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# Integral Psychedelic Therapy

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The Non-ordinary Art of  
Psychospiritual Healing

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their own mind and heart for these nascent parts to live, allowing the client's "seedlings of emergent self-experience" to be "held there for safe-keeping" (Davies, 2003, p. 23). The therapist may need to incubate these seedlings internally at first to create space for the client to grapple with any destabilizing reactions these profound states can evoke while ensuring the seedlings do not get lost entirely. This may require a balance of patience and persistence—making space for the range of reactions the client has to the session while staying connected to the deep personal significance and value the seedlings hold.

It is not only wounded or protective parts breaking through dissociative barriers that can feel threatening after a medicine session, and thus be hard to integrate. Blissful experiences of expansion, transcendence, unity, and connection to Self can later feel confusing, disorienting, unbelievable, or threatening to one's sense of self or worldview. Moreover, these states can be notoriously difficult to access once the medicine fades. Clients graced with such experiences may feel intense grief or despair upon the return of their familiar ruminative patterns or low moods, which can evoke a grasping desire to "get back" to the exultant state, or conversely trigger a minimizing dismissal of the transcendent experience.

We can support clients through this tumultuous ride by inviting them to share all their experiences of and reactions to their psychedelic session—transcendent and blissful, dismissive and distressing. A central tenet of psychedelic therapy—particularly essential for integration—is to hold both positive and challenging experiences, expansion and contraction, as equally valuable. Grounded in this equanimous stance, we are best equipped to help clients remain open to the full range of their experiences while drawing out their curiosity, spontaneous expression, and reflective meaning making.

A stance of equanimity supports the therapist in holding the client's disappointment, disbelief, or despair—as well as any protective impulses to shut down emotionally, or dismiss their experience—without holding tightly to an agenda of *making* the client recognize the value of their experience or succumbing to their own countertransference feelings of disappointment, doubt, or frustration. No matter the client's capacity or willingness to acknowledge and embrace their nascent parts, the therapist can continue to hold them in mind and heart, seek out opportunities to gently reintroduce them into the field, and watch for and reinforce moments when they spontaneously arise. With an eye for appropriate timing, the therapist can reflect these seedlings back to the client, working collaboratively to integrate the full spectrum of parts into the tapestry of the client's psychological world.

A significant goal of relational psychedelic integration is to foster ongoing recognition, internal empathy, and cooperation between the client's multiplicity of self-states. The relational therapist helps the client direct attention to the dialectic between expansive states and insights experienced in the medicine sessions and their more constricted and protective self-states, where the larger perspective prompted by expansive states can illuminate patterns of constriction. In this sense, integration should support the client in cultivating an increasingly intimate connection between the diverse parts of the psyche and the essential Self.