

Oregon Psilocybin Services (OPS) aligns with Oregon's State Health Improvement Plan (SHIP)

The [2025-29 Oregon State Health Improvement Plan \(SHIP\)](#) includes a strategy to **Destigmatize psilocybin as a culturally responsive option for healing and wellness.**

The SHIP is a 5-year plan for improving the health of all people, of all ages, in all places in Oregon. It recognizes the diverse experiences of our population and strives to have inclusive strategies that benefit everyone. The strategies are organized under 4 priority areas:

- Healthy Environments
- Individual, family, and community well-being
- Health promotion and disease prevention
- Emergency preparedness and response

The strategy to **Destigmatize psilocybin as a culturally responsive option for healing and wellness** supports the **Individual, family, and community well-being** priority.

Inclusion in the SHIP is a significant movement forward for ensuring access to regulated psilocybin services in Oregon. Licensed facilitators represent diverse lived and professional experiences and support **Individual, family, and community well-being** by providing culturally responsive services to clients. In Oregon, some licensed facilitators specialize in serving veterans, people of color, individuals who identify as LGBTQIA2S+, and people participating in addiction recovery programs. Licensed facilitators may also be dual licensed health care professionals, integrating psilocybin services into the health and behavioral health system. Although a prescription or referral from a health care provider is not required for clients to access psilocybin services, patients may discuss regulated psilocybin services with their providers.

How does the strategy to destigmatize the use of psilocybin as a culturally responsive option for healing and wellness support individual, family, and community well-being?

- Psilocybin has been used for centuries by various indigenous and tribal communities for healing, ceremonial, and other purposes throughout the world ([Spiers et. al., 2024](#))
- Research suggests that psilocybin may help address depression ([Raison, et al. 2023](#)). The Food and Drug Administration (FDA) has designated psilocybin a breakthrough therapy for the treatment of depression.
- Research also suggests that psilocybin may help address alcohol ([Bogenschutz et al., 2022](#)) and tobacco dependence ([Johnson et al., 2026](#); [Johnson et al., 2016](#)). The Oregon Health and Science University (OHSU) is currently funded by the National Institute on Drug Abuse of the National Institutes of Health to research how accessing state psilocybin services impacts use of alcohol, nicotine, and other substance over time ([OHSU News, 2026](#)).
- Additional research shows promise for end-of-life distress ([Griffiths et al., 2016](#)), PTSD ([Anderson et.al., 2020](#)), and other health concerns ([Abbas et. al., 2021](#)).
- The use of psilocybin has also demonstrated promise for symptoms related to trauma, including racial trauma ([Williams et al., 2021](#)). Particularly when services utilize culturally responsive approaches, such as acknowledging systemic biases and negative cultural stereotypes ([Smith et. al., 2022](#)).
- In one study, Black, Indigenous, and People of Color (BIPOC) participants who were provided psychoeducation were more receptive to seeking or referring others to psychedelic-assisted psychotherapy ([Feng et. al, 2024](#)).

What activities will help advance the strategy to destigmatize psilocybin?

Offering presentations, trainings, and discussions regarding regulated psilocybin services in Oregon with CCOs, medical and behavioral health providers, and other health system partners.

- Attitudes regarding the therapeutic use of psilocybin among US healthcare professionals is generally positive, however, many professionals report low knowledge ([Wang, 2024](#); [Wells, 2024](#)). One study found that although 73% of psychologists and psychotherapists reported discussing psychedelic use with their patients, less than 55% reported having adequate knowledge to counsel them on use ([Kucsera, 2023](#)). Training among health professionals has demonstrated reduced stigma related to substance use and toward harm reduction ([Sulzer et al., 2022](#)).

Offering presentations, trainings, and discussions regarding regulated psilocybin services in Oregon with tribal, local, and state public health partners, as well as other public officials and community-based organizations.

- Psilocybin services have the potential to improve public health issues, while the potential harms are also of public health concern. A review of the field of public health reported that only 3% of public health schools engaged in the topic ([Kuiper et. al., 2024](#)).
- In 2025, an estimated 11 million U.S. adults used psilocybin ([Priest, et al, 2026](#)) and the prevalence of psychedelic use is highest in the Pacific states ([Rocky Mountain Poison and Drug Safety, 2025](#)). However, unregulated products raise significant public health and safety concerns ([Breeman, 2025](#)). In 2024, [OHA issued a warning](#) about unregulated products.

How will Oregon Psilocybin Services measure destigmatization?

The Oregon Psilocybin Services section will work with SHIP partners to measure progress on the SHIP strategy. We will use data in the [OPS Data Dashboard](#) and data collected as part of the annual evaluation of the [OPS Strategic Plan](#) to track the following progress measures:

Who is accessing psilocybin services?

- Client Demographic Data (including total # of clients served, [REALD-SOGI](#) data, age, income, and client reasons for accessing services)

Who is providing psilocybin services?

- Licensed Facilitator Demographic Data (including total # of licensed facilitators and REAL-SOGI data)

Who are we presenting to and providing education to?

- A list of internal and external partners we have presented to or provided education to (Including OHA, PHD, LPHAs, CCOs, Nine Federally Recognized Tribes of Oregon, Cities/Counties/Law Enforcement, Community Based Organizations (CBOs), advocacy associations, health providers, and the public.)

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For more information, please refer to the following resources:

- [OPS General Fact Sheet](#)
- [OHA State Health Improvement Plan](#)
- [OPS Health and Safety Fact Sheet](#)
- [OPS Equity and Access Fact Sheet](#)
- [OPS Annual Reports](#)
- [OPS Data Dashboard](#)