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# New Frontiers in Military Mental Health Science and Practice: Catalyzing Therapy with Psychedelics

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## Introduction

The intersection of military mental health and emerging therapeutic approaches requires careful consideration, particularly when examining promising yet experimental treatments like psychedelic-assisted therapy (PAT). This analysis provides a high-level overview of PAT's potential role in military mental health care, while acknowledging the need for thorough scientific validation and alignment with both military organizational values and tactical requirements. Consistent with the DoD's three pillars of Force Health Protection: (1) promoting wellness and sustaining health to deliver a healthy and fit force; (2) preventing acute and chronic casualties during training, deployments and war; (3) providing high-quality health care in peacetime and on the battlefield, the potential use of PAT must be in accordance with these pillars as new frontiers in treating trauma-related disorders and sustaining a healthy and fit force. Contemporary research suggests that PAT, which combines psychedelics like psilocybin and MDMA with traditional psychotherapy, shows promise in symptom reduction, therapeutic engagement, and treatment adherence. As military medicine has historically balanced innovation with prudent caution in "going to the sound of guns" (proactively addressing needs), the examination of PAT's applications for addressing complex psychological challenges within military and veteran populations warrants thoughtful investigation. While maintaining operational readiness remains paramount, research indicates that psychedelic therapies may enhance warrior effectiveness through improved mental wellness and cognitive flexibility. However, as Brim et al. (2024) emphasize, careful consideration is essential, particularly given that psychedelic substances like MDMA remain prohibited for active-duty personnel outside approved research settings. Also, while psychedelic-assisted therapy offers unique potential for addressing complex psychological challenges, it is not a simple solution to mental health struggles. Rather, it often involves confronting difficult emotions and experiences, with the goal of fostering deeper emotional resilience, mental clarity, and psychological flexibility over time.

## The Need for New Treatment Options in the Military Community

The prevalence of mental health challenges within military populations underscores the importance of exploring innovative treatment approaches while maintaining the highest standards of care. Recent data illustrates both the scope of these challenges and the opportunities for enhanced therapeutic interventions.

Statistics from 2022 indicate that approximately 17.6% of active-duty personnel sought psychological health treatment, though this likely understates the actual need, as it only reflects those actively pursuing care (Curry, 2024). While Trauma-Focused Cognitive Behavioral Therapy (CBT-TF) serves as the primary psychological intervention for PTSD in both active and veteran populations, current treatment approaches face significant challenges. A review of randomized clinical trials (RCTs) found that noncompletion rates for trauma-focused therapies, such as prolonged exposure therapy (PE) and cognitive processing therapy (CPT), ranged from 25% to 48% among active-duty military personnel and veterans (Steenkamp et al., 2020). In routine clinical practice at the Veterans Administration (VA), the rates of noncompletion were even more concerning, with over 60% of veterans who started PE or CPT failing to complete treatment over a fifteen-year period (Maguen et al., 2019). Response and remission rates within one to six months were 35% for PTSD, 45% for depression, and 41% for anxiety among Army military personnel receiving behavioral health services (Hepner, 2021). Earlier research also highlighted that many service members who could benefit from mental health treatment, particularly for PTSD, often didn't access available services (Hoge, 2014). Additionally, concerns persist regarding career impacts, security clearance maintenance, and fitness for duty, especially when treatment involves chronic psychotropic medications.

These findings suggest the value of investigating additional therapeutic approaches that might better serve military personnel while maintaining the highest standards of care and operational readiness. In other words, we need more tools in the toolbox, that can complement and even sharpen our existing and necessary tools and can therapeutically and practically address cognitive distortions.

## Federal and State Initiatives Supporting Psychedelic-Assisted Therapy

The landscape of psychedelic-assisted therapy (PAT) within military healthcare is evolving through strategic federal and state initiatives that prioritize rigorous scientific validation while maintaining military organizational values. These initiatives demonstrate a methodical approach to investigating psychedelics' therapeutic applications, supported by empirical evidence from randomized controlled trials (RCTs) and complementary research methodologies.

The Veterans Administration (VA) has adopted a systematic approach to evaluating PAT through carefully designed pilot studies and strategic research partnerships.

A significant milestone occurred in September 2023 with the VA's State of the Art (SOTA) Conference on psychedelic treatments, which convened 72 subject matter experts to develop an evidence-based framework for implementing MDMA and psilocybin therapies within the VA system. This strategic groundwork led to concrete actions: in January 2024, the VA's Office of Research and Development issued a Request for Applications (RFA) focusing on MDMA and psilocybin research for PTSD and depression treatment. The formation of an Integrated Project Team (IPT) in April 2024 further strengthened the VA's systematic approach to research implementation (Wolfgang, [2025](#)).

The Department of Defense (DoD) demonstrated its commitment to exploring innovative treatment options through the 2024 National Defense Authorization Act (NDAA), which identified psychedelic research as a critical gap area. The subsequent allocation of \$10 million for DoD-wide psychedelic medical trials reflects a measured approach to advancing evidence-based therapeutic options for service members and veterans.

At the state level, Oregon's Measure 109 established a precedent for regulated therapeutic applications of psilocybin, implementing comprehensive oversight mechanisms. Colorado's Proposition 122 (also known as Natural Medicine Act of 2022) expanded this framework, creating structured protocols for licensed healing centers offering supervised psilocybin sessions, scheduled to commence in 2025, while maintaining appropriate municipal oversight. Texas has emerged as a leader in supporting MDMA and psilocybin research for PTSD treatment, particularly focusing on veteran care through coordinated private and state initiatives. Maryland's proposed legislation for clinical trials investigating psychedelic-assisted therapy for veterans with trauma-related disorders exemplifies the growing scientific interest across multiple regions of the country.

These coordinated federal and state initiatives reflect a careful, evidence-based approach to evaluating psychedelic therapy's potential role in military and veteran mental health care.

### **Psychedelic-Assisted Therapy FDA Drug Development Process**

The integration of psychedelics like psilocybin and MDMA as therapeutic catalysts represents a significant development in mental health treatment paradigms, particularly for PTSD and related conditions. The FDA's methodical evaluation of these treatments provides a rigorous structured approach to validating novel therapeutic modalities.

Recent Phase 3 clinical trials evaluating MDMA-assisted therapy for PTSD have demonstrated promising outcomes, with 67% of participants showing substantial improvement to the point of no longer meeting PTSD diagnostic criteria, compared to 32% in the placebo group (Mitchell, [2023](#)). The FDA's request for additional data exemplifies their methodical evaluation approach, partic-

ularly given this treatment modality's innovative nature. This careful assessment is essential as MDMA-assisted therapy represents a novel treatment paradigm that uniquely integrates pharmacological intervention with specialized psychotherapy protocols.

It is also important to note that the FDA's review process identified several areas requiring attention in the New Drug Application (NDA) for MDMA. Primary concerns centered on aspects of study protocols, particularly regarding informed consent procedures and the management of psychological risks associated with intense psychedelic experiences and inadequate blinding. Additional considerations included therapist-participant relationship dynamics, long-term psychological impact assessment, outcome consistency across diverse populations, and protocols for managing adverse reactions during sessions. These factors influenced the FDA's decision, emphasizing the importance of refined study designs and enhanced safety protocols in future investigations.

The FDA's designation of Breakthrough Therapy status for both psilocybin-assisted therapy in treatment-resistant depression and LSD-assisted therapy for generalized anxiety disorder (GAD) reflects their recognition of these treatments' potential to significantly advance current therapeutic options. Initial clinical investigations have shown encouraging results, with both psilocybin and LSD interventions demonstrating meaningful effectiveness in symptom reduction for depression and anxiety, respectively.

The FDA maintains stringent safety and efficacy standards through their established three-phase clinical trial system, with many potential treatments not meeting these comprehensive requirements. While this thorough evaluation process requires considerable time and resources, it serves as a crucial foundation for establishing psychedelic-assisted therapies' scientific validity.

Despite developmental challenges as a new treatment paradigm and field of contemporary research, the growing body of research evidence and increased advocacy continue to build a substantive foundation for integrating psychedelic-assisted therapy into established mental health treatment protocols for military personnel and veterans. The ongoing regulatory review process serves as an essential quality control mechanism to ensure these therapies meet both safety and efficacy standards for broader clinical implementation.

### **Psychedelic Drug Definitions, Categories, and Examples**

The term "psychedelic" derives from Greek etymology signifying "mind-manifesting," highlighting these compounds' capacity to facilitate introspective exploration and access innate healing mechanisms. In the military mental health context, both the terminology and specific substances like LSD carry historically-influenced perceptions that warrant careful consideration. To effectively evaluate their therapeutic potential for service members and veterans, it's essential to develop an evidence-based

understanding of the distinct compounds classified as psychedelics.

### Examples of Psychedelic Drug Categories:

- **Serotonergic Classic Hallucinogens (Psychedelics):** This classification encompasses psilocybin (derived from specific mushroom species) and LSD (lysergic acid diethylamide), which primarily interact with the 5-HT<sub>2A</sub> serotonin receptor. These compounds can induce significant alterations in perception, cognition, and emotional processing. While their therapeutic potential is noteworthy, historical misconceptions necessitate careful consideration when evaluating their integration into military mental health protocols.
- **Entactogens and Empathogens:** MDMA (3,4-methylenedioxymethamphetamine) represents a distinct category. Unlike traditional psychedelics, MDMA promotes emotional accessibility and interpersonal connection, showing particular promise for treating combat-related PTSD and moral injury.

### Examples of Additional Psychedelics from Natural and Synthetic Sources:

- **5-MeO-DMT:** Sourced from *Bufo alvarius* toad secretions and specific botanical species, characterized by brief but profound altered states.
- **Ibogaine:** An alkaloid extracted from the *Tabernanthe iboga shrub*, showing potential applications in substance use disorder treatment.
- **Ayahuasca:** A traditional Amazonian preparation combining DMT with MAO inhibitors from two different plant sources, utilized for therapeutic and spiritual purposes.
- **Peyote and San Pedro:** Cacti containing mescaline, historically used in ceremonial contexts for extended psychospiritual experiences.
- **Synthetic Analogues:** Compounds like 2C-B, offering varied therapeutic applications and duration profiles.

Understanding the distinct characteristics of different psychedelic compounds is crucial for psychedelic-assisted therapy. Each substance presents unique pharmacological profiles, therapeutic applications, and safety considerations that require careful evaluation within the context of military medicine's commitment to evidence-based practice and operational readiness. Considering psychedelics to be a homogeneous category falls short and underscores the significant diversity in tolerability, impact, side effects, and safety; differences which begin (and end) at the 5HT-2A receptor.

A fundamental consideration in evaluating psychedelics for military mental health applications is the distinction between pharmaceutical-grade compounds and unregulated

substances. Street variants of MDMA, colloquially known as "Molly," present significant risks due to variable purity and potency, contributing to understandable institutional caution. In contrast, pharmaceutical-grade psychedelics are manufactured under rigorous quality control protocols, ensuring consistent potency and safety parameters essential for therapeutic applications.

This pharmaceutical distinction underscores the importance of standardized compounds in clinical research and therapy protocols. By maintaining stringent quality controls, these substances can be administered with optimal safety margins and therapeutic efficacy, facilitating their potential integration into evidence-based mental health interventions.

### Mechanisms of Change

Understanding the mechanisms of psychedelic-assisted therapy (PAT) reveals promising pathways for enhancing therapeutic outcomes, particularly for service members facing complex mental health challenges like PTSD and co-occurring conditions. Also, by addressing the interplay of biological, psychological, and social factors, PAT aligns with a biopsychosocial model, integrating wellness-focused approaches to foster both individual recovery and overall resilience.

While there are multiple biological and psychological processes that theoretically contribute to PAT's effectiveness, neuroimaging research has identified crucial interactions with serotonin 2A receptors, which modulate the default mode network (DMN). The DMN governs baseline thought patterns and self-perception (i.e., our sense of who we are, and the typical ways view ourselves, interpret the world around us, react, and pursue goals), and its modulation enables enhanced neural connectivity across brain regions in what has been termed the Relaxed Brain Under Psychedelics (REBUS model; Carhart-Harris, 2019). Though this modulation and the experience of its effects can be significant, it creates opportunities for adaptive perspective shifts, enabling individuals to reconstruct their self-perception and interpersonal dynamics. Thus, PAT extends beyond symptom management, fostering comprehensive psychological development by addressing entrenched habitual, and pervasively persistent cognitive patterns. This neurological mechanism has been validated through extensive research, including functional magnetic resonance imaging (fMRI) and positron emission tomography (PET) studies, demonstrating psychedelics' capacity to facilitate transformative therapeutic experiences (Carhart-Harris et al., 2012; Vollenweider & Kometer, 2010).

The synergy in PAT parallels military combined arms doctrine, where psychedelics and psychotherapy collaborate for maximum therapeutic impact. The psychedelic component functions as a catalyst, facilitating emotional processing and reducing psychological barriers, while psychotherapy provides structured guidance for integrating insights into sustainable healing practices. This integrated approach shows particular promise for conditions

like PTSD, where traditional interventions may show limited effectiveness. Similar to military operations, where coordinated arms achieve superior outcomes compared to single-domain approaches, the combination of psychedelics and psychotherapy offers a comprehensive treatment framework. Understanding this careful orchestration and emerging evidence base can inform military psychologists' evaluation of PAT's potential for service member care.

### **Psychedelic-Assisted Therapy Treatment Phases**

PAT implementation follows a structured, phase-based protocol ensuring safety and effectiveness. These phases align with military operational planning principles, providing a systematic framework for implementation and evaluation.

#### **Pre-Treatment Phases that Ensuring Readiness**

- **Screening Phase:** Drawing parallels with pre-mission personnel assessment, this phase implements comprehensive evaluations to determine therapeutic suitability. The screening process employs evidence-based protocols to assess both physiological and psychological readiness, examining cardiac risk factors that could be impacted by autonomic arousal during dosing sessions, and evaluating psychological stability with particular attention to conditions like manic presentations that might contraindicate treatment. This methodical approach reflects military medicine's commitment to risk mitigation and operational readiness. Also, the interdisciplinary collaboration between medical and mental health professionals during screening ensures a holistic assessment of physical and psychological readiness.
- **Drug Tapering Phase:** This phase mirrors operational stand-down periods, requiring careful management of existing medications, particularly serotonergic compounds that could interact with psychedelic agents. The systematic reduction of contraindicated medications follows established medical protocols, ensuring optimal conditions for therapeutic engagement while maintaining patient safety and physiological stability.

#### **Treatment Phases that Provide Sequential Structure**

- **Preparation Phase:** Analogous to pre-mission briefings and rehearsals, this foundational phase establishes essential groundwork for therapeutic success. Clinicians provide comprehensive education about psychedelic effects and potential psychological responses, while developing individualized coping strategies. This preparation embodies the military principle of thorough training, ensuring

participants possess the psychological tools and understanding necessary for meaningful engagement with the therapeutic process.

- **Dosing Phase:** This critical phase parallels mission execution, representing the culmination of careful preparation and planning. Under controlled conditions, participants engage with the psychedelic experience while maintaining therapeutic support and safety protocols. The emphasis remains on maintaining an adaptive mindset while navigating potentially challenging psychological territory, similar to the flexibility required in complex military operations.
- **Integration Phase:** Reflecting the military's after-action review process, this phase facilitates the processing and application of therapeutic insights. Participants work with clinicians to contextualize their experiences and develop strategies for implementing psychological insights into daily life. This structured reflection period proves essential for consolidating therapeutic gains and fostering sustained psychological resilience. It is essential for participants to approach their experiences with the understanding that PAT is not a one-time solution but part of a broader journey toward emotional well-being. By working closely with therapists, participants can process the insights gained from their sessions, transforming challenging experiences into actionable strategies for leading a more fulfilling life. The integration phase also highlights the importance of an interdisciplinary team, combining clinical expertise in trauma processing, wellness strategies, and relational dynamics to create a sustainable path to recovery.

Common to other therapies, the foundation of all PAT intervention, is the development, nurturing, and maintenance of the therapeutic bond/relationship. This phase-based approach demonstrates how PAT can be implemented and communicated within existing military medical frameworks, emphasizing safety, preparation, and systematic evaluation throughout the therapeutic process. The careful structuring of these phases reflects the military medical community's commitment to evidence-based practices while acknowledging the unique needs of service members and veterans.

#### **Psychedelic-Assisted Therapy Relevance for Military Members and Veterans**

The treatment's condensed format (typically requiring only one to three dosing sessions involving taking a psychedelic drug) addresses a common concern of many military members about medication dependence. This presents a compelling alternative to conventional long-term pharmacological interventions, which often require daily medication administration and may create a sense of diminished personal agency in the healing process.



## Group-Based Therapy and Peer Support in the Military Context

The adaptation of psychedelic-assisted therapy to group treatment models presents a distinctive advantage for military personnel and veterans. The VA's innovative approach of conducting group sessions with veterans who served together in "fire teams" leverages established unit cohesion and trust, fostering an optimal therapeutic environment. Research on group-based approaches indicates that shared healing experiences can produce robust outcomes, enabling veterans to rebuild both internal stability and external connections while strengthening their sense of community and shared purpose. Furthermore, group-based interventions may provide an ideal framework for addressing moral injury, particularly when social wounds stem from perceived betrayal or compromised trust in leadership relationships.

### Transdiagnostic Benefits

Current research demonstrates that psychedelic-assisted therapy shows promise in addressing multiple psychological conditions affecting military members and veterans, conditions that frequently co-occur (studies indicate over 80% co-occurrence with PTSD; Walter, [2018](#)):

- **PTSD:** Clinical trials investigating MDMA-assisted therapy have demonstrated compelling evidence for reducing PTSD symptomatology and enhancing overall psychological functioning among service members (Mitchell, [2023b](#); Mitchell, [2024](#)).
- **Major Depressive Disorder, including Treatment Resistant Depression:** Controlled studies of psilocybin-assisted therapy have documented sustained improvement in depressive symptoms among individuals who previously showed minimal response to conventional therapeutic approaches (Davis, [2021](#)).
- **Alcohol Use Disorders:** Systematic investigations of both MDMA and psilocybin interventions reveal promising outcomes in reducing alcohol consumption patterns among individuals diagnosed with alcohol use disorder (Bogenschutz, [2015b](#)).
- **Anxiety Disorders:** Current evidence suggests that therapeutic protocols incorporating psychedelic compounds, particularly psilocybin, show marked effectiveness in addressing various anxiety presentations, including generalized anxiety disorder and end-of-life related anxiety, yielding substantial improvements in emotional regulation capacities and psychological resilience (Griffiths, [2016](#); Ross, [2016](#)).
- **Suicide Risk:** Recent preliminary research through an open-label pilot investigation of psilocybin-assisted therapy with patients experiencing depression and persistent suicidal ideation demonstrated meaningful reductions in both suicidal thoughts and depressive symptoms, with therapeutic gains

maintained through a 12-week follow-up assessment period (van der Vaart et al., [2024](#)).

Also of particular relevance to military mental health providers, **Moral Injury**, while not formally recognized in the DSM, represents a significant psychological concern among service members that may be particularly responsive to PAT interventions. Moral injury manifests when individuals experience violations of core moral or ethical principles, either through personal actions or witnessing others' conduct, encompassing both active transgressions and failures to act. While often co-occurring with PTSD's fear-based responses, moral injury distinctly involves profound moral-spiritual wounds leading to self-condemnation and withdrawal. Traditional therapeutic approaches emphasizing fear extinction and cognitive restructuring may inadequately address the fundamental betrayal of moral values inherent in these experiences (Lehrner, [2021](#)). PAT, particularly utilizing MDMA, facilitates enhanced emotional processing and interpersonal trust, enabling service members to address moral transgressions within a supportive clinical environment. This therapeutic framework helps military personnel overcome shame-based barriers and judgment fears, promoting self-forgiveness and moral reconciliation.

### Fitness for Duty, Readiness, and Retention Considerations

The integration of psychedelic-assisted therapy into military treatment protocols necessitates careful evaluation of likely impact around important operational concerns related to fitness for duty, readiness and retention and including commitment to the warfighter mission, potential harms, potential substance abuse, and potential for duty limiting profiles and side effects.

- **Fitness for Duty, Readiness, and Retention:** By addressing underlying mental health challenges through PAT, service members may experience enhanced performance under stress, improved tactical decision-making, and superior functioning in high-pressure combat environments.

PAT extends beyond mere symptom alleviation, offering transformative experiences of meaning and connection—elements vital for military personnel's successful reintegration into their units, families, and civilian communities. Research also demonstrates PAT's capacity to enhance cognitive flexibility and facilitate flow states. These outcomes, combined with symptom reduction, align naturally with core military values emphasizing personal agency, unit cohesion, and psychological resilience. Therefore, these improvements could significantly enhance retention rates and overall warfighter effectiveness by promoting sustained psychological preparedness.

- **Commitment to the warfighter mission:** An important consideration for military psychologists involves understanding PAT's potential impact on a healthy force's primary mission: the ability to

“locate, close with, and destroy the enemy.” Specific concerns may arise regarding psychedelics’ influence on service members’ combat attitudes, including perspectives on killing or mortality risk. Current evidence does not indicate that PAT compromises tactical engagement capabilities or undermines the warrior ethos. Rather, research suggests potential enhancements in emotional regulation and reduction of combat-related stress impacts. These therapies often facilitate deeper understanding of actions and moral frameworks, potentially leading to more considered, ethical decision-making while maintaining combat effectiveness. By addressing underlying trauma and moral injury, PAT may enhance service members’ ability to process and integrate their experiences, potentially resulting in a more resilient and mentally prepared fighting force.

- **Ensuring safety and minimizing harms:** Another concern is ensuring safety and minimizing potential harms. Clinical evidence from controlled settings indicates that psychedelic substances like MDMA and psilocybin, when administered therapeutically, demonstrate a favorable safety profile without significant adverse physical or psychological outcomes. Research shows that while psychedelic experiences can be intense, qualified professionals effectively manage challenging episodes within therapeutic environments, often facilitating meaningful emotional breakthroughs (Mithoefer et al., [2011](#); Mitchell, [2023a](#)). This evidence suggests that with appropriate medical oversight, psychedelic interventions may enhance operational effectiveness while maintaining duty readiness.
- **Minimizing substance abuse risk:** There is also the question if the controlled therapeutic use of psychedelics could encourage substance abuse. Interestingly, emerging research reveals an unexpected benefit: participants in psychedelic-assisted therapy frequently report decreased dependence on both illicit substances and prescription medications. Multiple studies demonstrate that individuals receiving PAT, particularly with psilocybin, show reduced alcohol consumption and improved management of various substance use disorders (Bogenschutz et al., [2015b](#); Johnson et al., [2014](#)). These findings hold particular significance for military personnel facing substance use challenges, suggesting PAT’s potential to enhance force retention and psychological preparedness.
- **Minimizing adverse impacts of side effects and profiles:** Psychedelic therapy involving one to three doses offers a targeted and brief intervention with lasting benefits, which contrasts with the daily prescription of psychotropic medications that can result in duty-limiting side effects such as sedation, cognitive impairment, and fatigue. This approach not only reduces the likelihood of these disruptive outcomes but also provides a more focused and manageable therapeutic experience that allows ser-

vice members to maintain optimal performance and readiness while addressing underlying mental health challenges.

Overall, the rigorous preparation and integration phases of PAT can ensure that military members are equipped to process and grow from potentially challenging experiences. These therapeutic encounters help service members build a stronger foundation for emotional regulation and psychological readiness, ultimately contributing to their effectiveness in military roles.

### **Anecdotal Evidence from the Field**

Beyond controlled clinical studies, substantial field evidence demonstrates veterans’ engagement with and response to psychedelic healing approaches. A notable contingent of U.S. Special Operations Forces veterans reports therapeutic benefits from compounds like ibogaine and 5-MeO-DMT in addressing trauma-related psychological and cognitive challenges. These substances have shown promising potential for alleviating symptoms associated with PTSD, depression, and anxiety, as documented in firsthand accounts from individuals who have explored these alternative therapeutic modalities (Davis et al., [2020](#)). Additionally, veterans consistently report favorable outcomes from utilizing psychedelics for psychological healing and spiritual growth across various non-clinical contexts (Davis et al., [2024](#)).

While these experiential accounts suggest increasing receptivity to psychedelic interventions, it remains essential to carefully consider associated risks, particularly in unstructured settings. Current harm reduction frameworks emphasize the importance of comprehensive education for potential participants, including detailed safety protocols. This encompasses understanding possible adverse reactions, medication interactions, and the critical nature of appropriate setting and professional oversight, especially for individuals with existing mental health conditions. Implementation of these harm reduction approaches helps optimize therapeutic potential while mitigating risks.

### **Provider Requirements and Benefits**

Delivering effective psychedelic-assisted therapy requires specialized expertise and thorough understanding of non-ordinary states of consciousness. Clinicians must develop competency in supporting individuals through profound emotional experiences, facilitating therapeutic processing while maintaining safety and containment. This inner-directed therapeutic approach necessitates practitioners to skillfully guide clients in accessing and integrating internal experiences throughout their healing process. Additionally, providers need refined awareness of trauma dynamics, particularly when supporting military personnel and veterans who may present with complex, attachment, and/or developmental trauma histories.

Psychedelic-assisted therapy offers unique professional rewards, providing opportunities to witness transformative healing as clients navigate meaningful insights and resolve enduring emotional challenges. The profound

therapeutic alliance formed through these shared experiences significantly enhances treatment outcomes, contributing to lasting positive changes.

## Barriers and Implementation Considerations

The developing field of psychedelic-assisted therapy faces a number of implementation challenges and considerations.

- **Therapist training and trained therapists:** A primary consideration involves securing adequate resources, particularly specialized training for clinicians in managing expanded consciousness states and trauma-related manifestations and a cadre of therapists who are trained to competently provide this specialized type of therapy. Therapist training must also include strategies for helping participants set realistic expectations, emphasizing that PAT may involve emotionally intense experiences that require additional therapeutic support for meaningful integration and sustained personal growth. Training programs must also emphasize interdisciplinary collaboration, equipping teams to navigate the complex interplay of pharmacological interventions and psychotherapeutic processes.
- **Logistical barriers.** The operational requirements of delivering these treatments—including the necessity for dual therapist presence in certain protocols and extended treatment sessions lasting six to eight hours—create significant resource constraints. In addition, appropriate space and controlled settings would need to be identified to support psychedelic therapy dosing sessions, during which the participant is able to lie on a comfortable bed-like surface for a period of six to seven hours.
- **Cultural Resistance and Stigma:** Military institutions understandably express caution regarding psychedelic interventions, often due to historical associations with recreational substance use. Indeed, in 1971, then President Nixon directed the DoD to commence drug urinalysis to identify service members needing rehabilitation for Vietnam associated addiction. Leading up to unit wide urinalysis testing, the stigma of street drugs, drug abuse, and an ethos of “*turning on, tuning in, and dropping out*” posited by counterculture and LSD-promoter, Timothy Leary, precipitated the passage of the Controlled Substance Act of 1970. Addressing these concerns requires robust empirical evidence demonstrating safety and treatment efficacy. Clear distinction must be maintained between clinical applications and recreational use. Extensive data from clinical trials, FDA-sanctioned research, and comprehensive meta-analyses consistently validate the safety and effectiveness of psychedelic-assisted therapy when conducted in controlled therapeutic environments.
- **Integration of social support networks:** The integration of social support networks, particularly

family members and peers, remains fundamental in providing comprehensive care for military personnel and veterans throughout their therapeutic journey. Research by Monson (2020) has demonstrated successful outcomes in utilizing MDMA-assisted therapy with veterans and their spouses in dyadic therapeutic settings.

## Limited Access to Treatment

Active-duty military personnel currently encounter significant constraints regarding treatment accessibility, with participation restricted to formal clinical research environments. Wolfgang and Hoge (2023) delineate specific legal parameters governing VA and DoD psychedelic-assisted therapy trials. While active-duty service members face present restrictions, research participation remains viable with proper authorizations. The DoD and VA operate within established regulatory frameworks that enable therapeutic trials, supported by federal guidelines and FDA’s Expanded Access provisions for MDMA-AT. Military healthcare providers must recognize these interventions’ investigational status and their limitation to controlled research settings.

Military patients pursuing psychedelic-assisted therapy face several critical considerations. The resource-intensive nature of these treatments, particularly MDMA-AT requiring up to 80 therapist-hours per patient, demands strategic patient selection and resource allocation. Military providers must carefully evaluate factors including clinical severity, potential treatment outcomes, and implications for duty status or medical separation. As these interventions become available, developing ethical frameworks for treatment prioritization becomes essential. Providers must also maintain awareness of potential non-prescribed psychedelic use when treatment access is limited, while carefully balancing patient care needs with military operational requirements.

## Broad Frontier with Many Research Opportunities

Psychedelic-assisted therapy represents an evolving frontier in mental health treatment, encompassing numerous opportunities, research considerations, and unexplored territories. Unintended consequences require management of harm reduction techniques, which may result from even the appropriate and clinical use of psychedelics. While this article provides a comprehensive overview of current research findings and clinical practices, it addresses several crucial aspects deserving deeper examination. These include the complex mechanisms of action, the diverse array of psychedelic compounds under investigation, variations in treatment protocols, opportunities for participation and contribution in clinical trials, and the multifaceted ethical considerations.

Psychedelic-assisted therapy offers a transformative approach to mental health care by using a synergistic combination of a psychedelic drug and good therapy to foster a person’s ability to fully engage with and process their

emotions and to understand and correct cognitive distortions. However, it is vital to recognize that these therapies are not a quick fix and are a collaborative process that requires preparation, commitment, and skilled therapeutic support.

Significant work remains in addressing critical questions about optimal PAT implementation, including appropriate psychedelic selection, dosage and administration routes, disorder-specific applications, timing considerations within service members' careers, therapeutic approach selection, provider qualification requirements (e.g., chaplain, nurse, psychologist), and as frequently emphasized, necessary therapist training and experience levels. Within the military context, several implementation questions warrant further investigation, presenting valuable research opportunities. These include examining optimal timing for intervention such as immediately following trauma exposure (e.g., post-combat scenarios), upon return from deployment, or prior to separation from active duty.

For those interested in this field, continued exploration of peer-reviewed clinical trials, study findings, and emerging research remains essential. For those interested in current research initiatives, information on all clinical trials including psychedelic-assisted therapy trials for veterans with PTSD are readily accessible through the ClinicalTrials.gov website. One example is an open-label proof-of-concept psilocybin therapy for veterans with PTSD being conducted by Ohio State University (e.g., Davis, 2023). Another example is a two-week MDMA-assisted Massed Prolonged Exposure protocol for PTSD, currently under investigation at Emory University (U.S. National Library of Medicine, n.d.).

## Conclusion

Military service members and veterans face heightened mental health challenges, including PTSD, depression, and anxiety, due to the demanding and high-stress nature of their roles. These conditions not only affect personal well-being but also pose substantial obstacles to mission readiness and operational effectiveness. While traditional therapies such as Trauma-Focused Cognitive Behavioral Therapy (CBT-TF) have shown effectiveness, high dropout rates and limited engagement highlight the need for alternative approaches that can offer additional support with this population.

Psychedelic-assisted therapy (PAT), a field currently under rigorous investigation, presents a potentially promising additional therapeutic approach and option for enhancing military mental health care. By integrating substances like MDMA or psilocybin with psychotherapy in controlled settings, PAT facilitates deep emotional processing and healing. Preliminary studies and anecdotal evidence suggest that these therapies may lead to significant improvements in mental health, especially in alleviating symptoms of PTSD and addressing moral injury—a key concern for military personnel.

The potential benefits of PAT extend beyond symptom relief. Research indicates that psychedelic therapy could enhance fitness for duty, improve cognitive flexibility, and promote overall life satisfaction—factors that contribute to both individual well-being and mission readiness. As military personnel face unique stressors and trauma, integrating PAT into mental health care could lead to more effective and sustainable treatment outcomes.

Moving forward, it is crucial to conduct further research to substantiate the effectiveness and safety of psychedelic-assisted therapy for military service members and veterans. Collaboration between military institutions, mental health professionals, researchers, and policymakers is essential to ensure that these therapies are introduced in a manner that is both safe and aligned with military values. By addressing current barriers to implementation and continuing to investigate PAT's potential, we can build a more comprehensive, holistic approach to mental health care that supports service members in their duties and overall well-being, in support of fullest Force Health Protection possible.

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Mark J. Bates, PhD, a retired U.S. Air Force lieutenant colonel, served as an airlift pilot for nine years and a clinical psychologist for 11 years. His psychology roles included training at the Uniformed Services University of Health Sciences, an internship at Malcolm Grow Medical Center (MGMC) at Andrews AFB, commanding the mental health flight at Hanscom AFB, and directing the clinical psychology residency at MGMC. Post-retirement, he led the Psychological Health Promotion (Resilience and Prevention) mission at the DoD Psychological Health Center of Excellence for over nine years, which was a good fit with his passion for an integrative, wellness and performance focus. Transitioning into psychedelic therapies, Dr. Bates completed the Psychedelic Therapies and Research certificate at the California Institute of Integral Studies (CIIS). He is now as a psychedelic-assisted therapist and researcher at Sunstone Therapies, working on clinical trials involving MDMA, methylone, psilocybin, and 5-MeO for conditions such as depression, treatment-resistant depression, and PTSD as part of an exceptional team committed to continually evolving the quality of care and research for those affected by complex mental



health challenges and disorders. In addition, he has a strong interest in education and training and serves as a consultant mentor for psychedelic therapists.

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