

Clinician attitudes towards the use of psychedelics in the treatment of mental health and substance use

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Introduction / Issues: Research into psychedelic assisted therapies (PAT) for the treatment of mental health (MH) and substance use disorders (SUD) has increased tenfold in as many years. Australia is set to be the first country to legalise the medicinal use of 3,4-methylenedioxymethamphetamine and psilocybin. Effective translation of this treatment into practice will require an understanding of implementation barriers and facilitators for clinicians, clients, and organisations.

Method / Approach: We surveyed Australian MH and Alcohol and Other Drug (AOD) clinicians on their beliefs, attitudes, and interest (or disinterest) in PAT's by capturing information about knowledge, beliefs, self-efficacy, attitudes, motivations and goals, contexts and resources, and social influences. Survey design was guided by the Theoretical Domains Framework (TDF) which is a theoretical framework for assessing challenges to implementation.

Key Findings OR Results: 120 clinicians completed the survey. 75% reported having a Masters or Bachelor's degree, with an average of 13.2 years working in the MH or AOD sector. 92% agreed or strongly agreed that PATs deserve further research for the treatment of MH and SUD. 65% of clinicians agreed or strongly agreed PATs will benefit their patients. 70% of clinicians agreed or strongly agreed that PATs are safe but 68% agreed PATs will be challenging to implement. 48% were concerned that the financial cost of PATs will exclude patients. 69% agreed or strongly agreed that their attitudes towards PATs have been positively influenced by external sources such as social media and news reporting. 51% of clinicians have had a personal experience using psychedelics. Further group comparisons will be explored.

Discussions and Conclusions: We have identified strong positive clinician attitudes towards PATs along with several key related attitudes.

Implications for Practice or Policy: Study outcomes will provide information about specific barriers and facilitators that can inform the conduct of PAT clinical trials, and identify education and training opportunities, organisational changes and factors that may influence clinician level expectancy effects.

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