Shrink Rap Radio #615, October 4, 2018, The Third Wave Psychedelic Renaissance
David Van Nuys, Ph.D, aka “Dr. Dave” interviews Paul Austin
(transcribed from www.ShrinkRapRadio.com by Kat Bautista)

Introduction: My guest today is third-wave psychedelic pioneer, visionary and entrepreneur Paul Austin. Now, here’s the interview.

Dr. Dave: Paul Austin, welcome to Shrink Rap Radio.

Paul Austin: Hey, David, thanks so much for having me on, I really appreciate it.

Dr. Dave: Well, I’m so glad to have you here. I’m a huge fan. I’ve been listening to your podcast ever since I discovered it. Can’t even remember how I discovered it, but relatively recently I was probably doing – because I’ve been doing some psychedelically oriented interviews, I probably did a search on psychedelics, and boom, your podcast came up, and a whole bunch of others. I couldn’t believe it. Like, where did all of this come from? So I have to say that I see you as a real visionary. I’m very excited by the work that you’re doing and the way that you’re able to articulate your vision. And I know that you’ve credited Jim Fadiman as being the godfather of microdosing. I’m crediting you with being the Johnny Appleseed (laughs) of microdosing. Really, really spreading it. So I’ve made reference to your vision and I called you a visionary. Maybe you can break down that vision for us. Maybe before you go there, just give us a quick overview of where you grew up, what your major influences were, how you got involved with psychedelics. Just...

Austin: Yeah, what was my path?

Dr. Dave: Yeah, yeah.

Austin: So when I tell most people where I’m from, they’re a little surprised concerning the work that I’m doing. So I’m originally from Grand Rapids Michigan, West Michigan, which is, I don’t know, a more traditional place. And so growing up, I always felt a little out of sorts, a little like “Ugh, I don’t really belong here.” Then when I was in school, the age of 19 and 20, I’ve started to work with psychedelics in a more formal capacity and came to certain insights and awarenesses that really gave me the courage to branch out of West Michigan and start to build my network elsewhere. The main insight from those early psychedelic experiences was, growing up, I’d internalized a lot of shame about who I was and what I was doing because of the community that I grew up in, and with those experiences I came to recognize that the issue wasn’t so much with me but with the system that we were living in. And so when I finally had – I ended up moving to Turkey and taught English there for a year, and then lived in Thailand where I built my first online business, which was teaching English school. I had a little bit of free time, and I started a side project, a hobby project called The Third Wave. This was in late 2015. It was just when microdosing was starting to gain some popularity, and by that point in time it was clear that cannabis was becoming medicalized and legalized. It was clear that from a lot of the research coming out of institutions like NYU and Johns Hopkins, it was clear that
psychedelics were effective at treating depression and PTSD. So in creating The Third Wave as a resource, I wanted to start to build a cultural infrastructure for how we can actually learn scientific facts about psychedelics. And really, how can we start to educate our culture about what are the benefits and some of the risks of psychedelics in a rational, formalized way. And so I built The Third Wave. Since that point in time it’s just been really starting to grow in popularity – we’re in the New York Times and Rolling Stone and the message of responsible psychedelic use for intentional purposes, whether that’s creativity or healing or leadership, a lot of people seem to be resonating with that message. Yeah.

Dr. Dave: Yeah. Thank you for that background and you touched on several things that relate to my question about your vision. One thing you spoke about – courage. And clearly you have a lot of courage. You’ve been standing up (laughs) and speaking out all over the place and being very open. It’s like by virtue of listening to your podcast I know all kinds of stuff about you that in years past would have been secrets! But you’re just out there, really out there in a big way, and you also refer to the culture and feeling like the culture was out of step for you. Clearly you are into redesigning culture, in a way. I believe you said starting at the bottom (laughs)...

Austin: Yeah.

Dr. Dave: ...and so you can get into that, and the other keyword that I’ve really been thinking a lot about since discovering your work is intentionality. And that makes it a very different enterprise than when I was coming up in the second wave. Tell us about the three waves, what the three waves are that you’re referring to, and then let’s get into your vision. You can spell it out.

Austin: That would be great. So the first wave of psychedelic use was the use of psychedelics by indigenous groups for thousands of years. So this is the beverage kykeon, which was used in Ancient Greece in something called the Eleusinian mysteries, which Plato and Aristotle were a part of, and naturally the core of Western philosophy when it comes to psychedelics. And then you had ayahuasca in the Amazon. You had soma in Ancient India, which was written about in the Bhagavad Gita and the Upanishads. And there are various other indigenous societies and groups around the world who have been using these plant medicines for thousands of years to access visionary states. Unfortunately, though, around the time where Christianity became more the mainstream perspective in Western thought, a lot of those visionary plants were put away. And that was until the fifties and sixties when – this is the second wave now – when Gordon Wasson, who was the vice president of JP Morgan and amateur mycologist went down to Oaxaca and discovered the magic mushroom and then wrote about it in Life Magazine. It was the front page in 1957. And that’s when these visionary substances, psychedelics, started to re-enter and re-emerge in Western consciousness. That led to Timothy Leary and Richard Alpert, that led to really the crescendo that occurred during the sixties where LSD was legal and a lot of people were consuming it. But what happened was, it got a little out of control. There wasn’t the infrastructure in place to support a lot of the awakening that was happening culturally...
Dr. Dave: Yeah.

Austin: ...and so the administration at the time tied psychedelic use to the anti-war movement and shut down all the research that was going on, because there were tons of research in the fifties and sixties. They shut down and made all of the substances illegal and inaccessible. And this was very non-normative. In other words, there have always been a place for these substances within Western culture. As I mentioned, the Eleusinian mysteries of Ancient Greece. So when everything was shut down, the prohibition of psychedelics, it was really this new time period where we couldn’t explore these states in a responsible way. And so what happened with the third wave is, in 1999, Bob Jesse reached out to a researcher at Johns Hopkins named Roland Griffiths and connected him to Bill Richards, who was one of the early researchers in the sixties with psilocybin, and in 2006 they published a landmark paper about the role of psilocybin in occasioning mystical type experiences. And for me this marks the beginning of the third wave, when that first research paper was established. Since that point in time, so about twelve years now, there’s been a continuous growth of interest in psychedelics for medical purposes, specifically. But outside of that we’ve also seen, obviously, the medicalization and legalization of cannabis, so these substances that were previously deemed illicit and had no medical value by institutions like the US government were now coming into our consciousness as, “Oh, these might have legitimacy.” And so where this is going, where this appears to be going (and this is more or less the vision) is as even modalities like yoga and mindfulness meditation become more mainstream, psychedelics are also a part of that. In other words, it allows us as individuals to step out of “Okay, I need to be focused on doing this in the future” or “I’m worried about this in the past” and be more present with ourselves. And so that presence is then what helps to cultivate what I consider to be well-being. So we’re really looking at how we can help people re-contextualize or reevaluate psychedelics not as drugs, so to say, but as tools that if used in a responsible way can help to facilitate creativity, help facilitate healing, presence, awareness. And microdosing then in particular is so interesting because it’s acting as that touch point, that initial way that people can start to engage with psychedelic substances that is not really all that threatening, that isn’t all that scary and so that they can start to experience and understand some of the benefits that are tied to these substances.

Dr. Dave: That’s really hit a nerve. I was shocked to hear that your podcast is getting something like 150,000 people listening per episode.

Austin: So we get about 150,000 people every week who come to the website. And then we get on each podcast about 10,000 downloads...

Dr. Dave: Okay.

Austin: ...and then the interest is just continuing to grow and grow and evolve pretty considerably.
Dr. Dave: Yeah. Yeah. And at an amazing rate. And you’ve only been doing this for, what, 2 years?

Austin: Yeah, 2 years, and this has only been my main project for about the past year or so. So, for the first year...

Dr. Dave: Yeah.

Austin: ...I wasn’t really running it as a business. It was a hobby, a side project, something I had thought was an important resource so people could access information that was accessible and rooted in science and then once we were in the New York Times in May 2017, that’s when I committed full-time to doing that as my project. And it’s been an interesting road. And with Michael Pollan’s new book that came out about four months ago, it’s become much easier, because now, culturally, people are really starting to accept that these substances have utility if used properly.

Dr. Dave: Yeah. That book of his, I think, is a major cultural milestone, along with Ayelet Waldman’s book. And you interviewed her. When I tried to interview her I was already too late. (laughs) So you’re lucky that you got in. She got overwhelmed with the number of interviews that she was doing, but you did a wonderful interview with her. And you’re under 30, right?

Austin: I’m 28.

Dr. Dave: 28. (laughs)

Dr. Dave: 28. And so I’m blown away not only by the way that you’ve used the media, these tools, so effectively. And you’ve got content everywhere, it’s like you’ve got little buds of content growing off this tree, and it’s hard to keep up with it all. So that’s amazing. And I’m struck by how such a young guy – you have mastered so much content. Because you’re on top of the history, you’re very much, I think, on top of the science and everything that’s emerging. You’ve interviewed a lot of the key figures from the past as well as fascinating people who are part of this third wave. So let’s get back to your vision. Because you’ve got a couple of major projects that we have to be sure to talk about. Well, let’s talk about your work in Amsterdam. Take us there.

Austin: Yeah, yeah, yeah. So when I started the third wave, right? The focus of that – and this helps to lay out the vision a little bit – the third wave is the touch point that goes as far and wide as possible. So that’s the way that people first start to interact and engage with psychedelics as tools with intention. And laying that educational framework is so important because it increases accessibility to understanding how to use these tools. But once people become educated, once they understand, “Okay, these are some of the benefits, these are some of the risks,” many of them start to ask, “Well, how can I do this myself? Because I’m struggling with X, Y, and Z,” or “I’m going through a life transition, this would be useful. What’s the next step beyond that?” And so with the work at the third wave and particularly with my focus on microdosing, I was invited to speak at a few major
tech and business conferences. One of the first ones was The Next Web, in Amsterdam, where I spoke about microdosing. The videos on youtube, there are maybe about 150,000 views. And then I spoke at Tech Open Air in Berlin and the South by Southwest conference in Germany that Mercedes Benz did. And I was going here with Martijn Schirp, who is my co-founder with Synthesis. And we were asking, we’re giving this education information to people, how do we allow them to take that next step so they can actually work with these substances in a way that’s transformative, that’s helpful, that’s impactful? And we notice that a lot of the retreats that are out there around psychedelics tend to come in a more shamanistic perspective...

Dr. Dave: Right.

Austin: ...which comes back to that first wave – ayahuasca in the Amazon – and we’ve seen that growth in popularity with ayahuasca in particular. But that approach, for most mainstream Western individuals, is a bit off-putting or difficult to access, so we were wondering how can we offer an experience with psilocybin, which is the active ingredient in magic mushrooms, and which there’s a lot of clinical research on. How can we offer that experience to people in a more modern, safe, intentional setting that strips more of the shamanistic view and presents it in a more modern perspective? And since Amsterdam is this world-class city and since psilocybin truffles are legal there, we saw that as being the spot to do it. So basically what we did is we created a website and we sent out a few emails to the Third Wave community asking if people wanted to join us for a psilocybin retreat in Amsterdam. In late April, we did our first retreat with 25 people. Then, basically, from that point in time, it’s just been continuing to grow and evolve. So in July and August, we had about 28 people coming in. We’re doing 3 more retreats in November for about 42 people. Now we’re looking at how we can start to offer these retreats every month, so we now have a retreat spot outside of Amsterdam, about 40 minutes outside of Amsterdam. We have our first investor, and we’re really looking at how can we expand the scope and impact of this. And basically what we do in this process is we let people have an excellent experience. So we walk them through preparation, setting the mindset beforehand so they can start to cultivate intention, then we’d lead them to the ceremony where we serve a tea with psilocybin, have them lie down on mattresses, play excellent music in the background, and then the following day it’s about integration. How can we start to integrate this experience so that when we go home, it’s not just a drug experience that happens...

Dr. Dave: Exactly.

Austin: ...it’s this experience of transformation that allows us to have better relationships, that allows us to be more effective in creative or leadership positions, that allows us to heal from things that have happened in our past and process and deal with those. And we’ve seen just this tremendous outpouring of interest. Like I said, Michael Pollan’s book was really the change maker, because in May when that came out, all of a sudden after that point, we were getting two or three applications everyday to come to the retreats in Amsterdam, which has been phenomenal.
Dr. Dave: And that program is called Synthesis, is that right?

Austin: Yup, that program is called Synthesis, and our website is SynthesisRetreat.com. Basically right now we just offer three-day retreats for people to come to Amsterdam and experience that.

Dr. Dave: Yeah. And I was fascinated by the structure of the three-day retreats. The first day, I take it, is spent getting people up to speed in terms of some of the history of all of this that you’ve alluded to already, some of the science of it, and getting to know one another in the group. The second day is the transformative experience, and then the third day is about integration, how you integrate it into your life. In the sixties, one of the things that I got very high off of during that period of time was called encounter groups. Not drug-assisted, but more of a marathon kind of setting where you’re in a small group of people and you’re giving honest feedback, and emotions begin to come out and anger is expressed, and tears, and sadness, and loss, and all of that stuff. And we all fall in love with each other, mostly. And then I remember going out and just – the first time I did that I became a leader, but the first time I was a member of a group like that, I was high. I was, like, walking (laughs) on clover and buttonholing people and saying, “Hey, how are you doing? I mean, really, how are you doing?” But as I got involved in leading those kinds of groups, we saw that having a mountain top experience is one thing, but then when you come down from the mountain, whether it’s a religious retreat in the Christian tradition – you may have been exposed to some of that stuff as a young person, “Give your heart to Jesus” – and then you get back to normal life and things can tend to go flat. And so we saw that phenomenon, and we began to have discussions and talk about the sort of thing that you’re doing, which I think is so wise, is to have conversations around what’s your intention, and what did you learn from this experience, and how could you imagine yourself melding it back into your regular life. This is all my imagination. I haven’t gone through it yet, but it’s my impression of what you’re doing.

Austin: And that’s an accurate impression. I think I want to touch on a couple of points that you mentioned, that psychedelics aren’t the only way to access these states...

Dr. Dave: Mm-hmm.

Austin: ...of awareness and understanding. We’re seeing the rise of meditation and mindfulness meditation, yoga. A lot of people are starting to do breath work. So we really look at it from a mind-body sphere of perspective.

Dr. Dave: Yeah.

Austin: Or body-mind-spirit. How can we heal the body, so that’s diet, exercise, sleep. How can we heal the mind? Through working through emotional things, and then spirit, it’s about purpose and meaning. Where do we find purpose and how do we find meaning? This larger container that we’re building with the third wave, it’s not just, “Okay, psychedelics and microdosing can be used as tools with responsibility,” but “How are we building a cultural infrastructure so that when people come back from these experiences,
whether that’s drug-induced or through other states, that they feel like there’s a container where they can continue to exist in this?” And so something like Burning Man, for example, is a futuristic example of an intentional community that’s created around that. So I think a lot of the work that’s to be done going forward is how do we make that more normal in general culture? How can people be more vulnerable? How can people trust one another and feel safe where they’re at? And this is the larger vision of the third wave, is creating that cultural infrastructure and container so we can finally heal as people, so we’re not just stuck in needing to prove ourselves through money, ego, status, but instead, we’re really working together collaboratively to build and connect systems that are much healthier. Basically.

Dr. Dave: Yeah. Now you’re doing so many of these groups, and I imagine that there are different clusters of what people are looking for. In the use of psilocybin and these other psychedelic substances, you offer people the opportunity to either get their toes in the water with microdosing, which is an entry point, but also access to full-on mystical high-dose experiences. Do you run separate retreats for those two different groups?

Austin: So right now we’re only focused on the high-dose experiences with psilocybin in Amsterdam.

Dr. Dave: All right.

Austin: A lot of the education that we do is around microdosing, particularly with the third wave. But with Synthesis we wanted to basically create that container and space where people could come in to do higher doses. The reason people are coming in is we don’t have a medical background. So I’m an entrepreneur. I don’t have a medical degree. My co-founder doesn’t have one as well. So right now we don’t offer those experiences for people who may be dealing with clinical issues, like depression, PTSD, and addiction, which is what a lot of the clinical research shows psychedelics are effective for. But we’re really more bringing in people who are at a point of transition. And that could be someone who maybe has been a creative director in a corporation for many years, and now that they’re financially somewhat comfortable, they want to start their own new project. That could be someone who’s just maybe coming out of college or graduate school and wants to get clarity on what path that they could pursue. Coming next, those could even be people who are entering retirement, who have maybe made their contribution in a business sense and now want to look at ways that they can continue to contribute, healing themselves, working with themselves and then letting that spread farther outside of themselves. It’s people from a range of occupations and areas. We have psychiatrists and medical doctors, psychotherapists, we have founders, people who work as executives in corporations, and many of them, if not all of them, are at this transition point. And they’re really looking at how can the insight gleaned from these high-dose psychedelic experiences help them to have better relationships with their spouse, how can that help them to have better relationships with their kids, how can that help them to eat healthier, to take better care of themselves. These are all really practical questions that, I think, many of us deal with, and psychedelics again are one of those tools that can help to facilitate that healing process.
Dr. Dave: Yeah. So are you going to be doing any documenting, a sort of qualitative research if you will? Because it sounds like a lot of important things will be happening for people, and it would be a shame for that to be lost to the collective.

Austin: Absolutely. So right now we have people fill out intention worksheets before they come to cultivate their own sense of intention. After they’re done with the experience we ask them to write up a report of the experience that they went through, so that we have that as well. But I think what’s even more – not visionary but more exciting (25:32.9) qualitative is we can also start to do quantitative research on before and after someone comes in. What’s the actual change to their well-being? These are things like sleep quality, these are things like blood markers and blood panels. So we’re starting to flesh that out in terms of how can we take someone where they at when they come in, and then prove and show them that because of this experience all of these other elements are also starting to improve

Dr. Dave: Yeah. Yeah. You’re on the world stage at this point, and you’re going to have or are already having the kind of impact of, say, someone like a Timothy Leary during that other period. And he stumbled in some ways and there were pitfalls. So what potential pitfalls do you see and how are you going to avoid them?

Austin: Yeah, that’s a really good question. So I dealt with this about a year ago or so, more on the psychedelic subculture where because I was being so public about my own psychedelic use, in particular microdosing, there were some more conservative figures who were really somewhat concerned about that.

Dr. Dave: Yeah.

Austin: So I think one of the pitfalls is assuming that everyone is as prepared as I was to start to work with psychedelics. I come from, like I said, a more traditional family-oriented background. In my own psychedelic work, I haven’t had to deal with a lot of deep trauma related to depression or addiction or things like that, and sometimes when people who come from that background, they start working with psychedelics, there’s a lot of stuff that comes out that they need to process. So I think one of the big concerns or pitfalls is if psychedelics continue to grow, and I trust that they are, how do we make sure the infrastructure is in place to support those people who need to heal? I think that’s one of the big concerns now, because, for example, with the clinical trials that they’re doing, it’s two therapists for every one person who’s going through the experience. And that’s not something that can be scalable, so that if millions of people are interested in working with this, they can actually utilize – so I think that’s one pitfall. Is the interest in this growing too quick and too fast? And that’s somewhat what happened in the sixties, was there was a deep need for this and there was no infrastructure to support it.

Dr. Dave: Right.

Austin: So I think that’s one thing to be aware of. I think the second thing is more practical or logistical. We’re seeing this big divide right now between the federal...
government and the states. And we’ve seen this particularly play out with marijuana, where the federal government still sees cannabis as illegal, as this schedule 1 substance, yet there are states that have legalized cannabis. We even tell this in a recent announcement where people who are now working in the illegal cannabis industry in Canada, if they mentioned that at the border, the United States border, they’d receive a five-year ban from entering the United States.

Dr. Dave: Hmm.

Austin: So I think this is the other concern, is in dealing with the federal government that is very opposed to this, could there start to be some crackdown on these substances, and on the people who are working with them? And I think that’s why the work that MAPS is doing is so important, because Rick Doblin, who is really the visionary in this space, has been working for the last 30, 35 years on this...

Dr. Dave: Yeah.

Austin: ...in particular. That’s why he focused on healing war veterans with PTSD with MDMA, because I think one of the concerns is that the cultural right – there will be a backlash against some of these. So by working with people and those communities and healing them, we can mitigate some of that. So I think those are the two concerns, and also my own public concern is is this too much too soon? In other words, I don’t have the protection of a medical institution. What we’re doing is more cultural, so I’m just taking a lot of steps to protect myself legally, because a lot of the little things, it’s like taxes, and other things that governments try to get you on. So having and making sure that everything is clear, everything is by the book, everything that we’re doing is completely legal is really, really important in this time.

Dr. Dave: Yeah. And it’s not just in this country, it’s interesting that this upsurge of hunger for more open, more conscious, more etcetera, is coming up at the very time that the world seems to be drifting towards a more authoritarian leadership. And what a surprise to see that (laughs) happen in this country.

Austin: Well, and that’s why these substances and these other things that we were discussing, these ways of interacting with reality or perceiving reality, it’s acting as a counterpoint or a counterbalance. So it almost seems as if we’re just getting more and more divisive, and I think that’s why this psychedelic work is so important, because it’s one of these tools that can really help us to understand that we are all connected, that we are all in this together, and that if we’re going to survive as a species, actually with the ecological crisis that’s coming on...

Dr. Dave: Yeah, yeah.

Austin: ...how can we all work together to ensure that we continue to play this game that we call life.
Dr. Dave: Yeah. Well, I love the way that you’re looking at the larger game and trying to be as cognizant of that as you can and to address those issues. I reflect a lot on your work in terms of me as a second-wave person (laughs) who – maybe I can begin to consider myself a third-wave person but I have that second-wave set of experiences and for example, it’s interesting that you’re an entrepreneur, a self-described entrepreneur, and other entrepreneurs are getting together to brainstorm how can we enhance creativity, productivity, earnings, etc., whereas in the second wave, the little group that I was part of, that was almost antithetical to the idea of psychedelics, the sense that well, spirituality is something that’s totally set aside from the world of commerce.

Austin: Right. And I think that’s a huge part of the integrative process that we’re going through as a culture, because, for example, with things like the opiate crisis, or people who are working traditional jobs where they’re just not happy, at the core of that is purpose and meaning. And purpose and meaning is tied to feeling like we can do something greater than ourselves. We can contribute to something greater than ourselves. We feel connected to a community. And that’s why The Third Wave is an educational resource. Synthesis is working hands-on, but really, my vision, the thing that is most important to me is how can we reintegrate spirit into business, in a way. So in other words, how can we help business evolve so that it’s not just about the bottom line, it’s not just about extracting resources from the earth and making money out of those, but instead we can utilize altered states, for example, that happen through psychedelics to start to build ecosystems that are more sustainable, regenerative, that recognize the earth, that recognize community as really important facets of the business itself. For example, we’re seeing this play out with companies like Patagonia, which is a benefit corporation, a B Corp, where the focus isn’t just on “We’re making money,” but “How are we also looking at ecological capital and social capital?” Dr. Bronner’s, the soap company which has donated millions of dollars to MAPS research, is another great example of that...

Dr. Dave: Oh, interesting.

Austin: ...It’s a benefit corp.

Dr. Dave: I use Dr. Bronner’s everyday. (laughs)

Austin: Exactly. Right?

Dr. Dave: Go ahead, yeah.

Austin: They’re doing fantastic work, and so, really, it’s like how can we build new models of business that are sustainable, that contribute back, and what role might psychedelics play in that process. I think...

Dr. Dave: Yeah.

Austin: ...it’s really part of this process of waking up and growing up, as Ken Wilber puts it, where as a culture we really have to start to recognize that we do exist in this web of
interconnectedness. So how do we start to take care of the things around us, because in doing that that also helps us as humans to flourish and be healthy and all these things.

**Dr. Dave:** Yeah. Yeah. You mentioned the growing legality of marijuana and I’ve been interested in that, and I’ve got my own questions about microdosing. Do you see marijuana as a microdosable psychedelic or is it somehow in a separate camp?

**Austin:** So I think, and I alluded to this earlier, we should go a little bit deeper into that. I think cannabis in many ways is a gateway drug, and not in the way that our government taught us in the 80s and 90s that it would lead to heroin addicts or whatever else it might be. But what cannabis does is it familiarizes our culture with an altered state that was previously illicit and that we now see as legitimate. This is also happening with pharmaceutical companies, for example, where more and more people are waking up to the fact that pharmaceutical companies creating all these legal drugs, such as oxycontin that they don’t really have our best interests at heart.

**Dr. Dave:** One of the podcasts that I enjoyed listening to was you rhapsodizing on video about how you see the future unfolding and very stoned on marijuana, in this particular case. I think you were in Turkey, maybe, or some place where it was some pretty high-dose stuff around, and my experience of marijuana, I think people used to say, “You want to get stupid?” And that has always been my experience is I get stupid.

**Austin:** Yeah, and I think...

**Dr. Dave:** How is it that you can think with such clarity?

**Austin:** Well, so we have to look – cannabis and psychedelics, right, if they fit within that framework of how we perceive intelligence, which, I think, in modern day is doing things, it’s already knowing the answers to questions and then being able to answer those appropriately, and this is what we call convergent thinking, right? And convergent thinking is helped along with substances like caffeine and nicotine, which are the two main drugs that we as a culture use right now, and those help to facilitate convergent thinking. So if I’m in a more creative headspace, a more brainstorming headspace, this is where cannabis and microdosing really help because those facilitate something called divergent thinking. And divergent thinking is basically the ability to take ideas that are perceived as being different or separate and start to understand how we can synthesize those to create a new way of perceiving things. So oftentimes when I’m doing more of my conceptual architecting, of what I’m trying to envision, where we’re going, how we’re headed, how are we building these systems, some of these substances will help to facilitate that process of divergent thinking. Brainstorming, essentially. And so if I’m trying to remember stuff, cannabis is not good for that, right? Because it does harm short-term memory. But if I’m trying to think in the future of new concepts and new ideas, I’ve found that cannabis and microdosing can be very helpful for that.

**Dr. Dave:** That’s an interesting distinction. And it fits with my experience. One of the things that you’ve talked about too is trying to support and seed psychedelic societies. So that’s
an interesting concept as well, psychedelic societies, groups, because we know that we function better in community than while frightened and alone. (laughs)

**Austin:** Right. Connection is really important.

**Dr. Dave:** Yeah.

**Austin:** Connection is very important. Yeah, and that’s the project that we’re calling the Third Wave Nodes project. So I’ll explain The Third Wave a little bit more and get into that vision, because this is an important part of that. Really, the focus of The Third Wave is the objective that publicly we’re trying to achieve is to increase psychedelic literacy, which essentially means right now maybe 10 to 15% of people in Western countries actually know the difference between maybe LSD and cocaine, or magic mushrooms and heroin. So a lot of people perceive all illegal drugs as being illegal and therefore dangerous. So by increasing psychedelic literacy, we can start to build this cultural container that I’ve mentioned earlier. And we’re really doing that through three main ways. The first way is research on microdosing. So by validating scientifically what impact and effect microdosing has, that will help to create a stronger sense of legitimacy in the eyes of mainstream culture. So that’s one element of microdosing research. The second element is building above ground an online community. So we already have a microdosing course and community where people who are interested in microdosing can get access to educational frameworks as well as an online community and forum, where they can start to communicate and talk with other people who are also interested in microdosing. And now we want to expand that, to actually do in-person meetings in New York, San Francisco, LA. We’re looking at Vancouver, Amsterdam, where we can actually start to have discussions and dialogues about these substances and bring community together in that framework. And then the third element of that is the website which is already the most developed and underway element is how can we continue to increase our online reach, our visibility. Utilizing this new aesthetic that we’ve created with The Third Wave – so in the past a lot of the way that people perceived psychedelics are more rooted in that second-wave countercultural vibe which usually isn’t tied to professionalism or usually isn’t tied to having things well-organized and accessible. Erowid is a great example of this. Erowid is a resource online where you can find information about any drug that you want. However it’s a bit disorganized. It’s hard to access. It’s hard to navigate. Their user interface is challenging. So what we’ve done with the website in The Third Wave is we’ve looked at how can we start to create this new aesthetic for psychedelic education and make it as accessible as possible. So that’s a third way. And then how can we amplify that reach not only for example, through Google and search traffic and other online websites, but also major mainstream media publications like the New York Times and Business Insider, Rolling Stone, because those media publications feel comfortable publishing what we’re doing because we’re perceived as professional. We’re perceived as we know what we’re doing. The resources are well-developed and those three elements, the microdosing research, the Third Wave nodes, and then the online presence – those all come together to then culturally increase psychedelic literacy. So that’s the...

**Dr. Dave:** Yeah.
Austin: ...larger vision of what we’re really trying to develop.

Dr. Dave: Yeah. Yeah, it’s so well articulated and so broad.

Austin: It is. And it’s a big undertaking, right? Because...

Dr. Dave: Yeah, right.

Austin: ...one of the big challenges from going to medicalization – just so your listeners know, it looks like by the end of 2019, we’ll be able to open MDMA clinics in the United States. By the end of 2019 or early 2020, that’s what assumed. And that substances like psilocybin, which are in magic mushrooms, will become medical to treat depression by 2021, and MDMA is for PTSD. So if we look at the medicalization, that’s really important because people who haven’t found healing before now finally will have access to tools that can cure them from a lot of these challenges that they dealt with. But if we look at going beyond just working in psychiatric clinics and hospitals and institutions, then that goes into a legal regulated framework. And the key to be able to – this comes back to what we were talking about earlier, the key to being able to create that legal regulated framework where not only sick people – people have diagnoses can access psychedelics, but the rest of us as well, for spiritual exploration, for creativity, for exploring ourselves and who we are, we have to make sure that education is accessible as possible. So the biggest challenge right now in making this open-access, so to say, is that educational process so that people understand things like set and setting so that people understand things, like those who have a predisposition to psychosis, to schizophrenia, should not be using psychedelics. To understand that there are risks involved, this is all part of that movement, and it’s a 10 to 15-year project. This isn’t something that is just a quick start-up that’s 2 or 3 years in, and then we get bought out by a company and establishing us as a non-profit...

Dr. Dave: (laughs) Yeah.

Austin: ...we’re committed for the next 10 or 15 years to building this infrastructure because from my personal perspective when I think from maybe your perspective, from a lot of people, psychedelics are important tools in helping us to heal from a lot of the cultural issues that we’re currently involved with, and so that we can evolve and grow as a species, and like I said, deal with things like the ecological crisis.

Dr. Dave: Yeah. You talked about maybe as soon as 2021 or so that there might be clinics and that in a way sounds like pie in the sky. However, I have an adult son who is having a trigeminal nerve pain and nothing was touching it and it was destroying his life. He tried all of the traditional stuff and interestingly, through Kaiser Permanente, they had a program where they put him on a 24-hour ketamine drip. My understanding is that ketamine actually is a psychedelic.

Austin: So the classic psychedelics are usually LSD, psilocybin and mescaline, which is in peyote. Ketamine technically is called a disassociative, but when used within a
psychotherapeutic context, it basically has psychedelic – it’s a psychedelic experience where basically the ego drops away and you’re able to be fully present. So that’s one thing that I’ve been having conversations with people in New York and other places about is ketamine is already legal.

Dr. Dave: Yeah.

Austin: It could be used.

Dr. Dave: Yeah. And by the way it led to a miraculous turnaround. Absolutely miraculous.

Austin: What happened? What was that turnaround like for him?

Dr. Dave: That the symptoms pretty much went away or didn’t matter as much as they did before. They didn’t have the salience that they had. And during the 24-hour period part of the prep was, they said, “Now, this is a psychedelic. It’s got psychedelic properties. You may notice those.” What I noticed was he just had this burst of wanting to reach out to family and friends and have them send him loving messages. He solicited people (laughs) online, family and everybody. “Send me your favorite music,” etc. and it was just Mr. Love. I mean, he’s like that in his basic nature but this was very amplified. And...

Austin: And it gets into the impact and effects of this is when the ego, it started rigid, it makes us feel disconnected. It makes us feel isolated, it makes us feel like we can’t reach out, we can’t connect, because we’re dealing with our own stuff. And what’s great about ketamine and these other substances is the ego tends to dissolve. It goes away. And that allows us to open up to connection...

Dr. Dave: Yeah.

Austin: ...and to be more intentional about connecting. And so I think when I talk about, for example, in the business context, a lot of that growing up process is being able to be vulnerable in a business context, as a leader to be vulnerable, to embody feeling and emotion and to be able to connect because we have a lot of business leaders at the moment who are just in their heads, who can’t feel, actually, and that’s leading them to not be great leaders, to not really build cultures, organizational cultures, that are connected, that are loving, that are supportive. And I think that speaks to the efficacy and the importance of these substances in that story of your son.

Dr. Dave: Yeah. Earlier you were talking about microdosing, research on microdosing being one of the legs of the vision. And I’m under the impression that currently there is no solid research on microdosing. Is that the case, and isn’t anybody heading down that path? How soon are we going to see that?

Austin: Great question. So the biggest challenge still with doing research on psychedelics is that they’re schedule 1 substances. That means the government makes it almost prohibitively expensive to do research on these substances. The work that MAPS has done
is so critical, because Rick Doblin has raised, I think, 47 million dollars as a non-profit to do all this research on MDMAs for PTSD. So one of the biggest challenges right now – we’re doing research on microdosing – is simply the cost. And not only the cost, but also setting up a normal clinical trial with microdosing. We were taking low doses over a month or two months. That’s much different from just going in and having one or two experiences with higher doses, which is what a lot of the clinical trials are doing right now. So that can be handled in a couple of ways, right? The first way that it’s being handled is there’s been some initial research done that’s survey-based. So Jim Fadiman did research where he surveyed, I think, over a thousand people and showed that microdosing can help with depression, for example. There was some other research that was recently published out of the University of Toronto which showed that microdosing can help with anxiety as well as depression. But these are all survey-based research. These are people who are microdosing at home, who would then report their subjective effects in this survey. So the first clinical trial that’s happening is the Beckley Foundation, which is based out of the UK, out of London, they’re collaborating with Imperial College to do a research study on the efficacy of microdosing LSD for creativity. And that is going to get up and going, I think, fairly soon in the next three to four months. So that’s the first clinical trial...

Dr. Dave: Okay.

Austin: ...that will be carried out. And a lot of the research that we’re going to be doing at the third wave – so instead of exploring the effects of microdosing on clinical issues like depression, we really want to explore what impact and effect does microdosing have on healthy, normal people, because although 20% of people struggle with clinical issues, 80% of people are healthy. And so we want to understand what impact or effect is microdosing having on those people. Really, what we’re exploring is what’s the interaction or what’s the relationship between microdosing and agency or autonomy, which essentially means what’s the relationship between microdosing and an individual’s ability to take responsibility over their own well-being and wake up to the fact that “I can change my diet, I can change how I exercise, I can change my sleep patterns, I can start to meditate, I can start to do yoga.” And how does microdosing act as a catalyst to get people to start to do those things...

Dr. Dave: Yeah.

Austin: ...to start to take better care of themselves. Because what we’re noticing with people who are starting to microdose is that they are already getting healthier. They are getting better sleep. They’re starting to do more yoga, that they’re getting into a habit of meditation and this is largely because microdosing and generally psychedelics facilitate something called neuroplasticity, which is the ability to adapt and change. So a reason why a lot of people don’t eat well or don’t exercise much or don’t really start a practice of meditation or yoga is because they can’t integrate that as a habit long term. And this gets back to the conversation that we have about integration. How do we utilize that open window of neuroplasticity, of adaptability, to start to integrate new habits of health and well-being so that over the long term we can start to heal ourselves and we’re not dependent on a doctor prescribing us pharmaceuticals? Or we’re not dependent on
whatever other external system. We can really look at “No, I have this, I can do this, It’s in my power to do this. And I’m going to start to do it.” So that’s really what we want to explore with microdosing.

**Dr. Dave:** Yeah. Interesting to me as a psychologist is – I come out of the humanistic psychology tradition, and...

**Austin:** Is that Maslow...

**Dr. Dave:** Yeah, Maslow...

**Austin:** Okay.

**Dr. Dave:** ...exactly. Living up to your peak potential and so on. And that’s what I hear in the background of what you’re saying. Also the new positive psychology movement, which is...

**Austin:** Flow, like flow states

**Dr. Dave:** Yeah. Exactly. And a whole bunch of research that instead of looking into pathology, which psychology for so long focused on, there are those pioneers who said, “Well, let’s think about psychological health, and what does that consist of and how do we develop that and build that.” And, so...

**Austin:** That’s the human potential...

**Dr. Dave:** Exactly.

**Austin:** ...of sorts, right? Like how can psychedelics unlock these self-actualized states...

**Dr. Dave:** Yeah.

**Austin:** ...that Maslow talked about and allow us to operate that.

**Dr. Dave:** Right.

**Austin:** And that’s what I talked about business, right? Like how amazing would it be if leaders of major Fortune 500 companies could actually act on that...

**Dr. Dave:** Yeah.

**Austin:** ...place and position through psychedelics.

**Dr. Dave:** Yeah. And actually culturally we went through a period where – I’m blocking on the word that you just used, what is the word that you just used? (laughs)
Austin: Self-actualization or human potential?

Dr. Dave: Human potential. The human potential movement. And so we had these larger organizations like est, Erhard Seminars Training. Did you ever run across that or hear about that?

Austin: I’ve heard of it, yeah.

Dr. Dave: And there were a lot of things that were spin-offs from that or that’s part of an idea, often with a very charismatic trainer at the head of it, and very entrepreneurial. They were making a lot of money by creating a lot of different levels that people could, by taking additional trainings, rise up to and so on.

Austin: This is like NLP as well. Neuro-linguistic programming.

Dr. Dave: Yeah. Yeah. Yeah.

Austin: And so I think one of the ways that we can avoid that with psychedelics is when you have leaders who come from those more states of self-actualization, so to say, they recognize that, okay, they need enough financial resources to take care of themselves. But a lot of the excess is better invested in community. It’s better invested in ecological capital, because again this comes back to building these ecosystems of health.

Dr. Dave: Yeah, right.

Austin: And building those we also facilitate our own well-being.

Dr. Dave: Yeah. Now you do have an entrepreneurial effort here that I want to give you space to talk about, which is your microdosing course that you now charge for, but there’s a whole vision around that.

Austin: Yeah, so we basically rolled that out about a year ago as a way to start to generate revenue for the team that we’re starting to build. So like anyone else I have to pay myself a salary so I can live in an apartment in New York, and go out to eat, and all these things. We also have about 18 members working on The Third Wave. So that course was a way to just initially generate more resources to come in so we could continue to grow and build and evolve, and since that point in time, we’ve decided we were in between. Do we want to go the for-profit route, or the non-profit? And now we’ve committed to go in the non-profit route. So really that microdosing course and community is the core, the nucleus, of people who really want to support us financially initially, but also who want to start to get involved in this space in a more intentional way. Basically, that course allows people PDFs and videos, spreadsheets, we have expert interviews with psychiatrists and psychotherapists, medical doctors, people who are looking at nootropics, so that we can start to understand how they can work with them and that’s been really our keystone in terms of how we’ve been able to continue to do the work that we’re doing and grow and evolve. And so that’s something that in the future we’ll continue to get the word out in, but
again, it’s within the non-profit context, so that’s a way to support the larger mission of what we’re doing in community building in the psychedelic space.

**Dr. Dave:** Yeah. Well, we’ve covered a whole bunch of the stuff here that I hope that we would, and I’m just looking through my notes to see if there’s anything we didn’t touch on.

**Austin:** Anything else popping up?

**Dr. Dave:** (laughs) I think we’ve touched on it a lot. I’ll do some commentary after this where I’ll talk a little bit more about then and now. My then and the second wave and what’s happening now and so I really want to – is there anything that you didn’t get a chance to say here that you’d like to?

**Austin:** No, your questions were excellent. I really appreciate you creating the space that we can just have a conversation about this and go over it but this has been so much fun, so thank you for doing this.

**Dr. Dave:** Okay, well, Paul Austin, I want to thank you for being my guest today on Shrink Rap Radio, and I hope we have more contact down the line.

**Austin:** I’m sure we will.