Psychedelic Influence in the United States:

Exploring the Role of Psychedelic Drug Policy in Protecting Dominant Cultural Values

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Abstract

Veteran suicide in the United States is a critical concern, demanding innovative solutions. This paper investigates psychedelic drug policy, as these substances have been revealed to be a safe and effective treatment of PTSD in veterans. The research aims to identify the conditions that led to psychedelics being placed in the most restrictive drug schedule, and the evolving conditions that led to the resurgence of research. The study draws from drug legislation, media narratives, medical research, and relevant literature, applying it in process tracing methodology. It adopts a theoretical framework rooted in corruption, morality, law, and cultural conflicts. The research finds that political motives, rather than safety or efficacy concerns, led to the criminalization of psychedelics. The analysis identifies public perception as the most potent variable. Actors responded to public perception, working to either shift or maintain social attitudes, opinions, or norms. The fundamental mechanisms in this process center on drug policy – its enactment, preservation, and reduction – serving as a means of preserving dominant ideology while disguised as altruistic actions to safeguard public health. The implications of this research suggest that the current schedule I classification of psychedelics is unfounded, given their safety profile and potential medical benefits. Veterans, in particular, stand to benefit immensely from legal access to psychedelic-assisted psychotherapy. The findings of clinical trials have offered hope in the battle against PTSD, potentially revealing a solution to this tragic issue. In conclusion, the paper emphasizes the need for accessible and effective PTSD treatment. It reveals that the existing barriers to treatment are the remnants of a decades-old cultural conflict that instrumentalized drug policy. By raising awareness and challenging the current classification of psychedelics, this research humbly aspires to contribute to the future reduction of veteran suicide. *Keywords:* post-traumatic stress disorder, veteran suicide, psychedelics, psychotherapy, MDMA-assisted psychotherapy, Controlled Substances Act, moral injury

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Contents

Acronyms and Abbreviations

Abbreviation	Definition
CDER	Center for Drug Evaluation and Research
CIA	Central Intelligence Agency
DARPA	Defense Advanced Research Projects Agency
DEA	Drug Enforcement Administration
DMT	N,N-Dimethyltryptamine
DoD	Department of Defense
FDA	Food and Drug Administration
IPTS	Interpersonal theory of suicide
LSD	Lysergic acid diethylamide
MAPS	Multidisciplinary Association for Psychedelic Studies
MDMA	3,4-Methylenedioxymethamphetamine
mPFC	Medial prefrontal cortex
NIMH	National Institute of Mental Health
PDES	Pilot Drug Evaluation Staff
PMIE	Potentially morally injurious event
PTSD	Post-traumatic stress disorder
VA	Department of Veterans Affairs

Chapter 1 – Introduction

This dissertation explores the legal history of psychedelic substances in the United States. It discerns pivotal phases of public opinion of the U.S. dominant ideology and the resulting drug legislation. This research incorporates the analysis of social and cultural factors, legislative decisions, policies, regulations, funding mechanisms, and research approvals. This investigation assesses the social-political dynamics that shaped psychedelic policies, subsequently impeding medical research on the substances, even as these substances have emerged as effective treatments for post-traumatic stress disorder (PTSD). This discovery could be beneficial to the fight against military suicide.

In summary, this research concerns the nexus between public perception, deeply entrenched militarized ideologies, and the evolution of psychedelic drug policy in the United States.

Motivation

The study of conflict resolution exists to mitigate violent conflict in our world and focuses on the psychological causes of conflict and mobilization and the psychological effects. Conflicts rarely conclude neatly. Their ramifications often persist long after physical violence has stopped, particularly within the individual. Conflict resolution addresses this, acknowledging the importance of reconciliation and trauma healing.

Those in the United States witness the dangerous effects of trauma, particularly among veterans. Over the past few decades, the rate of U.S. veteran and active-duty military suicide has dramatically increased. In the 20 years following the 9/11 terrorist attacks, suicide claimed the lives of 30,177 service members. This number is alarmingly more significant than the 7,052 U.S. military killed during war operations in the same period (Suitt, 2021, p. 1). This staggering statistic is shocking and is representative of the motivations behind this research.

While much of the conflict resolution literature on trauma healing refers to community-wide healing post-conflict, the unique nature of military suicide in the United States demands special attention. It involves individuals who experienced conflict abroad, returned home, and now process their deployment amidst a population that did not share their experiences. There is still much to uncover about this epidemic, its causes, and, most importantly, potential solutions. One certainty prevails: As long as veterans and active-duty personnel continue to endure high suicide rates, there is a conflict that needs to be resolved.

In recent years, there has been an increase in media content discussing the potential therapeutic benefits of some psychedelic substances for PTSD, particularly in the veteran population. While these claims are intriguing and scientifically substantiated, these substances remain illegal in the United States. They are classified as schedule I controlled substances.[1] It has recently been reported that the Food and Drug Administration (FDA) may approve the therapeutic use of one of these substances, 3,4-methylenedioxymethamphetamine (MDMA), within the coming year, possibly soon after the submission of this paper. This action would have profound significance, considering psychedelic substances have been illegal since 1970 and are generally seen as dangerous within American society.

To those who are not familiar, 'psychedelics' refers to a handful of drugs recognized for inducing hallucinations, or more accurately, expanding an individual's consciousness (Doblin, 2001, p. 1; Kalensky, 2022).[2] Some of the substances within this category are lysergic acid diethylamide (LSD), psilocybin, mescaline, ibogaine, MDMA, ketamine, and N, N-Dimethyltryptamine (DMT).[3]

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[1] The term 'schedule I' is often capitalized throughout the literature on these substances. However, the Controlled Substances Act of 1970 uses 'schedule I' in lowercase, so this paper will follow this model.

[2] Not all psychedelic substances produce hallucinations. However, they all interact with an individual's conscious and subconscious awareness.

[3] This list does not include marijuana, which is technically not a psychedelic substance; however, it is psychoactive and can induce altered states of consciousness. At certain points in this paper, marijuana will be discussed alongside psychedelics because, while not the same, they are similar.

This paper intends to connect the dots between the initial placement of psychedelic substances on schedule I and the status of these drugs today. The intention is to provide a comprehensive understanding of the social implications of psychedelics, how this has interacted with ideology, and its effect on the United States Government, the American public, and now, individuals with PTSD.

Chapter Outline

Chapter two will provide an in-depth overview of the related literature, summarizing critical theories, key concepts, and definitions. Chapter three discusses the research methodology of process tracing. Chapter four will serve as the historical background, outlining drug policy and research evolution and introducing key factors such as the Nixon Administration and the antiwar movement. This chapter provides a historical context that benefits the understanding of subsequent developments. The fifth chapter contains the research, detailing the process while offering a theoretically informed analysis of the motivations and causal factors. The final chapter will discuss the findings, consider potential implications, and make recommendations for the future.

Chapter 2 – Literature Review

Introduction

This chapter serves as an exploration of the literature relevant to the research topic. This research examines the historical process of antidrug legislation in the United States and the potential interplay between ideological differences and the formation of these policies. The research will trace the case process, supported by theories explaining the motivations underlying the observed actions. Conflict resolution, as a field, is theoretically complex. Some of the many intricate features, terms, and concepts from the field that relate to our case will be defined and discussed in this chapter, providing readers with a comprehensive understanding of the topics analyzed in later chapters.

This chapter will draw upon academic theories from various disciplines that explain conflict, conflict resolution, and human behavior at individual and group levels. This review will include an overview of the literature on conflict dynamics and the psychological aspect of conflict – particularly within military service. Additionally, this chapter will introduce the topic of psychedelics and psychedelic research, contextualizing their relevance to the research and discussion. This contextual framing aims to facilitate a broader perspective, aiding the examination of the case.

Conflict

Conflict is an inherent reality for humankind – an inevitable aspect of life (Galtung, 1996; Lederach, 2003; Taylor & Lederach, 2014, p. 13). It can exist at all different levels, from individual interactions to between civilizations (Galtung, 2010, pp. 21–27). At every level, it is intricate and complex. Every conflict is unique. This complexity is particularly magnified in cultural, social, and structural conflicts (Galtung, 2010, p. 23).

Among the theories that explain why conflicts occur is realistic conflict theory. The theory claims that individuals have goals and configure their behavior to pursue their goals. In cases where groups harbor contradictory goals, the groups compete. When the goals are mutually exclusive, conflict emerges (Hogg, 2016, p. 5). The crux of realistic conflict theory lies in the insight that conflicts emerge from incompatible relational situations. Conflicts are rooted in mutually exclusive goals, giving rise to frustration, which, in turn, motivates those involved to act to eliminate the cause (Galtung, 2010, p. 28).

Conflict Resolution

The field of conflict resolution stands as an effort to address conflict and mitigate its potential detrimental effects on those involved. Conflict resolution aims to create systems that foster human fulfillment and avoid suffering. The experience of the individuals involved, concerning their needs and rights, determines the need for intervention (Galtung, 2010, p. 21). At its core, conflict resolution forges pathways to peace. Galtung (1964) explains that there is both positive and negative peace. Conflict resolution wants to reach positive peace. Negative peace denotes the absence of physical violent conflict, but there still may be structural issues that put individuals at risk. Positive peace goes deeper, referencing the absence of physical violence, but also, individuals' fundamental civil and political rights are met, as well as their broader needs for survival and wellness. These rights include having freedom and access to a range of life options (Galtung, 2010, p. 21).

Conflict resolution works in many ways to reach positive peace, including shifting the consciousness structures of those involved (Nan, 2011, p. 240). Structurally, this involves the development of equitable and peaceful democratic institutions. The focus of these institutions needs to be on fundamental human rights, not power (Galtung, 2010, p. 24). The purview of conflict resolution extends beyond the de-escalation of violent conflict, encompassing the

potential to make constructive changes that will result in long-term positive transformation (Taylor & Lederach, 2014, p. 13).

In order to create a constructive response, conflict resolution must address conflict's incredibly nuanced nature and the myriad of variables. Because of this, conflict resolution is transdisciplinary, interacting with many different fields (Galtung, 2010; Taylor & Lederach, 2014, p. 13). Among these contributing disciplines, psychology takes a particularly significant role. The psychological landscape of those involved in conflicts – including their emotions, perceptions, and identity – is integral to conflict dynamics (Maiese, 2006, p. 187). Conflict resolution strategies must acknowledge and address this aspect of conflict. This type of approach can reveal motives and foster a better understanding of why the groups involved have mobilized to conflict (Taylor & Lederach, 2014, p. 13). The field is very concerned with the individual level, even when conflict participants are large groups like civilizations. But the study of the group level and the structure of society is just as important (Galtung, 2010, p. 22).

There are several different kinds of conflict resolution. Examples are de-escalation, peacebuilding, and reconciliation. Within these, a common thread is the inclusion of a mediator. Individuals directly involved in a conflict can be biased, making it difficult to develop a rational and effective solution that works for all parties. A mediator can bring an unbiased and impartial point of view that opens up the space for a collaborative resolution (Galtung, 2010, p. 25). Post-conflict, it is important that the same dynamics that led to the conflict in the first place do not return. Without a mediator, it is more likely that this will occur (Cobb & Castel, 2016). Moreover, mediators bring a wealth of expertise and a diversified toolkit of knowledge and experience that can benefit the resolution process and guide conflict toward a transitional place (Taylor & Lederach, 2014, pp. 13–14).

De-escalation, one of the facets of conflict resolution, focuses on ending physical violence. De-escalation is not simple and often involves tactics like negotiation. Shifting perspectives from seeing the other as an enemy to seeing the other as a negotiating partner is a formidable challenge requiring a transformation of consciousness (Nan, 2011, p. 240).

Peacebuilding takes a different approach than de-escalation, pivoting from the reactive management of present conflict to proactive prevention of conflict renewal (Taylor & Lederach, 2014, p. 16). This approach focuses on system structure and ensures a system is healthy. Peacebuilding avoids systems that could develop into unbalanced power dynamics that create marginalization. Systems like this can lead to violent mobilization. The goal is to create a cooperative peace structure that unites participants and fosters healthy relationships (Taylor & Lederach, 2014, pp. 13–15). Peacebuilding focuses on human rights, needs, trust, justice, and interconnectedness (Cobb & Castel, 2016; Taylor & Lederach, 2014, p. 16). It often involves serious system change or the implementation of symbolic activities that can foster new understandings of group relations within a system (Maiese, 2006, p. 189).

Another incredibly important feature is reconciliation, a form of peacebuilding. Reconciliation concentrates on the delicate process of mending relationships between conflicting groups. Reconciliation acknowledges that even if the present system promotes equality, conflict can reemerge if the groups still deeply hate each other. It recognizes the power of emotion and perception. Even very complex and well-thought-out peace treaties are unlikely to last if those involved still harbor feelings of hatred, fear, or mistrust (Maiese, 2006, p. 188). A lasting solution hinges on cultivating empathy and acknowledging the humanity within the 'other' (Nan, 2011, p. 240). This aspect is particularly crucial in protracted conflicts with a history of trauma (Maeise, 2006, p. 194). Trauma healing is a necessary part of reconciliation (Galtung, 2010, p. 25). If conflict participants have yet to heal their trauma, building relationships with those who caused it

is nearly impossible. If trauma still exists in those who experienced the conflict, then the conflict is not yet resolved.

Ripeness Theory

Conflict resolution is by no means a straightforward endeavor. It encompasses a complex interplay of variables. One variable that greatly influences a resolution's success is the timing of intervention. Ripeness theory explains this, suggesting that the conditions in the conflict are more potent than any intervention strategy. If the resolution fails, a change in the conditions is more likely to help rather than a change in the strategy. Many conflict resolution academics suggest that ripeness theory is essential when navigating conflicts (Coleman et al., 2008, p. 5). Ripeness theory recognizes that conflicts evolve and have phases, and conflict intervention may be more effective during some phases than others. While the theory reveals little about why conflicts occur, it does demonstrate that transformative change relies on the conditions. It suggests that through working with transformation, interventionists can open an opportunity for negotiation or even resolution. It is more about opportunity than strategy. Mediators must remember that those involved in the conflict will likely have a better interpretation of ripeness than outsiders (Froude & Zanchelli, 2017). Ripeness theory offers a valuable suggestion emphasizing that timing can be crucial to success in conflict resolution.

Group Dynamics in Conflict

In conflict, adversarial parties often split along various lines of identity. These divisions could be political, cultural, ethnic, or economic. Those on one side of the conflict share a common identity. A group identity can be formed around various things, including a common language, religion, shared past, or mutual view of ideology (Galtung, 2010, p. 22). Commonalities like these contribute to the solidarity of a group (Lee et al., 2020, p. 65). When

identity is formed around a shared history or trauma, the potency of group formation can be especially strong (Lee et al., 2020, p. 69).

Social identity theory provides insight into self-categorization and its interaction with intergroup dynamics. As much as group affiliation influences the formation of one's identity, identity also influences group formation. As developed by Tajfel (1974), social identity theory discusses intergroup relations, including conflict and cooperation between groups. Individuals have a psychological attachment to their respective groups. It is not necessarily about how individuals operate within their group but also how the social group operates within the minds of the individuals involved with it.

This theory posits that group membership often leads to positive feelings of self-esteem. By identifying as a member of one group, individuals can distinguish themselves from those belonging to other groups (Bartles-Smith, 2022, p. 1737; Hogg, M. A., 2016, p. 8). This distinction creates space for clear differentiation and comparison (McKeown et al., 2016, p. xv). As provided by group membership, a shared social identity influences an individual's personal identity, behavior, and view of other groups' character and behavior (Hogg, 2016, p. 8). Differentiated views of the other can create polarization (Hogg, 2016, p. 11). This polarization can fuel the levels of individual self-esteem (Martiny & Rubin, 2016, p. 20).

Cultural divisions frequently serve as fault lines for group conflict. Cultural identity can be more potent than other group identities because it forms around a group's overall norms, beliefs, and behaviors. Cultural variety is immense, and there are vast differences between cultures (Galtung, 2010, p. 24). This cultural dimension intensifies intergroup conflict due to the psychological salience of beliefs, normative constructs, and ethical and moral perceptions. Morality stands out here as a motivator because concepts of right and wrong behavior are, at times, tied to religious beliefs. Psychologically, groups view their ingroup as morally just, and

such a belief can rationalize conflict with another group that is immoral in comparison (Bartles-Smith, 2022, p. 1737).

Another dynamic, in addition to shared language or shared beliefs, that can influence identity as well as intergroup conflict is a shared history. A group's understanding of the past greatly influences their current intergroup relations. Vamik Volkan (1997, 2001) explores this concept in depth and explains that groups often hold onto 'chosen traumas' or 'chosen glories' to understand their past. This emotionally infused interpretation of history relates to the group's present-day identity and perceptions of others. Volkan refers to this as 'chosen' because it refers to the shared mental perception of the past rather than the historical event itself. A history of conflict between two groups can be remembered and passed down generationally. The memory of this event exacerbates current divisions if it perpetuates feelings of resentment and animosity. This sentiment can escalate and influence a group's use of violence to demand retribution or even as a tool of revenge (Volkan, 1997). Revenge as a conflict motivator is also connected to morality, as it is a way of achieving justice or righting wrongs (Bartles-Smith, 2022, p. 1737).

In summation, groups form around commonalities, differentiating them from other groups. Groups become further stratified because of the psychological mechanisms that encourage discrimination of the other to bolster ingroup self-esteem. At times, the separation of groups is cultural, meaning there are different collective understandings of morals and norms. Each group's historical perspective can influence these dynamics.

Corruption

Intergroup relations, although prone to group comparison, do not always intensify and escalate to conflict. It is just one of the many factors involved in escalation. An additional factor is power dynamics, which differ from case to case. Power distribution can be inequal when multiple groups coexist within a state or region. Often, one group has more power and can exert

greater influence in their context. Such a power dynamic can give rise to corruption. *Corruption* is defined as the misuse of power for private gain, representing a deviation from moral behavior (Beyerle, 2011, p. 58; De Graaf, 2007, p. 43). Corruption is possible because no authority above the state monitors the use of power. There are several sources of corruption, such as psychological, ideological, economic, political, and cultural, in addition to others (De Graaf, 2007, p. 42). Several theories exist to explain the motivations behind corruption, as well as the many ways that corruption may manifest. One academic, Gjalt De Graaf, delves into several different theories on corruption.

Organizational Culture Theories

De Graaf (2007) discusses a grouping of theories called 'organizational culture theories.' These theories illuminate cases where corruption is caused by and affects organizational variables. These theories reveal that certain organizational structures and cultures are more likely to breed corruption than others. Organizational culture theories focus on organization-centric factors and ignore situational or personal aspects. The theories suggest that corruption follows a process where the organizational structure influences a mental state that subsequently leads to corrupt behavior (De Graaf, 2007, p. 51). While corruption may follow a change in one's mental state, this mentality is influenced by the organization's structure. These theories explain that corruption is system-driven rather than character-dependent. Therefore, a flawed system can lead to repetitive corruption, even as the actors involved change. Once an organization's culture becomes corrupt, individuals interacting with the system are more likely to become corrupt themselves (De Graaf, 2007, p. 52). Corruption, under these theories, can be viewed as contagious.

Public Choice Theory

Another theory explored by De Graaf (2007) is the public choice theory (pp. 46-47). This theory refers to cases where corruption stems from individual-level decision-making. The resulting corruption may appear at the micro or the macro level. This theory focuses on an individual's rational decision-making process and does not encompass previous factors that may have contributed. This theory reveals that corruption is a tool for empowered actors to achieve their self-interested goals. Studies based on public choice theory have revealed that corrupt individuals are typically male (De Graaf, 2007, p. 47). The research has also revealed that the incentive for corruption is not complex or rare. Corruption appears when involved actors determine that the anticipated advantages of their actions outweigh the potential costs. Corruption is more likely to occur when actors believe they will not get caught (De Graaf, 2007, pp. 46-47).

Clashing Moral Values Theories

Additionally, De Graaf (2007) explores how the moral values of a society may impact corruption. Societies, like cultures, carry certain values and understandings of right and wrong, which translate from the societal to the individual level. Theories on clashing moral values suggest that an official's conduct, while committed at the individual level, is ultimately influenced by societal values. Theories of this sort are interesting because many consider morality a positive thing. However, since it is relative, it can still influence corruption. An individual in power may use corruption to ensure their society's behavior reflects their cultural understanding of morality and ethics. Thus, corruption occurs when there are clashing moral values within a society, and the empowered group is motivated to protect their values, even if it requires the misuse of power (De Graaf, 2007, pp. 53-56).

Social Change

As previously discussed, corruption and power dynamics often lead those in power to prioritize their interests. The reality of this behavior is that the group not in power is left disadvantaged, having their interests ignored. In societies where the marginalized group's experience is especially painful, the resulting frustration can influence them to mobilize for change (Coleman et al., 2008). Intergroup conflict resulting from this mobilization is common, yet the specifics of each conflict can differ greatly. Conflict analysts explore social change in depth to better understand why it occurs and how it may influence the structure of a system. The study of social change focuses on power dynamics, processes of contestation, and the structure of systems (Galtung, 2010, p. 22). This section will explore different interpretations of the triggers of conflicts in which a group seeks societal change.

One scholar who explores this topic is Francis Stewart (2008). Stewart identifies horizontal inequality as the motivator for mobilization. Horizontal inequality arises when a group receives unequal treatment or does not have access to the same opportunities as another group within their society (Stewart, 2008, p. 12). Stewart focuses on culturally defined groups with clear and impermeable boundaries, preventing individuals from altering their societal position (Stewart, 2008, p. 7). Such circumstances intensify frustration about their position, compelling them to seek social change.

Sociologist Johan Galtung (1969) also explored this phenomenon and identified structural violence as a catalyst for social change. Structural violence, sometimes called indirect violence, is defined as violence that occurs not at the hand of a direct actor but rather from the system's structure (Galtung, 1969, p. 171). This form of violence appears as an unequal power and opportunity distribution (Galtung, 1969, p. 171). The well-being of the marginalized group is violated for the sake of the group in power. It often involves exploitation and discrimination.

Structural violence might result in a group's inability to access the adequate resources or the political representation necessary to enact structural change (Taylor & Lederach, 2014, p. 16). Due to their disadvantaged position and the inability to alter their circumstance, the marginalized group becomes increasingly frustrated. It is motivated to seek alternative ways to change the system. Galtung's work on structural violence parallels Stewart's work on horizontal inequality, adding another dimension suggesting that societal structures can contribute to inequality.

In addition to these interpretations, Ted Gurr (1970) in 'Why Men Rebel' explores another understanding of why oppressed groups mobilize for social change. Gurr discusses relative deprivation as the catalyst. Relative deprivation is the discrepancy between an individual's expectations and circumstances (Gurr, 1970, p. 24). Gurr focuses on individuals' mindsets and perceptions of their position. His work underscores the power of perception, explaining why some marginalized groups mobilize to rebellion while others do not. It emphasizes that mobilization is not solely driven by horizontal inequality or relative deprivation but rather by recognizing a marginalized position coupled with the group's desire for change.

These concepts shed light on motivations for social change. Once a group is motivated to mobilize, there are different approaches to achieving change. Of course, there is always the possibility that a group can mobilize to violent rebellion, civil war, or other hard power tactics. Such an approach can lead to devastation and may not lead to an effective solution. Physical conflict can traumatize entire cultural groups, resulting in a cycle of oppression and rebellion. There are alternate approaches to social change that do not use violence. For example, nonviolent peace movements can be equally effective in creating lasting societal change that fosters equality and healthy intergroup relationships (Bloch, 2016, p. 2). To prevent future conflicts, the focus of education on societal change should shift from rebellion to nonviolent approaches (Nan, 2011, p. 250). Even in instances with violent and powerful regimes, peaceful grassroots movements have

successfully achieved positive social change (Bloch, 2016, p. 2). The case examined in this paper involves a cultural conflict where the marginalized group had initiated protests, a form of nonviolent action, to achieve social change. Literature revealing the power of peace movements emphasizes that nonviolent action can threaten dominant cultural ideology.

Consciousness and Conflict

Consciousness can be understood, in its simplest sense, to mean 'awareness.' It encompasses an individual's interpretation of the world, involving both the abstract and concrete aspects. In more intricate terms, consciousness is one's perception, both sensory and emotional, as influenced by memories, desires, and previous knowledge or experiences (Nan, 2011, p. 240). Consciousness is self-aware and includes an understanding of these elements and beyond. It is intrinsically tied to conflict, as evidenced by its influence on mobilization (Gurr, 1970; Lee et al., 2020). When a group becomes conscious that they are oppressed, mobilization occurs. Consciousness is also deeply intertwined with conflict resolution. Conflict resolution requires a transitional space to make effective change, and a shift in consciousness allows for the transitional space to appear (Nan, 2011, p. 259). This section examines the connection between consciousness and conflict and its implications for conflict resolution.

Since consciousness refers to an individual's awareness and understanding, it is inherently subjective. Each person's experiences affect what they are conscious of – or not. When individuals lack certain knowledge or experience, their consciousness of a particular matter might be limited, a phenomenon known as cognitive blindness (Maiese, 2006, p. 188). Cognitive blindness can also result from emotion, distorting one's interpretation of reality. Sometimes, individuals are not entirely aware of the rationale behind their decision-making and are instead motivated by their subconscious (Galtung, 2010, p. 24; Maiese, 2006, pp. 187–189). Literature on this topic allows analysts to understand why conflict behavior may seem irrational.

In conflict and conflict resolution, it is crucial to acknowledge that both an individual's conscious and unconscious awareness are equally pertinent. At times, emotions overpower rational decision-making.

Morality, Law & Conflict

As previously explored in the discussion of group dynamics in conflict, cultural understandings of right and wrong greatly influence group dynamics and conflict. The distinction between right and wrong is morality. Morality is subjective, and different cultures may have different interpretations of what is moral behavior and what is immoral. Given its abstract and philosophical nature, this topic has long captivated the attention of political, legal, and social philosophers (Calavita, 2010; Cane, 2012). Law is a mechanism through which societies enforce their moral values (Calavita, 2010, p. 13). Laws are representative of morality (Lukes & Prabhat, 2012). The two concepts frequently intertwine and can sometimes be indistinguishable (Cane, 2012, p. 59).

One renowned theorist, known for his work exploring the connection between morality and law, is Émile Durkheim. His work discusses collective consciousness and culture, recognizing each culture is unique. Cultural differences are often points of contention, particularly when contrasting views of morality emerge. Group membership involves solidarity in moral values, which is the group's collective conscience (Calavita, 2010, p. 13). Durkheim theorized that a culture's legal systems were influenced by this, especially the understanding of the relationship between law and punishment (Calavita, 2010, p. 13). When a group has a shared understanding of right and wrong, their legal system encourages their interpretation of moral behavior. Through this interpretation, legal punishment is a mechanic to deter immoral behavior (Calavita, 2010, 13).

Another theorist who was concerned with this dynamic was the legal philosopher H.L.A. Hart. His works investigated the intersection of morality and law and explored potential areas where the two differ (Cane, 2012). Hart explains that both law and morality are related to reasoning (Cane, 2012, p. 60). While moral behavior contrasts with immoral behavior, legal behavior contrasts with illegal behavior (Cane, 2012, p. 60). While closely linked and overlapping in many ways, the two are not the same in every case. Sometimes, what is deemed moral may be illegal, or vice versa. Hart also links law and morality to culture, illustrating that in certain societies, for example, pre-legal societies, there is no major distinction between morality and customs. In these cases, social norms determine right from wrong behavior (Cane, 2012, p. 63).

This literature is very revealing for conflicts that occur between cultural groups. The differences between the groups that cause an escalation to conflict may not only be issues of inequality or lack of opportunity. Groups might find themselves in conflict because they have an incompatible understanding of what is right and wrong.

In addition to intergroup conflicts, moral conflicts can occur at the intrapersonal level. Such conflicts emerge when individuals are confronted with feelings of guilt. When individuals act in a way that does not fit their understanding of moral behavior, their sense of self-worth can be negatively affected. At times, individuals may act in ways that are necessary at the moment, but in doing so, they trigger an internal struggle with their moral beliefs. This internal con conflict is a result of moral injury (Levi-Belz et al., 2023).

Empathy

Conflict involves an interaction between two actors, whether at the individual or macro level. This interaction inherently involves the perception and understanding of the other party. Humans naturally perceive others when they interact. For instance, when a stranger passes

another on the street, they perceive each other, and basic assumptions about age, gender, ethnic background, and status are made. This perception of the other is empathy. Empathy, as a concept, is and others (Bubandt & Willerslev, 2015, p. 10). It is believed to be the link between oneself and the other (Nan, 2011, p. 246). Empathy is essentially 'perspective-taking' (Bubandt & Willerslev, 2015, p. 8). Although intangible, it is known to interact with one particular region of the human brain, the amygdala (Hicks, 2018).

Empathy connects the individual to the world, and it is the foundation of humankind's inclination to form groups and societies (Bubandt & Willerslev, 2015, p. 9). A lack of empathy damages an individual's connection to the world (Hicks, 2018). However, empathy is not to be confused with sympathy, as it often is. Many understand empathy to have positive and altruistic qualities. Empathy can be such, but it can also be merciless (Taylor & Lederach, 2014, p. 17). Empathy, simply defined as being one's perception of others, can include the recognition of another as evil, worthless, or other negative attributes. In conflict situations, especially within intergroup cultural conflicts, the differences between groups are emphasized. Empathy can even be weaponized in conflict and add to a group's strategy. If a group is capable of empathizing with another group, it can effectively calibrate its actions (Bubandt & Willerslev, 2015, p. 5). Empathy can be employed as a manipulation tactic. This reality is complicated further by moral relativism and differences between cultural understandings of right and wrong.

Just as empathy is not inherently good, it is not inherently evil either. It can effectively instigate positive change. Working with empathy is very important to conflict resolution. To ensure that a conflict will not resurface, the conflicting groups need to change their perspective of the other. If a group continues to perceive the other as an enemy, the conflict will likely reemerge. Focusing on empathy is pivotal for this change. Conflict resolution works to humanize

the 'inhuman' other (Nan, 2011, p. 240). Empathy is a tool, and like most tools, its applications can vary widely.

Trauma and Conflict

Conflict is not devoid of violence. War, in particular, can devastate entire civilizations in the most barbaric and brutal ways. War is not forgiving, and in a world that experiences conflict at high rates, no individual is immune to its unapologetic impact. This is often traumatic. Trauma is intertwined with both conflict and conflict resolution. Trauma can be a cause and an effect of conflict, and conflict resolution needs to consider the role of trauma to a great extent.

The term 'trauma' comes from the Greek word for 'wound'. It essentially denotes a wound of the mind (Lee et al., 2020, p. 67). Trauma can result from violence, shock, or a sustained painful experience, like marginalization or structural violence (Lee et al., 2020, pp. 67-68). More specifically, it results from potentially harmful experiences that create feelings of fear and helplessness (Kolassa & Elbert, 2007, p. 321). Like empathy, it is an intangible concept, yet it results from the physical release of stress hormones within the brain (Kolassa & Elbert, 2007, p. 321). It manifests itself within an individual's consciousness and impacts their awareness and perception of the world. Although trauma exists within the mind of the individual, it can be shared by an entire group, creating a collective trauma.

Even when a conflict has concluded, the trauma inflicted by the conflict can persist in the minds of those involved. This reality raises a pivotal question for conflict resolution practitioners: *Can a conflict genuinely be considered resolved if the trauma it caused persists even after a peace treaty has been signed*?

Traumatic events are stored in an individual's memory and are often accompanied by intense emotions. The body naturally responds to traumatic events with stress. While this is an effective protective mechanism, it can lead to chronic stress as well as structural changes to the

brain (Kolassa & Elbert, 2007, p. 322). The long-term effects of trauma can lead to PTSD. This disorder frequently emerges in the aftermath of an extremely traumatic incident (Muldoon et al., 2016, p. 9). It can also be precipitated by long-term exposure to a stressful environment, such as oppression or marginalization. Additionally, it can also be influenced by guilt, which causes an individual to grapple with stress over moral conflict or a moral injury.

    The human brain is an intricate system deeply influenced by its past chemical experiences. The brain's capacity to form neural networks is referred to as neuroplasticity. In the wake of a traumatic event, neuroplasticity is affected by the brain's chemical reaction, creating networks of stress (McEwen, 2013, p. 675). Neuroscientific research on PTSD has revealed that brains subjected to an intense or chronic stress response have an enlarged fear network (Kolassa & Elbert, 2007, p. 321). Additionally, the brain systems responsible for learning and memory are affected. These areas include the amygdala, hippocampus, and the medial prefrontal cortex (mPFC) (Kolassa & Elbert, 2007, p. 322; McEwen, 2013, p. 675). The amygdala triggers the fear response, while the hippocampus serves as the brain's memory center. The mPFC regulates brain functions and signals to the amygdala to stop fear responses once the threat has been determined to no longer exist. In cases of PTSD, the amygdala becomes more likely to initiate a fear response, thereby influencing the hippocampus. This process causes those with PTSD to struggle with memory issues. PTSD also interferes with the mPFC's ability to halt the fear response, meaning that when those with PTSD feel afraid, it is harder to calm down, even if the individual is now aware that the threat is gone (Kolassa & Elbert, 2007, p. 322; McEwen, 2013, p. 673).

    Individuals afflicted by PTSD experience ongoing intrusive memories, including nightmares. Often, these individuals remain in a chronic state of alarm (Kolassa & Elbert, 2007, p. 321). Unfortunately, such symptoms exacerbate the fear that fuels the development of PTSD,

making the disorder especially difficult to treat or improve. Severe cases of PTSD can result in depression, suicidal ideation, and increased suicide risk.

Interpersonal-Psychological Theory of Suicide

The causes of suicidal ideation and the escalation to self-inflicted are explained in the Interpersonal-Psychological Theory of Suicide (IPTS) (Monteith et al., 2013). This theory identifies feelings of burdensomeness and thwarted interconnectedness as two of the primary causes of suicidal ideation (Monteith et al., 2013, p. 418). Research reveals that an individual's suicide risk increases when they have a lack of social support frameworks (Levi-Belz et al., 2023, p. 204). Individuals who are well connected to others are less likely to consider suicide, even when faced with intense stress or mental illness.

Suicidal ideation does not necessarily escalate to suicide. However, in certain cases, it does. The IPTS proposes that habituation to violence and access to means elevate the likelihood that one's suicidal ideation will escalate (Monteith et al., 2013, pp. 418-419). These factors increase the individual's propensity for self-directed violence. Exposure to previous violence can result in desensitization to pain and death, thus diminishing the perceived extremity of the decision to commit suicide. This phenomenon is known as 'acquired capability for suicide.' When an individual has this, it increases the lethality of their self-directed violence (Monteith et al., 2013, pp. 418-419). Suicide is a tragic phenomenon that still requires extensive exploration.

Military Service, Morality, and Mental Health

While suicide could affect any individual, certain demographics experience higher rates of PTSD and suicide. One of these demographics is comprised of veterans and active-duty military personnel in the United States. This population commits suicide at a significantly higher rate than the general public in the United States.

For example, veterans represent 14.3% of suicide deaths while only making up 8.3% of the U.S. population (Levi-Belz et al., 2023, p. 198). This phenomenon has steadily gotten worse over the past few decades. Between 2001 and 2018, annual rates of veteran suicide increased, on average, by 47 deaths a year (U.S. Department of Veterans Affairs, 2022, p. 6). Rates today are nearly double what they were in 2005 (Levi-Belz et al., 2023, p. 198). Military suicide peaked in 2018 in both its veteran and active-duty populations (U.S. Department of Veterans Affairs, 2022, p. 5). During 2018, an estimated 20 service members committed suicide each day (*Military and Veteran Suicide*, 2019, p. 1). These statistics emphasize the need for a solution, which requires a deeper understanding of the causes.

Various theories attempt to explain why suicide is more prevalent in the military population than in other demographics. Military service may serve as a casual pathway for suicide. Interestingly, the rates of mental health issues and suicide exist throughout the military, in both those who have been deployed and those who have yet to see combat (Levi-Belz et al., 2023). This suggests that military training may have negative psychological impacts in addition to combat.

Combat

There are certain factors of combat that can increase suicidal ideation. One of these factors is trauma. Simply, military experience puts individuals in traumatic situations, which are unavoidable in combat. Combat may also be a potentially morally injurious event (PMIE) (Crandall, 2020, p. 373; Levi-Belz et al., 2023, pp. 198–199). Moral injury can be defined as the shame caused by guilt-based disturbances that result from witnessing, perpetrating, or failing to prevent an event that violates the individual's moral code or values (Bartles-Smith, 2022, p. 1727; Levi-Belz et al., 2023, p. 198). The effects of a PMIE may not manifest until a soldier has returned home from combat. The moral code of combat differs from that of American society.

Actions that are justified in combat would be immoral in other contexts (Bartles-Smith, 2022, p. 1738). A veteran's ability to rationalize their behavior as ethical becomes harder when removed from the combat situation, resulting in moral injury. Moral injury is associated with negative psychological effects, including PTSD, suicidal ideation, and suicidal behavior (Bartles-Smith, 2022, p. 1727; Levi-Belz et al., 2023, p. 198-199, 202). The likelihood of experiencing trauma or a PMIE increases the longer an individual is in combat, and rates of PTSD and suicide are higher in individuals who served two deployments when compared with those with only one (Lineberry & O'Connor, 2012, p. 874).

Training

It is important to consider both military training and combat experience as influences of the increased military suicide rates. A study found that 15.7% of the individuals deployed in Iraq and Afghanistan were diagnosed with PTSD compared to a rate of 10.9% of non-deployed military personnel (Dursa et al., 2014).

One reason that PTSD is present in some military personnel that had not been deployed may be that military training can lead to habituation to violence and a decrease in empathy, both of which have implications beyond combat situations. This is involved in training because soldiers need to be prepared to kill without hesitation since any reluctance to fire at the enemy could result in American casualties. In military training, an individual's natural predispositions not to kill are eliminated. This process may involve dehumanization and the removal of empathy (Bartles-Smith, 2022, p. 1755). Such training is dangerous and does not necessarily protect individuals who do go to combat. Evidence indicates that soldiers who devalue the dignity of their combat opponents experience more profound psychological damage (French, 2017, p. 11).

While training aims to prepare individuals for combat, such preparation can also result in higher rates of aggression and impulsivity, which are known risk factors for suicide (Lineberry &

O'Connor, 2012, pp. 873–874). Soldiers are not just tools of war; they are unique and complex individuals with inner worlds, feelings, families, and aspirations outside of the military (French, 2017, p. 10). When training involves the abandonment of their humanity, their life may be squandered regardless of if they return home from combat.

Psychedelics

This section introduces the historical and recent developments in scientific research on psychedelics and psychedelic-assisted psychotherapy. While a more detailed exploration of this topic will be presented in Chapter five, it is essential to establish a foundational understanding of psychedelics, their connection to psychiatry, and their potential relevance to psychology.

The term 'psychedelic' references a class of hallucinogenic substances that profoundly affect the mind. These substances are known to alter conscious awareness, potentially expanding an individual's perception by allowing them to experience the world without the usual cognitive filters. They create a dream-like state in which even the simplest things can be awe-inspiring (Doblin, 2001, p. 1). The word psychedelic means 'mind manifesting' and was created by psychiatric researcher, Dr. Humphry Osmond, in 1956 (Doblin, 2001, p. 1). This term encapsulates the substances' effects on the mind. Psychedelics can influence perception, emotions, and cognitive abilities for a short period of time, expanding the user's awareness beyond the standard level of consciousness and into a space that was previously subconscious to them (Doblin, 2001, p. 1). Most special is their ability to dissolve one's ego or sense of self. (Kalensky, 2022) In addition to 'psychedelic', this category of drugs is sometimes referred to as 'hallucinogens' or 'entheogens.' While some of these substances can cause hallucinations, not all drugs in this category do, especially at certain doses. For this reason, the term 'hallucinogens' is not the most fitting. However, the term 'psychedelic' carries with it a history of stigmatization

and baggage (Pollan, 2018, p. 18). For this reason, some researchers chose to refer to this category of substances with a less stigmatized name.

As mentioned in Chapter One, some drugs within this category are LSD, psilocybin[4], mescaline[5], ibogaine, DMT, and MDMA. Psychedelics are believed to elicit their mind-altering reaction at the chemical level. They are psychoplastogens, which are compounds that enhance neuroplasticity by altering the levels of brain chemistry (Kalensky, 2022). Neuroplasticity, previously discussed, refers to the brain's ability to form new networks in response to experiences or significant events.

In the United States, psychedelics are classified as schedule I substances, defined by the Drug Enforcement Administration (DEA) as drugs, substances, and chemicals with "no currently accepted medical use in treatment in the United States" and "has a high potential for abuse" (Controlled Substances Act, 1970, p. 1247). Substances classified in this area are considered to be dangerous and unsafe under medical supervision (Controlled Substances Act, 1970, p. 1247). The later research chapter will delve into the historical legal trajectory of these substances, their placement on schedule I, and any subsequent legal changes.

In the last two decades, there has been a sudden increase in scientific research on these substances. Much of this research has been involved with the psychological effects and potential medical uses of psychedelics and psychedelic-assisted psychotherapy. Researchers have investigated the effects of psychedelics on brain chemistry. There has also been an interest in the benefit that comes from the experiential level rather than pharmacological. Despite their scheduling classifying them as having no medical use and being addictive, research has shown that these substances are remarkably safe and non-addictive. (Pollan, 2018, p. 14) Research has

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[4] Psilocybin is the active ingredient in magic mushrooms.
[5] Mescaline is the active ingredient in peyote cactus.

found that it is incredibly difficult to overdose on these substances, and some of the substances, like LSD and psilocybin, have no potential of causing a fatal overdose (Crandall, 2020, p. 377; Pollan, 2018, p. 14). This does not mean that they are always safe for everyone or should be used recreationally. They can be dangerous for many reasons in uncontrolled environments, but within a controlled medical setting, psychedelics have been shown to have no major adverse effects lasting more than 24 hours (Mithoefer et al., 2018, pp. 87–88, 146; Pollan, 2018, p. 14). One reason for this safety measure is that medical research with psychedelics involves subject screenings, excluding individuals who have – or have a family history of – schizophrenia and other conditions that may be exacerbated by the psychedelic experience (Kalensky, 2022).

When a subject is given a psychedelic, there is a chemical release of serotonin, dopamine, and norepinephrine (Crandall, 2020, p. 375). This has been found to lead to pleasant changes in mood and perception (Kalensky, 2022). Psychedelics improve an individual's attitude toward life (Crandall, 2020, p. 375). The positive effects of psychedelics on mood and life satisfaction are still detected by researchers even 12 months after their initial treatment (Mithoefer et al., 2018, pp. 15–17, 83). The effects are thought to be lasting because of changes in the neuroplasticity (Pollan, 2018, p. 11).

Additionally, psychedelics are associated with increased open-mindedness. The experience with psychedelics challenges the dominance of ego-driven thinking and habitual thought patterns (Crandall, 2020, p. 373). It is not the pharmacological effects of these drugs alone that improve the patient's condition, but rather the 'trip' itself. This drug-induced high can be as influential as any other lived experience. Just as a single event can leave an individual traumatized, a single psychedelic experience can leave long-term positive effects (Pollan, 2018, p. 11).

Some scholars suggest that psychedelics might have effects beyond the individual, extending to society, politics, and culture (Pollan, 2018). Many of those who have used psychedelics are left with the sense that the substances could have a positive effect on the world at large (Crandall, 2020, p. 374). Psychedelics enable individuals to perceive the world without the filter of preconceived notions, including social constructs. This fresh perspective can foster empathy and remove stigmas, potentially catalyzing positive societal change. If this research is accurate, it could have an incredible impact on those involved in reconciliation and peacebuilding in conflict resolution.

Conclusion

In conclusion, the following chapters will build upon the foundation set forth in this chapter. The comprehensive theoretical framework established will assist the research alongside the selected method of process tracing. Conflicts are complex and often involve intricate power dynamics and concepts of justice. Effective conflict resolution requires creative approaches to understanding and resolving conflict at both the individual and group levels. The insights formed from the analysis of this literature contribute to a richer understanding of its psychological dimensions, including emotion, empathy, morality, and mental health. Treating trauma is a necessary step in successful and sustainable conflict resolution. Scientific research in recent years has explored the influence of psychedelics in trauma healing. This research may be influential for conflict resolution and reconciliation. The examination of this literature sets the stage for a comprehensive exploration of the interplay between conflict, corruption, trauma, and potential healing mechanisms.

Chapter 3 – Methodology and Research Design

Introduction

This chapter will explain the research methodology used to investigate the chosen case and its transitional dynamics. The research seeks to understand how shifts in cultural ideology have shaped psychedelic drug policy over time. The chosen method of research is process tracing. The research will draw on a comprehensive theoretical framework that considers concepts such as dominant ideology, structural violence, and corruption. The method of process tracing will yield theoretically grounded connections between these concepts in the case.

To substantiate claims of causal relationships, the trajectory that links points X and Y will need to adhere to a coherent theoretical process. This chapter will examine different theories and perspectives, including micro and macro levels, as well as individual and group dynamics. This exploration is geared toward identifying the causes of the process at play.

Case Selection

Before diving into the rationale for employing process tracing as the chosen method, it is important to explain the selection of the case under study. I have been interested in this topic since I first became aware on the recent developments in scientific and medical research of psychedelics. The complex dynamic between an illicit substance and its potential therapeutic applications immediately captured my attention, as well as the effectiveness that these research endeavors were revealing. As I learned more about the benefits of psychotherapy utilizing substances like LSD, MDMA, and psilocybin, I was left with a glaring question. *Why are these drugs illegal in the first place?*

Once I became aware that psychedelics were curing veterans of their PTSD, this journey of discovery was catalyzed. Since then, I have been interested in looking into this case in more detail. If there was a time when these drugs weren't illegal, what led to their criminalization?

And if these drugs are listed as schedule I controlled substances, what has led to the resurgence of their research? These very questions led to this case selection and ultimately led me to the method of process tracing.

The framing of the research, including the temporal scope and key actors, was not chosen at random; rather, it was dictated by the case itself. The Vietnam War and the concurrent antiwar countercultural movement have been interwoven with this subject since its inception. The United States government's war on drugs had a new target every decade. In the 1960s, it focused on psychedelics (Larson, 2011, p. 77). Thus, the analysis of this case begins with the historical events of the Vietnam War – a conflict that had incredible influence over domestic American culture. The research will concentrate on the actions of presidential administrations, mainly Nixon's because drug policy was chiefly overseen by the White House (Walther, 2012, p. 7). The other key actors are psychedelic researchers and veterans.

The primary objective of this study is to determine if the sociocultural currents of this period interacted with the formation of psychedelic drug policy. Subsequently, this analysis will follow these policies through time and will seek to identify the causal factors that motivated changes to the legal status or research of psychedelics. This research aims to contribute to a deeper understanding of the nexus between drug policy and political ideology as a humble contribution to the field of conflict resolution.

Method – Process Tracing

The methodology that aligns most effectively with this research question is process tracing. Put simply, process tracing involves the systematic tracing of causal mechanisms that link a cause, or a set of causes, with its effects (Beach, 2016, p. 1). This approach includes the identification and analysis of each step in the causal process, as well as the interconnectedness of the steps (Beach, 2016, p. 1). It facilitates a comprehensive examination of the case as a system

(Beach, 2016, p. 3). Within this case, there are various actors that influence outcomes. Process tracing allows the research to focus on the underlying mechanisms of influence rather than simply a chronology of the events.

As described by Derek Beach (2016), process tracing is more intricate than the straightforward relationship between X and Y. Instead, there is a more intricate sequence, X -> [A -> B -> C-> D] -> Y. In this schematic, the X represents the cause, and Y represents the outcome. The intermediate letters – A, B, and C – represent actors. And the '->' signifies the action taken. This representation underscores the integral role of each actor and action in the overall mechanism. Altering or omitting a single variable would disrupt the process. For this method to be effective, each part of the mechanism will need to be matched with predicted and found evidence.

Research Design & Theoretical Process

Design

The research methodology will be designed around the schematic: X -> [A -> B -> C -> D] -> Y; represented in the chart below. It provides an overview of the process that the research seeks to unravel. The research chapter will include a more comprehensive version of this chart.

(X) Cause: Antiwar Counterculture Movement threatens Nixon Administration	
(A) Actor: Nixon Administration	(->) Action: Passes Controlled Substances Act
(B) Actor: Presidential Administrations	(->) Action: Continue to use drug policy as a political tool
(C) Actor: Dr. Carl Peck	(->) Action: Establishes the Pilot Drug Evaluation Staff
(D) Actor: U.S. Government	(->) Action: Increases funding and FDA approval rates for psychedelic research
(Y) Effect: The first Phase III clinical trial for psychedelic-assisted psychotherapy is completed, substantiating the evidence of the medical benefits.	

Theoretical Process

Process tracing methodology requires a theoretical path (Beach, 2016, p. 2). The theories underlying the case will be examined to reveal the mechanisms and their component parts. This examination will focus on specific actions that interlink various steps within a causal mechanism. The objective is to construct strong inferences on the events that link causes to their corresponding outcomes (Beach, 2016, p. 2). The theories will provide the 'causal logic.' An extensive review of the existing literature has revealed the following theories as references for shaping the mechanism for this research. These theories will be analyzed to formulate verifiable expectations that can be explored through process tracing.

Realistic Conflict Theory. Realistic Conflict Theory simply explains that conflicts emerge when two groups possess opposing and mutually exclusive goals (Hogg, 2016, p. 5). Groups devise strategies to reach their goals, and these shape their behavior. If another group is impeding the other's aspirations, there will be conflict. This theory guides the research to focus on actors' goals, with special attention paid to when these goals contradict.

Social Identity Theory. Social Identity Theory, as explained by Henri Tajfel and John Turner (2004), bridges the gap between individual psychological attachment to identity and group membership. This involves a comparison of the ingroup to the outgroup. To increase self-esteem, group members have an interest in their group being 'positively distinctive' (Hogg, 2016, p. 7). To achieve this, a group will emphasize the contrast between groups and even discriminate against those in the outgroup. The theory explains the psychological pattern behind increased social competition and polarization (Martiny & Rubin, 2016, p. 20). This theory suggests that the case may follow a pattern of polarization between the two non-like-minded groups.

Social Change Theory. Social Change Theory discusses the interplay between intergroup relations and social transformation. Intergroup dynamics may be a barrier to social

change or a catalyst. The permeability of group boundaries plays a pivotal role in conflict. This theory explains that when group membership is clearly defined and well-constructed, it is difficult for individuals to change their status. When permeability is low, groups mobilize toward social change (Hogg, 2016, p. 7). Mobilization due to group dynamics is a well-explored topic within the field of conflict resolution. This theory will direct the research toward group dynamics and inform the understanding of the causal mechanisms during points of mobilization in the case.

Law and Morality – Durkheim. Literature on the relationship between law and morality is relevant to the case, for the pattern is, in part, tracing drug policy and the rationale behind such legislation. This topic was explored in depth by sociologist Émile Durkheim. This literature emphasizes that laws, in many ways, are a government's way of enforcing morality (Calavita, 2010, p. 13; Lukes & Prabhat, 2012). This literature will paint a picture of how morality, while relative, influences law-making. This will aid in supporting the basis behind the research's reflections on morality and the instrumental use of policy in this case.

Corruption Theories. This paper looks at the different ways that corruption manifests. This literature will shed light on the causal mechanisms behind certain actors. As previously explained in the literature review, corruption is a complex reality that can be caused by many different things (De Graaf, 2007). Overall, corruption is the misuse of power for private gain (Beyerle, 2011, p. 58). The literature on corruption will explain the actions and inactions of the actors involved in this case.

Interpersonal-Psychological Theory of Suicide (IPTS). The research will also include a discussion of suicide and some of the factors that may lead someone to suicidal ideation or suicide attempts. This will add to the process tracing mechanism by linking certain actions to the severe increase in veteran suicide. The IPTS discusses how feelings like burdensomeness and lack of interconnectedness can lead to suicidal ideation (Monteith et al., 2013, p. 418). IPTS

recognizes how increased access to firearms and habituation to violence may increase the

lethality of self-directed harm or suicide attempts (Monteith et al., 2013, pp. 418–419). This

theory directs the research towards data on the habituation of violence that occurs in military

training and combat service, as well as the literature on interconnectedness, which can also be

thought of as empathy.

Application of the Theories

The application of these theories steers the trajectory of this research. These theories aid

in structuring the causal mechanisms in this case and ensure cohesiveness. By directing the focus

and scope of the research, these theories lay the foundation for the process tracing method to be

utilized in this study.

Data Collection

The research study will examine both primary and secondary data sources, which will

include a wide array of reports and literature concerning the subject matter. The variables under

examination will be explored using the following data types.

- Literature on U.S. Military Activity, particularly in Vietnam
- Literature on the anti-Vietnam War movement
- Evidence of policy shifts concerning psychedelics – federal acts
- Corruption indicators – quotes from presidential administrations, media reports
- Statistics on veteran suicide
- Scientific findings on the effects of psychedelics - medical research
- Rates of FDA approval of psychedelic research
- Scholarly Literature.

The examination of this data will allow for a comprehensive exploration of the mechanisms

at play within this case.

Limitations

The possible limitations involved in this methodology should be discussed. The method

used involved sound data collection and theoretical analysis; however, the multifaceted nature of

this particular case leaves room for various challenges. There are not only many different

variables, such as actors and mechanisms but also an extensive temporal scope spanning several decades.

Process tracing requires that the researcher makes several choices, including the selection of variables to analyze. In this study, the selection of variables involved careful consideration and was directed by the prominent actions in the case itself, but it's possible that a different researcher could have selected or emphasized different variables. The researcher also forms their own interpretation of a conclusive theoretical framework. A different theoretical framework could have been applied, which would draw attention to different variables and actions. It is important to note that process tracing combines the empirical with the theoretical.

Process tracing, as a method, intends to unearth genuine causal mechanisms. But there is a vast array of ways it can be interpreted. It is difficult to exhaust the exploration of every possible causal mechanism involved in a case. Every effort was made to make the most comprehensive insights into this case and research question, but constraints such as time and word limit set bounds to the research venture. Having a set due date, the research was pursued within a predetermined timeframe. The effort was made to do as much as possible given this time constraint, but this does not change the fact that an undefined amount of time to complete the research would have undoubtedly allowed for a deeper and more extensive discussion of the topic.

In addition to this, another potential limitation of this paper pertains to researcher bias. While efforts were made to mitigate bias, the long-had interest in the subject matter, even subconsciously, may have affected the research. The research and findings remain insulated from bias, yet it is necessary to acknowledge the potential presence of this factor.

In summation, this paper remains mindful of the potential limitations within both the method of process tracing as well as in the completion of the paper itself. The complicated nature

of the chosen case, as well as time constraints and potential bias that is inherent to being human, need to be considered. These limitations were avoided as much as possible, but they also reveal the dynamic and complicated nature of the case, which emphasizes the importance of this study.

Conclusion

The research conducted in the next chapter will exhibit the method of process tracing as explained in this chapter. This methodology will root in comprehensive theoretical frameworks and trace the connections between the initial cause and the eventual outcome. The influence of theory will substantiate the inferences being made. It intends to provide a deeper understanding of the interplay between drug policy and cultural ideology.

Chapter 4 – History

Introduction

Before commencing the research, it is essential to understand the historical context of the topics under examination. This chapter serves as a comprehensive yet brief overview of such history. First, it will explore the implementation of federal drug laws in the United States. This examines all drug-related laws, even legislation that does not directly concern psychedelic substances. Examining this legislation will reveal the United States' standard motivations and use of drug policy, allowing the differences that appear in psychedelic legislation to stand out. This chapter will also include a history of psychedelic research. This chapter discusses the motivations and events of the Vietnam War, as well as the corresponding antiwar movement. This information will prepare the reader for the topic discussed in the next chapter.

Early U.S. Drug Legislation

Historical Use of Psychedelics

Psychedelics have an extensive history and have been used for many millennia.[6] The positive effects of psychedelics were recognized even in prehistory, with evidence that these substances were used for spiritual and healing purposes (Doblin, 2001, pp. 2, 10). The traditional use of psychedelics fostered intergenerational peace and, at times, was a tool for conflict resolution (Ginsberg, 2019, p. 41). Such applications remain today (Pollan, 2018, p. 2).

Psychedelic substances were legal throughout much of United States history until the infamous war on drugs, which began in the 1970s (Walther, 2012, p. 1). There was a time when the United States had no drug-related legislation, but this changed in the early 20th century.

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[6] There is evidence of ancient use of psychedelics in the Americas, Eurasia, Australia, and Africa. Such widespread prevalence reveals that the use of these substances is a species norm. (George et al., 2022, p. 891)

Emergence of Federal Drug Laws

The first drug laws focused on ingredients in medicine that were potentially harmful or addictive, including narcotics. The Pure Food and Drugs Act of 1906 put in place a mandate for labeling requirements for dangerous ingredients (Doblin, 2001, p. 12). At this time, prescriptions were not required to obtain drugs. This included opium, cocaine, narcotics, and cannabis. The Pure Food and Drugs Act aimed to make consumers aware of possible dangers in certain medicines they may be purchasing. Prescriptions were not required until the Harrison Narcotic Act of 1914 (Doblin, 2001, p. 15). Even still, the act did not set any guidelines on what indication a substance could be prescribed for, but simply that certain substances required a prescription. This act set the groundwork for future narcotic regulations (Larson, 2011, p. 81; Walther, 2012, p. 1). Legislators had intended for this act, and the new prescription requirement would decrease the rate of narcotic use. Unfortunately, a congressional study revealed an increase in narcotic use within the three years following the Harrison Narcotic Act going into effect (Walther, 2012, p. 1). This early legislation made no mention of psychedelics, yet they are significant, as they are the first federal drug laws in American history (Larson, 2011, p. 81).

Taxation and the Marijuana Tax Act

The first two acts focused on protecting the American people from dangerous and addictive substances. The next drug act, the Marijuana Tax Act of 1937, took a different approach and implemented taxation on non-medical drug use. This meant that the U.S. government would profit from non-medical marijuana use. The act imposed higher taxes on cannabis purchased without a prescription. While medical cannabis was taxed at one dollar per ounce, non-medical cannabis was taxed at one hundred dollars per ounce (Doblin, 2001, pp. 15-16). This act did not legally limit the non-medical use of cannabis, which, at the time, was not a major public health concern.

Safety Concerns and Regulatory Enhancements

During the same year, the federal government became increasingly concerned about the safety of medicine and their ingredients. This was due to a tragedy involving over 100 deaths, mostly children, caused by an ingredient in a sore throat medicine (Doblin, 2001, p. 16). This event prompted amendments to the Food and Drugs Act of 1906. Soon after, Congress passed the Federal Food, Drug, and Cosmetic Act of 1938. This act introduced inspections and new regulations for drug manufacturers, including the requirement for new drugs to receive approval before marketing (Doblin, 2001, pp. 16-17). Notably, this act marked the first instance of federal regulation for a psychedelic substance – mescaline. Products containing mescaline now required a label that warned the consumer that it may be a habit-forming substance. The act did not restrict the sale of peyote or mescaline in any way (Doblin, 2001, p. 18).

Cannabis Criminalization and Perception Shift

The restriction on cannabis came a few years later. In 1941, prescriptions for cannabis were prohibited. This occurred after the use of cannabis for medical reasons was delegitimized. Both non-medical and medical use were criminalized (Doblin, 2001, p. 19). Consequently, cannabis use became increasingly stigmatized, and within a few years, it was regarded as a menace to society (Doblin, 2001, p. 19). This event is an example of how a drug's legal status can influence public perception of it.

Uncharted Territories

While these first congressional acts were being passed, psychedelics had yet to be researched, and their use had not yet become widespread. Due to this, the early drug laws did not include psychedelic substances apart from mescaline. Because of this, the drugs were legal and could be researched in depth. The next section will examine early psychedelic research.

Early History of Psychedelic Research

Scientific Interest in Psychedelics in the Late 19th Century

While psychedelics had been used for thousands of years, the scientific exploration of them as potential medicines emerged in the late 19th century. The first research projects involving psychedelics were performed by psychologists around 1874. (Doblin, 2001, p. 9) These psychologists explored the relationships between the psychoactive properties of psychedelics, consciousness, and philosophy (Doblin, 2001, p. 11). At this time, there were no regulations on psychedelic research in the United States or internationally (Doblin, 2001, p. 10). Researchers were not required to seek prior approval or permits to possess or administer psychedelic drugs (Doblin, 2001, p. 6).

Discovery of LSD

A large increase in research occurred after the accidental discovery of LSD in 1938. LSD, widely known as 'acid,' was discovered in Switzerland by Dr. Albert Hofmann, who was attempting to find a respiratory stimulant (Doblin, 2001, p. 19; Pollan, 2018, pp. 1-2). In his search, he synthesized LSD and, soon after, discovered that it was a psychoactive substance. Hofmann explored the substance further and hypothesized that it had potential benefits for training psychologists and psychiatrists. He believed it would grant them a new way of understanding the mind (Doblin, 2001, p. 21; Lee & Shlain, pp. 5, 20). The discovery of LSD excited researchers and sparked widespread interest in scientific explorations of the mind.

Nazi Experiments and Ethical Codes

This period was also marked by especially horrific tragedies, such as Nazi Germany's use of concentration camps. Within these camps, Nazi scientists used imprisoned individuals in involuntary human testing. At the Dachau concentration camp, mescaline was administered to prisoners and studied as a potential mind control tool (Doblin, 2001, p. 21). The research found

that mescaline was not effective for this purpose (Lee & Shlain, 1992, p. 14). When the war was concluded, the truth about the use of human subjects in involuntary studies was revealed. In response, the international community was compelled to establish ethical standards to avoid such an atrocity in the future. In 1947, the first international ethical code for human research was formed by the Nuremberg Judges (Doblin, 2001, pp. 21). This code set a requirement for informed consent and emphasized that harm to research subjects, both mentally and physically, needed to be prevented (Doblin, 2001, pp. 21-22).

Pioneering Psychedelic Research

Psychedelic research was flourishing internationally, and in the United States, researchers experienced open acceptance of this type of study. Most psychedelic substances were extremely accessible to researchers who were interested in them. For example, Sandoz Pharmaceuticals, the company that Dr. Albert Hofmann worked for, distributed LSD to interested researchers. Acquiring LSD was free in exchange for research data, and distribution was automatic to those who requested it (Doblin, 2001, p. 22). Both federally funded research projects in the United States and self-funded projects were receiving LSD from Sandoz Pharmaceuticals. For those projects that were self-funded, there was no requirement for researchers to share their data with the FDA.

The first recorded research involving LSD in the United States began in 1949. It started with self-experimentation, and within the same year, it was used with research subjects (Doblin, 2001, 22). The outbreak of LSD into the research world occurred alongside the discovery of neurotransmitters in the brain by neuroscientists (Pollan, 2018, p. 2). There was immediately a market for LSD research. While some funders included foundations, universities, and private donors, most of the funding came through the Central Intelligence Agency (CIA) and CIA-linked conduits (Lee & Shlain, 1992, p. 25). It became popular among psychologists who were seeking

alternative treatments for withdrawn or neurotic patients who were not responding effectively to standard treatment methods (Lee & Shlain, 1992, p. 25). Research with LSD became very popular, particularly in relation to psychotherapy. One reason for its popularity was its potency, having powerful effects even in very small doses.

Unethical CIA Research

The CIA began to conduct their own research on psychedelics (Doblin, 2001, p. 22). In the wake of World War II, the United States had heightened security concerns connected to the Cold War. These concerns motivated government research into possible interrogation agents and nonlethal incapacitants (Doblin, 2001, p. 19). The CIA and the Navy embarked on projects like 'Project Chatter' in 1947. Scientists were asked to develop a speech-inducing drug. The experiments tested mescaline as a possible truth serum (Lee & Shlain, 1992, pp. 13-14). The similarities between this project and the disturbing experiments conducted in the Dachau concentration camp raised some ethical questions about the origins of this inquiry. Some believe that the Navy's investigation of mescaline was directly influenced by the horrific mind control experiments that occurred in Dachau (Lee & Shlain, 1992, p. 14). It is known that the United States collected the scientific research that was left by the Nazis at the end of the war. The research experiments with mescaline would have been outlined in detail in those documents (Lee & Shlain, 1992, p. 15). Due to security concerns, the United States imported over 600 Nazi scientists in an operation called 'Project Paperclip' (Lee & Shlain, 1992, p. 15). Some of these scientists had previously worked closely with the psychedelic experiments at Dachau.

The CIA's research with psychedelics continued, and come 1951, the CIA moved on from mescaline, which had proven ineffective, and shifted their focus to LSD. When studying this substance, possible candidates for field experiments included prisoners of war, prisoners, and security officers (Lee & Shlain, 1992, p. 20). This population of subjects is questionable,

considering the ethical code and requirements set forth in the Nuremberg Code, which clearly notes that research subjects need to give consent to be studied.

Another CIA research project began in 1953 in San Francisco, California. This was Project MK-ULTRA, a mind-control and chemical interrogation program (Central Intelligence Agency, 2018). This official U.S. government program studied the effects of LSD on unwitting United States citizens. The project used unethical methods of obtaining test subjects, for example, using prostitutes to lure men into laboratories disguised as brothels. These individuals would, unknowingly, be given LSD. CIA agents and researchers would then observe the behavior of the subjects through one-way mirrors (Central Intelligence Agency, 2018; Doblin, 2001, p. 24). This method of studying the effects of LSD is immoral for several reasons and violates the ethical principles set forth by the Nuremberg Code. However, the regulations made clear in the Nuremberg Code were not enacted into U.S. law, so therefore, the CIA was not breaking the law (Doblin, 2001, p. 22). Nonetheless, the Nuremberg Code clearly stated that experimenting with unwitting subjects is morally unacceptable, and while the code cannot be applied in U.S. courts, the principles it proposes are still meaningful (Central Intelligence Agency, 2018). Regardless, this research continued until the 1970s (Lee & Shlain, 1992, p. 18).

The research eventually revealed that LSD is not reliable as a truth serum; however, it was potent and could make even the most serious subjects act impractical and senseless (Lee & Shlain, 1992, pp. 3, 21). In studies with security officials involving mock interrogations, the administration of LSD sometimes appeared to make a subject more open, but the information shared by subjects was often inaccurate or nonsensical (Doblin, 2001, p. 38). The capacity to induce such behavior led to the consideration of LSD as an anti-interrogation defense (Lee & Shlain, 1992, p. 22). The contrast between the belief that LSD was a truth serum and later an anti-interrogation defense reveals the CIA's confused understanding of the substance. Other

experiments with the drug were even more experimental, including the investigation of LSD's potential to revive memories of past experiences and communicate with deceased agents (Lee & Shlain, 1992, pp. 21, 24).

Notably, the CIA's research with unwitting subjects raised significant ethical concerns, although it did not legally violate any U.S. federal regulations. The CIA research concluded in 1973. Within a year, the United States set new regulations that protected human subjects from unknowingly being involved in scientific research (Doblin, 2001, p. 51).

Psychedelic Research in the 1950s

The CIA was not the only organization studying these substances. During the 1950s, clinical psychologists were interested in the positive effects of psychedelics on mental health. In addition to LSD, these researchers investigated mescaline, psilocybin, and ayahuasca in psychiatric patients experiencing psychosis and schizophrenia, as well as in healthy patient populations for general therapeutic effects (Doblin, 2001, p. 25). Much of this non-governmental research was still linked to the CIA through indirect funding.

The 1950s also saw the popularization of psychedelics in non-medical circles. Recreational use, or personal non-medical experimentation, especially increased after popular figures began to write about their own experiences with psychedelics. This included Aldous Huxley, who documented his personal experiences with mescaline in *The Doors of Perception* (1954) (Doblin, 2001, p. 24).

Psychedelic Research in the 1960s

Research on psychedelics continued in the 1960s. Between 1949 and the end of the 1960s, more than 25,000 doses of LSD had been administered. Overall, the research on LSD and other psychedelics found these substances to be outstandingly safe (Doblin, 2001, p. 27). Psychedelics proved to have therapeutic potential as effective treatment methods for a variety of

mental ailments. Findings showed that psychedelics were successful at treating alcoholism, anxiety, depression, and other forms of psychological distress (Doblin, 2001, pp. 38-39).

Conclusion

The research indicated that psychedelics could safely help individuals in ways that no other substances could. However, the scientific exploration of the medical uses of psychedelics would soon be frozen. The political and cultural developments of the 1960s would ultimately lead to the Controlled Substances Act of 1970. The following sections will provide an overview of the 1960s drug laws, the Vietnam War, and the anti-Vietnam War movement.

1960s – Updates on Drug Laws

The 1962 Kefauver-Harris Amendments and Increased Oversight

In the 1960s, there were significant developments in drug legislation. This included the 1962 Kefauver-Harris Amendments to the 1938 Food, Drug, and Cosmetic Act. These amendments introduced regulations on the conduct of psychedelic research. The act gave the government more oversight to review the safety and efficacy of research drugs and medications (Doblin, 2001, p. 32). This legislation was influenced by the tragic Thalidomide tragedy in the late 1950s in Canada, Europe, and Japan. Thousands of pregnant women who had used the medication to treat morning sickness gave birth to children with severe birth defects. In the wake of this event, the U.S. government's involvement with the pharmaceutical industry intensified to avoid such an event (Doblin, 2001, p. 33). These amendments aimed to prevent future tragedies, now requiring pharmaceutical companies to obtain approval from the government prior to marketing their product. Also, previously approved drugs could be withdrawn from the market if concerns about their safety surfaced.

Impact on Psychedelic Research

These ramifications of the Kefauver-Harris Amendments had a great influence on psychedelic research. Although previous research had indicated that the substances were safe, research projects were required to comply with the newly established regulations to demonstrate that psychedelics were safe to use with research subjects. Until approval was received, ongoing studies were halted (Doblin, 2001, p. 35). Once approved, the government monitored research closely to ensure safety protocols were being met (Doblin, 2001, p. 35; Lee & Shlain, 1992, p. 92).

Curbing Non-Medical Distribution: The Drug Abuse Control Amendments of 1965

The 1960s also witnessed the enactment of the Drug Abuse Control Amendments, which became the first legislation to address the non-medical distribution of psychedelics. In 1965, under President Lyndon B. Johnson, these amendments aimed to mitigate the non-medical use of LSD through a standard supply-reduction strategy (Doblin, 2001, p. 40; Walther, 2012, p. 1). This did not explicitly make the possession or the use of LSD illegal. Instead, the amendments focused on the manufacturing and the sale of LSD (Doblin, 2001, p. 41).

Impact on Psychedelic Research

While the above amendments were aimed at non-medical use, they also impacted medical research. They obstructed the supply of LSD to research projects, even those that had previously received approval. Researchers were required to return their supply of LSD to the FDA (Doblin, 2001, p. 41). Doctors and scientists who had witnessed the positive effects of LSD in psychiatry were alarmed by this decision and voiced their concerns during the 1966 Congressional Hearings on the topic. They argued in tandem with senators and appealed for the continuation of research. There was concern that the motivation behind the discontinuation of the research was political and that the science was being ignored (Doblin, 2001, p. 41).

The End of Research and a Shift in Narrative

Despite these efforts, research projects with LSD were frozen. Soon, research with other psychedelics would also face cessation. This followed an FDA and National Institute of Mental Health (NIMH) review of research protocols (Lee & Shlain, 1992, p. 93).

Moreover, Johnson initiated the narrative that drug use was immoral, a narrative that would persist during the Nixon Administration, as well as the presidential administrations to follow. President Johnson characterized the *drug problem* as a threat to the nation's 'self-respect' (Doblin, 2001, p. 46). This perspective would shape the course of drug policy and public perception in the years to come.

The Vietnam War: A Brief History

Context and Domestic Influence

The Vietnam War was the longest war in U.S. history, spanning from 1955 until 1975. This war, while fought aboard, was intertwined with domestic politics in the United States (Mandelbaum, 1982, p. 158; Small, 2010, p. 333). The war received an unprecedented backlash from the American people.

Historical Background and Cold War Ideology

The Vietnam War followed off the back of the Korean War, where the United States supported South Korea in the battle against communism. The Vietnam War was fueled by Cold War ideology and domino theory. The United States saw Vietnam as another domino that could potentially fall in favor of communism and further threaten the 'free world' (Kimball, 2010, p. 218). At the time, the main effort was to ensure that the Soviet Union could not expand. Although Vietnam itself was not part of the Soviet Union, its northern region experienced communist-led insurgency, and due to Cold War tensions, the United States considered this to be an extension of Kremlin influence. However, to the Vietnamese, the main concern was securing

independence from French colonial rule. The communist guerilla movement gained support, not

necessarily due to its ideology, but primarily for its resistance against the French (Zunes & Laird,

2010, pp. 2–3).

Initial Escalation

In 1954, The Geneva Agreement was signed, culminating in the end of French colonial

rule in Vietnam. The agreement temporarily divided the country along the 17th parallel, with a

plan for a unifying election to come in 1956 (Zunes & Laird, 2010, p. 3). This election never

took place, and the aspiration for unification was thwarted by U.S. intervention. Fearing a

communist victory, the U.S. obstructed the planned election and supported a corrupt dictatorship

in Saigon. This action ignited conflict between the northern-supported National Liberation Front

and the U.S.-backed regime in Southern Vietnam (Small, 2010, p. 334). This conflict would

continue for two decades.

Presidential Leadership and Furthered Escalation

The prolonged duration of this conflict meant that the Vietnam War was inherited by

several U.S. presidents. It influenced their foreign policy and their campaign strategies (Small,

2010, p. 334). Some of the actions taken by the United States in Vietnam were strategically made

to garner domestic support. A president's reelection hinged on the status of the war.

Dwight D. Eisenhower was the first president engaged in Vietnam. Committed to

assisting Saigon, Eisenhower sent 800 military 'advisors' to South Vietnam during his presidency

(Small, 2010, p. 334). The role of these individuals was to advise the Army of the Republic of

Vietnam.

In 1961, John F. Kennedy took office and assumed Eisenhower's role in the Vietnam War.

Kennedy was quick to escalate U.S. involvement further and increased the number of advisors in

South Vietnam from 800 to 16,000 (Small, 2010, p. 334). Notably, Kennedy's war strategies

were influenced by his interest in being reelected (Small, 2010, p. 334). While not directly quoted from the president himself, individuals close to Kennedy claimed that he intended to pull out of Vietnam after his reelection in 1964 (Small, 2010, p. 335). Unfortunately, Kennedy was assassinated before the end of his first term in office, so it is unknown if he would have seized the opportunity to disentangle the United States from the conflict in Vietnam.

The Johnson Era and Escalation

Following the assassination, Vice President Lyndon B. Johnson assumed office, inheriting the Vietnam War. Johnson became president during one of the most contentious times in United States history (Small, 2010, p. 335). The Vietnam War is often thought of as Johnson's war. His administration favored escalation, motivated by Cold War tensions, a fear of communism, and containment strategy.[7] In 1964, President Johnson began a bombing campaign in North Vietnam (Zunes & Laird, 2010, p. 3). Soon after, the first American troops arrived in Vietnam in the spring of 1965. They were tasked with protecting bases in South Vietnam. By the spring of 1966, the number of troops exceeded 270,000 (Small, 2010, p. 339).

During this period, television was the main source of information for Americans interested in the events of the war (Mandelbaum, 1982, p. 158). This was historically significant, as this was the first war to be televised into the homes of Americans. Because of this, American citizens were being exposed to the horrors of battle on a regular basis, including images of bombs falling and footage of troops in combat (Mandelbaum, 1982, p. 157). This exposure affected public opinion of the war (Mandelbaum, 1982, p. 157; Small, 2010, p. 336). Public opinion of U.S. military activity in Vietnam was crucially important and had great influence over foreign policy. Johnson, who feared Americans would lose faith in the engagement in Vietnam,

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[7] Containment strategy, formulated by George F. Kennan during the Cold War, aimed to contain the Soviet Union and communism to its current borders. This strategy motivated the use of military action to ensure that communism did not spread. (Office of the Historian, n.d.)

was not forthcoming about the actual reality of the conflict. Instead, he repeatedly shared that victory was close and that the end of the war was near (Mandelbaum, 1982, p. 160). Johnson's efforts to persuade the American people that the war was being won when it was not caused credibility issues. This exacerbated antiwar sentiment.

The Nixon Era and 'Vietnamization'

Johnson decided not to run for a second term, and in 1968, Richard Nixon was elected President. By the end of Johnson's presidency, there was a considerable and growing antiwar movement. Aware of this, Nixon's strategy was to walk the line between satisfying the antiwar group and as well as maintaining strength in South Vietnam (Small, 2010, p. 347). His goal was to limit American bloodshed in Vietnam while still containing communism. This plan, known as 'Vietnamization,' aimed to support the victory of South Vietnam while gradually withdrawing U.S. troops and replacing them with Vietnamese forces (Small, 2010, p. 347).

Despite Nixon's de-escalation rhetoric at home, he wanted to make his commitment to the conflict known within Vietnam. To appear prepared to escalate, the Nixon Administration approved the bombing of neutral Cambodia. Efforts were made to hide this from the American people, but unfortunately for Nixon, the Cambodia bombings were revealed in an article in the New York Times (Small, 2010, p. 347). The Nixon Administration denied the bombings, and the story quickly disappeared from the news. Meanwhile, the bombings continued. The leaked story made Nixon distrustful of his own administration (Small, 2010, p. 347). It also led to public distrust and furthered antiwar sentiment. Many Americans became weary of their government's involvement in Southeast Asia.

Conclusion and Legacy

By 1973, American troops had all returned home. The Vietnam War continued until the Fall of Saigon in 1975 when the North Vietnamese captured the southern capital (Mandelbaum, 1982, p. 157). The conquest in Vietnam had been a failure.

The United States' failed involvement in a foreign conflict left many Americans weary of U.S. intervention abroad. This sentiment would later be called 'Vietnam Syndrome' (Herring, 2010; Zunes & Laird, 2010, pp. 6–7). This term is defined as "an unwillingness to commit U.S. troops to an unwinnable conflict" (Herring, 2010, p. 409). Vietnam Syndrome is still present in many Americans today and was especially felt in response to U.S. military involvement in Afghanistan and Iraq. This sentiment has influenced an interest in nonviolent responses to conflict, meaning the Vietnam War may invertedly be an impetus for the recent growth of the field of conflict resolution.

The Vietnam War ultimately resulted in 58,220 American deaths (Department of Defense, 2008). A majority of these deaths occurred in Vietnam, but this statistic does include deaths that resulted from the conflict after its conclusion, such as injuries and illnesses. The Department of Defense (2008) reports that 382 of these individuals died as a result of 'self-inflicted' death (Department of Defense, 2008).

The Anti-Vietnam War Movement: A Culture of Change

Early in his presidency, Nixon faced multifaceted challenges from several directions. One of the most significant challenges was the anti-Vietnam War cultural movement. The 1960s is a decade remembered for the social and cultural movements in the United States. These movements advocated for various causes, including civil rights, sex and gender, and disarmament. None were as politically influential as the antiwar movement (Lee & Shlain, 1992, p. 104).

Growing Dissent and Ideological Divisions

The Vietnam War started in 1955, and by the 1960s, a mounting antiwar sentiment emerged. The nation was split in opinion of the war, spawning two distinct groups known as the Hawks and the Doves (Small, 2010, p. 336). Hawks, being pro-war, supported military intervention as a means of containing communism. Doves, on the other hand, favored peace and advocated for de-escalation and eventual withdrawal from the conflict (Small, 2010, p. 336). Vietnam, being a small farm nation, struggled to withstand the repercussions of war. Some Americans questioned the ethics of civilian and American casualties. Others perceived the collateral damage of the war as necessary, given the circumstances, and believed that a failure to contain communism would be more dangerous and immoral (Small, 2010, p. 338).

The Anti-Vietnam War Movement

Between 1964 and 1973, the growing antiwar sentiment coalesced into the official Anti-Vietnam War Movement (Zunes & Laird, 2010, p. 2). This movement targeted the U.S. Government and the prevailing military-industrial complex it clutched onto. The movement was comprised of a diverse array of individuals, the majority being college-aged youth. Participants were from various walks of life, including U.S. veterans who had returned from Vietnam (Herring, 2010, p. 410; Zunes & Laird, 2010, p. 2). Over time, the movement expanded, drawing in hundreds of thousands of Americans who effectively used nonviolence to influence government action (Zunes & Laird, 2010, p. 2). At its core, the main motivation of the movement was an opposition to militarism.

Peaceful Resistance and Demonstrations

As a nonviolent movement, this group participated in peaceful protests and acts of civil disobedience (Zunes & Laird, 2010, p. 3). The first demonstration took place in Washington, D.C., in April of 1965. This protest drew over 25,000 individuals who stood united against the

Vietnam War, effectively challenging dominant U.S. ideology and culture. The antiwar movement grew as the conflict in Vietnam intensified. In 1967, over 300,000 individuals participated in a march in New York City (Zunes & Laird, 2010, p. 4). Many activists faced imprisonment or fled the country. In 1969, for the Moratorium on the War, more than three million individuals got involved in demonstrations (Zunes & Laird, 2010, p. 5). The antiwar movement stands as a resounding example of the power of nonviolent action and activism.

Cultural Dimensions and Counterculture

The antiwar movement, while primarily driven by political motivations, manifested in various forms for different individuals. For some, membership in this group meant more than just opposing the Vietnam War. For many young people, participation in the antiwar movement was intertwined with cultural experimentation (Zunes & Laird, 2010, p. 4). These young people did not just take a political stance but also challenged traditional social norms and behaviors. In many ways, this was influenced by a need for differentiation between the pro-war group and the antiwar group. In certain individuals, this included the use of psychedelic drugs.

Drugs like LSD and psilocybin were a part of the counterculture movement in a number of ways. For one, psychedelic drug use was new to the scene, and experimenting with the substances gave American youth a unique experience that set them apart from previous generations (Crandall, 2020, p. 373; Pollan, 2018, p. 3). Choosing to use these substances was, in itself, nontraditional. In addition to this, the psychedelic experience may have further influenced an interest in a nontraditional counterculture.[8]

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[8] Many individuals were introduced to psychedelics in government-funded research projects. This experience created new considerations of social constructs and norms. This being the case, government action inadvertently influenced some individuals to join the counterculture movement. (Lee & Shlain, 1992, p. 99)

Psychedelics, Social Transformation, & Self-Exploration

Research has shown that psychedelic drug use can influence feelings of love and peace, increasing an individual's empathy and interconnectedness with the world around them (Crandall, 2020, pp. 373–375; Doblin, 2001, p. 1; Kalensky, 2022). These profound messages resonated with the ethos of the antiwar movement and the broader counterculture (Pollan, 2018, p. 3). The non-medical use of psychedelics was common within the counterculture at both the leadership and the general level. Some speculate that psychedelics are partly responsible for the counterculture movement rather than merely being a feature of it (Lee & Shlain, 1992, p. 3). Others suggest that the outbreak of non-medical psychedelic use changed American society forever (Lee & Shlain, 1992, p. 99).

Furthermore, psychedelics also are known to dissolve an individual's ego and subconscious constructs (Crandall, 2020, p. 373; Doblin, 2001, p.1). This effect resonated with the youth of the antiwar movement, who were already engaged in self-exploration (Lee & Shlain, 1992, p. 105). The horrors of the Vietnam War, televised into American homes, prompted a struggle with national identity, particularly concerning notions of morality. This resulted in internal debates about moral authenticity (Lee & Shlain, 1992, p. 105). The quest for peace and nonviolence, as supported by the antiwar movement, was an extension of personal exploration of identity. Engaging with psychedelics offered individuals the opportunity to form their own unfiltered perspective of the Vietnam War, free from the influence of media or government narrative.

Psychedelic Controversy

Psychedelic use within the counterculture lifestyle was controversial. The counterculture movement and the anti-Vietnam War movement, although having considerable overlap, were not entirely the same. Yet, oftentimes, they were conflated. While the antiwar movement challenged

America's militarized ideology, the counterculture movement challenged American tradition and norms. Those outside of these movements were fearful, as they perceived such behavior as threatening to society. The media played into these fears and represented these movements with images and examples of the most extreme members. As a result, the antiwar movement was seen as extreme, and those who belonged to it were further differentiated in American society. This made it harder for individuals who challenged the war but did not challenge American culture to support the antiwar movement publicly (Zunes & Laird, 2010, p. 5). Even still, both the antiwar movement and cultural experimentation posed a threat to the prevailing government ideology.

Conclusion

In conclusion, the history of drug laws, psychedelic research, the Vietnam War, and the antiwar movement within the United States serves as a foundation for the following research chapter. This history interacts with cultural transformation, evolving notions of morality, and the influence of the general public, the government, and the media in shaping societal change. The forthcoming research will build upon this historical background, tracing the causal process that motivated Nixon's decision to enact the Controlled Substances Act, the effects of this legislation, and how this has developed into the current landscape of psychedelic research today. This historical context will allow for a deeper exploration of the process.

Chapter 5 – The Process – Research and Analysis

Introduction

This chapter delves into the case study, employing the analytical research method of process tracing. This approach facilitates the identification of the influential mechanisms within the chosen case. More specifically, the research seeks to examine the variables within the following sequence: X -> [A-> B-> C -> D] ->Y. This process will integrate and expound upon several theories discussed in Chapter 2.

Research Question and Hypothesis

Research Question. *How has the public perception of the dominant militarized ideology in the United States influenced psychedelic drug policy?*

The overarching research question is interested in the ways that drug policy in the United States has been utilized as a tool to protect its ideological values. The case analysis begins with the challenges to this ideology posed by the antiwar movement during the Vietnam War era. This will involve a critical examination of the efficacy and effectiveness of these policies and an evaluation of their potential impact on both the U.S. military and the broader American society.

Hypothesis. In light of ongoing research, the hypothesis posits that the implementation of psychedelic drug policy was in reaction to changes in public perception of the presidential administrations and concurrent military activities. It proposes that these policies were strategically enacted to deliberately weaken the antiwar movement, which posed a significant threat to the militarized regime during the Vietnam War era. This hypothesis speculates that research will reveal a correlative relationship between the public's perception of the U.S. military and the implementation of psychedelic-related legislation and regulations.

Overview

$$X \rightarrow [A \rightarrow B \rightarrow C \rightarrow D] \rightarrow Y$$

Cause	(X) Cause: Antiwar counterculture movement threatens the Nixon Administration			
Part 1	**Conditions:** Negative public perception of the Nixon Administration increases	**(A) Actor:** Nixon Administration	**(->) Action:** Passes the Controlled Substances Act	**Outcome:** Psychedelics become illegal and stigmatized. Psychedelic research stops. Starts a culture of corruption.
Part 2	**Conditions:** Public perception of drugs becomes potently negative	**(B) Actor:** Presidential Administrations	**(->) Action:** Continue to use drug policy as a political tool	**Outcome:** Narrative in media, government, and education emphasizes that drugs are dangerous. Focus shifts to the substances that are the most dangerous.
Part 3	**Conditions:** Negative perception of psychedelics becomes less salient. The public demands swifter approval of drugs.	**(C) Actor:** Dr. Carl Peck - The director of FDA's Center for Drug Evaluation and Research	**(->) Action:** Establishes the Pilot Drug Evaluation Staff Shifts schedule I drugs into this new division	**Outcome:** Psychedelic research resumes. Reveals potential benefits for mental ailments.
Part 4	**Conditions:** Increase in suicide in U.S. armed forces and veteran populations. Psychedelics may help.	**(D) Actor:** U.S. Government[9]	**(->) Action:** Increases funding and FDA approval rates for psychedelic research	**Outcome:** There is an increase in psychedelic research. More veterans are included in trials with these substances. Positive results.
Effect	(Y) Effect: The first Phase III clinical trial for psychedelic-assisted psychotherapy psychedelic is completed, substantiating the evidence of the medical benefits.			

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[9] VA, DoD, DARPA, FDA, states, etc.

In this schematic representation, the X variable represents the initial *cause* of the process, this being the antiwar counterculture movement that threatened President Richard Nixon's Administration. The research begins with the exploration of the motivations behind the implementation of the Controlled Substances Act of 1970. It then follows the process to its outcome, or *effect*, represented by the Y variable, being the current regulations on medical research of psychedelics, which have recently been amended.

This research endeavor hopes to reveal the interplay among various actors and mechanisms that have collectively shaped today's psychedelic drug policy. Through an in-depth exploration of motivations, this study aims to identify the rationale of these policies and examine the repercussions. The process will draw from established theoretical frameworks for predictive insights and pattern recognition. This study hopes to add to the existing literature surrounding the dynamic nature of drug policy and its entanglement with ideological considerations.

Cause – The Antiwar Counterculture Movement Threatens the Nixon Administration (X)

The Challenge of the Antiwar Movement

The anti-Vietnam War movement posed a serious threat to the Nixon Administration and the dominant militarized ideology in the United States. This movement was the largest and most intensive antiwar movement in United States History (Zunes & Laird, 2010, p. 2). Its influence affected American domestic politics, significantly shaping the decisions made by those in power (Small, 2010, p. 333). Notably, the Nixon Administration was especially impacted by this movement.

The movement's political activism was present in many channels, effectively influencing the public's perception of the Nixon Administration. It induced a growing skepticism toward the government's actions, both abroad and domestically. Public confidence in Nixon's leadership eroded (Kimball, 2010, p. 226). Those involved in the antiwar movement were also participating

in electoral politics. This included strategies such as neighborhood leafletting, signing petitions, and purchasing paid newspaper advertisements that questioned the Vietnam War's ethics. Protesters undertook several forms of civil resistance, such as withholding tax payments, either partially or entirely. There were also collaborative efforts to protect those who were evading the draft (Small, 2010, p. 339). These actions were highly effective, resulting in a shift in the perspective of the war (Schreiber, 1976, p. 225). This shift influenced the Nixon Administration to act.

The Cultural Divide

The growing contention between the antiwar left and the pro-war right deeply concerned the Nixon Administration. The division separating the two groups was cultural and ideological, centered on differing opinions of the morality of military intervention abroad.[10] This type of conflict interacts with the concept of social identity theory previously explored in Chapter 2. The split in the understanding of morality, national security, and military philosophy in the United States was dismantling the national order (Larson, 2011, p. 88; Small, 2010, p. 339). While the antiwar movement focused on an out-of-country conflict, the real moral conflict revolved around contrasting visions of the United States itself. Culture was split by the conflicting understandings of American values and its military (Herring, 2010, p. 411).

The Role of Social Identity Theory

Social identity theory explains that when groups separate, they tend to emphasize the differences between them. This typically results in the promotion of a negative portrayal of the other and a positive representation of the ingroup. This phenomenon was present in the United States during this era. The antiwar movement perceived the support of the U.S. military as

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[10] Concerns about the morality of U.S. military intervention abroad remained long after the anti-Vietnam War movement. This division in ideology drew the line of the cultural divide at the time, but it is still very much present today. As mentioned in Chapter 4, the hesitancy to involve U.S. troops in foreign conflict is referred to as 'Vietnam Syndrome.' (Herring, 2010)

immoral and unethical. This led those in the antiwar group to view pro-war individuals in negative ways. The inverse happened as well. Consequently, the groups were further differentiated.

Due to being in line with the dominant ideology, the pro-war narrative was represented in the media, which reported that those on the left were inherently dismissive of authority and described them with adjectives like 'dirty,' 'filthy,' 'hairy,' and 'unkept' (Small, 2010, p. 341). This narrative was not only present in media sources but is also evident within government activity at the time as well (Kimball, 2010, p. 226).

Demographics and Differentiation

An interesting aspect in this case is that these groups did not have significant differences demographically and only differed in ideology and moral perspective. This meant that differentiation existed everywhere. Many households even had splits within them. Some government officials closely affiliated with the Vietnam War had children who were active in the antiwar movement (Herring, 2010, p. 410). This phenomenon is intriguing because, typically, conflict occurs between groups that differ in most demographic aspects. In this case, the split is simply ideological. Despite a lack of demographic distinctions or location-based division, group differentiation still persisted.

The Antiwar Movement and Counterculture

Due to the differences being ideological and not physical, group members were motivated to interlace their political beliefs with their behavior to make group membership more distinct. Many on the antiwar left found ways to entangle their political opposition with a counterculture. This approach amplified the differences between the two groups. Those within the antiwar movement were interested in a counterculture that would challenge traditional American norms (Zunes & Laird, 2010, p. 4). This behavior included experimental drug use, a practice popular

among the youth in the antiwar movement and considerably less common within the pro-war right.

The Misrepresentation of the Antiwar Movement

The pro-war narrative often left out the true message of the antiwar movement. Most simply, the antiwar left advocated for peace, citing the moral issues of collateral damage to innocent Vietnamese civilians and the massive loss of American soldiers. They believed that the Vietnam War and the resulting damages were unethical and unnecessary. They attributed the responsibility for these casualties to the United States government, not the Northern Vietnamese. They argued that the United States' decision to involve American troops in this conflict, which retrospectively had little to do with the United States, was ethically questionable. However, the pro-war media painted the antiwar left as morally compromised at the same time. They claimed that the real threat to the American people was the antiwar movement (Herring, 2010, p. 413).

'Communist.' Strategically, the antiwar left was portrayed as being communist, exploiting the fears created by Cold War tension. The pro-war group asserted that if the antiwar left opposed the United States' containment policies, then they must also support the spread of communism (Small, 2010, p. 341). Unfortunately for the antiwar movement, this narrative gained traction after the President of North Vietnam publicly expressed gratitude for the antiwar left's opposition to the United States military policies in Vietnam (Schreiber, 1976, p. 225). This narrative encouraged some individuals to oppose the antiwar left. If those opposing the war were depicted as immoral and communist, supporting the war was constructed as the morally right thing to do (Small, 2010, p. 342). Although antiwar protests were peaceful and legal, antiwar protesters were seen as a genuine threat to the nation (Small, 2010, p. 349).

'Hippies' and Psychedelics. In addition to being portrayed as communists, members of the antiwar movement, often referred to as 'hippies,' were also unfairly characterized as drug

users. This group was particularly associated with psychedelic drugs (Doblin, 2001, p. 55). These substances were believed to reframe an individual's view of society by allowing them to view the world free from prevailing social constructs. The relationship between psychedelic use and a growing alienation from traditional American societal norms made drugs a public enemy on par with communism (Larson, 2011, p. 89).

Part 1 – Nixon (A) Passes the Controlled Substances Act (-> 1)

Conditions – The Growing Threat of the Antiwar Movement

As the antiwar left and pro-war right became more distinct, the antiwar counterculture gained legitimacy, posing a greater threat to the Nixon Administration. The conditions that triggered Nixon's response were his declining public support and the growing influence of the antiwar movement. Realistic conflict theory explains this response, asserting that individuals modify their actions to protect their goals. When goals are threatened by the actions of another group, conflict erupts. The Nixon Administration viewed the antiwar movement as both a political and a national security threat. This motivated him to take action to debase their movement.[11]

Considering the history of peace movements and their ability to restructure societies, the antiwar movement did pose a serious threat to the societal norms of the United States. The Nixon Administration employed various strategies to undermine the movement, including some illegal activities. This included the penetration of antiwar groups with individuals from intelligence agencies (Small, 2010, p. 348; Zunes & Laird, 2010, p. 4). These individuals would then work to identify or even encourage illegal or violent activity (Small, 2010, p. 343). There was also the investigation of tax returns of those in the leadership positions of the antiwar movement (Small,

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[11] At the time, there was a serious concern that the Antiwar movement may have been connected to foreign governments interested in destabilizing the United States. This has since been disproven, but when it was believed to be true, it explains why the antiwar movement was seen as such a severe threat to national security. (Small, 2010, p. 348)

2010, p. 348). These actions would allow the government to arrest those involved but also further marginalize the antiwar movement (Zunes & Laird, 2010, p. 6). This marginalization was aimed to deter individuals who were not involved in the movement from supporting it. The Nixon Administration escalated from such strategies, resorting to drug legislation to further debase the antiwar movement.

Regime Response – Suppress the Antiwar Movement

The regime's response was to employ counterdrug strategies as a means of controlling the antiwar movement. There were many ways that the Nixon Administration could have gone about interfering with the movement, but there is clear evidence that drug policy was a tactic. The true motives behind Nixon's drug strategy are made clear in the words of John Ehrlichman, Nixon's domestic policy advisor. He said,

> You want to know what this [War on Drugs] is really about? The Nixon Campaign in 1968, and the Nixon White House after that, had two enemies: the antiwar left and black people... We knew we couldn't make it illegal to be either against the war or black, but by getting the public to associate the hippies with marijuana and blacks with heroin, then criminalizing both heavily, we could disrupt those communities. We could arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news. Did we know we were lying about the drugs? Of course we did. (Pollan, 2021, p. 17)

The criminalization of drugs meant the federal government could arrest those in the antiwar left. This strategy offered a legal means to disrupt the antiwar movement, where drug users could be arrested while opposing the government's foreign defense policies, which could not serve as a basis for arrest (Kimball, 2010, p. 226). This gave the Nixon administration a legal

avenue to disrupt the movement. The Nixon Administration was the first presidential

administration to formulate a clear national drug reduction strategy (Walther, 2012, p. 1).

The implementation of the drug laws was coupled with antidrug narratives, depicting the

substances as harmful at both the individual and societal levels. In a message to Congress in July

of 1969, Nixon referred to drugs as a threat to the health and safety of America (Walther, 2012, p.

4). Nixon also argued that drug users posed a threat to the foundations of the United States, and a

response was necessary (Larson, 2011, p. 89).

The rationale behind this response is further explained by Johan Galtung, who wrote,

"Violence breeds violence" (Galtung, 1996, p. 270). Galtung explains that violent action affects

the conscience of the perpetrator, especially when the unethical effect of their violence is noticed

by others. In an attempt to silence their own bad conscience or guilt, the perpetrator will again

resort to violence, this time toward the source of their guilt (Galtung, 1996, p. 270). The antiwar

movement was drawing attention to the U.S. government's unethical practices in Vietnam. The

American public began to question if the collateral damage of innocent Vietnamese lives and the

young American soldiers was necessary. The U.S. government, rather than shifting its tactics in

Vietnam, struck back at the antiwar movement. This behavior is in line with that suggested by

Galtung (1996).

This response also interacts with public choice theory, which clarifies the motivations of

corruption (De Graaf, 2007, pp. 46–47). Corruption is the misuse of power for private gain.

Public choice theory explains that the decision to do this comes from an individual's reasoning

(Beyerle, 2011, p. 58). It involves the rational thinking of an empowered actor, who would

personally consider the potential gains from their corruption in comparison to the potential costs.

Using drug laws as a tool of control allowed the government to disrupt the movement in a legal

way. This means that Nixon is still misusing his power for private gain, but through a strategy

that is less obvious and more likely to go unnoticed as corruption. If unnoticed, the potential gains outweigh the potential costs.

In addition to public choice theory, theories on clashing moral values shed light on an additional cause of corruption (De Graaf, 2007, pp. 53-56). While the decision-making behind whether committing a corrupt act is worth it occurs at the individual level, the motivations may come from the societal level. De Graaf (2007) explains that societies have a collective view of morality. When, within the society, a conflict over morality erupts, those in power may use corruption as a tool to protect what they determine to be right moral behavior. The antiwar movement posed a threat to the present acceptance of morality in American society. The Nixon Administration's response was to use corrupt behavior as a tool to protect the dominant ideology. Such an action is an example of clashing moral values.

Mechanisms – The Controlled Substances Act

The specific mechanism used was the Controlled Substances Act, which was implemented on October 27, 1970. This act regulated both medical and non-medical drug use, significantly impacting how these substances were handled (Doblin, 2001, p. 48). The Controlled Substances Act repealed all prior drug regulations, replacing them with one unified approach. Previously, the implementation of drug-related legislation came after a tragic event that had revealed potential dangers in the current system of research, testing, manufacturing, or labeling.[12] The Controlled Substances Act did not follow such an event.

The implementation of the Controlled Substances Act established five drug schedules, all having different levels of control. The act placed psychedelics onto schedule I, the most strictly controlled category. Drugs placed on schedule I were defined in the act as having a "high

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[12] For example, the deadly ingredient in sore throat medicine in 1937 and the Thalidomide tragedy in the late 1950s motivated changes in drug legislation. (Doblin, 2001, pp. 16-32)

potential for abuse." (Controlled Substances Act, 1970, p. 1247) In addition to this, the act recognizes schedule I substances as having "no currently accepted medical use" and that there is a "lack of accepted safety for the use of the drug or other substance under medical supervision" (Controlled Substances Act, 1970, p. 1247).

The blanket prohibition of this schedule criminalized the use, sale, and possession of psychedelics and other substances in this category (Crandall, 2020, p. 371). Schedule I substances could now only be researched with approval from the FDA. However, such approval was rare, and it became essentially impossible for researchers to attain permission (Doblin, 2001, p. 70). Research now also involved the additional approval and overview from the Bureau of Narcotic and Dangerous Drugs, which later became the DEA (Doblin, 2001, p. 49). By the end of 1970, psychedelic research involving human subjects had been shut down by the FDA and the NIMH (Doblin, 2001, p. 130).

Prior to the Controlled Substances Act, research on psychedelics was fairly open, and there were few laws actually criminalizing the use of these substances (Doblin, 2001, p. 40). Possession of stimulant drugs with a hallucinogenic effect was not explicitly illegal prior to 1970. The Controlled Substances Act intensified drug control, affecting both non-medical use and medical research. Congress and researchers had encouraged the Nixon Administration to focus only on dangerous and addictive drugs, which psychedelics had proven not to be (Doblin, 2001, p. 41). However, since they did carry a dangerous social implication, psychedelics were included in schedule I. The scheduling of any drug can be reclassified, yet psychedelic substances have remained on schedule I since 1970.

Within the year, the Nixon Administration escalated the government's approach to drug strategy. In June of 1971, Nixon declared the war on drugs (Walther, 2012, p. 4). After the Controlled Substances Act, drug control was mainly being completed at the local police level,

but the national 'war on drugs' campaign made the drug issue a federal issue (Larson, 2011, p. 88). This drug strategy was purposely described with war-based language. This relates to the power of narrative. Similar language was used when discussing the antiwar movement. For example, in 1972, Nixon encouraged his chief of staff to use war-related language when speaking on television. While on the *Today* program, H. R. Haldeman, chief of staff, referred to critics of the Vietnam War as actively "aiding and abetting the enemy" (Small, 2010, p. 349). This language is very similar to the legal definition of treason which states that treason consists of "adhering to their [the United States] Enemies, giving them Aid and Comfort" (U.S. Const. art. III, § 3.). The language of being at 'war' with drugs influenced public perception of the substances. It depicted drugs as a serious enemy to the American people (Larson, 2011, p. 80). It is true that certain substances, like opioids and crack cocaine, pose a serious threat to the health of millions of Americans, but psychedelics are dissimilar to these in many ways, especially concerning their safety levels and addiction potential.

Enacting drug policy was a new tactic, having never been used as a tool in cultural conflict prior to this example. With this said, Nixon did dispute that his policymaking was influenced by the antiwar movement. However, there is significant evidence that it was, with many authors citing the political pressure from the antiwar movement as the motivation behind the regulation of psychedelics (Doblin, 2001, p. 54; Londoño, 2022; Pollan, 2018, p. 3; Small, 2010, p. 350). The similarities in the war-like narrative concerning the antiwar movement, communists, and psychedelic drug use appear to reveal that they were collectively a concern. Criminalizing the use and possession of psychedelics and limiting the ability to research such substances was a vengeful act motivated by politics rather than scientific evidence.

Lawmaking, as a tool, has greater societal effects beyond criminalizing a particular action. Laws influence public perception of what is moral behavior (Calavita, 2010, p. 13). An

action that is legal is also an action that is morally acceptable. Just the same, an action that is illegal is immoral (Bartles-Smith, 2022, p. 1733). When the Controlled Substances Act criminalized the use of psychedelics, it also made it clear that in American society, the use of these drugs was immoral. Since morality and ethics were a major point of contention between the dominant U.S. ideology and the antiwar counterculture, using a mechanism that played into this was even more effective.

Outcome – Psychedelic Stigmatization and Impact on Research

The implementation of the Controlled Substances Act not only made psychedelic drug use illegal but also contributed to the stigmatization of these substances.[13] This stigma, bolstered by media narratives, affected the research of psychedelics. While research on psychedelics was technically still permissible with FDA approval, the stringent legal and security requirements imposed by the Controlled Substances Act made research exceptionally challenging (Crandall, 2020, p. 371). A potentially more potent barrier was the portrayal of psychedelics as harmful substances in the media.

In the 1970s, media outlets ran stories that exaggerated the dangers of psychedelics. These claims often lacked scientific validity but were no less effective, considering that the American public had no reason to question the information. One example of this was the NBC documentary titled "Reading, Writing and Reefer" which falsely reported that the use of marijuana could result in illiteracy (Coyle et al., 1979, p. 6). The documentary was based on DEA evidence sourced from unreliable studies that had slanted their findings. Such sensationalized narratives fueled public fears of drugs. Unfortunately, stories on this were popular with viewers, resulting in an incentive for media outlets to continue to report on the

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[13] It is important to draw attention to the fact that the implementation of the Controlled Substances Act had devastating effects on marginalized groups, like the black community in the United States. The lasting effects of this still exist today. A deeper discussion of this is not included here because it is out of the scope of this paper. Regardless, it should be acknowledged.

topic. Another example of this media coverage was a widely viewed report that LSD had the ability to scramble one's chromosomes (Pollan, 2018, p. 5).

As public concern about the effects of psychedelics grew, research on these substances in humans became socially unacceptable. The American public believed that these substances caused permanent and severe physical and cognitive harm, making it unethical to use them in research. Consequently, recruitment of subjects became virtually impossible (Doblin, 2001, p. 46).

Such a narrative made the government's efforts to decrease access to and use of psychedelics appear to be in the best interest of the nation (Larson, 2011, p. 80).

Part 2 – Presidents (B) Continue to Use Drug Policy as a Political Tool (-> 2)

Conditions – Evolving Public Perceptions of Drugs

The antiwar movement lost support as it became further associated with counterculture and anti-American values (Zunes & Laird, 2010, p. 5). Despite this, it played a pivotal role in achieving significant outcomes such as the signing of a peace treaty, the withdrawal of remaining U.S. forces, and the end of the draft in 1973 (Zunes & Laird, 2010, p. 6). In 1974, President Richard Nixon resigned from office before an incoming impeachment could remove him for obstruction of justice and an abuse of power. In 1975, the Vietnam War ended. Although Nixon's Administration was no longer active, and the antiwar movement had concluded, the anti-psychedelic drug policies enacted remained, as did the public's fear of these substances (Doblin, 2001, p. 46).

Scientists interested in researching psychedelics faced barriers such as difficulties obtaining FDA approval and high licensing fees (Crandall, 2020, p. 371). Ongoing research was put on hold, yet there was no direction on how to get Clinical Holds removed (Doblin, 2001, p. 71). Psychedelic research was frozen. Additionally, negative coverage continued, and educational

campaigns in American school systems aimed at highlighting the potential dangers associated with drug use emerged. In the late 1970s, some states required elementary and high schools to offer courses on the health hazards of drugs (Coyle et al., 1979, p. 6).

A significant condition that remained, although Nixon was no longer in office, was the culture of corruption. As explained by De Graaf (2007), organizational culture theories (pp. 51-52) explain that corruption is contagious and affects the organizational culture of a system. This results in corruption persisting, even as individuals within the system come and go. In this case, the office of the President of the United States was tainted.

Regime Response – The Continued Use of Drug Policy as a Political Tool

With the decline of the antiwar counterculture movement, there was no longer a political justification for classifying psychedelics as schedule I substances. However, there was no regime response to reclassify this category of drugs, as drug policy proved effective in bolstering support for presidential administrations. Media reports on the dangers of drugs, coupled with crackdowns on drug use, fostered a positive public perception of the government's efforts to protect its citizens. The regime's response was to continue the use of drug policy as a political tool to maintain public support for the presidency (Larson, 2011, p. 80). Drug policy remained unchanged for decades, although it was not effective in curbing actual drug use (Walther, 2012, p. 2). Presidents prioritized their public support over those who could benefit from psychedelic research, an action originally deemed morally acceptable by Nixon.

Mechanisms – The Continuation of the War on Drugs

This next section will examine the drug strategies of the presidential administrations from the 1970s through the 1990s, summarizing the continuation of the war on drugs during each administration.

Gerald Ford. Following Richard Nixon's resignation, Gerald Ford took office. Having served as Nixon's Vice President, the Ford Administration did not make any major changes to drug policy (Walther, 2012, pp. 2, 5). Like Nixon, Ford disregarded recommendations from Congress and scientists to prioritize counterdrug efforts toward more dangerous and addictive substances, which did not include marijuana or psychedelics. Such a suggestion was heard by Jimmy Carter, however, who campaigned on the promise of decriminalizing the possession of marijuana in small amounts. After his inauguration in 1977, Carter worked to uphold this promise.

Jimmy Carter. Carter proposed legislation to decriminalize possession of marijuana in amounts up to one ounce. Unfortunately, a drug scandal interrupted President Carter's drug reform effort. In 1978, a Washington Post article exposed drug-related misconduct within the White House (Coyle et al., 1979, p. 6; Walther, 2012, p. 6). The article claimed that Dr. Peter Bourne, whom Carter had recently appointed as the director of the Office on Drug Abuse Policy, had written a fellow White House aide an invalid prescription for Quaaludes. This article shattered support for Dr. Bourne, who was Carter's top advisor on decriminalization of drugs. Other news sources published stories in the wake of this scandal reporting on other drug use among White House aides, specifically with substances such as cocaine and marijuana (Walther, 2012, p. 6). The scandal forced Dr. Bourne's resignation. Consequently, the Carter Administration abandoned drug decriminalization efforts (Walther, 2012, p. 6). The White House had its hands tied, meaning the DEA could apply extreme pressure on drug use without limits. This included an increase in DEA-sourced antidrug propaganda (Coyle et al., 1979, p. 6).

The Carter Administration's retreat from decriminalization efforts is an example of public perception having influence over federal policy. Congress, scientists, and Carter were all aware that the criminalization of non-dangerous drugs and the extreme enforcement of these laws was

not productive for the country and was destroying marginalized communities. However, due to a dip in public support, the Carter Administration prioritized itself, leaving drug policy untouched (Walther, 2012, p. 6). Such a decision cannot be attributed to a fault in individual character but rather a fault of the executive system in the United States.

Ronald Reagan. Ronald Reagan was inaugurated in 1981 and pursued an aggressive drug policy with a 'zero tolerance' approach. It was further emphasized by the "Just Say No" campaign (Walther, 2012, p. 7). Throughout Reagan's presidency, the United States passed four additional antidrug bills. Such laws did not effectively reduce the use of drugs, but they served as a political tool, promoting the administration as proactive in the area of public health (Larson, 2011, p. 80).

George H. W. Bush. George H.W. Bush, Reagan's Vice President, was inaugurated in 1989. His interaction with the war on drugs began during Reagan's presidency. Bush oversaw a significant increase in the military's drug-related budget, which quadrupled during his time as Vice President. Once President himself, Bush continued the war on drugs, taking a stigmatization approach. Instead of passing more severe drug policies, he started the 'denormalization' campaign to make drug use even more socially unacceptable (Walther, 2012, p. 9). His efforts proved successful.

Bill Clinton. When Bill Clinton won the presidential election in 1992, Americans who advocated for a reduction in drug policies were hopeful (Walther, 2012, p. 10). Unlike any of his predecessors, Clinton had admitted to personally trying marijuana (Ifill, 1992, p. 15). Those optimistic about a change in policy were left disappointed, as the Clinton Administration maintained a drug strategy almost indistinguishable from those that preceded it (Walther, 2012, p. 10). Clinton felt compelled to maintain a tough stance on drugs to preserve public support from both parties. The Clinton Administration took a particular interest in curbing drug use in

youth, spending $191 million on drug prevention measures in public schools, mostly at the high school level (Walther, 2012, p. 11). This was not successful, and throughout Clinton's presidency, there was an increase in juvenile drug use.

The repetitive pattern of manipulating drug policy to enhance political support is a form of corruption, aligning with the organizational culture theories presented by De Graaf (2007). Regardless of party or personal beliefs, the budget for the war on drugs increased with every presidential administration (Walther, 2012, p. 13).

The first reoccurrence of psychedelic medical research occurred during the Clinton Administration and will be discussed in further detail below. For this reason, the examination of presidential administrations is discontinued here.

Emergency Ban of MDMA. During the 1980s, as the war on drugs was being waged, concern grew around a new psychedelic drug – MDMA, also known as ecstasy. This substance had been left out of initial drug scheduling in 1970 because it had not yet been popularized at the time. Since it wasn't yet illegal, MDMA was researched in depth from 1970 until 1985, the year it was added to schedule I (Doblin, 2001, p. 57; Earp & Savulescu, 2020, p. 88).

A lot of the research on MDMA in the 1970s and 1980s had not been conducted privately because of fears that attention from the government would quickly result in the criminalization of the substance (Doblin, 2001, p. 58). The research found that MDMA, in controlled therapeutic settings, did not result in any severe adverse effects or death (Doblin, 2001, p. 61). The drug is known to create intense feelings of love, comfort, and joy. Researchers and clinicians found it to be therapeutic for those with depression, addiction, and other mood-afflicting ailments. Those without such conditions were also intrigued by the positive effects, and by the early 1980s, MDMA had made its way into the party scene.

MDMA, while safe in controlled environments, can be deadly when used incorrectly. As it became more popular in public settings like nightclubs, there were hospitalizations and deaths. There were several mistakes made that led to these adverse effects. In this scene, few precautions were being taken to ensure purity. Also, MDMA was frequently being used in dangerous combinations, like with alcohol (Earp & Savulescu, 2020, p. 88). The U.S. government immediately became concerned about MDMA, validly.

In 1984, the DEA recommended that MDMA be placed on schedule I. This recommendation was immediately scrutinized by clinicians and researchers who had been working with the substance (Earp & Savulescu, 2020, p. 88). A scheduling hearing was requested and granted. During the hearing, scientists and researchers presented sufficient evidence that MDMA was non-toxic and did not present any dangers when used in a medically supervised setting. The DEA presented evidence on why the substance should go on schedule I. The judge presiding over the hearing decided that the therapeutic applications of MDMA meant it did not qualify as a schedule I substance. This conclusion was ignored, and the DEA placed the psychedelic on schedule I in 1985 with an emergency ban (Earp & Savulescu, 2020, p. 88). This decision was not scientifically supported and is an example of the overreach of the war on drugs.

Outcome – The Prioritization of More Dangerous Drugs

The outcome of the war on drugs and the federal spending on related actions did not result in reduced drug use. This reality was clear throughout the war on drugs, yet presidents maintained ineffective policies. This repetition is described by Walther (2012) as 'insanity,' defined as continually repeating a particular behavior and expecting different results (p. 1). It appears that drug policy was not designed to reduce drug use but rather to serve other political purposes, evident in the consistent application of inadequate policies.

One positive outcome of the war on drugs was that the focus of antidrug media campaigns had shifted toward genuinely dangerous and addictive drugs, such as crack cocaine (Doblin, 2001, p. 72). Less threatening substances like psychedelics no longer carried the same social implications as they had in the 1960s and 1970s. This shift facilitated the conditions that would allow for the reemergence of psychedelic research.

Part 3 – Dr. Peck Establishes the Pilot Drug Evaluation Staff

Conditions – Shift in Public Focus

Public attention had shifted away from psychedelics, and after being frozen for two decades, psychedelic research began to thaw (Doblin, 2001, p. 70). During the 1980s, the FDA faced criticism from various directions regarding its research approval process, specifically from AIDS activists who demanded that the government work faster to approve a treatment for the disease (Doblin, 2001, p. 134, 138; Duggan, 1988). The FDA's drug approval process was slow, especially in comparison to similar government entities in other countries. In 1987, Dr. Carl Peck became the director of the FDA's Center for Drug Evaluation and Review (CDER), which is responsible for regulating and monitoring any drugs or substances used in human subjects or patients (Doblin, 2001, p. 133). Dr. Peck was eager to increase the FDA's efficiency while not diminishing its quality of review (Doblin, 2001, p. 134).

Regime Response – Clearing the Backlog of New Drug Applications

Under the mounting pressure now coming from the public, Congress, and the pharmaceutical industry, the FDA sought innovative processes and worked to reduce the backlog of drug research applications. The regime response was influenced by the public perception of the FDA.

Mechanisms – Establishment of the Pilot Drug Evaluation Staff

In 1989, Dr. Peck established the Pilot Drug Evaluation Staff (PDES). The creation of this unit was an experiment of the drug review process, and the PDES was tasked with identifying barriers to drug research and developing new policies and procedures that may be more efficient than the existing FDA process (Doblin, 2001, pp. 141-142). Essentially, it was more focused on evaluating new processes rather than evaluating drugs.

When the PDES was established, it needed to have drugs to test the new processes and procedures on, so the CDER was reorganized. Prior to this, drug review was split into eight divisions, organized by drug purpose. For example, one division was responsible for evaluating any drug related to oncology, another division for surgical-dental, and so on (Doblin, 2001, p. 143). The review of drugs used to treat drug abuse was moved into the new division, and with it came any other research conducted on drugs of abuse (Doblin, 2001, p. 146). This included schedule I drugs.

This category of drugs had previously been the responsibility of the Neuropharmacological Drug Products division, which had shown a lack of interest in them (Doblin, 2001, p. 147). This division had been putting Clinical Holds on psychedelics for years (Doblin, 2001, p. 146). This was likely due to their contentious schedule I status. Although the PDES was created in response to concerns of the AIDS epidemic, it facilitated a major change in the trajectory of psychedelic research (Doblin, 2001, p. 71).

Outcome – Psychedelics as Treatment for Mental Ailments

Schedule I drugs, now being under the purview of the PDES, were being reviewed in the same manner as other drugs, and the research applications that had been put on hold were receiving new attention. Since the conditions had changed, and the substances were no longer stigmatized, the FDA cautiously moved forward with the discussion of this type of research.

Doblin refers to this new period as the "era of cautious acceptance," spanning from 1989-1996 (Doblin, 2001, pp. 3, 70).

In 1990, the PDES approved new psychedelic research protocols. Since public attention had turned toward other drugs, there was no major backlash to the new psychedelic research. This signifies the potent role of public perception in this process. While political pressures and public sentiment influenced the early stages of this process, as the public began to shift its focus away from psychedelics, research could continue without political or public outcry. The difficulties that researchers had experienced were from political pressures, which had now changed (Doblin, 2001, p. 72).

As the stigma around psychedelics waned, research in this area continued to gain popularity. In 1992, the first therapeutically oriented psychedelic research protocol was submitted to PDES (Doblin, 2001, p.78). There would be many to follow. Psychedelic research on humans had stopped in 1965, making the decision to start human trials again significant, requiring serious and careful considerations.

By 1995, the PDES was dissolved due to concerns that the staff was not necessarily impartial in its conduct, resulting in the reduction of scientific rigor (Doblin, 2001, p. 165). Nonetheless, the PDES had explored new approaches to project management and drug review and established the policy framework for future research protocols. The FDA decided that it could maintain these innovations and no longer needed the PDES. Its dissolution was not related to its approval of psychedelic research (Doblin, 2001, pp. 180-181, 185). The FDA continued to uphold the new policy of evaluating schedule I drugs, including psychedelics, in the same manner as other drugs. This decision facilitated the exploration of the potential medical uses of psychedelics (Doblin, 2001, p. 184).

After the PDES had been dissolved, the FDA intended to uphold the new protocols for evaluating schedule I drugs, including psychedelics. However, there was a dip in approval rates, and some were concerned that the end of PDES also meant the end of research on these substances. With perseverance, such as formal complaints when research permission was denied, research was approved, and studies started to be conducted (Doblin, 2001, p. 130). By 2000, the FDA had approved several psychedelic studies, paving the way for the exploration of the potential benefits for mental illnesses like schizophrenia and psychosis (Doblin, 2001, p. 121).

Soon after, research extended to universities, and a government-sanctioned study in 2001 permitted the administration of psilocybin for medical research at John Hopkins under the guidance of Dr. Roland Griffiths. This study explored the connection between psychedelics and mysticism, yielding groundbreaking results. Over 70 percent of the research subjects reported that their experience with psilocybin was one of the most important events in their lives, with 30 percent describing it as the most important (Crandall, 2020, p. 372). Dr. Griffiths concluded that the effects of psilocybin were an inverse of the effects of trauma. The results revealed positive changes in mood, behavior, and attitudes toward life (Crandall, 2020, p. 372; Pollan, 2018, p. 11).

This research with psilocybin marked the beginning of the psychedelic renaissance that exists today. Researchers became interested in the positive impact that resulted from profound psychedelic experiences. Consequently, psychedelics gained popularity among scientists seeking new approaches to treat mental illness and addiction.

Part 4 – Government (D) Supports Psychedelic Research (->4)

Conditions – Military Suicide and Media Representation

At the turn of the century, the issue of veteran and active-duty military suicide became increasingly prominent, both in occurrence and in public awareness. This issue started to escalate

during the 1990s and early 2000s, eventually becoming a serious concern around 2010. The military and the public expressed deep concerns and were eager to identify the root causes of PTSD and suicide among soldiers, as well as effective treatment methods.

In the early 2000s, veteran and active-duty suicide rates steadily increased, coinciding with the U.S. combat operations in Iraq (Lineberry & O'Connor, 2012, p. 871). Since 2001, more than 30,000 military personnel, both active-duty and veterans, have tragically taken their own lives (Defense Advanced Research Projects Agency, 2022). Research on this phenomenon has revealed a clear correlation between military experience and severe mental health issues such as depression, anxiety, PTSD, and substance abuse. The prevalence of these issues correlates with the intensity and duration of an individual's deployment (Lineberry & O'Connor, 2012, p. 873). Today, veterans are twice as likely to commit suicide compared to the civilian population in the United States (*Military and Veteran Suicide*, 2019, p. 2).

Media Coverage and Evolving Terminology. Media coverage on this topic has increased significantly in the past 20 years, but it has been present since the early 20th century. Veterans have long returned home with psychological effects and trauma-related symptoms, known by different names such as 'shell shock'[14] and 'battle fatigue,' evolving into what we now recognize as PTSD (Chekroud et al., 2018, p. 1).

Chekroud and colleagues (2018) conducted a study on the discussion of veterans and psychological effects, examining articles or publications on PTSD and the military (Chekroud et al., 2018, p. 1).[15] The research found that between 1906 and 2016, a staggering 14,138, 283 articles were published in *The New York Times*, *Associated Press* and *Reuters* on this topic

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[14] After the First World War, post-combat psychological effects in veterans were referred to as 'shell shock' because it was believed that the symptoms were a result of physical brain trauma caused by the use of artillery shells in trench warfare.

[15] This research identified articles that included a PTSD term alongside a military term. This would be any combination of 'shell shock,' battle fatigue,' 'post-Vietnam syndrome,' and 'PTSD' with terms such as 'veteran,' 'soldier,' 'military,' or 'armed forces.' Of course, shell shock and battle fatigue are inherently referring to military personnel, but PTSD is more general.

(Chekroud et al., 2018, p. 1). There has been a notable increase in the discussion of mental illness since the 1950s (Chekroud et al., 2018, p. 2). The study identified a trend, being that the discussion of veteran psychology was significantly greater at times when troops were engaged in conflict.

Following the Vietnam War, the term 'post-Vietnam syndrome' emerged to describe the traumatic effects of the combat. This term eventually became a political term used to describe a new hesitancy in committing U.S. troops to unwinnable foreign conflict (Herring, 2010). Before it became a political term, it referred to PTSD symptoms in Vietnam veterans. The data collected by Chekroud and colleagues shows that the term began appearing in the media during the 70s, peaking in 1990, coinciding with the start of the Gulf War (Chekroud et al., 2018, pp. 2-3). The term 'post-Vietnam syndrome' was soon after replaced with 'PTSD,' a term that identifies trauma as the cause of the psychological effects. During the 2000s, there was a large increase in the percentage of media content that discussed this topic (Chekroud et al., 2018, p. 2). There was a parallel increase in the research on mental illness and the study of psychedelic-assisted therapy. This was potentially influenced by the growing discourse on the topic, which was impacting public perception of military service.

Trends in Military Suicide. The United States has long shown concern for returning veterans, with memorials for the fallen and healthcare for the wounded. More recently, there has been an increased emphasis on understanding the psychological effects experienced by those returning home physically unharmed (French, 2017, p. 10).

As explained in the literature review, IPTS denotes two major influences on suicidal ideation, as well as two factors impacting the escalation to self-directed violence (Monteith et al., 2013). Suicidal ideation often arises from feelings of thwarted interconnectedness and

burdensomeness. Escalation to suicide results from a habituation to violence and access to means. Those within the military often experienced higher-than-average rates in these categories.

The U.S. Department of Veterans Affairs (VA) publishes annual reports on suicide prevention, which provide critical statistics and insights into the severity of the issue (U.S. Department of Veterans Affairs, 2022). These reports draw data from the Department of Defense (DoD) and VA's interagency Suicide Data Repository (*Military and Veteran Suicide*, 2019).

Statistics from the National Veteran Suicide Prevention Annual Report 2022 support this theory's discussion of thwarted interconnectedness (U.S. Department of Veterans Affairs, 2022). The data indicates that veterans who die by suicide have a lower level of involvement with the Veterans Health Administration (U.S. Department of Veterans Affairs, 2022, p. 23). This suggests that veterans involved with the VA have a lower suicide risk. Additionally, veteran suicide rates are higher in rural areas than in urban areas, possibly related to interconnectedness, community size, and access to VA facilities (U.S. Department of Veterans Affairs, 2022, p. 28).

Suicidal ideation does not always escalate to self-inflicted violence, but this escalation is more likely when an individual is desensitized to violence and access to lethal means, which are common among veterans and active-duty military personnel. According to data collected by the VA (2022), most veteran suicide involves the use of a firearm. In 2020, 71% of veteran suicide deaths involved a firearm (U.S. Department of Veterans Affairs, 2022, p. 19). This is significantly higher than the next most frequently used method, suffocation, which is used less than 15% of the time (U.S. Department of Veterans Affairs, 2022, pp. 17 -18). Non-veteran adults, in contrast, are more likely to use suffocation, as it is the method used in about a third of civilian suicides (U.S. Department of Veterans Affairs, 2022, p. 18).

Regime Response – Support the Research of Innovative PTSD Treatments

In response to the alarming rise in military suicides and the pressing need for effective PTSD treatments, the U.S. government has made addressing these issues a top priority (Defense Advanced Research Projects Agency, 2022). Unfortunately, traditional medical treatments for PTSD, such as SSRIs, have proven ineffective for a portion of the veteran population. These medications involve lifelong use and come with side effects. Fortunately, research into psychedelics has started to yield promising results.

Recent studies have demonstrated that psychedelics can significantly alleviate symptoms of various mental health conditions, including PTSD. In some cases, just one treatment session of psychedelic-assisted psychotherapy has led to patients no longer meeting the medically accepted criteria for a PTSD diagnosis (Earp & Savulescu, 2020; Kalensky, 2022; Mithoefer et al., 2018).

The timing of the regime response can be understood through ripeness theory, which suggests that changing circumstances can influence the conclusion of conflicts by creating a 'ripe' moment. Previously, conditions were such that permitting psychedelic research would have been detrimental to the private interests of the U.S. government. However, changing conditions and increased media attention on veteran suicide encouraged the support of nonconventional PTSD treatment approaches (Londoño, 2022).

Mechanisms – Increasing Funding and FDA Approval Rates

With government and FDA approval, clinical studies have been able to explore the impact of psychedelics on veterans with PTSD. The rate of approvals has been increasing, and in 2021, the FDA reviewed more applications for psychedelic research than it had in the previous four years (Londoño, 2022).

In 2001, the FDA approved the first study of MDMA for PTSD, marking the beginning of an extensive clinical research venture supported by the Multidisciplinary Association for Psychedelic Studies (MAPS). The 20-year MDMA research program, which started its efforts in 1992, gained Breakthrough Therapy Designation from the FDA in 2017 (Mathis, 2017). This designation signifies that there is substantial clinical evidence that MDMA-assisted psychotherapy is effective and suggests that this treatment may be more beneficial than current medically accepted treatments.

The DoD, through the Defense Advanced Research Projects Agency (DARPA), has played a direct role in funding psychedelic research (Geppert, 2022). DARPA has invested millions of dollars into psychedelic research (Geppert, 2022, p. 398).

Additionally, some U.S. states have approved measures allowing for the study of certain psychedelic substances as mental health treatments (Public Act No. 21-26, 2021, p. 9; H.B. No. 1802, 2021).

Outcome – Positive Results of Medical Benefits

The increased focus on psychedelic research has transformed the lives of many individuals who had the opportunity to participate in these studies. One popular example is John Lubecky. Lubecky returned from Iraq in 2006 with PTSD and found the standard anti-depressants prescribed by the VA to be ineffective, leading to alcohol abuse and five suicide attempts (Crandall, 2020, p. 375; Earp & Savulescu, 2020, pp. 92-94). He thought nothing could alleviate his PTSD symptoms. However, his life took a positive turn when he enrolled in a research study exploring the effects of MDMA-assisted psychotherapy on PTSD. This experience saved Lubecky's life.

Clinical trials of psychedelic-assisted psychotherapy for PTSD have even been directly offered by the VA. MDMA-assisted therapy has demonstrated impressive results, with a majority

of subjects experiencing a reduction of more than 30% in their PTSD symptoms after just two psychotherapy sessions. Others saw a total reduction of symptoms, no longer meeting the criteria for a PTSD diagnosis (Earp & Savulescu, 2020; Kalensky, 2022; Mithoefer et al., 2018). These positive effects have been long-lasting, with three-quarters of the research subjects still experiencing symptom reductions three and a half years after their initial treatment (Kalensky, 2022).

In another study involving three MDMA psychotherapy sessions, 67% of subjects no longer met the criteria for a PTSD diagnosis. These sessions occurred within an 18-week time period, demonstrating that MDMA-assisted psychotherapy can eliminate the symptoms of PTSD in a relatively short period of time (Crandall, 2020, p. 376; Kalensky, 2022). The reduction in symptoms was still present more than a year after the sessions concluded (Crandall, 2020, p. 376).

Research involving LSD and Psilocybin has also shown promising results, although these substances are being studied in the general population rather than in veterans. These psychedelics demonstrated potential as treatments for various mental health conditions, including depression caused by a terminal illness diagnosis, major depressive disorder, Alzheimer's disease, migraine headaches, obsessive-compulsive disorder, and anorexia nervosa (Kalensky, 2022). Furthermore, psychedelic-assisted psychotherapy has shown promise in addressing addiction issues, particularly with cocaine, opioids, or alcohol (Kalensky, 2022). This is relevant to the veteran population, which has a higher incidence of struggling with substance abuse issues.

An interesting component of this research and the effectiveness of psychedelic-assisted psychotherapy is the interaction it has with empathy. Moral injury and the resulting PTSD can be influenced by a lack of empathy, leading to feelings of disconnectedness. The combination of psychedelics and psychotherapy appears to reintroduce individuals to patterns of empathy within

the brain. In a government-sanctioned study at John Hopkins with psilocybin in 2001, subjects reported experiencing feelings of love and understanding, which fundamentally reshaped their perspectives (Crandall, 2020, p. 373).

Scientifically, psychedelic experiences can have lasting effects, influencing neuroplasticity in the brain. Psychedelics introduce a flood of neurotransmitters like serotonin, dopamine, and norepinephrine, which elevate mood and reduce stress (Crandall, 2020, p. 375). The altered chemical neuro-environment allows individuals to process past events, including trauma and PMIEs, in new and healing ways. When an individual engages with a memory, they reexperience the event. Standard psychotherapy can be healing, and there are benefits to having a therapist guide a patient through a memory in order to process it. This benefit is expanded in psychedelic-assisted psychotherapy, for it includes a new chemical neuro-environment. This allows an individual to not only process their memories but also rewrite them, permanently removing the feelings of fear and stress that reside within the memory. Psychedelic-assisted psychotherapy addresses the root of the issue, creating new networks in the brain.

Importantly, psychedelic-assisted psychotherapy is extremely safe. So far, thousands of subjects have participated in these clinical studies. There have been no reports of any serious adverse events (Pollan, 2018, p. 15). This safety profile is extraordinary.

Effect – Impending FDA Approval of MDMA-Assisted Psychotherapy (Y)

The recent resurgence of interest in psychedelic research has been referred to as a psychedelic renaissance (Pollan, 2018, p. 3). This has been accompanied by a significant increase in media coverage highlighting the positive effects of psychedelics. This media attention is contributing to a growing acceptance of these substances within the American public.

Journey to FDA Approval

In January of 2023, MAPS reported groundbreaking results from the first-ever Phase III clinical trial for a psychedelic substance. Phase III trials are the pivotal final step in the FDA approval process for drugs before they can be marketed. Specifically, this trial demonstrated the efficacy of MDMA-assisted psychotherapy in treating patients with PTSD (Mitchell et al., 2021). The study protocol employed in this trial may serve as a model for future Phase III clinical trials involving psychedelics. With these promising results, there is a realistic possibility of FDA approval, suggested to come by 2024 (Inouye & Wolfgang, 2022). Such approval would make the positive effects of MDMA-assisted psychotherapy more widely available, including to veterans (Crandall, 2020, p. 377).

Expanding Benefits to Veterans and Civilians

The statistics of military suicide emphasize the need for accessible and effective PTSD treatments. This demographic would benefit immensely from increased access to psychedelic-assisted psychotherapy. In addition to this, non-military civilians who experience PTSD, depression, or substance abuse issues could also benefit if MDMA-assisted psychotherapy is approved by the FDA. MAPS founder Rick Doblin is optimistic that MDMA-assisted therapy for PTSD will soon be available to those in need (Multidisciplinary Association for Psychedelic Studies, 2023). Doblin has asserted that if scientists were tasked with designing the perfect drug to treat PTSD, it would be MDMA (Crandall, 2020, p. 376).

Currently, the only access to such treatment is by participating in clinical trials, which often have lengthy waiting lists due to the high demand among many with PTSD (Crandall, 2020, p. 378). While some, like John Lubecky, have had their lives transformed through these trials, there are limited spots available, and many eligible individuals are not able to participate.

Until FDA approval is granted for psychedelic-assisted psychotherapy, individuals suffering from PTSD lack legal access to effective treatment. Consequently, some are compelled to travel abroad to seek similar care. While this experience proves therapeutic for many, it comes with risks, including reports of sexual abuse at foreign retreats while under the influence of psychedelics (Villeneuve & Prescott, 2022, p. 1). The safety of individuals, particularly veterans, should not be jeopardized in their quest to alleviate life-threatening PTSD symptoms. Hopefully, this situation will change in the near future.

Media Shapes Public Perception

The recent surge in media coverage highlighting the positive effects of psychedelics is playing a pivotal role in shaping public perception and acceptance of these substances in the American public. This influence is significant, and hopefully, it will continue further. Despite the progress, a substantial portion of the United States population still harbors reservations about psychedelics, considering them to be dangerous drugs. For example, in 2014, a public opinion poll found that more than 60% of Americans opposed the legalization of psychedelics (Crandall, 2020, pp. 371–372). Concerns about the potential dangers of psychedelics are not entirely unfounded, particularly in uncontrolled environments. It is essential to emphasize that in a controlled therapeutic setting, these substances are both safe and effective. Spreading awareness of this is crucial to increasing accessibility to psychedelic-assisted psychotherapy. The more widely accepted this approach becomes, the more individuals will be able to benefit from this transformative treatment.

Chapter 6 – Discussion and Conclusion

Introduction

This final chapter will explore research findings, summarize the overall paper, and explore what the content of this paper suggests for the future. The research question that guided this overall endeavor was, *'How has the public perception of the dominant militarized ideology in the United States influenced psychedelic drug policy?'* This question was formed from an interest in the causes of the restrictive drug scheduling of psychedelics, as implemented by the Controlled Substances Act of 1970. The research found that the government had no scientific data to support that the drugs were dangerous or non-medically beneficial, meaning political motivations are the true cause of psychedelic drug scheduling. This paper hopes to have supported this assertion through the examination of conflict resolution theories, which are formulated on past events and patterns of human psychology. The examination of this case traced the process until today. This temporal scope contributes to a better understanding of the original cause and can support predictions of the future of the process.

The Nixon Administration did face challenges to its militarized ideology. Threatened by the counterculture movement, Nixon deployed anti-psychedelic policies, hoping to debase those who posed the challenge. The need to strictly prohibit the use and research of psychedelics was not scientifically supported. It was a form of corruption in that such policies were enacted to achieve private gain for the presidential administration. The use of drug policy as a political tool proved effective.

Due to the resulting negative perception of drugs by the American public, those who took office following Nixon would be criticized for relaxing drug policy, even though scientists and Congress were recommending this action. For decades, psychedelics has been listed as schedule I controlled substances. The continued inclusion of psychedelics on schedule I disadvantages the

American people. The greater concern was of the detrimental effect that relaxing drug policies would have had on Presidential support. This case serves as an example that corruption can be persistent in an organization, remaining even when the individuals who occupy that organization change.

Eventually, psychedelic stigmatization wore off as other drugs proved more dangerous. This changed the conditions, allowing for the reignition of psychedelic research. When psychedelic research returned, it still faced many barriers. These barriers decreased, while funding and approval rates increased once psychedelics were revealed as potentially beneficial to the veteran population. The tragic epidemic of suicide among military personnel demands attention, and every possible solution to the issue should be considered. This includes psychedelic-assisted therapy. Recent results from the first-ever Phase III clinical trial with a psychedelic substance have substantiated the evidence that psychedelic-assisted psychotherapy is beneficial for PTSD in veterans. Soon, MDMA-assisted therapy may be approved by the FDA.

Findings

One significant finding from this research is that public perception is the most influential variable in this case. The in-depth exploration, specifically of the conditions that precipitated actions, reveals that changes in public opinion are potent motivators and influence governmental response. Public perception was relevant in this case in two ways. For one, it was a motivator of change. However, in addition to this, the government discovered that influencing public perception is a powerful political tool.

For example, it was not simply the existence of the anti-Vietnam War movement that posed a threat to the Nixon Administration. Rather, it was that this movement was particularly effective at increasing a negative public opinion of the military activity in Vietnam. The change in the public perception was the variable that influenced a reaction. The effort to debase the

movement was performed, not because Nixon disagreed with them, but because they were affecting his public support.

The Nixon Administration targeted the antiwar movement in several ways, including the infiltration of the group with special agents. The more effective tool was the one that played into public perception. When Nixon passed the Controlled Substances Act, it did not just make drug use illegal but also immoral. This action led to those in the antiwar counterculture movement being perceived to be dangerous and lacking morality. This played into the differentiation tactics that often come out of cultural conflict. Criminalizing psychedelics led to their stigmatization. This was exacerbated by media stories on their effects, which cited falsified DEA studies. Such a public perception made drug policy a wonderful tool for presidential administrations, although it was ineffective at curbing drug use. Psychedelic research was not able to thaw until public perception changed again, which emphasizes that it is the most influential variable.

The weaponization of public perception is dangerous at the societal and the individual level. It is especially dangerous for societies when the perception is of a group. When a government acts in ways that lead to the further differentiation of those who are not in their group, it can cause ingroup members to have bad perceptions of the other. If a conflict emerges, and the groups see the other in a negative light, conflict can be more intense. This is especially true when one group dehumanizes the other group.

This is also dangerous at the individual level and can lead to individuals struggling with internal conflict. If their behavior or experience does not align with the one that the government is supporting, they may question themselves. This can cause them to act out, either to find themselves or to hurt themselves. In the 1960s, individuals who did not agree with the government questioned their American identity and experimented with psychedelics. More recently, the dangers of public perception have affected veterans who return home from combat.

When the public perception of the conflict they were in is negative, perhaps being seen as unjustified, it can affect how veterans process their combat experience. It can be harder to psychologically grapple with events they witness or took part in. This causes an internal struggle that can lead to suicidal ideation, and maybe even suicide. Public perception of a conflict has a great influence on how the veterans of that conflict process it after they are home.

Benefits of the Analysis

The exploration of this case and the related theories hopes to serve as a humble addition to the field of conflict resolution. The analysis reveals various features of the case that are important. First, the main finding is that public perception is an extremely potent variable and crucially influences action. Acknowledging this can direct future case studies and research to focus on this aspect. It may be more about what people are perceiving rather than what is actually happening.

Another aspect of this analysis that may be beneficial to the field is the discussion of the psychological effects of military experience both combat and training. It is important that more people are aware of the psychological elements of military experience. This includes being aware of the warning signs of veteran both suicidal ideation and military suicide. This literature should be widely known within in the military.

Discussion of the research on psychedelic-assisted psychotherapy can also beneficial to those who struggle with PTSD. Promoting awareness of this treatment strategy, and a positive public perception of it, will increase research and funding opportunities. The academic discussion of this topic is especially important. Since the substances are still on schedule I, it can be difficult for certain actors, like the DoD and the VA, to address this topic with full transparency. For example, the most recent report from the VA on veteran suicide did not mention psychedelic-assisted psychotherapy (U.S. Department of Veterans Affairs, 2022). The

report does list current prevention measures, including innovation efforts and research. This list does not include information on psychedelics, and only briefly mentions therapy, discussing how telehealth virtual therapy may increase access (U.S. Department of Veterans Affairs, 2022, pp. 38, 40). The report focuses on social solutions, like increasing communication, financial aid, and VA access, which is valid and may be really beneficial to those with PTSD. It amplify that there is a dire need for more effective care options, but it does not give examples of what this may be (U.S. Department of Veterans Affairs, 2022, p. 36). The omission of psychedelic-assisted therapy from the report emphasizes the need for this topic is discussed elsewhere, like within academia. This does not necessarily suggest that the DoD and the VA do not find psychedelic-assisted psychotherapy hopeful; it difficult to discuss the application of a substance that is not officially FDA approved from within the government. The VA and DoD do continually express the importance of the issue, and believe that every possible prevention measure should be explored (*Military and Veteran Suicide*, 2019, p. 43).

This paper draws attention to the fact that governments can be corrupt, prioritizing its own interests over what is best for the public, or the people they serve. The analysis in this case revealed that the government acted in ways to ensure that public perception would align with the dominant ideology. The discussion of this encourages individuals to question the motives of their leaders. As explained, a government official is more likely to be corrupt if they think they will get away with it, or the determined pros outweigh the cons. If more individuals are aware that government officials may become corrupt, chances are higher that the public will identify corrupt behavior. This increases the risk of being caught, which could decrease the rates of corruption.

A major benefit of this analysis and the discussion of the benefits of psychedelic-assisted psychotherapy is that it allows for a more robust consideration of the legal classification of these substances. The evidence shows that these substances are not addictive or dangerous. However,

they are still classified as schedule I substances. According to the Controlled Substances Act, schedule I drugs have a high potential for abuse and no medically accepted use as a treatment in the United States. The study of these substances makes it clear that they do not meet these characteristics, as they can treat PTSD. It is important that psychedelics are reclassified. This paper hopes to get that message out there. Any other schedule would be a better fit. Schedule II drugs are defined as substances with "a high potential for abuse," yet there is an accepted medical use with "severe restrictions" (Controlled Substances Act, 1970, p. 1247). Schedule III is slightly less controlled, being drugs that have a lower potential for abuse than those in schedule I and II. Schedule III substances are defined as potentially causing "low physical dependence or high psychological dependence" and have accepted medical uses (Controlled Substances Act, 1970, p. 1247). Even rescheduling psychedelics to schedule II would make them widely more accessible for research and medical treatments. However, they may better fit the description of schedule III, as they are found not to be addictive, and individuals will not build a dependence on the substance. Psychedelics should stay controlled, and they should not be used without medical supervision or the guidance of a professional. However, they certainly should not remain on a schedule I, which they do not meet the definition of.

Implications Moving Forward

Psychedelics

This paper covered many different complex topics, and its findings do reveal implications for many of these areas. The first to be discussed are the implications for psychedelic research and applications of psychedelic-assisted psychotherapy. If psychedelics are rescheduled, the benefits of their therapeutic use could extend far. While they could treat mental health, they may also be able to heal relationships.

There has been an interest in the use of MDMA in couples therapy when one of the members of the couple has PTSD. Such research was active in the 1970s and 1980s before MDMA was made illegal (Earp & Savulescu, 2020, p. 83). It has resurfaced. Evidence from a MAPS-sponsored clinical study shows that MDMA changes how partners relate to each other, increasing sociability while decreasing anxiety around hard topics (Almond & Allan, 2019; Baggott et al., 2015; Wagner et al., 2019). The couples can emotionally explore issues that trouble them, address the role of trauma in these issues head-on, and build patterns that heal the partner with PTSD. It can be hard for those who have suffered trauma to discuss its effects, even with loved ones. MDMA appears to make this easier (Earp & Savulescu, 2020, pp. 82-83). Individuals describing a shared MDMA experience say that it enhances love and makes those involved feel like they have been merged (Stones, 2019). Chemically, MDMA causes the release of neurotransmitters and hormones, such as serotonin and oxytocin, which mediate feelings of satisfaction, happiness, optimism, and comfort. Couples who have experienced MDMA-assisted couples therapy explain that afterward, their relationship is built on love, trust, and understanding (Earp & Savulescu, 2020, p. 84).

The study of conflict resolution outlines the importance of trauma healing and reconciliation in the prevention of a resurfacing conflict. It emphasizes the importance of understanding, respect, and, most importantly, trust. The evidence of MDMA-assisted couples therapy shows impressive results in the capability of removing fear and anxiety, creating opportunities for relationships to be built and greater connections to be had. This leads to a lofty question: *Can psychedelic-assisted therapy benefit conflict resolution?* Perhaps psychedelics could play a role in reconciliation. Perhaps they could play a role by influencing consciousness transformation, creating opportunities for negotiation or settlement of violence.

In many ways, the use of MDMA-assisted psychotherapy is involved with conflict resolution when used to treat PTSD in veterans. PTSD in veterans is a direct result of conflict experience, meaning the treatment of such PTSD is conflict-related trauma healing. However, this trauma is very different from the trauma felt by innocent civilians who experience violent, protracted conflict throughout their lives. U.S. veterans travel to combat zones but then return home to a peaceful environment. For civilians who live within a conflict zone, there is no escaping its traumatic elements. With this said, there have been interesting cases of the use of psychedelic therapy with individuals who have not been removed from conflict. For example, in 2019, the Israeli Ministry of Health approved the compassionate use of MDMA-assisted psychotherapy for PTSD at four different treatment sites throughout Israel (Multidisciplinary Association for Psychedelic Studies, 2019). Perhaps even more interesting is the joint ceremonial use of Ayahuasca as a conflict resolution practice, involving both Israelis and Palestinians (Ginsberg, 2019, p. 42). Such ceremonies are connected to spirituality and involve related music and text. When interviewed on such experiences, those involved reported having feelings of acceptance, togetherness, and interconnectedness and expressed that their anger was transformed into compassion, specifically in the context of the ongoing protracted conflict (Ginsberg, 2019, p. 42). The reported result is that they no longer see those in the outgroup as *the other*, seeing a person as a person before seeing them as a Jew, Muslim, Christian, Israeli, or Palestinian. Especially intriguing is the reported influence such ceremonies have on an individual's activism (Ginsberg, 2019, p. 43). Individuals said that prior to the ceremony, their nonviolent activism was motivated by hate, but since their joint psychedelic experience, their activism is motivated by love and compassion. Such reports suggest that group therapy using psychedelics with individuals involved in conflict can transform their consciousness, reducing differentiation, fear, and hatred.

This implies that there is a need for more research on psychedelic therapy and conflict, not just in trauma healing but also in consciousness transformation. Perhaps psychedelics can heal systematic generational trauma. This needs to be explored.

Military

As explained in depth, military training in the United States can have detrimental effects on the individuals who experience it. The acknowledgment of this influences the discussion of what changes could be made to avoid this negative and life-threatening effect. *Is there a way to train effective soldiers while not diminishing empathy and moral integrity?*

The research found that there is an increased suicide rate, compared to the general U.S. population, among both veterans and non-deployed military personnel, revealing that suicide is not just a result of PTSD. Perhaps there is a more encompassing term that would better fit the condition common among the U.S. military. The psychological effects do result from trauma, but also from the removal of the natural inhibition to kill. Using the term 'post-traumatic stress disorder' to refer to the psychological effects of military service leaves out a significant part of the equation. The mental condition present in this population has been misnamed before, having evolved from battle fatigue, shell shock, and now, PTSD. Each term references the assumed cause. It would not be surprising if the term evolved again in the future, maybe including a reference to habituation of violence, moral injury, or thwarted interconnectedness.

Hopefully, the trend of PTSD and suicide in military personnel can be corrected. The research in this paper implies there are necessary changes to be made to military training. The psychological conditions of military personnel are improved by psychedelic-assisted psychotherapy, which increases neuro-networks of empathy (interconnectedness), compassion, and acceptance. This suggests that military training damaged the natural condition of these

networks, creating the need for them to be reintroduced with therapy. The elements of military training that hurt empathy need to be identified and removed.

Psychedelics are beneficial in the treatment of PTSD. However, working to correct the issues of military training that can lead to psychological issues would be an additional effective solution. Evidence shows that soldiers who treat their opponents with dignity have less psychological damage (French, 2017, p. 11). If military training prepared soldiers for combat while ingraining that the enemy has inherent worth, there would be lower rates of PTSD. Combat experience would not be a PMIE, and soldiers would not struggle with moral injury. It is necessary that the mental health of military personnel is prioritized. If military training emphasized ethics and morality, soldiers would have a psychological resilience to trauma (Bartles-Smith, 2022, p. 1727).

There is a concern that this would diminish the efficacy of the soldier. This concern is interesting and can be interpreted as the prioritization of a soldier's effectiveness over their mental health.

Conclusion

In conclusion, this paper explored psychedelic legislation, revealing that the substances were more threatening to dominant ideology and culture than to public health. The most potent variable in the evolution of conditions was public perception. The inclusion of psychedelics in psychotherapy enhances the treatment of mental health of veterans by changing the neuro-environment and promoting feelings of acceptance. Such research and findings have implications for both military training and conflict resolution. Such research hopefully reveals that conflict is psychologically damaging, emphasizing the need for nonviolent approaches to change, while highlighting that the power to make change is rooted at the individual level.

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