## ONTARIO COURT OF JUSTICE (South West Region)

BETWEEN:

#### HIS MAJESTY THE KING

Respondent

- and -

### **SAMER AKILA**

**Applicant** 

### AFFIDAVIT OF ZACHARY WALSH

I, Zachary Walsh, PhD., R. Psych, Professor, Department of Psychology at the University of British Columbia of 3333 University Way, Kelowna, British Columbia Campus, MAKE OATH AND SAY/AFFIRM:

### Area of Expertise

1. My proposed area of expertise is use of psychedelics with a specific expertise in psilocybin use, effect, and access.

### Personal Qualifications

2. I am a Full Professor with the Department of Psychology at the University of British Columbia. Attached hereto and marked as Exhibit "A" is a true copy of my Curriculum Vitae. I received my B.Ed. English 1997. I have been trained in Psychology: BA Honours 2001, MA Psychology 2004, and PhD Clinical Psychology 2008. I have conducted extensive research and have had research published in peer-reviewed journals on the subject of psilocybin use and behavior, and on psychedelic use more generally. I am currently funded by the Social Sciences and Humanities Research Council of Canada



and the Canadian Institutes for Health Research to study substance use. I have authored highly cited scientific articles on psilocybin use and mental health. I am the principal investigator for the Microdose.me study which is the largest study to date of microdosing psychedelics – primarily psilocybin. I am senior author on two widely accessed articles based on data from that study and my work in the area has received wide coverage in the media.

- 3. I have been part of several panels to develop clinical guidelines and recommendations for regulation of psychedelics including the BC Ministry of Mental Health and Addictions Steering Committee on Psychedelic Medicine Assisted Therapy in British Columbia. I have been consulted on psilocybin-related issues by the Canadian Senate, am a founding member of the International Society for Research on Psychedelics and a founding member of the Editorial Board of the peer reviewed journal Psychedelic Medicine. I have also worked as a paid consultant to emerging psychedelic companies Entheotech and Numinus where I have received compensation in the form of shares and options (value <\$5000 each) and Mycomedica Life Sciences where I have received hourly compensation (<\$1000). I teach an advanced undergraduate psychology course at UBC on the topic of drugs and behavior which includes detailed coverage of psilocybin and psychedelics generally and I have also delivered psilocybin/ psychedelics education seminars and workshops for diverse health professionals.</p>
- 4. I have experience with psilocybin assisted psychotherapy as a therapist on a clinical trial of psilocybin assisted psychotherapy for alcohol use disorder and as a therapist working within the Health Canada Special Access Program to provide access to psilocybin for certain conditions most notably anxiety associated with serious diagnoses such as cancer. I am principal investigator for a clinical trial of psilocybin to assist with opioid titration among individuals attempting to reduce their use of prescription opioids in the context of chronic pain. I was also a member of the clinical team for one of Canada's first trials of psychedelics to treat a mental health condition. I have led several large surveys of psilocybin and psychedelic use in Canada. Note that the use of psilocybin and



psychedelics has been among my key research topics. In the course of my research and clinical work over the past decade I have had the opportunity to work with diverse participants in the psilocybin industry including patients, physicians, and countless other users of psilocybin.

- 5. I acknowledge that it is my duty to give evidence in relation to this proceeding as follows:
  - (a) to provide opinion evidence that is fair, objective, impartial, and non-partisan;
  - (b) to provide opinion evidence that is related only to matters that are within my area of expertise; and
  - (c) to provide such additional assistance as the court may reasonably require, to determine a matter in issue.
- 6. I acknowledge that the duty referred to above prevails over any obligation which I may owe to any party by whom or on whose behalf I am engaged.

### Opinion

Can a person who consumed psilocybin reasonably expect to potentially experience changes in any of the following thought-related effects during or after their psilocybin experience: cognitive flexibility, spirituality, life-meaning, ego dissolution, connectedness, mindfulness, creativity or other similar effects?

- 7. Psilocybin use can cause consumers to experience positive changes in the thought-related domains of cognitive flexibility, spirituality, life-meaning, ego dissolution, connectedness, mindfulness, and creativity. These thought -related effects are overlapping but also meaningfully distinct and as such warrant distinct examination.
- 8. The vast majority of research on thought-related effects of psilocybin has focused on larger rather than micro doses of psilocybin. In general, the category of thought-related effects is the primary domain in which psilocybin effects are experienced.



- 9. Among the most thoroughly researched category of thought-related effects involves mystical experience which includes spirituality, life-meaning, ego dissolution, and peace. Ego-dissolution is a positive thought-related experience characterized by the feeling of being outside of or beyond one's typical sense of self or perspective. An article published in the journal *Psychopharmacology* entitled *Psilocybin occasioned mystical-type experiences: immediate and persisting dose-related effects* (Griffiths, Johnson, Richards, Richards, McCann & Jesse, 2011) confirm the capacity of psilocybin to reliably engender *mystical experiences* and *ego dissolution*.
- 10. Among adults with no prior experience with psilocybin 72% of participants in this study experienced a complete mystical experience. In addition to these mystical experiences participants reported and were assessed to have experienced lasting positive changes in other thought-related domains. These changes may have been at least partially resulting from the highly valued mystical experience and associated shifts in perspective and consciousness. As the authors of the study report:

"The present study also extends previous observations indicating that psilocybin can occasion persisting positive changes in attitudes, mood, life satisfaction, behaviour and altruism/social effects (Griffiths et. al. 2006, 2008). All of these domains showed dose-related increases one month after sessions, with effects at the highest doses sustained at the 14 month follow up. One month after sessions at either or both the two highest dose sessions, 94% of volunteers endorsed that the experience increased their sense of well-being or life satisfaction moderately or very much, and 89% rated moderate or higher changes in positive behaviour. At the 14-month follow-up, these ratings remained high. The types of behaviour change most frequently cited by volunteers were better social relationships with family and others, increased physical and psychological self-care and increased spiritual practice (Table 6). Ratings by community observers before and after the study as well as ratings by study monitors after the study monitors were consistent were persisting positive changes in behaviour and attitudes claimed by the volunteers. The persisting positive changes, particularly in attitudes, mood and life satisfaction occasioned by psilocybin appear similar in kind and breadth to the enduring changes reported in case studies of individuals who have had spontaneously-occurring mystical or insightful-types of experiences (Miller and C' de Baca, 2001)."

11. These experiences have clear thought-related impacts. For example, one characteristic participant statement:

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- "I have a thousand ideas to write about and am making time and space in my life to accommodate them."
- 12. The results of this study have been replicated several times and are reliable. In sum, replicated evidence across several samples indicates that use of psilocybin can engender mystical experiences and these experiences are distinctly characterized by several of the thought-related effects identified in the question with a particular emphasis on positive ego-dissolution, spirituality, and life-meaning.
- 13. A study recently completed by our researcher team at UBC in collaboration with investigators from University of Toronto and approved by the UBC Behavioral Research Ethics Board and *in preparation for submission* to a peer reviewed journal provides further detailed information regarding other aspects of thought related effects. The survey included responses from more than 740 adult users of psychedelics among whom psilocybin was the most widely used substance used by over 80% of respondents. Positive impacts of psychedelic use on *General Thinking* were reported by 97% of respondents with 61% reporting large positive effects. More granular analysis indicated that 93% reported improvements in *Positive Thinking*, 86% reported increases in *Creativity* and 84% reported increases in *Mental Clarity*. Other highly endorsed thought-related effects included 95% reporting increases in *Personal Sense of Spirituality* and 93% reported increases in *Appreciation of Nature*. In sum, thought related effects were ubiquitous in our recent survey of psychedelic users.
- 14. Research has also specifically identified positive impacts of psilocybin use on creativity. A double-blind, placebo-controlled study published in the journal *Translational Psychiatry* entitled *Spontaneous and deliberate creative cognition during and after psilocybin exposure* (Mason et al., 2021) indicated that spontaneous creative insights was enhanced acutely following administration of psilocybin, and that the generation of novel ideas increased in the subsequent week. Neuroimaging indicated that these effects were accompanied by neurological changes related to cognitive flexibility, leading the



authors to conclude that they had established an empirical basis for the broadly reported anecdotal accentuation of creativity associated with use of psilocybin use.

15. Mindfulness is a thought-related skill involving the capacity to attend to the active and present contents of one's mind. Accentuation of mindfulness and ego-dissolution are frequently reported thought-related effects of ingesting psilocybin. This is reflected in the findings of a 2019 article published in the journal *Nature: Scientific Reports* after a blind peer review process, entitled *Characterization and prediction of acute and sustained response to psychedelic psilocybin in a mindfulness group retreat* (Smigielski et al., 2019). In this study experienced meditators who ingested psilocybin during a meditation retreat experienced deeper meditative states and accentuated mindfulness compared to those who completed the meditation retreat but received placebo.

Participants who received psilocybin were also more likely to experience ego-dissolution related to the mystical experience. This private, thought-related experience has been widely found to have salutary effects, and meditators who received psilocybin and experienced high levels of ego-dissolution had greater positive changes in perspective on self, environment and other people when queried 4-months after the experience.

When a psilocybin consumer experiences some or all of the thought-related effects listed in question #1, does the person tend to view these effects as valuable and/or important?

16. The subjective value and importance of the thought-related experiences is immense. An article published in *Journal of Psychopharmacology* after a blind peer review process, entitled "*Mystical-type experiences occasioned by psilocybin mediate the attribution of personal meaning and spiritual significance 14 months later*" (Griffiths, Richards, Johnson, McCann & Jesse, 2008) reported that adults who were administered psilocybin viewed their experience as among the most important of their lives, such that 58% rated among the top 5 most *personally meaningful* experiences of their lives and 67% rates as among the most *spiritually meaningful* of their lives.



17. The enduring impact of these effects is highlighted by an article published in *Journal of Transpersonal Psychology* after a blind peer review process, entitled "*Pahnke's Good Friday experiment: A long-term follow-up and methodological critique*" (Doblin, 1991). This paper reports on a unique opportunity to examine the very long-term thought-related effects of psilocybin use. The study builds on an early study of psilocybin-occasioned mystical experience that in 1962 administered psilocybin to divinity students. Assessments conducted shortly after the experiment indicated that participants in the psilocybin condition experienced profound thought related mystical type experiences and that these experiences were considered highly meaningful and valuable. Interestingly, when followed up 25 years later participants maintained their high esteem for the psilocybin experiences, rating them as being among the most important spiritual event of their lives. As one participant reported:

"Just in that one session I think I gained experience I didn't have before and probably could never have gotten from a hundred hours of reading or a thousand hours of reading." (p.16)

18. In sum the acute and long-term perceived importance of thought related psilocybin experiences is extremely high.

### What are the reasons people consume psilocybin?

- 19. This query warrants distinct discussion for microdoses and for larger doses, as the subjective experiences of and motivations for each practice overlap but are also distinct in important ways.
- 20. With regard to larger doses, thought-related motives are the primary reason people consume psilocybin. This reflected in the findings of a 2021 article published in *Drug and Alcohol Review* after a blind peer review process, entitled "*Motives for the use of serotonergic psychedelics: A systematic review*" (Basedow & Kuitumem-Paul, 2021). The article presents a comprehensive review of the literature on motivations for the use of serotonergic psychedelics, of which psilocybin is the most widely used in North

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America. The review included 37 relevant studies with a total of over 12800 participants queried across diverse time periods, locations, and methodologies making it an extremely robust, comprehensive, and reliable analysis. That review identified *Expansion* motives as the primary motives for the use of psilocybin and other serotonergic psychedelics. The authors described *Expansion* motives as being clearly thought-related such that they involve:

"...subjectively increasing self-knowledge and creativity..." (p.1398)

- 21. Enhancing spirituality is another widely cited reason for psilocybin use, as psilocybin containing mushrooms have an extensive and well-documented history of use as entheogens. Entheogenic plants are plants used to enhance spiritual experience. There is evidence of entheogenic use of psilocybin among the Indigenous peoples of the Americas dating back to the precolonial era. This is reflected in the contents of a 2024 article published in *Journal of Psychedelic Studies* after a blind peer review process, entitled "*Indigenous psilocybin mushroom practices: An annotated bibliography*" (Spiers et al., 2024). This article documents 49 research articles that identify Indigenous approaches to the use of psilocybe mushrooms with evidence from several centuries clearly documenting use of psilocybin for thought-related purposes such as spirituality and communication.
- 22. Motivations for microdosing are clearly outlined in a 2021 article published in *Nature:*Scientific Reports after a blind peer review process, entitled "Adults who microdose psychedelics report health related motivations and lower levels of anxiety and depression compared to non-microdosers" (Rootman et al., 2021). This study is the culmination of research by myself and an international team of leading health researchers from prominent universities in Canada, Europe and Australia. The data for this article were drawn from the Microdose.Me (MM) study, which is the largest detailed study to date of psychedelic microdosing. The MM study was externally funded and reviewed by the Mitacs Foundation and was carried out between 2019 and 2021.

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The findings of this study highlight the broad thought-related motivations for microdosing psilocybin. Among the 3486 adults who reported microdosing psilocybin, 3 of the 4 most frequently endorsed motivations were entirely thought-related. Specifically, the most prevalent motivation was *Enhance Mindfulness*, which was endorsed by 83% of those who microdosed psilocybin. The thought-related motive of *Enhance Creativity* was the third most prevalent being endorsed by 74%, and the fourth most prominent was *Enhance Learning* which was endorsed by 58% of respondents. In sum, as is the case with the use of larger doses of psilocybin, thought-related motives are by far the most prominent reasons why people use psilocybin.

# <u>Is it possible to estimate the number of people in Canada accessing psilocybin through the unregulated market?</u>

23. The most recent national statistics pertaining to the numbers of individuals in Canada who consume psilocybin accessed from an unregulated source (i.e. not clinical trial or Health Canada Special Access) are drawn from the 2019 edition of the Canadian Alcohol and Drug Survey. That study reported that approximately 587,000 Canadians consumed drugs from the category of hallucinogens in 2019. In that survey hallucinogens was the category within which psilocybin was included. That survey did not report specific numbers regarding psilocybin, however our more recent survey of psychedelic users indicated that psilocybin was the most widely used psychedelic relative to the other substances that were classified as hallucinogens, being used by over 80% of respondents. Recent research from the US indicates that psilocybin use has increased since 2019 and this trend likely also extends to the Canadian context. As such, my best estimate is that over 500,000 Canadians have used psilocybin accessed from the illicit market in the past year. This estimate is accompanied by the caveat that illegality, stigma and other factors complicate estimation.

What are the health risks to consuming psilocybin? (for micro doses and larger doses)

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- 24. Estimating the health risks of psilocybin requires consideration of several aspects of risk, including risks of addiction, long-term health effects, risks during acute intoxication, and risks to public health. With regard to larger doses of psychedelics, an article published in *Journal of Psychopharmacology* after a blind peer review process, entitled "*Adverse effects of psychedelics: From anecdotes and misinformation to systematic science*" (Schlag, Aday, Salam, Neill & Nutt, 2022) presents a comprehensive review of the literature on harms related the use of psilocybin and other serotonergic psychedelics, wherein the authors review risks across several distinct domains.
- 25. Across all domains the evidence supports the conclusion that the health risks of consuming psilocybin are very low. Regarding risk of addiction and misuse, the authors note that this class of substances - which includes psilocybin - as having extremely low prevalence of dependence - even lower than caffeine. Another aspect of harms involves the potential for individuals to engage in dangerous behaviors under the acute effects of psychedelics. Regarding this concern the authors note that the risk of engaging in harm to self or others does not appear to be exacerbated among users of psychedelics. Indeed, psilocybin was estimated to have the lowest incidence of emergency hospital visits of all recreational drugs; fewer than 1% of users reports seeking help from emergency services related to psychedelic use and the use of psychedelics is estimated to be involved in a very low 0.1% of admissions to hospital. Among those who do seek emergency services related to the acute effects of psilocybin concerns are very typically short lived and not serious. A recent article published in Journal of Psychopharmacology after a blind peer review process, entitled "Adverse experiences resulting in emergency medical treatment seeking following the use of magic mushrooms" (Kopra, Ferris, Winstock, Young & Rucker, 2022) used data from the Global Drug Survey – which is the world's largest survey of drug users – to reveal that among more than 9200 psilocybin users the likelihood of a psilocybin use event leading to emergency service use was less than 0.1%. Further analyses of cases that led to emergency service use indicated that the few events that did lead to seeking services were short lived and self-resolving; transient



- anxiety and paranoia were the most common complaints and all but one case resolved within 24 hours.
- 26. In cases where individuals have engaged in harmful behaviors under the influence of psilocybin, psilocybin was usually consumed together with other substances such as alcohol which have known potential to increase risk for harmful behaviors. In such cases it is not possible to parse the extent to which if any the increased risk is distinctly attributable to psilocybin, making it more parsimonious to attribute the harmful behaviors to the substances for which there is an empirically validated association with violence and self harm such as alcohol or stimulants. Importantly, the small risk of engaging in harmful behaviors can be almost entirely mitigated by following best practices safety procedures discussed in more detail below such as screening and facilitation by an attendant not under the influence of psilocybin.
- 27. With regard to long-term health impacts psilocybin also appears to have an excellent safety profile for both mental and physical health. Psilocybin has an outstanding safety ratio (i.e., therapeutic index) such that a potentially harmful dose is several hundred times larger than what is used for thought-related effects, making it an order of magnitude safer than aspirin from the perspective of frank toxicity. The low physiological toxicity of psilocybin is well-established and as such most potential concerns relate to mental health. However, convincing populations evidence suggests that psilocybin use is not harmful to mental health and may actually confer benefit. This is reflected in the findings of a 2015 article published in *Journal of* Psychopharmacology after a blind peer review process, entitled "Psychedelics not linked" to mental health problems or suicidal behavior: A population study" (Johansen & Krebs, 2015). This study presents the results of a large population study of more than 135,000 US adults of whom more than 14,000 had used psilocybin. The analysis did not identify increased risk for mental health problems, suicidality or mental distress associated with use of psilocybin, but rather found that psilocybin use was associated with lower levels of severe psychological distress, reduced likelihood of using inpatient psychiatric services, and lower prevalence of being diagnosed with depression.



Moreover, the careful assessments of neurocognitive effects that are embedded in clinical trials have determined that there are no apparent deficits associated with the use of psilocybin. In sum, the acute and longer-term risks of psilocybin use to mental and physical health are very low.

- 28. A final and distinctive longer-term health concern associated with psychedelic use is the development of hallucinogen persisting perceptual disorder (HPPD) which is sometimes colloquially described as "flashbacks." The authors of the review note that despite anecdotes and public perceptions there have been no reports of HPPD among the hundreds of participants in clinical trials of psilocybin. As such they conclude that the condition is very rare and may present exclusively among illicit psychedelic use. In such use the actual nature of the psychedelic substance cannot be reliably ascertained and as such the apparent harms of illicit psychedelic use may not be directly translatable to potential harms of regulated psilocybin use. In light of this inconsistency in product purity and the rarity of the condition even among illicit use, pending further investigation it does not appear appropriate to include HPPD among the substantial risks of regulated psilocybin use. In sum, although there are anecdotal reports of HPPD there is no conclusive evidence that it represents a substantial health risk associated with the use of psilocybin in particular.
- 29. Evaluating the health risks associated with psilocybin use requires consideration of both individual and *public health*. A useful and widely adopted heuristic to contextualize the risk of a given substance is to compare its harms to those of other substances, and this process has been widely adopted to rank the relative combined individual and public health harms of various substances. Across diverse international ranking systems psilocybin is routinely scored to be the very lowest or among the few very lowest in terms of combined harms to personal and public health. An example of such ranking is a 2015 article published in *Journal of Psychopharmacology* after a blind peer review process, entitled "*European ratings of drug harms*" (Amsterdam, Nutt, Phillips & van den Brink, 2015) which I accept and adopt as part of my evidence. This study identifies

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psilocybe mushrooms as having the lowest risk of the 20 most widely used psychoactive substances ranked on 16 criteria that capture the combined harms to self and public. By way of context, on the weighted 100-point harm scale the most harmful drugs such as alcohol and heroin had scores greater than 50 whereas the score for psilocybin was less than 5. Moreover, this finding of low ranking is corroborated by other ranking systems and has been observed based both on the formal rankings of clinical experts in substance use and substance use treatment and on ranking by people with lived experience of drug use. In sum, psilocybin is among the least or perhaps the least harmful of all widely used legal and illegal psychoactive drugs.

- 30. With regard to public health, violence related to use of substances such as alcohol and stimulants represents a substantial public health concern, particularly with regard to violence toward intimate partners (i.e. domestic violence). However, a series of studies from our group indicates that psychedelics such as psilocybin are protective against domestic violence. This protective relationship has been identified for psychedelics in general among male jail inmates; inmates who had a history of psychedelic use were less likely to be arrested for domestic violence (Walsh et al., 2016) and male university students in Canada who had a history of psychedelic use were less likely to report violence and aggression against intimate partners (Thiessen, Walsh, Bird & LaFrance, 2018).
- 31. The evidence base related to psilocybin microdosing is much less well developed than the research involving larger doses. With regard to acute and public health risks the acute effects of microdosing are intended to be subperceptual and as such it is reasonable to assume that the impacts of microdosing on harmful behaviors and risks to public health would be extremely low. With regard to long-term health impacts, the Microdose.me study described above (paragraph 22; Rootman et al., 2021), which is the largest study to date of microdosing found that with regard to the widely used and well-validate measures of stress anxiety and depression individuals who microdosed demonstrated slightly better health, suggesting at minimum that microdosing is at least

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not harmful to longer term mental health. However, because microdosing is relatively novel as a widespread practice and is generally understudied, more time will be required to establish the absolute safety of microdosing with regard to potentially subtle physiologically effects. Nonetheless, taken together, the good safety of larger doses, preliminary evidence from microdosing studies, and widespread adoption of microdosing provide a strong signal of acceptable safety for microdosing.

What are the protocols generally when someone uses psilocybin at a clinical trial or via the Health Canada Special Access Program?

- 32. The best practices for the use of psilocybin in a clinical trial are articulated in review article published in *International Review of Psychiatry* after a blind peer review process, entitled "Current perspectives on psychedelic therapy: use of serotonergic hallucinogens in clinical interventions" (Garcia-Romeu & Richard, 2018). This article provides a thorough review of practices in clinical trials and psilocybin assisted psychotherapy more generally. The authors note that contemporary approaches to psilocybin assisted psychotherapy pay particular attention to screening, preparation, dosing, setting, and post-session integration.
- 33. This process is consistent with the formal programs of US states such as Oregon which has developed a mechanism for facilitating access to psilocybin outside of clinical use, such as use for thought-related purposes. Now produced and marked as Exhibit "B" to this my affidavit is a copy of the 2022 *Oregon Psilocybin Services Fact Sheet* developed by the *Oregon Health Authority* to inform citizens of the nature of the state program. Note that program participants are required to undergo screening, attend a preparation session, only access psilocybin from a licensed quality-assured source and consume it under the supervision of a trained and licensed facilitator. Now produced and marked as Exhibit "C" to this my affidavit is a copy of the 2022 *Client Information Form* also developed by the *Oregon Health Authority*. The purpose of this form is to assist in the screening of potential participants in order to minimize harms for medical and for non-

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medical use. To this end, the presence of intentions to engage in self-harm, and the presence of psychotic disorders or high risk of psychosis exclude potential participants from ingesting psilocybin. Note also that the presence of other medical and psychological issues that warrant ongoing treatment requires potential participants to consult with the health care experts engaged in their care to provide a personalized evaluation of appropriateness to consume psilocybin. The features presented in Exhibit B and Exhibit C are also consistent with my own experience working on clinical trials and on psilocybin-assisted therapy cases approved under the Health Canada Special Access program.

34. The screening is effective for minimizing the risk or excluding patients with severe mental illness – most notably psychotic disorders - who may have difficulty orienting to and integrating the experience. While safe – as described in paragraphs 24 - 30 above – the psychedelic experiences engendered by psilocybin can be psychologically intense and acutely disorienting. Among individuals with psychotic disorders (e.g. schizophrenia), or at high risk of such disorders, the intense and disorienting psychedelic experience may risk potential exacerbation of symptoms. The risks of an unpleasant or distressing experience is further reduced by *preparation* sessions that provides patients with realistic expectations regarding the experience, allows them to ask any questions, and to develop and briefly practice skills for navigating the psilocybin experience. Attention to setting further reduces risks of unpleasant or potentially harmful acute experiences by ensuring that the patient is attended to by trained assistants in a controlled environment throughout the session. This prevents accidents related to disorientation (e.g. falls) and allows for the provision of reassurance should patients become confused or agitated. The setting extends to the physical space which is organized in a manner that minimizes risk and maximizes comfort and tranquility through the use of environmental factors such as soft lights and music. Attention to dosing provides consistency and allows for moderating the intensity of the experience based on individual levels of familiarity and comfort with altered states of consciousness. Finally, *integration* sessions with the same trained specialists who

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provided preparation allow for patients to ask questions that may emerge post session and also allows the trained facilitator to address any concerns and monitor for unexpected negative reactions.

What are the health and safety risks from consuming psilocybin when consumed in a manner similar to the Health Canada approved Special Access Program or clinical trials?

- 35. The health and safety risks of consuming psilocybin are very low from the perspective of harm for the development of problematic use (i.e. addiction), from the perspective of long-term risks to mental and physical health, and in term of acute risk during the effects of psilocybin. Indeed, the disorientation associated with acute effects likely represents the most substantial risk and this risk can be clearly mitigated with the presence of a trained facilitator and with attention to the setting in which psilocybin is administered.
- 36. In sum, numerous clinical trials have carefully monitored adverse events and concluded that with the type of protocols established by those trials (see paragraphs 31 33) psilocybin can be consumed in a manner that minimizes the already small risks associated with consuming psilocybin. In this context the health and safety risks of psilocybin compare favourably to the type of activities that constitute mainstream recreations such as sport and travel. In other words, with proper attention to accessible and well-known protocols psilocybin can be used in a very safe manner. Indeed, it is noteworthy that participants in the clinical trials and patients accessing the Special Access Program must be experiencing substantial mental and or physical health problems in order to qualify for participation. That psilocybin can be consumed very safely by such individuals who may be reasonably expected to be at heightened risk for the negative effects of any intervention speaks strongly and positively to the safety of

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psilocybin use among the relatively healthier adults who may be expected to use psilocybin for non-medical, thought-related purposes.

Sworn remotely via videoconference by	)
Zachary Walsh in the city of West Kelowna. British Columbia, and the Commissioner Joanna Shaw in the city of Toronto, Ontario this 4 <sup>th</sup> day of	)
	)
	)
	)
June 2024.	)

Commissioner for taking affidavits

Joanna Shaw

JOANNA KATHLEEN SHAW,

a Commissioner, etc., Province of Ontario, for LEWIN & SAGARA LLP, BARRISTERS AND SOLICITORS. Expires October 16, 2026. Sworn remotely by Professor Zachary Walsh in the city of West Kelowna, British Columbia with commissioner Joanna Shaw in the city of Toronto, Ontario in accordance with O. Reg. 431/20, Administering Oath or Declaration remotely.

### JOANNA KATHLEEN SHAW,

a Commissioner, etc., Province of Ontario, for LEWIN & SAGARA LLP, BARRISTERS AND SOLICITORS. Expires October 16, 2026.



## CURRICULUM VITAE ZACH WALSH, Ph.D., R.Psych.

Professor

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### **EDUCATION**

2008

Ph.D., Clinical Psychology

Rosalind Franklin University/ Chicago Medical School, North Chicago, IL. Dissertation: *Psychopathy, ethnicity, socioeconomic status, and violence: A* 

further examination.

Supervisor: David S. Kosson, Ph.D.

2004

M.S., Psychology

Rosalind Franklin University/ Chicago Medical School, North Chicago, IL. Thesis: *The impact of socioeconomic status, ethnicity, and psychopathy on recidivism in a county jail population.* 

Supervisor: David S. Kosson, Ph.D.

2001

B.A. (Honours), Psychology

University of Winnipeg, Winnipeg, MB.

Thesis: The expectations of reminders and action-state on prospective memory.

Supervisors: Evelyn Schaefer, Ph.D. & Ross Broughton, Ph.D.

1997

B.Ed., English (Secondary)

University of Winnipeg, Winnipeg, MB.

### INTERNSHIP & POSTGRADUATE TRAINING

2008 - 2009 Postdoctoral Research Fellowship, Brown University, Warren Alpert Medical School, Department of Psychiatry & Human Behavior, Providence, RI.

2007 - 2008 Clinical Psychology Internship, Brown University, Clinical Psychology Training Consortium, Providence, RI.

### ACADEMIC APPOINTMENTS

2020 - Professor, University of British Columbia, Kelowna, BC.

2014 - 2020 Associate Professor, University of British Columbia, Kelowna, BC.

2009 - 2014 Assistant Professor, University of British Columbia, Kelowna, BC.

### PROFESSIONAL LICENSURE

2012 - College of Psychologists of British Columbia - Registered Psychologist #2011

Zach Walsh - CV- 05/24

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### ORIGINAL PUBLICATIONS IN PEER-REVIEWED JOURNALS

(underline indicates supervised student authorship)

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### **BOOK CHAPTERS & REVIEWED PUBLICATIONS IN EDITED VOLUMES**

- St. Pierre, M., Daniels, S., & Walsh, Z. (2022). Cannabis substitution: A Canadian Perspective. Hathaway, A., (Ed.). *High North: Cannabis in Canada* (146-63). Vancouver, UBC Press.
- Allan, J., Holder, M.D., & Walsh, Z. (2017). Cannabis and well-being. Preedy, V.R. (Ed.). *The Handbook of Cannabis and Related Pathologies: Biology, Diagnosis, Treatment and Pharmacology* (pp.308-317). Amsterdam, Netherlands: Elsevier.
- **Walsh, Z** & Thiessen, M. (2017) *TheAnswerPage.com*. The Use of Cannabis as a Substitute Drug. Boston: The Answer Page, Inc.
- **Walsh**, **Z** & Thiessen, M. (2017) *TheAnswerPage.com*. The Medical use of Cannabis and Cannabinoids in Post Traumatic Stress Disorder. Boston: The Answer Page, Inc.
- <u>Baker</u>, A., <u>Black</u>, P.J., & Walsh, Z (2014). Deception. In Arrigo, B.A. & Golson, G. (Eds.). *Encyclopedia of Criminal Justice Ethics* (p.244). Thousand Oaks, CA: Sage Publications.
- <u>Black</u>, P.J., & Walsh, Z (2014). Police profiling. In Arrigo, B.A. & Golson, G. (Eds.). *Encyclopedia of Criminal Justice Ethics* (p.670). Thousand Oaks, CA: Sage Publications.
- Crosby, K., Hiles, M., & Walsh, Z. (2014). The war on drugs. In Arrigo, B.A. & Golson, G. (Eds.). *Encyclopedia of Criminal Justice Ethics* (p.1017). Thousand Oaks, CA: Sage Publications.
- <u>Langille</u>, J.I., <u>Peters</u>, L. & **Walsh**, **Z.** (2014). Violence against women and girls. In Arrigo, B.A. & Golson, G. (Eds.). *Encyclopedia of Criminal Justice Ethics* (p.996). Thousand Oaks, CA: Sage Publications.
- <u>Peters</u>, L. & Walsh, Z. (2014). Drug courts. In Arrigo, B.A. & Golson, G. (Eds.). *Encyclopedia of Criminal Justice Ethics* (p.893). Thousand Oaks, CA: Sage Publications.
- Hare, R.D., <u>Black</u>, P.J., & Walsh, Z. (2013). The PCL-R: Forensic applications and limitations In R. P. Archer (Ed.). *Forensic use of clinical assessment instruments, Second Edition*. (pp.230-265) Mahwah, NJ: Lawrence Erlbaum.
- Stuart, G.L., Chatav Schonbrun, Y., & Walsh, Z. (2009). Treatment for substance abuse reduces intimate partner violence. DATA: *The Brown University Digest of Addiction Theory and Application*, 28, 8.
- Walsh, Z., & Stuart, G.L. (2009). Antisocial Personality Disorder as a co-occurring disorder with Substance Use Disorder. In G.L. Fisher & N. A.Roget (Eds.). *Encyclopedia of Substance Abuse Prevention, Treatment, and Recovery* (pp.92-95). Thousand Oaks, CA: Sage Publications.
- Walsh, Z., & Stuart, G.L. (2009). Experimental substance use. In G.L. Fisher & N.A. Roget (Eds.), *Encyclopedia of Substance Abuse Prevention, Treatment, and Recovery* (pp. 389-391). Thousand Oaks, CA: Sage.

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Walsh, Z., & Stuart, G.L. (2009). Moderation in use. In G.L. Fisher & N.A. Roget (Eds.), Encyclopedia of Substance Abuse Prevention, Treatment, and Recovery (pp. 554-555). Thousand Oaks, CA: Sage.

Walsh, T., Walsh, Z., & Stuart, G.L. (2009). Decriminalization. In G.L. Fisher & N.A. Roget (Eds.), Encyclopedia of Substance Abuse Prevention, Treatment, and Recovery (pp. 263-266). Thousand Oaks, CA: Sage.

Walsh, T., Walsh, Z., & Stuart, G.L. (2009). History of drug use laws. In G.L. Fisher & N.A. Roget (Eds.), Encyclopedia of Substance Abuse Prevention, Treatment, and Recovery (pp. 327-330). Thousand Oaks, CA: Sage.

#### INVITED PRESENTATIONS

Walsh, Z. (2023). Cannabis and mental health primer. Invited half day clinical workshop at Vancouver Mental Health Summit, Richmond, BC.

Walsh, Z. (2023). Drugs, behavior and harm reduction. Invited day-long clinical workshop at YMCA of Southern Interior BC.

Walsh, Z. (2023). Psychedelic psychotherapy primer. Invited half day clinical workshop at Vancouver Mental Health Summit, Richmond, BC.

Walsh, Z. (2023). Psychedelic interventions in palliative care. Invited keynote presentation to Interior Health Palliative and End of Life Care Conference, Kelowna, BC.

Walsh, Z. (2023). Medical cannabis for mental health and addiction. Invited keynote presentation to Annual Regional Congress on Psychology, University of Costa Rica, Guanacaste, Costa Rica.

Walsh, Z. (2023). Psilocybin-assisted therapy – Health Canada Special Access Program. Invited presentation to Westbank First Nation Chief & Council, Westbank First Nation, BC

Walsh, Z. (2023). Cannabis and problematic substance use. Invited presentation to Canadian Consortium for Investigation of Cannabinoids Conference, Toronto, ON

Walsh, Z. (2023). Introduction to psilocybin-assisted therapy. Invited presentation to Westbank First Nation Health & Wellness Team, Westbank First Nation, BC

Walsh, Z. (2023). Psychedelic therapy primer. Invited webinar presentation for Canadian College of Naturopathic Medicine, New Westiminster, BC

Walsh, Z. (2023). Psychedelic therapies for end-of-life distress. Invited panelist presentation for screening of Dosed II Movie, MAPS Canada Sponsored, UBC-O, Kelowna, BC

Walsh, Z. (2023). Cannabis & Mental Health. Invited webinar presentation for the Mind-Body Training Institute, Vancouver, BC

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Walsh, Z. (2024). *Microdosing, microdosing and ketamine assisted psychotherapy: New developments in psychedelic research.* Invited talk for University of Manitoba, Psychology Graduate Students Association, Winnipeg, MB.

Walsh, Z. (2024). *Drugs, behavior and harm reduction*. Invited day-long clinical workshop at YMCA of Southern Interior BC.

**Walsh**, **Z.** (2024). *New developments in psychedelic research*. Invited talk for Okanagan Psychedelic Society, Kelowna, BC

Walsh, Z. (2023). Cannabis Research Ethics. Invited presentation to the Research Ethics BC, Vancouver, BC

Walsh, Z. (2023). Cannabis & Ageing. Invited panelist to the UBC IHLCDP Café Scientifique Speaker Series, Kelowna, BC

Walsh, Z. (2023). Cannabis Mental Health & Addiction. Invited presentation to the UBC Brain Wellness Speaker Series, Vancouver, BC

Walsh, Z. (2023). *Psilocybin Microdosing*. Invited presentation to the Rochester Psychedelic Group, Rochester, NY, USA

Walsh, Z. (2022). *Psychedelics and mental health primer*. Invited 2-day clinical workshop for Sarah Riel Society, Winnipeg, MB.

Walsh, Z. (2022). *Psychedelics in the treatment of PTSD*. Invited testimony to Senate of Canada – Subcommittee on Veterans Affairs, Ottawa, ON.

**Walsh, Z.** (2022). Canadian Research in Psychedelic Psychotherapy. Invited presentation at Matrix-N Translation in Action Conference, Vancouver BC

Walsh, Z. (2022). Cannabis & Harm Reduction. Invited consultant to the European Monitoring Centre for Drugs and Drug Addiction, Lisbon, Portugal.

Walsh, Z. (2022). Cannabis, Substance Use and Public Health. Invited panelist for the West Coast Brain Injury Conference 2022, Kelowna, BC.

**Walsh, Z.** (2022). Future clinical applications of psychedelics. Invited panelist for the Grow Up 2022 Conference, Victoria, BC.

**Walsh**, **Z.** (2022). *Psychedelics and addictions*. Invited panelist for the Catalyst 2022 Conference, Niagara Falls, ON.

Walsh, Z. (2022). Cannabis and mental health primer. Invited webinar of day-long clinical workshop for Hirose Seminars, Vancouver, BC.

**Walsh**, **Z.** (2022). *Understanding Addiction*. Invited presentation for Lake Country Health Planning Society, Lake Country, BC.

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Walsh, Z. & Farrell, L. (2022). Cannabis Use on Turtle Island. Invited webinar presentation for Canadian Centre on Substance Use and Addiction, Ottawa, ON. (Delivered online).

Walsh, Z. (2022). Cannabis and Mental Health. Invited webinar presentation of day-long clinical workshop for Palliser Health Care Network, Medicine Hat AB. (Delivered online).

Walsh, Z. (2022). *Problematic Cannabis Use*. Invited webinar presentation for Execulinks Continuing Education, Calgary, AB. (Delivered online).

Walsh, Z. (2021). *Psychedelic Psychotherapy Primer*. Invited presentation of day-long clinical webinar for Hirose Seminars, Vancouver, BC. (Delivered online).

**Walsh, Z.** (2021). *New Methodologies in Cannabis Research*. Invited presentation to University of Colorado – Boulder, Bidwell Research Lab, Boulder CO.

Walsh, Z. (2021). Recent Developments in Microdosing Research. Invited address for the Catalyst Calgary 2021 Conference. Presented online due to COVID-19.

**Walsh, Z.** (2021). *Microdosing, Macrodosing and Ketamine Assisted Psychotherapy: Tracking New Developments in the Psychodelic Renaissance.* Invited colloquium at the Simon Fraser University, Department of Psychology, Vancouver, BC.

**Walsh**, **Z**. (2021). *Student mental health and substance use*. Invited Panelist – Bell Let's Talk Day, Kelowna, BC. (Delivered online).

Walsh, Z. (2020). *Potential of kratom as a therapy*. Invited Panelist – Kratom Leadership Summit, Tampa, FL. USA. (Delivered online).

**Walsh**, **Z**. (2020). *Cannabis Research and Legalization*. Invited Keynote – Healthy Campus Event Selkirk College, Castlegar, BC. (Delivered online).

Walsh, Z. (2020). *Psychedelics use, mindfulness and the new behaviorism*. Invited address for the Catalyst Calgary 2020 Conference. Presented online due to COVID-19.

**Walsh**, **Z.** (2020). Efficacy of cannabis for the treatment of mental health – Investigations in process. Invited presentation at the Faculty of Pharmacy, University of Costa Rica, San Jose, Costa Rica.

Walsh, Z. (2020). Cannabis, pain, mental health & public health. Invited presentation at the Vancouver and District Dental Society – Midwinter Meeting, Vancouver, BC.

Walsh, Z. (2019). Cannabis, substance use disorders, and co-morbidities: Clinical considerations. Invited panelist and moderator at BC Centre on Substance Use Cannabis for Harm Reduction Forum at the University of British Columbia, Vancouver, BC.

**Walsh, Z.** (2019). Cannabis revised: Legalization, mental health & public health. Invited colloquium at the University of British Columbia, Department of Psychology, Vancouver, BC.

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Walsh, Z. (2019). *Mental health and cannabis in context*. Invited talk at International Perspectives on Cannabis and Mental Health Invited Meeting. University of Exeter, Exeter, UK.

Walsh, Z. (2019). *Psychedelics use, interpersonal violence and the new behaviorism*. Invited keynote address for the seminar on Psychedelic-assisted psychotherapy: on mindfulness and integration seminar. King's College, London, UK.

**Walsh, Z.** (2019). *Psychedelics as Medicine*. Invited talk at the annual BC Center on Substance Use Conference: Coming Together, Vancouver, BC.

Walsh, Z. (2019). *Ethics in cannabis research in Canada*. Invited plenary talk at the annual Island Health Research Ethics Board Education Event, Victoria, BC.

**Walsh, Z.** (2018). *Therapeutic cannabinoids in mental health*. Invited talk at Medical Cannabis in Naturopathic Practice Conference, New Westminister, BC.

Walsh, Z. (2018). Cannabis, mental health and public health. Invited talk at Vernon Signature Speaker Series, Vernon, BC.

Walsh, Z. (2018). Cannabis and mental health primer. Invited presentation of day-long clinical workshop (x 2) for Leading Edge Seminars, Vancouver, BC., & Toronto, ON.

Walsh, Z. (2018). Cannabis use, mental health and addiction. Invited talk at the Cannabinoid and Opioid Summit, Kamloops, BC.

Walsh, Z. (2018). Cannabis research at UBC. Invited keynote talk for the Annual UBC meeting of High School counsellors.

Walsh, Z. (2018). Cannabis use, mental health and parenting. Invited talk at the Federation of Law Societies of Canada National Family Law Conference, Vancouver, BC.

**Walsh, Z.** (2018). *Cannabis use, mental health and parenting*. Invited talk for Legal Aid Saskatchewan, Saskatoon, SK.

Walsh, Z. (2018). Cannabis use and mental health. Invited talk for the Saskatchewan Cannabinoid Symposium, Saskatoon, SK.

Walsh, Z. (2018). *Ethics in cannabis research in Canada*. Invited plenary talk at the annual meeting of the Canadian Association of Research Ethics Boards, Montreal, QC.

**Walsh, Z.** (2018). *Cannabis use and mental health*. Invited panelist at the Georgia Straight – Grassroots Cannabis Expo, Vancouver.

**Walsh**, **Z.** (2018). *Medicinal cannabis and mental health*. Invited panelist at Cannabis Hemp Conference and Expo, Vancouver, BC.

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**Walsh, Z.** (2018). *Cannabis use, mental health and public health.* Invited talk at 1<sup>st</sup> Ciclo de Conferencias Sobre de Cannabis Medicinal Basado en Evidencias, University of Costa Rica, San Jose, Costa Rica.

**Walsh, Z.** (2018). *Cannabis research in Canada*. Invited talk at 1<sup>st</sup> Ciclo de Conferencias Sobre de Cannabis Medicinal Basado en Evidencias, Universidad Hispanoamericana, San Jose, Costa Rica.

Walsh, Z. (2018). Beyond Harms: New Directions in Cannabis Research. Invited talk at Envision Festival, Uvita, Costa Rica.

**Walsh, Z.** (2018). *Psychedelics and the New Behaviorism*. Invited talk at Envision Festival, Uvita, Costa Rica.

Walsh, Z. (2018). Cannabis research after legalization. Invited talk at Institute for Health Living and Chronic Disease Prevention Curious about Cannabis Forum, UBC, Kelowna, BC.

Walsh, Z. (2017). Cannabis use, PTSD, and mental health. Invited talk at 14<sup>th</sup> Annual Conference of the Natural Health Products Research Society of Canada, Vancouver, BC.

Walsh, Z. (2017). Cannabis use and mental health. Invited talk at Cannabis Expertise: Medical Cannabis Education Symposium, Columbus, Ohio.

Walsh, Z. (2017). *Medicinal use of cannabis*. Invited panelist at Cannabis Hemp Conference and Expo, Vancouver, BC.

Walsh, Z. (2017). Beyond Harms: Public health and the end of cannabis prohibition. Invited talk at Face to Face in Drug Plan Management Forum, Vancouver, BC.

Walsh, Z. (2017). Psychedelic therapy and Third-Wave Behaviorism: New directions for the prevention of interpersonal violence. Invited talk at Psychedelic Science, Oakland, CA.

Walsh, Z. (2017). Marijuana for PTSD. Invited panelist at Psychedelic Science, Oakland, CA.

**Walsh, Z.** (2017). Cannabis and Post-Traumatic Stress Disorder – A case-based presentation. Invited talk at the 2017 Canadian Centre for the Investigation of Cannabinoids' Cannabinoids in Clinical Practice Symposium, Toronto, ON.

**Walsh, Z.** (2017). Cannabis and mental health. Invited talk at the 2017 BC Centre on Substance Use's Forum on Science of Cannabis: Defining a Research Agenda for Public Health, St. Paul's Hospital, Vancouver, BC.

**Walsh**, **Z.** (2017). Beyond Harms: Public health and the end of cannabis prohibition. Invited talk at the University of Manitoba's Centre for Applied Ethics, Winnipeg, MB.

**Walsh, Z.** (2017). *Cannabis and mental health*. Invited talk for the Canadian Students for Sensible Drug Policy – UBC, Kelowna, BC.

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Walsh, Z. (2017). The opioid epidemic in the broader context of substance use. Invited talk at UBC School of Social Works' Community Roundtable: The epidemic of opioid overdose; Conceptualizing an effective community response". Kelowna, BC.

Walsh, Z. (2017). Can Early Intervention Improve Mental Health Outcomes in Youth? Invited panel participant at UBC Dialogues: Okanagan -Kelowna, BC.

Walsh, Z. (2016). Psychedelics and the new behaviourism. Invited presentation at the Basscoast Music Festival, Merritt, BC.

Walsh, Z. (2016). Cannabis and public health. Invited talk at the 2016 Interior Health Authority - Addiction Awareness Day, Kelowna, BC.

Walsh, Z. (2016). Psychedelics and the new behaviourism. Invited presentation at the Psychedelic Psychotherapy Forum, Victoria, BC.

Walsh, Z. (2016). Cannabis and public health. Invited talk at the Canada Marijuana Boom: Opportunities in Indigenous Territories, Native Nation Events, Vancouver, BC.

Walsh, Z. (2015). Cannabis and pain in arthritis. Invited talk at the Arthritis Society -Medical Cannabis Research Roundtable, Vancouver, BC.

Walsh, Z. (2015). Medical cannabis research in Canada. Invited talk at the Drug Policy Alliance - International Drug Policy Reform Conference, Washington, DC.

Walsh, Z. (2015). Medical cannabis research and community impact. Invited talk at the Central Okanagan Association for Cardiac Health - Healthcare Professional Development Day, Kelowna General Hospital, Kelowna, BC.

Walsh, Z. (2015). Current research on medical marijuana. Invited talk at the Medical Marijuana in the Workplace: What Employers Need to Know workshop, Worksafe BC & Work Reintegration and Accomodation Program, UBC, Kelowna, BC

Walsh, Z. (2015). Cannabis for therapeutic purposes: Implications for public health and Mental Health. Invited talk at the Merritt Public Library, Merritt, BC.

Walsh, Z. (2015). Cannabis for the treatment of PTSD. Invited speaker at the 2015 Psychedelic Psychotherapy Conference, Victoria, BC.

Walsh, Z. (2015). Medicinal use of cannabis. Invited panelist at the 2015 Vancouver Cannabis Conference, Vancouver, BC.

Walsh, Z. (2015). Cannabis and public health. Invited talk at the 2015 Medical Marijuana course by the Continuing Legal Education Society of British Columbia, Vancouver, BC.

Walsh, Z. (2015). Cannabis for therapeutic purposes: Implications for public health and mental health. Invited talk at the The Kootenay Boundary Medical Cannabis Conference, Grand Forks, BC.

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Walsh, Z. (2015). Cannabis and chronic pain. Invited talk at the 2015 Café Scientifique, UBC, Kelowna, BC.

Walsh, Z. (2014). *Psychedelic psychotherapy and the new behaviourism*. Invited presentation at the 2014 Plant Teachers and Sacred Medicines Panel, UBC, Kelowna, BC.

Walsh, Z. (2014). Cannabis as medicine: New directions in research. Invited talk at the 2014, Cannabis Medicine Conference, Kyla's Quest, Kelowna, BC.

**Walsh, Z.** (2014). New directions in psychedelic science: Rediscovering the behavioural health potential of ancient medicines Invited talk at the 2014 Spirit Plant Medicine Conference, Vancouver, BC.

Walsh, Z. (2014). Cannabis and public health: New perspectives. Invited talk at UBC President's Research Lunch, Kelowna, BC.

Walsh, Z. (2014). *Making peace with cannabis*. Invited TED talk at TEDx -Penticton, Penticton, BC.

Walsh, Z. & Crosby, K. (2014). Cannabis and arthritis. Invited talk at UBC Institute for Healthy Living and Chronic Disease Prevention/ Interior Health Authority Partnership in Research Seminar, Kelowna, BC.

<u>Crosby</u>, K., <u>Lozenski</u>, K. & **Walsh**, **Z.** (2014). *Cannabis and arthritis*. Invited talk at Move It and Mingle Seniors Group, Army, Navy, and Air Force Club, Vernon, BC. **Walsh**, **Z.** (2013). *Cannabis: Aspirin of the 21<sup>st</sup> century?* Invited talk at Annual Meeting of UBC Board of Governors - Learning and Research Subcommittee, Kelowna, BC.

Belle-Isle, L., **Walsh, Z**., Callaway, R., Lucas, P., Capler, R., Kay, B., Stratton, T., & Holtzman, S. (2013). *Cannabis Access for Medical Purposes Survey: Preliminary findings on barriers to access.* Invited talk presented at BC Ministry of Health - Health Services and Health Policy Research Priorities Meeting, Victoria, BC.

Walsh, Z. (2012). One size does not fit all: Psychopathy and subtypes of partner violence perpetrators. Invited keynote lecture at the Intimate Partner Violence: Innovations in the Field Conference, Department of Psychiatry, University of Rochester, Rochester, NY.

Walsh, Z. & Callaway, R. (2012). Barriers to accessing cannabis among individuals with chronic illness. Invited talk at UBC Institute for Healthy Living and Chronic Disease Prevention/ Interior Health Authority Partnership in Research Seminar, Kelowna, BC.

Walsh, Z. & Capler, R. (2012). *Medical Cannabis: Standards Engagement, Evaluation and Dissemination (SEED)*. Invited talk at the Peter Wall Solutions Initiative Grantee Celebration, Peter Wall Institute of Advanced Studies, University of British Columbia, Vancouver, BC.

### ABSTRACTS & PRESENTATIONS

Walsh, Z. (2024). *Microdose.me : Findings from Phase 1*. Oral presentation at the Meeting of the International Society for Research on Psychedelics, New Orleans, LA

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- Thomas, L., Daniels, S., & Walsh, Z. (2023). *Combining Cannabis and Yoga: Practices and Motives*. Poster presentation at the 33<sup>rd</sup> Annual International Cannabinoid Research Society Symposium on the Cannabinoids, Toronto, ON.
- Sharma, R.H., Hole, R., Walsh, Z., Dow-Fleisner, S. (2022). 'Higher' Education: A Mixed Methods Exploration of ADHD Symptoms, Cannabis Use, and Academic Success Among Postsecondary Students Poster presentation at CHADD 2022 Annual International Conference on ADHD, Dallas, TX, United States.
- Lake, S., Kerr, T., Buxton, J., **Walsh, Z.**, & Milloy, M-J. Cannabis use tempers the association between low treatment dose and illicit opioid use in a community cohort of patients on methadone maintenance treatment. 30<sup>th</sup> Annual International Cannabinoid Research Society Symposium on the Cannabinoids, Galway, Conference cancelled.
- Walsh, Z. (2019). The Influence of Individual and Couple Use of Psychedelics on Conflict Negotiation in Intimate Relationships. Poster presentation at the International Society for Research on Psychedelics, New Orleans, Louisiana, USA.
- Sanchez, T. A., Daniels, S. E. A., St. Pierre, M., Walsh, Z., & Krank, M. (2019). *The Impact of Cannabis Legalization on the Social Norms of Cannabis Use in Youth*. Peer-reviewed paper presentation. International Society for the Study of Drug Policy. Paris, France.
- Thiessen, M. S., Crosby, K., Sanchez, T. A., & Walsh, Z. (2019). Substituting cannabis for alcohol: The impact of legalization. Oral presentation given at 2019 Cannabis and Public Health Forum. Ottawa, Canada.
- Thiessen, M. S., Walsh, Z., Russo, E., Daniels, S., Sanchez, T. A., & Crosby, K. (2018). Cannabis and pain: Examining the relationship between frequent cannabis use and pain sensitivity. Poster presented at the 28<sup>th</sup> Annual International Cannabinoid Research Society Symposium. Leiden, Netherlands.
- <u>Daniels, S., Thiessen, M., Sanchez, T. A.</u>, & Walsh, Z. (2018). *Therapeutic use of cannabis and substitution for pharmaceutical medications in a prenatal sample*. Poster presented at the 28th Annual Symposium of the International Cannabinoid Research Society. Leiden, Netherlands.
- <u>Thiessen, M. S., Matthews, L., Baba, K., Nemet, T., & Walsh, Z.</u> (2018). Cannabis education needs assessment among Canadian medical students. Poster presented at the 29<sup>th</sup> International Congress of Applied Psychology. Montreal, Canada.
- <u>Daniels, S., Thiessen, M.,</u> & Walsh, Z. (2018). Cannabis use during pregnancy perceived by mothers as acceptable for therapeutic purposes, and more acceptable than benzodiazepine use. Poster presented at the 29<sup>th</sup> International Congress of Applied Psychology. Montreal, Canada.
- <u>Daniels, S., Thiessen, M., Sanchez, T., & Walsh, Z.</u> (2018). *Prenatal Cannabis Use: Perceptions, Motives, and Patterns of Use.* Oral presentation at the 12th Annual Conference of the International Society for the Study of Drug Policy. Vancouver, Canada.
- **Walsh, Z.** (2017). *Medical cannabis and mental health: A guided systematic review*. Talk at 38<sup>th</sup> Annual Conference of the Canadian Pain Society, Halifax, NS.

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- Walsh, Z., Thiessen, M. S., Crosby, K., Lucas, P., Fader, S., & Bonn-Miller, M.O. (2017) The Composite Cannabis Assessment Tool (CCAT); Development and validation of a new measure of medical and nonmedical cannabis use. Poster presented at the 27<sup>th</sup> Annual meeting of the International Cannabinoid Research Society, Montreal, QC.
- Thiessen, M. S., Walsh, Z., Crosby, K., Russo, E., Chaudhuri, T., & Aggarwal, S. (2017) *Cannabis use in India: Characteristics, Access and Reasons for Use.* Poster presented at the 27<sup>th</sup> Annual meeting of the International Cannabinoid Research Society, Montreal, QC.
- Crosby, K., Thiessen, M. S., & Walsh, Z., (2017) Substituting cannabis for alcohol. Poster presented at the 27<sup>th</sup> Annual meeting of the International Cannabinoid Research Society, Montreal, QC.
- Walsh, Z. (2016). Cannabis for the treatment of PTSD. Talk presented at the 7th annual conference of the Canadian Institute for Military and Veteran Health Research, Vancouer, BC.
- Thiessen, M. S., Walsh, Z., Crosby, K., & Carroll, C. (2016). Preliminary Results for a Pilot Measure: Composite Cannabis Assessment Scale. Poster presented at the 77<sup>th</sup> Annual Canadian Psychological Association Convention, Victoria, BC.
- Crosby, K., Thiessen, M. S., Walsh, Z. (2016). Problematic cannabis use and young adult attention deficit/hyperactivity disorder symptoms. Poster presented at the 77th CPA Annual Convention. Victoria, BC.
- <u>Thiessen, M. S.,</u> **Walsh, Z.,** Lafrance Robinson, A., & Bird, B. (2016). *Classic Hallucinogen Use, Emotional Regulation, and Disordered Eating: A Mediation Model.* Poster presented at the Interdisciplinary Conference on Psychedelics Research, Amsterdam, Holland.
- Lucas, P., Walsh, Z. et al, (2016). Substituting cannabis for prescription drugs, alcohol and other substances among medical cannabis patients: The impact of contextual factors. Poster presented at NIH Marijuana and Cannabinoids: A Neuroscience Summit. National Institute of Health, Bathesda, MD.
- Walsh, Z., Shojania, K., Koehn, C., Crosby, K., Carroll, C. & Holtzman, S. (2015). *Cannabis for arthritis: Patient characteristics, reasons for use and perceived comparative efficacy.* Talk presented at the meeting of the International Cannabinoid Research Society, Wolfville, NS.
- Capler, R., Crosby, K., Lucas, P. & Walsh, Z. (2015). The SEED Project: Development of standards and certification program for medical cannabis dispensaries in Canada. Talk presented at the meeting of the International Cannabinoid Research Society, Wolfville, NS.
- Carroll, C., Crosby, K., **Walsh, Z.,** & Woodworth, M. (2015). *Cannabis and aggression: The importance of cannabis use motives and subtypes of aggression.* Talk presented at the meeting of the International Cannabinoid Research Society, Wolfville, NS.
- Walsh, Z. (2015). Cannabis for therapeutic purposes in a mental health framework: From the human endocannabinoid system to public health. Talk presented at the meeting of the American Psychiatric Association, Toronto, ON.
- Jonnson, M., Langille, J. I., & Walsh, Z. (2015). Objectification, victim blaming, and intimate partner violence. Poster presented at the meeting of the American Psychology-Law Society, San Diego, CA.

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- Erickson, K. A., Jonnson, M., Langille, J. I., & Walsh, Z. (2015). Effects of gender and gender role attitudes on victim blaming in intimate partner violence. Poster presented at the meeting of the American Psychology-Law Society, San Diego, CA.
- Walsh, Z., Crosby, K., Lozenski, K. & Holtzman, S. (2014) Cannabis, anxiety and pain: The importance of coping style. Talk presented at the meeting of the International Cannabinoid Research Society, Baveno, Italy.
- Lucas. P., Walsh, Z., Crosby, K., Callaway, R., Belle-Isle, L., Capler, R., Holtzman, S., & Kay, B. (2014). Substitution effects in medical cannabis patients: Results from the Cannabis Access for Medical Purposes Study. Talk presented at the meeting of the International Cannabinoid Research Society, Baveno, Italy.
- <u>Crosby</u>, K. & **Walsh**, **Z**. (2014) Cannabis use and perpetration of intimate partner violence. The moderating role of problematic alcohol use. Poster presented at the meeting of the International Cannabinoid Research Society, Baveno, Italy.
- Walsh, Z. (2014). The combined influence of alcohol dependence and psychopathy on perpetration of intimate partner violence: Prospective evidence from a jail sample. Talk presented at the meeting of the Canadian Psychological Association, Vancouver, BC.
- <u>Carroll</u>, C., <u>Crosby</u>, K., **Walsh**, **Z**. & Woodworth, M. (2014). A deeper look into cannabis use: Pinpointing schizotypal personality traits related to cannabis abuse and dependence. Poster presented at the meeting of the Canadian Psychological Association, Vancouver, BC.
- <u>Crosby</u>, K., <u>Carroll</u>, C., <u>Lozenski</u>, K., & **Walsh**, **Z.** (2014). An examination of broad and narrow band constructs of negative affect among cannabis users. Poster presented at the meeting of the Canadian Psychological Association, Vancouver, BC.
- <u>Lozenski</u>, K., <u>Crosby</u>, K., <u>Langille</u>, J.I., & **Walsh**, **Z.** (2014). Alcohol use accounts for the relationship between cannabis use and perpetration of intimate partner violence. Poster presented at the meeting of the Canadian Psychological Association, Vancouver, BC.
- MacLean, S., Langille, J.I., Crosby, K., & Walsh, Z. (2014). Depression and anxiety in victims of intimate partner violence: The role of self-esteem and belongingness social support. Poster presented at the meeting of the Canadian Psychological Association, Vancouver, BC.
- Boulier, K., Langille, J.I., Crosby, K., & Walsh, Z. (2014). Psychopathy, non-suicidal self-injury and intimate partner violence: Predicting self and other-directed violence. Poster presented at the meeting of the Canadian Psychological Association, Vancouver, BC.
- Walsh, Z., Crosby, K., Carroll, C., & Lozenski, K. (2014). Coping motives partially mediate the relationship between delusional ideation and cannabis-related problems. Poster presented at the meeting of American Psychological Society, San Francisco, CA.
- <u>Timoney</u>, L.S. & Walsh, Z. (2014). *The five-factor model of personality and life events in a personality disorder sample*. Poster presented at the meeting of American Psychological Society, San Francisco, CA.
- **Walsh, Z.,** Swogger, M.T., & Crosby, K. (2013). *Cannabis use motives across contexts: Differences and similarities between college and correctional samples.* Poster presented at the annual Addiction Health Services Research meeting, Portland, OR.

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- Swogger, M.T., Hart, E., Priddy, B., Murray, T., Erowid, F., Erowid, E. & Walsh, Z. (2013). *Experiences of kratom users: A qualitative analysis*. Poster presented at the annual Addiction Health Services Research meeting, Portland, OR.
- Capler, R., Balneaves, L., **Walsh, Z.,** Bottorff, J., Belle-Isle, L., Callaway, R. (2013). *HEMMP team and CAMPS team. Cannabis for therapeutic purposes, physicians as gatekeepers, and the patient-physician relationship.* Talk presented at the Family Medicine Forum, Vancouver, BC.
- Walsh, Z., Callaway, R., Belle-Isle, L., Capler, R., Kay, B., Lucas, P. & Holtzman, S. (2013). *Cannabis Access for Medical Purposes Survey: Patient characteristics, reasons for use and modes of access.* Talk presented at Symposium of the International Cannabinoid Research Society, Vancouver, BC.
- Lucas, P., <u>Crosby</u>, K., <u>Hiles</u>, M., Swogger, M. T., & **Walsh**, **Z**. (2013). Substance use among medical cannabis users: Substituting cannabis for alcohol and other substances. Poster presented at the 75th Annual Scientific Meeting of the College on Problems of Drug Dependence. San Diego, CA.
- Hiles, M., Crosby, K., Swogger, M. T., & Walsh, Z. (2013). Cannabis use motives and frequency of use: Combined and distinct associations with cannabis use problems. Poster presented at the 75th Annual Scientific Meeting of the College on Problems of Drug Dependence (CPDD). San Diego, CA.
- Walsh, Z., Belle-Isle, L., Callaway, R., Capler, R., Kay, B., Lucas, P., Holtzman, S., Crosby, K. & Atkinson, B. (2013). *Use of cannabis to treat symptoms of anxiety and depression:* Results from a survey of medical cannabis users. Poster presented at meeting of Multidisciplinary Association for Psychedelic Studies, Oakland, CA.
- <u>Wafler</u>, J. M., **Walsh**, **Z**., Woodworth, M., & Porter, S. (2013). *The Okanagan General Remorse Exam (OGRE): Preliminary validation*. Poster presented at the meeting of the American Psychology-Law Society, Portland, OR.
- Peters, L. R., <u>Langille</u>, J. I., <u>Blanco Carranza</u>, A., <u>Okano</u>, M., & **Walsh**, **Z.** (2013). *Bidirectional versus unidirectional violence: The roles of psychopathy and personality.* Poster presented at the meeting of American Psychology-Law Society, Portland, OR.
- Walsh, Z., Callaway, R., Belle-Isle, L., Capler, R., Kay, R., Lucas, P., Stratton, T., Swogger, M.T. (2012). *Medical cannabis: Incentives and barriers among a Canadian sample*. Poster presented at Addiction Health Services Research Conference, New York, NY.
- Erickson, K., Langille, J.I. & Walsh, Z. (2012). Who's to blame? Gender roles and victim blaming in intimate partner violence. Poster presented at the meeting of Canadian Psychological Association, Halifax, NS.
- Roemer, A., Crosby, K. & Walsh, Z. (2012). Psychopathic traits, alcohol use and female perpetration of intimate partner violence. Poster presented at the meeting of American Psychological Society, Chicago, IL.
- Krank, M.D., Goldstein, A., **Walsh, Z.** & Stewart, S. (2012). *Prevention targeting individualized misperceptions of peer use of alcohol and marijuana in a middle school.* Poster presented the meeting of the Research Society on Alcoholism, San Francisco, CA.

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- Roemer, A. & Walsh, Z. (2012). Where you live matters: The role of living arrangement on self-esteem and hazardous drinking behaviors. Poster presented the meeting of the Research Society on Alcoholism, San Francisco, CA.
- <u>Carranza</u>, A.B., **Walsh**, **Z.** & Swogger. M.T. (2012). *Self-directed violence and IPV perpetration: The roles of psychopathy and emotion dysregulation*. Poster presented at the Intimate Partner Violence: Innovations in the Field Conference, Department of Psychiatry, University of Rochester, Rochester, NY.
- Swogger, M.T., **Walsh, Z,** Maisto, S.A. & Connor, K.R. (2011). *Harmful alcohol use moderates the link between proactive aggression and suicide attempts among criminal offenders*. Poster presented at Addiction Health Services Research Conference, Fairfax, VA.
- Walsh, Z. (2011). Psychopathy socio-economic status and criminal violence: Evidence consistent with social push. Poster presented at the North American Correctional and Criminal Justice Psychology Conference, Toronto, ON.
- <u>Urch</u>, G., **Walsh**, **Z**., & <u>Roemer</u>, A., (2011). *Individual differences among perpetrators of violence against children: Negative affect and subcomponents of the psychopathic personality*. Poster presented at the conference of the Canadian Psychological Association, Toronto, ON.
- Roemer, A., Walsh, Z., Urch, G., & Wallace, G. (2011). Pathways to college drinking: Gender differences in the association between parental bonds and hazardous alcohol use. Poster presented at the conference of the Canadian Psychological Association, Toronto, ON.
- Edalati, H., & Walsh, Z. (2011). Psychopathy and emotional dot probe: Selective attention to happy faces. Poster presented at the conference of the Society for the Scientific Study of Psychopathy, Montreal, QC.
- **Walsh, Z.**, & Swogger, M. T. (2011). *Predicting self-directed and other directed violence: The roles of psychopathic traits.* Poster presented at the conference of the Society for the Scientific Study of Psychopathy, Montreal, QC.
- <u>Langille</u>, J. I., & **Walsh**, **Z.** (2011). *Psychopathy predicts intimate partner violence perpetration across gender*. Poster presented at the conference of the Society for the Scientific Study of Psychopathy, Montreal, QC.
- <u>Urch</u>, G., & Walsh, Z. (2010). *Psychopathy and violence against children: Factor level relationships*. Poster presented at the International Society for Justice Research, Banff, AB.
- Walsh, Z. (2010). Psychopathy and criminal violence The moderating effects of ethnicity. Talk presented at the meeting of the American Psychology and Law Society, Vancouver, BC.
- Swogger, M.T., & Walsh, Z. (2010). *Childhood abuse and substance use consequences among male and female criminal offenders*. Poster presented at the meeting of the American Psychology and Law Society, Vancouver, BC.
- Manning, J., Walsh, Z., & Cioe, J. (2010). *Psychopathy, substance use and stress*. Poster presented at the meeting of the American Psychology and Law Society, Vancouver, BC.
- Swogger, M. T., Conner, K. R., Walsh, Z., & Caine, E. D. (2010). Testing traits of personality disorders as moderators of treatment efficacy among criminal offenders. Abstract published in Clinical and Translational Science, 3, A-077.

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- Swogger, M. T., Walsh, Z., Cashman-Brown, S., Houston, R. J., & Conner, K. R. (2009). Psychopathy, Axis I Disorders, and Subtypes of Aggression among Criminal Offenders. Poster presented at the meeting of the American Psychological Association, Toronto, ON.
- Walsh, Z. (2009). The influence of ethnicity and neighborhood factors on the predictive power of psychopathy for violence: Social push or social potentiation? Talk presented at the meeting of the Society for the Scientific Study of Psychopathy, New Orleans, LA.
- Swogger, M. T., Walsh, Z., & Conner, K. R. (2009). Predicting self-directed versus otherdirected violence: The roles of anger and psychopathic traits. Poster presented at the meeting of the Society for the Scientific Study of Psychopathy, New Orleans, LA.
- Walsh, Z., Swogger, M. T., Chatav, Y., & Stuart, G. L. (2009). Alcohol use and interpersonal violence: The importance of perpetrator subtypes. Talk presented at the meeting of the Research Society on Alcoholism, San Diego, CA.
- Walsh, Z., Swogger, M.T., Chatav, Y., & Stuart, G.L. (2008). Psychopathy and subtypes of partner violent men and women. Poster presented at the meeting of the Association for Behavioral and Cognitive Therapy, Orlando, FL.
- King, A. C., Walsh, Z., Munisamy, G., & Epstein, A. M. (2007). The impact of depressive symptoms on the efficacy of naltrexone in smoking cessation. Talk presented at the meeting of the American Psychosomatic Society, Budapest, Hungary.
- Kosson, D. S., Allen, L., McBride, C. K., Walsh, Z., Tercek, R., & Greco, J. (2007). Preliminary evidence for negative affectivity and maladaptive emotion regulation strategies in youth with psychopathic traits. Talk presented at the meeting of the Society for the Scientific Study of Psychopathy, St. Petersburg, FL.
- Walsh, Z., & Kosson, D. S. (2007). Psychopathy and terror management: Impact on perceptions of blue-collar and white-collar criminality. Talk presented at the meeting of the Society for the Scientific Study of Psychopathy, St. Petersburg, FL.
- Kosson, D. S., Walsh, Z., & Swogger, M. T. (2007). Psychopathy, crime, & violence: What we know and what we don't know. Invited talk presented to the Department of Criminal Sciences, Pontificia Universidade Catolica do Rio Grande do Sul, Brazil.
- Walsh, Z., Stuart, G., & Shea, M. T. (2007). Psychopathy and intimate partner violence: The moderating effect of substance use treatment. Poster presented at the meeting of the Association for Behavioral and Cognitive Therapy, Philadelphia, PA.
- Walsh, Z., & Kosson, D. S. (2006). Psychopathy and violence: Two factors better than one Talk presented at the meeting of American Psychology and Law Society, St. Petersburg, FL.
- Swogger, M., Walsh, Z., & Kosson, D. S. (2006). Domestic violence and psychopathic traits: Distinguishing the antisocial batterer from other antisocial offenders. Talk presented at the meeting of American Psychology and Law Society, St. Petersburg, FL.
- Walsh, Z., Allen, L. C., & Kosson, D.S. (2005). Beyond social deviance: Substance-specific relationships with PCL-R facets. Talk presented at the meeting of the American Psychology and the Law Society, San Diego, CA.

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- **Walsh, Z.**, & Kosson, D. S. (2005). *Schematic processing in psychopathic and antisocial criminals: Mistrust, grandiosity and criminality*. Talk presented at the meeting of the Society for the Scientific Study of Psychopathy, Vancouver, BC.
- Walsh, Z., Brook, M., & Kosson, D. S. (2005). *Psychopathy and violence: Two factors are still better than one*. Poster presented at the meeting of the Society for the Scientific Study of Psychopathy, Vancouver, BC.
- Munisamy, G., Epstein, A. M., Walsh, Z., & King, A. C. (2005). *Higher sensation seeking predicts smoking relapse*. Poster presented at the meeting of the Society of Behavioral Medicine, Boston, MA.
- **Walsh, Z.**, Swogger, M. T., & Kosson, D. S. (2004). *Psychopathy, depression, and violence: The moderating role of rumination*. Poster presented at the meeting of the Society for Research in Psychopathology. St. Louis, MO.
- Walsh, Z., Allen, L. C., Sullivan, E. A., & Kosson, D. S. (2004). Beyond general social deviance: Substance-specific relationships with Psychopathy Checklist-Revised (PCL-R) facets. Poster presented at the meeting of American Psychological Society, Chicago, IL.
- Walsh, Z., & Kosson, D. S. (2004). *Psychopathy and recidivism in a county jail: The impact of ethnicity and socioeconomic status*. Poster presented at the meeting of the American Psychology and the Law Society, Scottsdale, AZ.
- Swogger, M., Walsh, Z., & Kosson, D. S. (2004). *Psychopathy and domestic battery: Relationship to the four-facet model.* Poster presented at the meeting of the American Psychology and Law Society, St. Petersburg, FL.
- **Walsh, Z.**, Swogger, M. T., & Kosson, D. S. (2003). *Instrumental and reactive violence in psychopathic and nonpsychopathic violent offenders*. Poster presented at the meeting of the Society for Research in Psychopathology, Toronto, ON.
- Walsh, Z., Swogger, M. T., & Kosson, D. S. (2003). *Psychopathy, head injury and child abuse: Predicting violent crime*. Poster presented at the meeting of Developmental and Neurosciences Perspectives on Psychopathy, Madison, WI.
- Walsh, Z., Kosson, D. S., & Sullivan, E.A. (2002). *Psychopathy, I.Q. and violence*. Poster presented at the meeting of the Society for Research in Psychopathology, San Francisco, CA.

#### **EXPERT OPINION & TESTIMONY**

- 2023 Bebamash v. Oueen. Expert witness testimony at the Ontario Court of Justice.
- 2023 Doe, Jones & Kozmenski v.King Expert witness response at the Federal Court of Canada, Ottawa ON.
- 2022 Psychedelics in the treatment of PTSD. Invited testimony to Senate of Canada Subcommittee on Veterans Affairs, Ottawa, ON.
- 2021 Doe, Jones & Kozmenski v. Queen Expert witness testimony at the Federal Court of Canada, Ottawa ON.
- 2019 Cannabis in the treatment of PTSD. Invited testimony to House of Commons of Canada Standing Committee on Veterans Affairs, Ottawa, ON.

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Zach Walsh - CV- 05/24

2019	Cannabinoids and Opioids Consensus Summit. Invited consultant. Toronto, ON.
2018	Workshop on National Standard for Cannabis Measurement, Invited consultant to the CIHR Institute of Mental Health & Addiction, Ottawa, ON.
2018	Cannabis in the treatment of PTSD. Invited testimony to Senate of Canada – Subcommittee on Veterans Affairs, Ottawa, ON.
2017	Needs Based Planning Expert Panel Focused on Cannabis Use Disorder, Consultant to the BC Ministry of Mental Health and Addictions / Centre for Applied Research in Mental Health and Addiction, Vancouver, BC
2017	Workshop on Health Research Needs and Priorities related to Cannabis Legalization and Regulation, Consultant to the CIHR Institute of Population and Public Health, Montreal, QC
2017	Phytos Apothecary & Wellness Centre v. Toronto Expert witness testimony at the Ontario Superior Court of Justice, Toronto, ON.
2016	Task Force on Marijuana Legalization and Regulation. Consultant to the Attorney General of Canada and the Canadian Ministries of Justice, Public Safety and Health, Vancouver, BC.
2016	National Research Agenda on Cannabis. Consultant to the Canadian Centre on Substance Abuse, Ottawa, ON.
2016	Mary Jane's Glass & Gifts v. Abbotsford Expert witness testimony at the BC Provincial Supreme Court, Vancouver, BC.
2015	Boehme v. Canada. Expert witness testimony at the BC Provincial Supreme Court, Duncan, BC.
2015	<i>Allard v .Canada.</i> Expert witness testimony at the BC Provincial Supreme Court, Vancouver, BC.
2014	Standing Committee on Health: Study on Marijuana's Health Risks and Harms. Invited witness presentation to the House of Commons, Ottawa, ON.
2014	International Forum: Update on the medical and therapeutic uses of cannabis Invited presentation and consultation to the Uruguayan National Office of Drugs and Ministry of Public Health, Montevideo, Uruguay.
GRANTS Ongoing:	
2023 -	<b>Principal investigator</b> – <i>Etheridge Foundation</i> . "Standardized natural psilocybin-assisted psychotherapy for tapering of opioid medication in patients with chronic pain: an open-label feasibility study" \$110,000.
2023 -	<b>Principal investigator</b> – <i>Mitacs Elevate Postdoc Program</i> . "Comparing acute effects of natural and synthetically derived psilocybin using a mixed-methods approach" \$160,000.
	Industry partner: Mycomedica Life Sciences

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- 2023 -Principal investigator – Mitacs Accelerate Postdoc Program. "Responsible stewardship of psychedelic-assisted therapy: An observational evaluation of a culturally safe and patient-centered program of care" \$160,000. Industry partner: Roots to Thrive
- 2022 -Co-Principal investigator – Canadian Institutes of Health Research. Operating Grant "Longitudinally evaluating the health impacts of cannabis regulation among two sentinel populations with high rates of cannabis use and drug-related harms" \$490,345. Co-principal investigator: M-J Milloy
- 2021 -Co-investigator – University of British Columbia - Health Innovation Funding Investment Award. "Harm Reduction Innovation: Exploring a Tri-Partnership Model for the delivery of Drug-checking Services on Campus and in the Community " \$24,9750 Principal investigator: Lauren Airth
- 2021 -Co-investigator – National Football League Players Association Joint Pain Management Committee "Naturally produced cannabinoids for pain management & neuroprotection from concussion in contact sports. "\$650,000. Principal investigator: J Patrick Neary
- Supervisor Social Sciences and Humanities Research Council. Doctoral 2021 -Fellowship Award "Cannabis Use and Cognitive Functioning" \$60,000. Student awardee: Tashia Petker
- 2020 -Principal investigator – Mitacs Accelerate Program. "Observing Microdosing: Effects on Cognitive Performance and Mental Health" \$112,500. Industry partner: Quantified Citizen
- 2020 -Co-investigator - Canadian Institutes of Health Research. Operating Grant "Evaluating tetrahydrocannabinol as an adjunct to opioid agonist therapy for individuals living with opioid use disorder: A Phase II, placebo-controlled, blinded, pilot study to assess safety and feasibility" \$279,000 Principal investigator: M-J Milloy
- 2020 -Co-investigator – Canadian Institutes of Health Research. Knowledge Synthesis Grant "A COVID-19 Patient Oriented Response and Recovery Effort: Working Across Sectors to Aid Healthcare Providers Suffering from Burnout, PTSD, or Treatment Resistant Depression (TRD)" \$50,000. Principal investigator: Shannon Dames
- 2019 -Co-investigator - Social Sciences and Humanities Research Council. Partnership Grant "Univenture: A partnership to address heavy drinking and other substance misuse on Canadian university campuses" \$2,500,000 Principal investigator: Sherry Stewart
- 2018 -Principal investigator - Social Sciences and Humanities Research Council. Insight Grant "Beyond Reefer Madness: Capturing the normal cannabis user in a nomological net" \$250,950.

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- 2018 Co-investigator Canadian Institutes of Health Research. Operating Grant "Smoking is better than taking pills": a longitudinal qualitative study of cannabis use and symptom management among people living with HIV" \$263,925 Principal investigator: Marilou Gagnon
- 2014 Consultant Heffter Research Institute & University of Alabama at Birmingham-"Psilocybin-facilitated treatment for cocaine use: A pilot study" \$20,000. Principal investigator: Peter S. Hendricks

#### Completed:

- 2021 2023 **Supervisor** *Social Sciences and Humanities Research Council.* Doctoral Fellowship Award "Cannabis and Alcohol Use" \$60,000. Student awardee: Joseph Rootman
- 2021 2023 **Co-Principal investigator** *Interior University Research Coalition Ministry of Health Research Grant.* Maverick Cannabis Project." \$48,500. Co-principal investigator: Florriann Fehr
- 2020 2023 Co-Principal investigator Canadian Centre on Substance Use and Addiction.

  Closing the Gaps in Cannabis Research Grant "Cannabis use among First Nations Peoples of Turtle Island: Motives for use, substitution and impacts of legalization." \$99,500.

  Co-principal investigator: Lindsay Farrell
- 2020 2022 **Co-Principal investigator** Canadian Mental Health Commission. Community Based Research Grant Grant "Cannabis si koom la Michinn (Cannabis as Medicine)" \$99,000.

  Community Partner: Metis Nation of BC
- 2018 2022 **Principal investigator** *Mitacs Accelerate Program*. "Cannabis and Mindfulness" \$90,000.

  Industry partner: Doja Health Canada licensed producer of medical cannabis
- 2018 2022 **Supervisor** *Canadian Institutes of Health Research*. Vanier Doctoral Scholarship "Cannabis hyperalgesia" \$150,000. Student awardee: Michelle Thiessen
- 2018 2022 Co-investigator Canadian Institutes of Health Research. Planning Grant "Working Together to Develop Canadian Clinical Practice Guidelines for the Use of Cannabis in the Management of Chronic Pain and Co-Occurring Conditions (Sleep Disorders, Mood Disorders, Substance Use Disorders)" \$10,000. Principal investigator: Gary Lacasse
- 2019 2021 **Supervisor** *Social Sciences and Humanities Research Council.* Doctoral Fellowship Award "Cannabis use norms" \$60,000. Student awardee: Tatiana Sanchez
- 2019 2021 **Supervisor** *Social Sciences and Humanities Research Council.* Joseph-Armand Bombardier Master's Scholarship "Cannabis and Binge Drinking" \$17,500.

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- 2014 2021 **Principal investigator** *Investigator Initiated Partnership* (Tilray Health Canada licensed producer of medical cannabis). "Clinical trial of medical cannabis for PTSD" \$228,125.
- 2019 2020 **Co-principal investigator** Canadian Institutes of Health Research. Catalyst Grant "Investigating cannabis as harm reduction during a community-wide overdose crisis" \$125,000 Co-principal investigator: M-J Milloy
- 2018 2020 **Principal investigator** Canadian Institutes of Health Research. Catalyst Grant "The impact of cannabis legalization on campus health: A multi-method approach to establishing a baseline and monitoring change" \$97,170
- 2020 **Principal investigator** *Mitacs Accelerate Program*. "Healthcare Utilization in Chronic Pain Patients: A Prospective Examination of Using Cannabis for Therapeutic Purposes" \$45,000. Industry partner: FLOWR Health Canada licensed producer of medical cannabis Declined due to Industry partner default
- 2018 2019 **Supervisor** *Social Sciences and Humanities Research Council.* Joseph-Armand Bombardier Master's Scholarship "Legalization and cannabis norms" \$17,500. Student awardee: Tatianna Sanchez.
- 2017 2018 Supervisor Social Sciences and Humanities Research Council. Joseph-Armand Bombardier Master's Scholarship "Prenatal cannabis use" \$17,500. Student awardee: Sarah Daniels.
- 2017 2018 **Principal investigator** *UBC Hampton Research Endowment Fund.* Bridge funding "Beyond Reefer Madness" \$5,000.
- 2014 2018 **Supervisor** *Social Sciences and Humanities Research Council.* Doctoral Fellowship Award "Cannabis use and partner violence" \$60,000. Student awardee: Kimberley Crosby
- 2015 2016 **Supervisor** *Social Sciences and Humanities Research Council.* Joseph-Armand Bombardier Master's Scholarship "Development of the Composite Cannabis Assessment Tool" \$17,500.

  Student awardee: Michelle Thiessen.
- 2014 2016 **Principal investigator** *Mitacs Accelerate Program*. "Clinical trial of medical cannabis for PTSD" \$45,000. Industry partner: Tilray Health Canada licensed producer of medical cannabis
- 2011 2016 **Principal investigator** *Social Sciences and Humanities Research Council.* Standard Operating Grant "One size does not fit all: A prospective multimethod examination of subtypes of women and men involved in intimate partner violence" \$117,150.
- 2014 2016 Primary partner BC Alliance for Mental Health/Illness and Addictions Community Action Initiative Service Innovation Grant "Caring for the Caregivers" \$200,000.

  Principal awardees: Canadian Mental Health Association

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- 2014 2015 **Supervisor** *Social Sciences and Humanities Research Council.* Joseph-Armand Bombardier Master's Scholarship "An examination of the associations between problematic substance use and experiences of intimate partner violence" \$17,500. Student awardee: Kimberly Crosby.
- 2014 2015 **Mentor** Intersections of Mental Health Perspectives in Addictions Research Training. Master's Fellowship "Substance use and intimate partner violence" \$18,000. Student awardee: Kimberly Crosby.
- 2014 2015 **Mentor** Intersections of Mental Health Perspectives in Addictions Research Training. Master's Fellowship "Cannabis use and subtypes of violence" \$18,000. Student awardee: Chris Carroll.
- 2014 2015 **Consultant** *University of Rochester Medical Center Office of Health Promotion.*Community Partnership Development Award "Assessing the effectiveness of a program for perpetrators of intimate partner violence" \$20,000.

  Principal investigator: Marc T. Swogger, Ph.D.
- 2013 2015 **Principal investigator** *Institute for Healthy Living and Chronic Disease Prevention* (BC Interior Health Authority / University of British Columbia). Research Interest Group Grant "Medical cannabis and arthritis: Barriers and pathways" \$10,000.
- 2012 2015 **Principal investigator** Peter Wall Endowment Peter Wall Solutions Initiative "Medical Cannabis Standards, Engagement, Evaluation & Dissemination (SEED)" \$90,000.
- 2013 2014 **Supervisor** *Social Sciences and Humanities Research Council.* Joseph-Armand Bombardier Master's Scholarship "Examining linguistic cues regarding intimate relationships in psychopathic versus non-psychopathic offenders" \$17,500. Co-Supervisor Steven Porter, Student awardee: Lacy Peters.
- 2011 2014 **Supervisor** *Social Sciences and Humanities Research Council.* Doctoral Fellowship Award "Social support needs of women involved in intimate partner violence \$60,000.

  Student awardee: Jennifer I. Langille, MA
- 2010 2014 **Co-principal investigator** Canadian Foundation for Innovation. Leaders Opportunity Fund "Centre for the Study of Psychology and Law" \$413,285 Co-Principal Investigators: Stephen Porter, Ph.D. & Michael Woodworth, Ph.D.
- 2011 2013 **Principal investigator** Institute for Healthy Living and Chronic Disease Prevention (BC Interior Health Authority / University of British Columbia).

  Research Interest Group Grant "Barriers to accessing medical cannabis among individuals with chronic illness" \$10,000.
- 2012 2013 **Co-investigator** Canadian Institutes of Health Research. Planning grant "Cannabis for therapeutic purposes in provincial health systems: A priority setting workshop" \$24,471.

  Principal investigator: Lynda G Balneaves, Ph.D.

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- 2012 2012 **Principal investigator** - *Health Canada*. Drugs and Tobacco Initiatives "Targeted prevention for cannabis use among Canadian youth - Environmental scan and literature review" \$7,813
- 2010 2012 Supervisor - Social Sciences and Humanities Research Council. Joseph-Armand Bombardier Master's Scholarship "Subtypes of male and female partner violence perpetrators"- \$17,500. Student awardee: Alissa Fezatte
- 2010 2012 Co-investigator - Canadian Institutes of Health Research. Catalyst grant "Alternative intervention for marijuana use (AIM): Addressing individual risk factors for transitions to initiation and escalation of marijuana use in early adolescence." \$87,001. Principal investigator: Marvin Krank, Ph.D.
- 2010 2012 Co-investigator - Institute for Healthy Living and Chronic Disease Prevention (BC Interior Health Authority / University of British Columbia). Research Interest Group Grant "Improving the health and well-being of men who have sex with men in the interior of British Columbia" \$10,000. Principal investigator: Susan Holtzman, Ph.D.
- 2008 2009 **Principal investigator** - Canadian Institutes of Health Research. Fellowship Award in Clinical Research: "Personality disorder as a moderator of treatment outcome for male and female perpetrators of partner violence." \$60,000. Supervisors: Gregory L. Stuart, Ph.D. & M. Tracie Shea, Ph.D.

#### **COURSES TAUGHT**

#### Undergraduate

Drugs and Behaviour Research Methods and Statistics Introduction to Psychology-Basic Processes

#### Graduate

Psychological Interventions Psychopathology

#### **CLINICAL APPOINTMENTS**

- 2023 -Consultant – Youth Substance Use Treatment – Interior Health Authority, Kelowna, BC.
- 2018 -Director – Problematic Substance Use Clinic - The UBC Interdisciplinary Clinic, Kelowna, BC.
- 2017 2018 Clinical supervisor – Psychological assessment and treatment program - The UBC Interdisciplinary Clinic, Kelowna, BC.
- 2014 2016 Clinical supervisor - Bridgeway residential addictions treatment - The Bridge, Kelowna, BC.

2013 - 2016	Independent rater - Phase 3 Clinical Trial - MDMA for PTSD - Multidisciplinary Association for Psychedelic Studies, Vancouver, BC.
2014 - 2015	Facilitator - Men's relationship group - Kelowna Family Centre, Kelowna, BC.
2008 - 2009	Research therapist - Brief Motivational Intervention for addictions and family violence, Butler Hospital, Providence, RI.
2008 - 2009	Research therapist - Cognitive Behavioral Therapy for anger and trauma, Providence Veterans Affairs Hospital, Providence, RI.
2007 - 2008	Graduate therapy intern - Cognitive Behavioral Therapy and Motivational Enhancement Therapy for addictions, Butler Hospital, Providence, RI.
2007 - 2008	Graduate therapy intern - Dialectical Behavior Therapy for women, Butler Hospital, Providence, RI.
2006 - 2007	Graduate therapy extern - Cognitive Behavioural Therapy for anxiety disorders, Clinics at Rosalind Franklin University, North Chicago, IL.
2005 - 2006	Graduate psychometrics extern - Forensic neuropsychological assessment, Isaac Ray Center, Chicago, IL.
2004 - 2005	Graduate therapy extern - Cognitive Behavioral Therapy and Motivational Enhancement for addictions, University of Chicago Hospital, Chicago, IL.
2004 - 2005	Graduate therapy extern - Dialectical Behavior Therapy for women, University of Chicago Hospital, / Emotion Management Program, Chicago, IL
2003 - 2004	Graduate psychometrics extern - Neuropsychology, University of Chicago Hospital, Chicago, IL.
OTHER AP	POINTMENTS
2023 -	Member - Naut sa mawt Centre for Psychedelic Research
2022 -	Member - Editorial board Nature-Scientific Reports

- 2022 Member Editorial board, Nature-Scientific Reports
- 2021 Member BC Ministry of Mental Health and Addictions Steering Committee on Psychedelic Medicine Assisted Therapy in British Columbia
- 2021 Member Advisory board, Mycomedica Lifesciences
- 2020 Member Editorial board, Psychedelic Medicine
- 2020 Member Advisory board, Entheotech Biomed
- 2019 Member Advisory board, Numinus Wellness
- 2019 Member Editorial board, Journal of Psychoactive Drugs
- 2018 Member College of Reviewers, Canadian Institutes of Health Research
- 2018 Affiliated Scientist BC Centre on Substance Use (BCCSU)

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2017 -	Member - Cannabis Guidelines Task Force, Canadian AIDS Society
2012 -	Member - Editorial board, Legal and Criminological Psychology
2012 -	Member - Advisory board, Multidisciplinary Association for Psychedelic Studies (MAPS) Canada
2011 -	Research affiliate - Canadian Institute of Substance Use Research (CISUR)
2017	Reviewer - Alberta Gaming Research Institute, Research Grant Program
2017	Reviewer – Mitacs Accelerate Program, Research Grant Program
2017	Reviewer - National Council of State Boards of Nursing, Report on Medical Marijuana and Nursing Practice
2016 - 2017	Member - Organizing committee, The BC Centre on Substance Use, Forum on Science of Cannabis: Defining a Research Agenda for Public Health
2014 - 2017	Member - Consultation Network of the Advisory Scientific Committee, Uruguayan National Drug Board, Montevideo, Uruguay
2011 - 2017	Co-Director - UBC Centre for Advancement of Psychological Science and Law
2013 - 2016	Research mentor - Intersections of Mental Health Perspective in Addictions Research Training (IMPART)
2010 - 2016	Member - Board of directors, John Howard Society of the Central and South Okanagan (Vice president 2014-15)
2015	Member – Planning committee, The Arthritis Society of Canada Medical Cannabis Research Roundtable & Priority Setting Workshop
2014	Member - Steering committee, The James Lind Alliance Priority-Setting Partnership, The Institute of Musculoskeletal Health and Arthritis, Canadian Institutes of Health Research
2014	Reviewer - UK Medical Research Council, Population Health Scientists Strategic Skill Fellowship Grant Program, Wiltshire, United Kingdom
2014	Topic expert - Online accredited continued medical education program on medical cannabis & Med School for You" Online patient education program on medical cannabis - mdBriefCase, Toronto, ON.
2013	Reviewer - German-Israeli Foundation for Scientific Research and Development, Young Scientist's Program Grant
2012	Reviewer - Social Sciences and Humanities Research Council of Canada (SSHRC), Insight Grant Program
2008 - 2010	Psychiatry faculty - Personality and Impulse Disorders, Faculty of 1000 Medicine
2008 - 2009	Project manager - National Institute on Alcohol Abuse and Alcoholism - R01: Brief intervention to reduce drinking among batterers, PI: Gregory L. Stuart, Butler Hospital, Providence, RI.

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2007 - 2008	Graduate research intern - National Institute of Mental Health - R01: Collaborative longitudinal study of personality disorders, site PI: M. Tracie Shea, Brown University, Providence, RI.
2004 - 2005	Group dynamics consultant- Tavistock Study Group, Northwestern University, Evanston, IL.
1997 - 2001	High school teacher - Manitoba School Divisions 1 & 6, Winnipeg, MB.
1990 - 1999	Organizer and fundraiser - Greenpeace, Winnipeg, MB.

#### **MEMBERSHIPS IN SOCIETIES & ORGANIZATIONS**

International Society for Research in Psychedelics

Canadian Consortium for the Investigation of Cannabinoids

International Cannabinoid Research Society

Canadian Psychological Association

Physicians for Human Rights

# AD HOC REVIEWER (representative)

Addiction	Addictive Behaviors
BMC Psychiatry	BMC Public Health
Behavioral Sciences and Law	Biological Psychology
Criminal Justice and Behavior	Current Drug Abuse Reviews
Drug and Alcohol Dependence	International Journal of Drug Policy
Journal of Abnormal Child Psychology	Journal of Interpersonal Violence
Journal of Psychoactive Drugs	Personality Disorders: Theory Research &
PLOS ONE	Treatment
Psychological Assessment	Social Science and Medicine
Psychology of Addictive Behavior	Substance Abuse Treatment, Prevention &
Suicide and Life Threatening Behavior	Policy
Violence Against Women	Archives of Internal Medicine

#### **HONOURS & AWARDS**

2023	Outstanding Faculty Member - UBC - Okanagan Clinical Graduate Student Body
2020	Award for Excellence in Research Activity – Health, UBC – Okanagan Campus
2018	Teaching Honour Roll Award, UBC
2016	Provosts Award for Excellence and Innovation in Teaching, UBC
2014	Teaching Honour Roll Award, UBC

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2013	Teaching Honour Roll Award, UBC
2008	Internship Research Grant, Brown University
2006	Dissertation Award, American Academy of Forensic Psychiatry
2006	Dissertation Award, American Psychological Association
2004	Award for Research Excellence, Rosalind Franklin University

# RESEARCH IMPACT (Google Scholar)

h-index - 38 i10index - 63 Citations - 4742

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allidavit of Professo	r Zachary Walsh
sworn before me, thi	4 th
day of June	<b>20</b> 24
to a new	ACOMMISSIONER, ETC
- Committee of the comm	A COMMISSIONER, ETC

BW

Sworn remotely by Professor Zachary Walsh in the city of West Kelowna, British Columbia with commissioner Joanna Shaw in the city of Toronto, Ontario in accordance with O. Reg. 431/20, Administering Oath or Declaration remotely.

# JOANNA KATHLEEN SHAW,

a Commissioner, etc., Province of Ontario, for LEWIN & SAGARA LLP, BARRISTERS AND SOLICITORS. Expires October 16, 2026,



# Oregon Psilocybin Services

# What is psilocybin?

Psilocybin is a naturally occurring psychedelic compound. It is found in over 200 species of mushrooms. For centuries, Indigenous and tribal communities around the world have used psilocybin for spiritual, ceremonial, and other purposes.

Regulated psilocybin services are now a legal option in Oregon. However, psilocybin is still a Schedule I substance under the Federal Controlled Substances Act.

# What are the benefits of psilocybin?

Research suggests psilocybin may help address depression, anxiety, trauma, and addiction. Studies have also found it can increase spiritual well-being.

To learn more about the research on psilocybin benefits and risks, see the <u>Scientific Literature</u> <u>Review and Cultural and Anthropological</u> <u>Information</u>. These publications are available in English and Spanish.

## The Oregon Psilocybin Services Act

The Oregon Psilocybin Services Act was voted into law by Oregonians in November 2020 and was codified in Oregon law in <u>Oregon Revised Statutes Chapter 475A</u>. ORS 475A directs the Oregon Health Authority (OHA) to license and regulate the production of psilocybin products and the provision of psilocybin services. Oregon is the first state in the U.S. to create a regulatory framework for psilocybin services.

## What are psilocybin services?

In Oregon, "psilocybin services" refers to preparation, administration, and integration sessions provided by a licensed facilitator.

The psilocybin products consumed must be cultivated or produced by a licensed psilocybin manufacturer, tested by a licensed laboratory, and may only be provided to a client by a licensed psilocybin service center during an administration session. Clients must remain at a licensed service center for the duration of the administration session.

Clients must be age 21 or older. Clients do not need a prescription or medical referral and they do not need to be Oregon residents.



# **Oregon Psilocybin Services Section**

The <u>Oregon Psilocybin Services</u> section (OPS) is housed within the Oregon Health Authority's Public Health Division. OPS is responsible for administering ORS 475A, which includes adoption of administrative rules, issuing licenses, and regulating licensees to ensure compliance with <u>statute and rules</u>. OPS began accepting license applications on January 2, 2023, and licensed psilocybin service centers began to open their doors to clients in the summer of 2023.

**Oregon Psilocybin Services** - <u>www.oregon.gov/psilocybin</u> Sign up for the <u>OPS Distribution List</u> to receive updates.

March 2024





# How an Individual Accesses Psilocybin Services:



1) Schedule a Session: A person interested in accessing psilocybin services will contact licensed service centers for information about psilocybin services. Once they find a service center that fits their needs, the potential client will schedule a preparation session with a licensed facilitator associated with the licensed service center they choose to work with. The OPS Licensee Directory includes contact information for service centers that have consented to being listed. Potential clients may also verify if a service center has a valid license by using the Search for License or Permit Status tool.



2) Preparation Session: The client meets with a <u>licensed facilitator</u> for a preparation session and completes <u>required forms</u> (including: client information, bill of rights, informed consent, safety and support plan, transportation plan, and accessibility). A licensed facilitator determines whether they can provide services to the client, and the client determines whether they want to move forward with an administration session.



3) Administration Session: The administration session takes place at a <u>licensed service</u> center. The client buys psilocybin products from a licensed service center and consumes psilocybin at the beginning of their administration session. The client remains at the service center with the licensed facilitator until they are ready to be released from the session. For group administration sessions, a minimal client-facilitator ratio is required. Within 72 hours after the session, the licensed facilitator contacts the client to check on them. An optional integration session is offered.



4) Integration Session: If the client chooses to take part in an optional integration session, they may review their safety and support plan or request referrals for community resources, peer support networks, and other resources at that time.

# How Psilocybin Products get to a Licensed Service Center:

- 1. Psilocybin products are cultivated and/or processed by a <u>licensed manufacturer</u> and are tracked in the OPS product tracking system.
- 2. The products are tested by a <u>licensed laboratory</u> accredited by the Oregon Environmental Laboratory Accreditation Program (ORELAP), and test results are entered into the OPS product tracking system.
- 3. The products are sold or transferred from a licensed manufacturer to a licensed service center. All product sales are tracked in the OPS product tracking system.





You can get this document in other languages, large print, braille or a format you prefer. Contact Oregon Psilocybin Services at: 971-341-1713 or email: OHA.Psilocybin@oha.oregon.gov.

This is Exhibit ... C ... referred to in the affidavit of Professor Zachary Walsh sworn before me, this ... 4 th ... ... 4 commenced at ... ... ... 4 commenced at ... ... 4 comm

Sworn remotely by Professor Zachary Walsh in the city of West Kelowna, British Columbia with commissioner Joanna Shaw in the city of Toronto, Ontario in accordance with O. Reg. 431/20, Administering Oath or Declaration remotely.

# JOANNA KATHLEEN SHAW,

a Commissioner, etc., Province of Ontario, for LEWIN & SAGARA LLP, BARRISTERS AND SOLICITORS. Expires October 16, 2026.



# PUBLIC HEALTH DIVISION CENTER FOR HEALTH PROTECTION Oregon Psilocybin Services http://oregon.gov/psilocybin



# **Client Information Form**

# Introduction:

A client must review and complete this client information form with a facilitator prior to participating in an administration session. A facilitator must provide this form in other languages or accessible formats upon a client's request. If a facilitator is unable to provide a translated or accessible client information form upon a client's request, they may not conduct an administration session with the client.

Each question must be answered by indicating "yes" or "no".

Questions	Yes	No
Have you taken the prescription drug Lithium in the last 30 days? (3)(a)		
Are you currently being treated by a medical, clinical, or other healthcare		
provider for a medical, mental health, or behavioral health condition? (3)(b)		ш
Have you ever had an allergic reaction to consuming mushrooms or other fungi? $(3)(c)$		
Are you currently taking any medications that might need to be consumed		$\Box$
during an administration session? (3)(d)		
Will you require assistance from an interpreter during an administration session? (3)(e)		
Will you require assistance from a client support person for catheter, ostomy, or toileting assistance, ambulation or transfer mobility support, or medical device assistance during the administration session? (3)(f)		
Will you require assistance from a client support person for augmentative and alternative communication (AAC) device support or assistive listening device support during the administration session? $(3)(g)$		
Are you having thoughts of causing harm, or wanting to cause harm, to self or others? $(3)(h)$		
Do you have a history of causing harm, or wanting to cause harm, to self or others? $(3)(i)$		
Have you ever been diagnosed with active psychosis or treated for active psychosis? $(3)(j)$		
Are you pregnant or feeding with breast milk? (3)(k)		
Do you require any assistive mobility devices? (3)(I)		
Will you require assistance to consume psilocybin products? (3)(m)		
Would you like to share any other conditions, sensitivities, or health concerns with your facilitator? $(3)(n)$		

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Updated 12/27/2022

A client may provide a narrative answer to the following questions.		
Would you like to share anything about your medical history, including current medications, that you feel would be helpful for an administration session?		
Would you like to share anything about your mental health history, including traumatic experiences that you feel would be helpful for an administration session?		
, see a see		
Would you like to share anything about specific behaviors, internal or external stimuli ("triggers") that could cause you to be uncomfortable during an administration session?		

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Nould you like to share anything about your history of substance use, including current substance use, that you feel would be helpful for an administration session?
Would you like to share any past experiences with psychedelics or altered states of consciousness?
Would you like to share any information about your relationships, your living situation, or your educational or work environment that may be affected by your administration session or may require additional safety or support planning?
or only or onl

Updated 12/27/2022



#### Facilitator Review and Evaluation

This section of the Client Information Form is used by the facilitator. A facilitator must evaluate the answers to questions listed in the Client Information Form as outlined in OAR 333-333-5050 (3) to determine whether the client should participate in an administration session.

- If a client answers yes to question (3)(a), the client may not participate in an administration session.
- If a client answers yes to question (3)(b), a facilitator shall encourage the client to consult a medical, clinical, or other healthcare provider regarding the risk of consuming psilocybin.
- If a client answers yes to question (3)(c), the client should be encouraged to consume an alternative psilocybin product rather than whole fungi or homogenized fungi during the administration session.
- If a client answers yes to question (3)(d), a facilitator should encourage the client to schedule their administration session at a time that allows them to participate without taking medication. A facilitator should also encourage the client to consult with a pharmacist or medical, clinical, or other healthcare provider regarding contraindications. If the client will take medication during an administration session, the client and facilitator must work together to identify whether the client will be able to administer the medication themselves. If the client is unable to administer the medication themselves, the client must identify a client support person who will be available to administer the medication when required.
- If a client answers yes to question (3)(e), the client and facilitator must work
  together to identify an appropriate interpreter who will be present in person or
  virtually during the client's administration session.
- If a client answers yes to question (3)(f), the client and facilitator must work together to create a written assistance or medical device plan.
  - o If the client requires a medical device, the medical device plan must describe the required medical device and indicate whether the client will be able to use the medical device without assistance. If the client is unable to use the medical device without assistance, the written medical device plan must identify a client support person who will be available to assist the client with their medical device when required
  - If the client requires assistance with catheter, ostomy, or toileting assistance, ambulation or transfer mobility support, the assistance plan must identify the type of assistance required and a client support person who will be available to assist the client.
- If a client answers yes to question (3)(g), the client and facilitator must work
  together to identify an appropriate client support person who will be present
  during the client's administration session to assist with the client's alternative 2

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- communication device support or assistive listening device support during the administration session.
- If a client answers yes to question (3)(h), the client may not participate in an administration session.
- If a client answers yes to question (3)(i), a facilitator shall encourage the client to consult with a medical or clinical provider regarding the risk of consuming psilocybin.
- If a client answers yes to question (3)(j), the client may not participate in an administration session.
- If a client answers yes to question (3)(k), the facilitator must inform the client that the risks of consuming psilocybin while pregnant or feeding with breast milk are unknown.
- If a client answers yes to question (3)(I), the client and facilitator must work together to create a written plan that describes how the client will safely exit the service center in the event that an emergency occurs during their administration session.
- If a client answers yes to question (3)(m), the client and facilitator must work together to identify an appropriate client support person who will be present to assist the client with consuming psilocybin products during their administration session.
- If a client answers yes to question (3)(n), the client and facilitator must work with the client to create a written plan that describes how the facilitator will take reasonable steps to accommodate the conditions, sensitivities or health concerns identified by the client. For example, if a client has a compromised immune system, the written plan will describe efforts to prevent the transmission of viruses and bacteria.

By signing this form, I acknowledge that I have reviewed and completed this form in coordination with a psilocybin services facilitator prior to participating in an administration session.

Client Name (Print)			
Client Signature	Date		
By signing this form, I ackn form with the client prior to			
Facilitator Name (Print)			
Facilitator Signature	 Date		BW
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