animal model of dependence.26

Ayahuasca, commonly translated from the Quechua language as "vine of the spirits" or "vine of the dead", is a psychedelic beverage originally from the Amazon rainforest used in different shamanic settings for a variety of medicinal, spiritual, and cultural purposes.1 It is prepared by boiling in water an admixture of the vine Banisteriopsis caapi, which is a source of β -carboline alkaloids, and other plants containing N,N-dimethyltryptamine (DMT), usually Psychotria viridis (Figure Figure11) or Diplopterys cabrerana, (where the preparation name is usually referred to as yagé).2

Almost four decades ago, ayahuasca traveled from its traditional uses in the Amazon basin to religious, therapeutic, and spiritual centers with a worldwide distribution.3,4 Brazilian churches that use ayahuasca as part of their religious practices, such as the Santo Daime and União do Vegetal, as well as shamanic practices involving the ingestion of the beverage in group rituals, have expanded globally within the psychospiritual transnational networks.4–7

6. Ayahuasca and public health II: health status in a large sample of Ayahuasca ceremony participants in the Netherlands

Leisen University Scholarly Publications (LU <u>link</u>) - The findings of this study indicate that long-term participants in ayahuasca ceremonies have better general well-being, fewer chronic and lifestyle diseases, and are more physically active compared to the normative Dutch data, as well as having a more balanced diet. (according to national dietary guidelines; Health Council of the Netherlands 2015).

Other studies that investigated the health of ayahuasca ceremony participants similarly reported differences in lifestyle, well being, nutrition, and physical activity (Kaasik and Kreegipuu 2020; Ona et al. 2019). It had been suggested that hallucinogens may promote healthful behaviors and may reduce the risk of developing "lifestyle diseases" such as diabetes, high cholesterol and blood pressure, which contribute to personal suffering, premature mortality, and public health costs (Teixeira et al. 2021).

Two recent studies report an association between classic hallucinogens and lower odds of being overweight or obese, and lower odds of having diabetes, cardiometabolic diseases, and/or cancer (Simonsson et al. 2021; Simonsson, Sexton, and Hendricks 2021). In addition, observational studies reported improvements of indicators of mental health and overall well-being among ayahuasca ceremony participants (Gonzalez et al. 2021; Kaasik and Kreegipuu 2020; Maia, Daldegan-Bueno, and Tófoli 2020).

7. Ayahuasca's entwined efficacy: An ethnographic study of ritual healing from addiction

PubMed – NIH Library of Medicine (NIH <u>link</u>)

Background: A range of studies has demonstrated the efficacy of the psychoactive Amazonian brew ayahuasca in addressing substance addiction. These have revealed that physiological and psychological mechanisms are deeply enmeshed. This article focuses on how interactive ritual contexts support the healing effort. The study of psychedelic-assisted treatments for addiction has much to gain from ethnographic analyses of healing experiences within the particular ecologies of use and care, where these interventions are rendered efficacious.

8. Associations between ayahuasca consumption in naturalistic settings and current alcohol and drug use: Results of a large international cross-sectional survey

National Library of Medicine – (NIH <u>link</u>)

In the context of both expanding naturalistic use and academic research interest in the therapeutic use of ayahuasca, our dataset of 8,629 ayahuasca drinkers from more than 40 countries provides a unique opportunity to investigate associations between ayahuasca consumption in naturalistic settings and the use of alcohol and other drugs.

We identified a strong positive association between the consumption of ayahuasca and the likelihood of never or rarely drinking alcohol, never or rarely engaging in risky drinking (>4 standard drinks on one occasion) and having not consumed a range of drugs in the past month.

Our findings suggesting anti-substance use effects are consistent with those reported in several smaller

studies. Analysis of outcomes for 36 patients at the Takiwasi (therapeutic community) drug treatment centre in Peru, which uses ayahuasca along with other traditional plants, identified significant decreases in addiction severity outcomes for drug and alcohol use, as well as reduced emotional distress and enhanced wellbeing [60].

Similarly, an observational study of First Nations young people in Canada provided with ayahuasca-assisted treatment for problematic substance use reported psychological and wellbeing benefits as well as reductions in tobacco, alcohol and cocaine use at 6 months [30].

A global survey of drug users, including 527 ayahuasca drinkers, found this group to have lower problematic alcohol consumption than other psychedelic users, but not non-psychedelic users; however, heterogeneity of groups was noted [61].

A number of studies have also reported lower rates of alcohol and other drug use among members of ayahuasca churches in Brazil, when compared to a comparison group or the Brazilian population, with these effects visible even among samples with a higher lifetime incidence of illicit drug use or dependence.

9. Ayahuasca-assisted therapy for addiction: results from a preliminary observational study in Canada

PubMed National Library of Medicine (NIH link)

This paper reports results from a preliminary observational study of ayahuasca-assisted treatment for problematic substance use and stress delivered in a rural First Nations community in British Columbia, Canada.

Ayahuasca-assisted therapy appears to be associated with statistically significant improvements in several factors related to problematic substance use among a rural aboriginal population. These findings suggest participants may have experienced positive psychological and behavioral changes in response to this therapeutic approach, and that more rigorous research of ayahuasca-assisted therapy for problematic substance use is warranted.

10. Psychotherapeutic and neurobiological processes associated with ayahuasca: A proposed model and implications for therapeutic use

Frontiers in Neuroscience (FN <u>link</u>)

Observational and qualitative studies investigating ayahuasca's therapeutic effects have identified improvements in some psychological skills or traits such as decentring (Franquesa et al., 2018; Domínguez-Clavé et al., 2019); certain mindfulness capabilities (acceptance, non-judgmental and non-reactive processing, and improved observation) (Thomas et al., 2013; Soler et al., 2016; Uthaug et al., 2018); cognitive flexibility (Stemme et al., 2008; Murphy-Beiner and Soar, 2020); and emotional regulation (Domínguez-Clavé et al., 2019).

Broader psychological and well being benefits have also been identified among those drinking ayahuasca. These include increased confidence, optimism, independence, and positive mood (Barbosa et al., 2009), higher levels of self-transcendence and lower harm avoidance (Bouso et al., 2012), increased satisfaction with life (Uthaug et al., 2018) as well as increased openness to therapeutic interventions and improvements in both anxiety and depression (Perkins et al., 2021a).

Beneficial effects have also been reported in relation to interpersonal relationships, sense of self, creativity, somatic perception, sense of connection, substance use, and other health behaviors (Thomas et al., 2013; Lafrance et al., 2017; Bathje et al., 2021; Perkins et al., 2021a).

Additional benefit may also be associated with the reported modulation of some personality traits after ayahuasca consumption including increased agreeableness, openness to experience, and extraversion, and reduced neuroticism and negative emotionality (Mendes Rocha et al., 2021

11. Changes in mental health, well being and personality following ayahuasca consumption: Results of a naturalistic longitudinal study

Frontiers in Pharmacology (FP link)

Fifty-three attendees (32 women, 21 men) completed pre and post ayahuasca assessments with 55.6% of the sample reporting a complete mystical experience based on the MEQ-30. One-month post-ayahuasca, significant reductions were identified in depression, anxiety, stress, alcohol and cannabis use, body dissociation, accepting external influence, self-alienation, impulsivity, and negative affect/emotionality.

Significant increases were identified in positive mood, self-efficacy, authentic living, extraversion, agreeableness, open-mindedness, spirituality, and satisfaction with relationships. While facets of the mystical experience held little predictive validity on outcome measures, baseline traits, particularly high negative emotionality and body dissociation, and low sense of self-efficacy, robustly predicted improvements in mental health, well being and personality following ayahuasca consumption: Results of a naturalistic longitudinal study.

12. Potential Use of Ayahuasca in Grief Therapy

ResearchGate (RG <u>link</u>)

This is the first study to explore the therapeutic potential of ayahuasca in grieving processes. The findings from this study indicate that people who used ayahuasca reported lower level of grief than people who attended a peer-support group. This result stems from the fact that although both groups were comparable in the level of grief at the moment of death, the level of grief presented in the Present Feelings scale (TRIG) was lower in the ayahuasca group. Also, a significantly greater proportion of ayahuasca participants reported direct benefits on some of the psychological and interpersonal dimensions that are central to grief processes.

13. Ayahuasca Global Consumption and Reported Deaths in the Media

ICEERS (link),.

For years, a number of concerns have been raised in the field of ayahuasca research that, so far, no one has tried to systematically resolve. The first consideration:

How many people in the world have taken ayahuasca in their lifetime? How many people take ayahuasca each year? How many servings of ayahuasca are taken each year? And another important question:

What do we know about the deaths the media has attributed to ayahuasca?

It seems that answering the first question by estimating the prevalence of ayahuasca consumption globally is valuable to understand ayahuasca's expansion and its social, economic, and environmental implications. Comparing these numbers alongside an analysis of the deaths the media attributed to ayahuasca would amplify the value of this information collectively. It can also help shed light on the alleged danger of ayahuasca which can be a tool to guide public policies.

Deaths Attributed to Ayahuasca

As part of this three-year study ICEERS examined media-reported deaths attributed to ayahuasca. One of the conclusions of the study was that:

To date worldwide, no forensic examination or toxicological analysis has determined the combination of Banisteriopsis caapi and Psychotria viridis or Diplopterys cabrerana (the traditional ayahuasca brew) has caused poisoning leading to death.

14. Therapeutic Effects of Ceremonial Ayahuasca Use for Methamphetamine Use Disorders and Other Mental Health Challenges: Case Studies in an Indigenous Community in Sonora, Mexico

PubMed (<u>link</u>)

The cases presented above suggest that the application of traditionally used entheogens within a culturally adapted community-based therapeutic programme for Indigenous mental health can be an effective therapeutic resource for supporting recovery from depression, grief, anxiety, PTSD and systemic trauma, and substance use disorders. The selected cases show specifically how ceremonial use of ayahuasca within a culturally adapted, community-based treatment program may be safe, tolerable, and demonstrates therapeutic potential.

Perhaps, most significant is the way in which this intervention has potential to support recovery from diverse mental health challenges among family and community members in addition to, and often as part of, individual recovery. Incorporating family members and community practices into treatment is of utmost importance for improving quality of life and well-being among historically oppressed Indigenous communities.

15. Influence of Context and Setting on the Mental Health and Well being Outcomes of Ayahuasca Drinkers: Results of a Large International Survey

Frontiers In Pharmacology (FP <u>link</u>)

Our study has a number of important strengths, including a large sample size, international cross-cultural sampling frame, and inclusion of ayahuasca drinkers from a range of different contexts of consumption Therapeutic motivation was the most consistently associated of the motivation variables, including with a greater number of self-insights, stronger subjective spiritual experience and higher PWG. Moreover, unlike previous studies, we are also able to identify and consider separately the sizable wellbeing and mental health benefits associated with the social and community aspects of ayahuasca drinking, on which ceremony practices, additional support, and drinkers motivations also have an influence.

16. Ayahuasca use and reported effects on depression and anxiety symptoms: An international cross-sectional study of 11,912 consumers

Journal of Effective Disorders Reports – Science Direct (SC <u>link</u>)

Of participants reporting depression (n = 1571) or anxiety (n = 1125) at the time of consuming Ayahuasca, 78% reported that their depression was either 'very much' improved (46%), or 'completely resolved' (32%); while 70% of those with anxiety reported that their symptoms were 'very much' improved (54%), or 'completely resolved' (16%).

A range of factors were associated with greater reported affective symptoms improvement, including subjective mystical experience, number of Ayahuasca sessions, and number of personal psychological insights experienced. 2.7% and 4.5% of drinkers with depression or anxiety, respectively, reported worsening of symptoms.

17. Psychedelic Medicine: A Rapid Review of Therapeutic Applications and Implications for Future Research (Canada)

Homewood Research Institute, Guelph, ON. (HRI link)

Amidst growing medico-therapeutic interest in psychedelics, the socio-political factors of the 1960s and 70s driven by racist policy and political persecution led to these drugs being declared illegal, including in Canada, despite a lack of evidence for toxicity or addictive potential. Their designation as Schedule I substances under the UN Convention on Psychotropic Substances, and consequently within the Canadian Controlled Drugs and Substances Act, meant that they were considered as having a high potential for non-medical use1, no currently accepted therapeutic application, and a lack of accepted safety for use under medical supervision.

The combination of the socio-political climate, shrinking funding opportunities, and methodological issues have severely limited new research and development since the 1970s. The past 15 years has seen a rapid resurgence of work in both basic and clinical psychedelic science, with the majority of the work focused on substance use, mental health, and related conditions. A wide range of topics are being covered within the domains of: neuroscience and psychopharmacology; treatment effectiveness with associated mechanisms of action and safety considerations; palliative, end-of-life, and spiritual care; treatment guidelines; training and certification of therapists and other practitioners; health policy and prevention; as well as anthropology, sociology, and global health.

18. The Impact of Ayahuasca on Suicidality: Results From a Randomized Controlled Trial

Frontiers in Pharmacology (FP link)

Interestingly, within the avahuasca group, the relationship between changes in suicidality and changes in nonsuicide-related depressive symptoms approached significance, with a large effect size (i.e., r = .53). These findings suggest that the impact of ayahuasca on suicidality may, in part, be due to its impact on nonsuicide-related depressive symptoms or mechanisms overlapping both non-suicide-related depressive symptoms and suicidality. Research suggests that suicide functions as a means of escaping intense emotional distress (Baumeister, 1990; Shneidman, 1998). Extant research indicates that psychedelics in general, and ayahuasca in particular, leads to decreases in emotional distress (for a review, see dos Santos et al., 2018). Similarly, a recent study found that the administration of ayahuasca led to decreases in emotion dysregulation, within a community sample and among individuals with BPD traits (Domínguez-Clavé et al., 2019). Similarly, among males in a community sample, lifetime use of psychedelics was associated with lower levels of emotion dysregulation (Thiessen et al., 2018). One particular means through which ayahuasca may decrease emotion dysregulation is via increased mindfulness-related capacities (e.g., acceptance and decentering), which have been shown to increase after administration of avahuasca (Thomas et al., 2013; Soler et al., 2016; Sampedro et al., 2017; Domínguez-Clavé et al., 2019; Soler et al., 2018; Uthaug et al., 2018).

19. Ayahuasca Treatment Outcome Project (ATOP): One Year Results from Takiwasi Center and Implications for Psychedelic Science

(PubMed (link)

Results: The group change from baseline to the one-year follow up was significant and in the anticipated direction for alcohol and drug use severity, depression and anxiety, and some dimensions of quality of life. There was considerable individual variation in outcomes and treatment duration. The majority of participants rated all aspects of the program as important, including the spiritual and therapeutic significance of the ayahuasca experience which was rated as very significant.

Conclusion: Based on the positive one-year outcomes, and within the limitations of an uncontrolled observational study design, the findings suggest promise for the effectiveness of the use of ayahuasca in a multifactorial treatment context for individuals with significant treatment histories, high levels of comorbidity and treatment motivation. Results highlight considerable variation in individual experience that merit in-depth qualitative analysis. Implications for ayahuasca-assisted and other psychedelic-assisted treatment alternatives are discussed.

20. Neuropharmacology of N,N-Dimethyltryptamine

(National Library of Medicine link)

This paper reviews the current literature of both the recreational use of DMT and its potential roles as an endogenous neurotransmitter. DMT appears to have limited neurotoxicity and other adverse effects except for intense cardiovascular effects when administered intravenously in large doses. Because of its role in nervous system signaling, DMT may be a useful experimental tool in exploring how brain works, and may also be a useful clinical tool for treatment of anxiety and psychosis.

21. Other Resources

ICEERS.org – Ayahuasca Global Consumption and Reported Deaths, June 2023.

YouTube – David Suzuki The Nature of Things - <u>The Jungle Prescription</u>, CBC Documentary 2011

Global News - These Ontario police officers are using ayahuasca to treat their PTSD, 2019

ICEERS.org - Ayahuasca Safety Profile Fact Sheet (ICEERS link)

Companionship of the Sacred Vine medical questionnaire (CSV <u>link</u>)

CSV - Ayahuasca Decision-Making Guide (CSV <u>link</u>)

The Spanish National Police magazine recognizes that ayahuasca is not illegal in Spain and "brings benefits to those who consume it." (PF <u>link</u>)

Parliament of Canada – The Opioid Crisis in Canada (PC link)

Substance-related acute toxicity deaths in Canada from 2016 to 2017: A review of coroner and medical examiner files (CAN \underline{link})
