

Attitudes Towards Psilocybin: A General Population's Opinions on Psilocybin and Psilocybin-Assisted Therapies

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ABSTRACT. Psilocybin-assisted therapies (PAT) have been used to treat several issues including obsessive-compulsive disorder (OCD), major depressive disorder (MDD), posttraumatic stress disorder (PTSD), smoking addiction, and anxiety (Grob et al., 2011; Johnson et al., 2014; Kisely et al., 2022; Moreno et al., 2006). If more positive benefits of psilocybin are discovered, psilocybin could become a more mainstream treatment option. Due to this possibility, it is important to understand people's beliefs about psilocybin and PAT. This descriptive study was conducted to understand the relationship between demographic characteristics and attitudes toward psilocybin and PAT. An anonymous Qualtrics survey was utilized to collect responses from 235 participants. Participants responded to questions regarding demographics, knowledge of psilocybin, previous experience with psychedelics, and attitudes toward PAT. Overall, attitudes towards PAT were relatively positive, but there were some notable differences among groups. Those with more positive attitudes were more likely to be men, democrats, and atheists. However, these differences may be related to sampling sources (e.g., Amazon's Mechanical Turk). Furthermore, participants with prior knowledge of psilocybin and previous experience with psychedelics had more positive attitudes toward PAT. These findings provide relevant information on what groups may be more open to PAT.

Keywords: psilocybin, psilocybin-assisted therapy, opinion, attitudes, psychedelics, magic mushrooms



Open Data badge earned for transparent research practices. Data are available at <https://osf.io/x2a4y/>

Psilocybin has been performing well in treatment trials for a variety of mental health conditions, such as obsessive-compulsive disorder (Ehrmann et al., 2021; Moreno et al., 2006), anxiety in advanced-stage cancer patients (Grob et al., 2011), and major depressive disorder (Zeiss et al., 2021). While psilocybin

is still classified as a “schedule one substance” under the Controlled Substances Act, mounting evidence of its efficacy has inspired new research and challenged people to view it in a new light. For example, in 2019, the U.S. Food and Drug Association labeled psilocybin as a “breakthrough therapy” for the treatment of depression

(Rahhal, 2019) and in 2020, Oregon was the first U.S. state to legalize its use for mental health treatment at licensed centers (Jacobs, 2023). Since then, several other states, districts, and other countries, such as Australia, have moved to decriminalize or make the use of psilocybin legal for psychiatric treatment (Therapeutic Goods Administration, 2023).

What Is Psilocybin?

Psilocybin is a psychoactive compound found in dozens of species of mushrooms, known as psilocybin mushrooms (Nichols, 2020). Scientists such as Weitlaner, Wasson, and Wasson brought international attention to this previously mythical plant in the late 1950s (for a brief history see Nichols, 2020, and Tylš et al., 2013). Psilocybin's scientific popularity led to its popularity as a recreational drug, causing it to be classified as a schedule one drug in 1970 (Nichols, 2020; Tylš et al., 2013), which is a drug having no accepted medical use and a high potential for abuse (DEA, 2018). Due to the "war on drugs" and other cultural factors at the time, psychedelic research as a whole was abandoned until the early 1990s (Carhart-Harris & Goodwin, 2017). Despite still being illegal in the United States, an estimated 9.68% of Americans have used psilocybin recreationally (Yockey & King, 2021).

Therapeutic Benefits of Psilocybin

Psilocybin affects the brain's serotonin system, particularly the 5-HT_{2A} receptor, which is believed to play a role in mood regulation and cognition (Donovan et al., 2021; Vollenweider et al., 1998). Its use can cause several types of hallucinations (auditory, visual, and physical), increased self-awareness, psychological flexibility, "spiritual" experiences, neuroplasticity, and time distortions (Carter et al., 2023; Corrigan et al., 2022; Davis et al., 2022). Several theories have been proposed to explain why these effects may be beneficial, such as altered brain connectivity in the default mode network, promotion of neuroplasticity, ability to confront and process difficult emotions or trauma, mystical experiences, altered perspectives, and reduced fear response (Carter et al., 2023; Corrigan et al., 2022; Davis et al., 2022; Dinis-Oliveria, 2017). Psilocybin may also cause unwanted side effects such as nausea, anxiety, headaches, vomiting, and dizziness (Peden et al., 1982; Yerubandi et al., 2024). In some cases, psilocybin can cause episodes of psychosis in individuals with a personal or family history of predisposing risk factors to psychosis (Honk et al., 2024; Morris, 2024; Suleiman et al., 2022; Vollenweider et al., 1998). However, in clinical trials the risk of serious adverse reactions has been minimal, and treatment with psychedelics has been well-tolerated according to one systematic review (Hinkle et al., 2024).

An example of psilocybin-assisted therapy (PAT) at work can be found in a study conducted by Moreno et al. (2006) when they sought to understand the effectiveness of PAT in patients with treatment-resistant OCD. The study was restricted to participants with moderate to severe symptoms of OCD on the first day of testing. The nine participants received varying doses of psilocybin ranging from "very low" (25 micrograms per kilogram of bodyweight) to "very high" (300 micrograms per kilogram of bodyweight). This protocol was enacted for four sessions, each date separated by a minimum of one week. The study environment was highly controlled; participants were supervised by "trained sitters" at all times, including at least one investigator. The researchers found psilocybin to be a safe and well-tolerated substance in a regulated and encouraging clinical environment (Moreno et al., 2006). One participant self-reported a lasting reduction of symptoms at a six-month follow-up.

Psilocybin also yielded promising results for patients with depression (Carhart-Harris et al., 2017; Daws et al., 2022; Zeiss et al., 2021), suicidal ideation (Hendricks et al., 2015), posttraumatic stress disorder (Kisely et al., 2022), and cancer-related anxiety (Grob et al., 2011). In addition, there is a high potential for PAT as a safe and effective treatment for both alcohol and tobacco addiction (Bogenschutz et al., 2015; Johnson et al., 2014).

Past Research on Attitudes

Understanding opinions and attitudes towards psychedelics and psilocybin (both within and outside the context of therapy) across different groups is important. Previous studies have looked at attitudes amongst specific groups, such as mental health professionals (Barnett et al., 2018; Davis et al., 2022; Meyer et al., 2022), mental health service users (Corrigan et al., 2022; Wang et al., 2024) African Americans (Carter et al., 2023), and healthcare students (Bhuiya et al., 2023; Wang et al., 2023). Each study provides further insights into what constituent groups may think about this type of treatment.

Mental Health Providers

Barnett et al. (2018) developed a scale to survey 324 American psychiatrists on their attitudes toward psychedelic treatment. This scale has since been used in other studies (Corrigan et al., 2022; Davis et al., 2022) and even inspired the creation of additional scales (Žuljević et al., 2022). Results indicated that participants generally viewed psychedelics as dangerous, although younger male trainees tended to be more open to these therapies. Similarly, Davis et al. (2022) examined the attitudes of 336 U.S. clinical psychologists using the Treatment Acceptability Rating Form-Revised (TARF-R). The safety

and therapeutic potential of psychedelics, as well as general perceptions of psychedelics were also assessed. Although 47.9% of participants believed psychedelics posed a risk of psychiatric impairment and 34.6% of participants believed psychedelics negatively affected neurocognitive functioning, many still saw value in further research. Davis et al. reported a startling lack of information among participants, even though 68.5% of them indicated previously working with a client who had experience with psychedelics. Focusing specifically on psilocybin, Meyer et al. (2022) surveyed 155 mental health professionals through an online survey. They found that opinions were generally neutral; however, those with more knowledge of or prior personal experience with psilocybin were also more likely to hold positive views. This study utilized a self-reported measure of knowledge. Similar to Davis et al. (2022), these participants also self-reported a lack of knowledge on the subject of PAT.

Mental Health Service Users

A 2022 study by Corrigan et al. examined the attitudes of 99 mental-health service users toward PAT (Corrigan et al., 2022). Participants completed a questionnaire based on prior research, with mental health diagnoses also recorded. Attitudes towards psilocybin as a treatment method were fairly favorable; most participants (59%) believed that psilocybin should be granted medical treatment status (Corrigan et al., 2022). Those who were younger, had previous psychedelic experiences, and those who were not religious displayed more positive attitudes towards PAT. Wang et al. (2024), explored the attitudes of 32 palliative care patients in a Florida outpatient setting. Over half of the participants expressed interest in PAT, although there was caution surrounding a fear of exploitation. Only 9.7% of participants reported knowledge of the therapeutic uses of psilocybin, indicating a need for further education on the subject.

Black Americans

Carter et al. (2023) looked at the effect psychoeducation may have on African Americans' ($N = 294$) perceptions of psychedelic-assisted therapy. To gather baseline attitudes, the psychedelic perceptions survey (PPS) was used. Following a brief psychoeducation, the psychedelic perceptions survey was re-administered to see if opinions changed. The study found that psychoeducation significantly impacted optimism towards that type of treatment. Black Americans specifically held much more positive viewpoints about this type of treatment after such education, in comparison to White Americans (mean difference = 0.29, $F = 4.57$).

Healthcare Students

Wang et al. (2023) surveyed 213 U.S. healthcare

students to assess their attitudes towards PAT. The study found that perceived knowledge (4-items; e.g., "I have substantial knowledge about psilocybin.") significantly influenced positive attitudes towards PAT ($\beta = .49$), while lower concern for potential adverse effects ($\beta = -.25$) and support of psilocybin decriminalization ($\beta = .19$) were also associated with more favorable views. Consistent with previous research (Barnett et al., 2018), Wang et al. found younger professionals tended to be more positive about PAT than those who had been in the field longer. Similarly, Bhuiya et al. (2023) explored the attitudes of 161 pharmacy students' attitudes toward PAT using the Pharmacy Students' Perceptions of Psilocybin Scale (PSPS). Results indicated that higher self-reported knowledge ($\beta = .37$), lower concern for negative effects ($\beta = -.18$), and strong beliefs in decriminalization for both recreational ($\beta = .16$) and therapeutic use ($\beta = .35$) were linked to more positive opinions on psilocybin.

International Opinions

The interest in attitudes towards psychedelics is not limited to the United States. Researchers in Croatia (Žuljević et al., 2022) recognized the need for a validated instrument and built a 20-item scale, named the Attitudes on Psychedelics Questionnaire (APQ), to assess attitudes toward psychedelics among general populations. The APQ displayed high reliability overall ($\alpha = .95$), and among its four subscales: legal use of psychedelics ($\alpha = .84$), effects of psychedelics ($\alpha = .89$), risk assessment of psychedelics ($\alpha = .84$), and openness to psychedelics ($\alpha = .84$). As part of the validation process, the team collected attitudes from a general sample of 1,153 Croatians. Out of their population, men ($\beta = -.17$), younger participants ($\beta = -.22$), and those with higher knowledge ($r = .49$) displayed more positive attitudes towards psychedelics. Contrary to prior literature, those who were less educated also had more positive attitudes ($\beta = -.12$).

Present Study

Despite all the work done to understand attitudes toward psychedelic-assisted therapies and PAT, the current literature lacks information about attitudes among a general U.S. population. To address this gap, we conducted a descriptive study of attitudes toward psilocybin and PAT among a convenience sample of general adults in the United States. The purpose of our study was to understand whether there is any relationship between demographic variables and attitudes toward psilocybin and PAT.

Methods

Research Practices

We sought to determine if there was a relationship between demographics and attitudes toward psilocybin

among a general sample of adults in the United States. An anonymous online Qualtrics survey was utilized to collect candid data.

Participants

Using prior research on the subject as a guide, 562 participants were recruited across multiple websites and social media platforms. To ensure only quality responses remained for data analysis, we reviewed survey responses and removed any incomplete responses (defined as responses without an APQ score) or responses flagged as “duplicate” or “bot-generated.” After data cleanup was complete, the data from 235 participants remained for data analysis (see Table 1 for detailed participant demographics and <https://osf.io/asxwk/> for a participant exclusion flowchart). Participation was limited to adults 18 and older with fluency in the English language residing in the United States. Recruiting occurred via snowball sampling across social media sites (Instagram, Facebook, and Snapchat), Mechanical Turk (MTurk), Reddit, and the Social Psychology Network (SPN). We used MTurk for its demographic diversity, although users are known to be more educated and less religious (Lopez et al., 2023). Unfortunately, MTurk produced the least reliable respondent pool due to the prevalence of bots. We used Reddit subforums dedicated to survey exchanges to reach additional participants. In addition, we both used our social media accounts to reach out to invite adults within our social networks to participate and to disseminate the survey to their friend groups as well.

Participants were relatively young with a mean age of 35.8 ($SD = 15.9$), majority women (60%), white (88%), middle-class (53.6%), and educated (46.8%). Politically, 46.8% of respondents identified as Democrats, 22.6% were Republican, and 21.7% identified as independents. Most respondents claimed some type of religious belief (67%). Most participants indicated that they were not disabled (71.5%) and had no mental health diagnosis (82.6%). Most were not working in a healthcare profession (90.2%) or ever served in the military (60.9%).

Measures

Demographics

We selected demographic characteristics used in prior research on the subject as well as a few additional ones that we thought might be predictive of attitudes toward psilocybin and PAT. Thus, participants were asked to report their age, gender, race, education, subjective social status, political alignment, religious affiliation, military service, disability status, and healthcare worker status (if they currently, or have ever, worked in a healthcare profession). The wording for these demographic questions was heavily influenced by the work of Hughes et al. (2016) to ensure the desired information was collected.

Previous Experience

Prior studies found connections between previous experience and attitudes (Corrigan et al., 2022; Meir et al., 2023; Meyer et al., 2022). So, participants were asked about previous experience with a list of nine different psychedelic drugs (psilocybin, LSD, MDMA, peyote, mescaline, DMT, PCP, ketamine, and salvia). The participant’s experience was sorted into two groups: those who had used psychedelics, and those who had not. The variable was also split to sort what participants had used psilocybin and those who had not.

Prior Knowledge

Prior knowledge was collected using a self-report based measure, modeled after prior research (Meyer et al., 2022). Participants were asked about their prior knowledge of psilocybin using three items. The first, “Prior to taking the current survey, how much knowledge would you say you have about psilocybin?” was assessed using a 5-point scale (5 = *extremely knowledgeable*, 1 = *no previous knowledge on the subject*). If participants indicated any prior knowledge of the subject, they were asked where they received their information (e.g., books, T.V., pop culture, social media).

Framing

Qualtrics skip logic was utilized so that if a participant indicated having any prior knowledge about psilocybin, a question on framing appeared. How the knowledge was presented, or its “framing,” was asked with a single question, “From what you’ve seen or heard, how has psilocybin been portrayed?” Responses were collected using a 5-point scale (1 = *all negative*, 5 = *all positive*).

Attitudes

Attitudes towards psilocybin were assessed using a modified version of the Attitudes on Psychedelics Questionnaire (APQ) developed and validated by Žuljević et al. (2022). The scale was modified to use “psilocybin” in place of “psychedelic,” per the study’s goals. The modified scale was internally valid in the present study (Cronbach’s $\alpha = .95$). The APQ uses a 5-point scale (1 = *completely disagree*, 5 = *completely agree*). A higher score indicates more positive attitudes towards psilocybin (minimum score = 20, maximum score = 100). The 20-item scale was divided into four subsections: the legal use of psychedelics ($\alpha = .80$), the effects of psychedelics ($\alpha = .85$), risk assessment of psychedelics ($\alpha = .80$), and one’s openness to psychedelics ($\alpha = .87$). Each subscale consisted of 5 questions with higher scores reflecting more positive attitudes (minimum subscale score = 5, maximum subscale score = 25). Example items were, “If [psilocybin]-assisted

psychotherapy enters into regular practice, I would be interested in learning more about it,” and “the use of [psilocybin] can damage the nervous system” (scored reversely). An open-ended question at the end of the survey allowed participants to share any further thoughts or statements about the survey and its subject matter.

Procedure

Before survey distribution, Milligan University’s institutional review board approval was sought and acquired (IRB approval number: Exe2308161850). Recruitment took place on several online platforms: Amazon’s Mechanical Turk ($n = 30$), SPN ($n = 12$; www.socialpsychology.org), survey exchanges sites on Reddit ($n = 69$), and posts on the authors’ personal social media pages ($n = 124$; Facebook, Snapchat, and Instagram). The survey took an estimated 7–10 minutes to fill out and was completed at the participant’s convenience. Participants recruited from Amazon Mechanical Turk received financial compensation of 75 cents for their involvement.

Data Analysis

Data analysis was conducted using SPSS. Demographic characteristics were analyzed using descriptive statistics. Pearson correlations were calculated to understand the relationship between some demographics and attitudes (age, number of psychedelics used). One-way ANOVA analyses, chi-square, and t tests were utilized to determine if there were statistically significant differences in the attitudes toward psilocybin and PAT among the levels within nominal variables. Post-hoc tests were also run to further explore significant findings.

Results and Discussion

We sought to understand the opinions and attitudes a general U.S. population has about psilocybin and PAT. Overall, attitudes were relatively positive (APQ $M = 72.1$, $SD = 16.4$, min. score = 25, max. score = 100). Subscale means were also high (min score = 5, max score = 25); the highest was openness ($M = 19.7$, $SD = 4.9$), followed by legal use ($M = 18.7$, $SD = 4.2$), then risk assessment ($M = 17$, $SD = 4.2$), and finally, effects ($M = 16.7$, $SD = 4.7$). The overall score and all subscale means were higher compared to prior research by Žuljević (2022), which focused on psychedelics as a whole (Total APQ; $M = 66.2$, $SD = 15.2$). As in other studies, attitudes varied considerably, based on demographics. Table 1 displays the mean APQ scores for all categorical demographic variables as well as effect sizes for any significant differences between them. An Open Science Resource appendix (<https://osf.io/asxwk/>) displays means and standard

deviations concerning the four subscales that comprise the APQ (legal use, effects, risk assessment, and openness).

Age

Our sample was relatively young ($M_{\text{age}} = 35.8$, $SD = 15.9$; range: 18–82); we found no significant relationship between age and APQ ($r = -.08$, $p = .119$). Some studies have found age to be a significant predictor of attitudes, specifically that those younger in age tend to have more positive attitudes on the subject. (Corrigan et al., 2022; Wang et al., 2023; Žuljević et al., 2022). Other studies, however, have found age to be unrelated (Meyer et al., 2022). Due to the contradiction with this variable, further studies may need to be conducted to determine if age is a reliable predictor of attitudes towards PAT or whether other factors moderate that relationship, such as knowledge or experience.

Gender

Men had higher mean APQ scores ($M = 76.3$, $d = .4$, $p = .003$) compared to women ($M = 69.9$). This difference was found in all four APQ subscales (see <https://osf.io/asxwk/>), consistent with prior studies in which men tended to view psychedelics, and specifically psilocybin, more positively than women (Barnett et al., 2018; Žuljević et al., 2022). Men had more self-reported knowledge of psilocybin ($\chi^2 = 33.25$, $df = 3$, $p < .001$), consistent with other studies (Corrigan et al., 2022). Men also reported more experience with psilocybin ($M = 2.6$, $SD = 2.4$, $p < .001$) when compared to women ($M_{\text{experience}} = 1.0$, $SD_{\text{experience}} = 1.9$), similar to previous studies (Matzopoulos, 2022; Yockey & King, 2021).

Race

As displayed in Table 1, the differences in mean APQ scores amongst racial groups were not significant ($\eta^2 = .03$, $p = .145$). It must be noted, however, that there was not much racial diversity in the sample, which is a weakness. Prior literature does not have much to say about race and attitudes towards psilocybin, outside of work done on psychoeducation (Carter et al. 2023), which found no significant difference between race and attitudes before education.

Education

Attitudes towards psilocybin did not seem to vary based on educational background ($\eta^2 = .00$, $p = .494$). Previous work has not displayed a definitive answer in regard to education; Žuljević et al. (2022) found those who were less educated held more positive opinions on psychedelic-assisted therapies, whereas Yockey and King (2021) found

educated individuals were more likely to have tried psilocybin. The lack of significance in this variable could be indicative of a shift in public perception where attitudes towards PAT is less dependent on a formal education. The world is changing, such that endless knowledge is quite literally at our fingertips (Purcell & Raine, 2014). Rather than depending on formal education, one could look at a slew of online platforms or learn from another’s personal experiences via social media and online forums. Future research might take a deeper

look into where people are getting their information to better understand what is driving these shifts in attitudes.

Religious Affiliation

Nonreligious participants displayed much higher mean APQ scores, compared to those who were religious ($\eta^2 = .17, p < .001$; see Table 1). These scores were also reflected in subscale analyses (see <https://osf.io/asxwk/>). The effect sizes for each of its subscales were relatively large (legal use $\eta^2 = .16, p < .001$; effects $\eta^2 = .19, p < .001$; risk

TABLE 1
Mean APQ Scores and Size of Differences Between Levels of Various Demographic Variables

Demographic	N	%	M	SD	Effect Size	Demographic	N	%	M	SD	Effect Size
Age					$r = -.08$	Subjective Social Status					$\eta^2 = .02$
Gender					$d = 0.40^{**}$	Poor	18	7.7%	70.9	(18.2)	
Men	85	36.2%	76.3	(15)		Working Class	69	29.4%	72.9	(17.2)	
Women	141	60%	69.9	(16.5)		Middle Class	126	53.6%	70.9	(16.1)	
Race					$\eta^2 = .03$	Affluent	21	8.9%	79.6	(10.4)	
White	207	88%	72.1	(16.6)		HealthCare Profession					$d = 0.16$
Black	6	2.6%	69.2	(18.4)		Employed	23	9.8%	71	(16.5)	
Asian American	6	2.6%	62.3	(7.5)		Not Employed in	212	90.2%	72.3	(16.4)	
Hispanic	9	3.8%	83.4	(10.2)		Data Source					$\eta^2 = .13^{***}$
Other	7	3%	69.6	(13.5)		MTurk	30	12.8%	62.5	(14.4)	
Education					$\eta^2 \approx .00$	Social Media	124	52.8%	69.6	(16.6)	
No College	75	31.9%	73.3	(17.2)		Social Psych Network	12	5.1%	80.3	(11.4)	
Undergraduate Degree	110	46.8%	70.8	(15.5)		Reddit	69	29.4%	79.5	(13.8)	
Graduate-level	50	21.3%	73.4	(17.1)		Knowledge of Psilocybin					$\eta^2 = .25^{***}$
Religious Affiliation					$\eta^2 = .17^{***}$	None	39	16.6%	59	(13.5)	
Religious	158	67%	67.5	(16.7)		A little	90	38.3%	68.3	(15.9)	
Not Religious	77	32.7%	81.7	(10.6)		Moderate	71	30.2%	79	(13.9)	
Political Affiliation					$\eta^2 = .17^{***}$	A Lot	20	8.5%	82.5	(10.6)	
Republican	53	22.6%	61.5	(17.1)		A Great Deal	15	6.4%	83.4	(12.3)	
Democrat	110	46.8%	77.5	(13.2)		Framing of Prior Knowledge					$\eta^2 = .27^{***}$
Independent	51	21.7%	74.1	(14.4)		Negative	52	22.1%	58.7	(16.1)	
No Preference	15	6.4%	64.5	(20.7)		Neutral	83	35.3%	71	(15.4)	
Disability Status					$d = 0.25^*$	Positive	97	41.3%	80.7	(11.4)	
Disabled	66	28%	75	(14.7)		Experience with Psychedelics					$r = .13^*$
Not Disabled	168	71.5%	71	(16.9)		Experience with Psilocybin					$\eta^2 = .16^{***}$
Mental Health Disorder					$d = 0.37^*$	Prior Use	105	44.7%	79.5	(13.4)	
Diagnosis present	41	17.4%	77.1	(13.9)		No Prior Use	128	54.5%	66.4	(16.7)	
Not present	194	82.6%	71.1	(16.7)							
Military Service					$\eta^2 = .01$						
Served	19	8%	66.4	(15.4)							
Not Served	143	60.9%	71.3	(16.6)							

Note. * $p < .05$. ** $p < .01$. *** $p < .001$

assessment $\eta^2 = .13, p < .001$; openness $\eta^2 = .08, p < .001$). This significance is reflective of prior research (Corrigan et al., 2022) showing nonreligious individuals to have more positive views of psilocybin. These numbers likely reflect hesitancy amongst religious individuals to trust a schedule one substance as a potential therapeutic mechanism. Unfortunately, the “religious vs. nonreligious” analysis was necessary due to the homogeneity of the sample (75.3% identified as Christian). This limits the ability to investigate differences among specific religious groups (Jewish, Muslim, etc.).

Political Affiliation

Democratic participants held more positive attitudes towards psilocybin ($M = 77.5, SD = 13.2, \eta^2 = .17, p < .001$; see Table 1 for reference) while respondents who leaned more Republican displayed the most negative attitudes towards psilocybin ($M = 61.5, SD = 17.1$). In looking at subscales and post-hoc tests, individuals without a political preference displayed more negative attitudes when it came to the legal use of psilocybin ($M = 16, SD = 5.7, p < .001$) as compared to Republicans ($M = 16.3, SD = 4.2$) who displayed the lowest mean scores in every other subscale. While left-leaning individuals in this study displayed higher attitudes toward PAT, being left-leaning does not necessarily cause higher attitudes. However, democrats tend to have personality traits such as high openness and agreeableness (Furnham & Fenton-O’Creevy, 2018), which may moderate the relationship. Additional research into how political identity may affect attitudes toward this type of treatment could be worthwhile.

Disability Status

There was no significant difference in opinions between those who reported having a disability and those who identified as “not disabled” ($d = .25, p = .09$). Although previous literature has looked at the attitudes of patients (palliative care and mental health service users), there has yet to be a specification between the attitudes of those who identify as disabled or not.

Mental Health Disorder

Those who reported having a mental health disorder displayed slightly higher APQ scores overall ($M = 77.1, SD = 13.9$), compared to those who reported not having a mental health disorder ($M = 71.1, SD = 16.7, d = .37, p = .031$). When looking at subscales (see <https://osf.io/asxwk/>), legal use ($\eta^2 = .03, p = .005$) and openness ($\eta^2 = .02, p = .022$) were significant, whereas effects ($\eta^2 = .01, p = .207$) and risk assessment ($\eta^2 = .01, p = .134$) were not. This is consistent with research by Corrigan et al. (2022), who found relatively positive attitudes toward

PAT among mental health service users. A limitation of this variable is the reliance on self-report, which may be based only on self-diagnosis in some cases.

Military Service

There was not a significant difference in APQ scores between those who served in the military compared to those who had not ($\eta^2 = .009, p = .222$), nor were there any notable differences in any of the subscale scores (see <https://osf.io/asxwk/>). Out of the sample of 235 participants, only 19 (8%) indicated prior service. Although this is a larger percentage than the national average (6%; Schaeffer, 2023), further studies are needed to understand if military service is predictive of attitudes towards PAT.

Subjective Social Status

Self-reported social class (affluent, middle, working, low) was not related to overall attitudes ($\eta^2 = .02, p = .144$), nor any of the subscale scores (see <https://osf.io/asxwk/>). Unfortunately, we found no prior research on this specific variable or related measures. A weakness found in this particular variable is that social status was self-reported and dependent on subjective interpretation. Future studies may look at other methods of operationalizing this variable (e.g., annual income) before ruling it out as a predictor of attitudes.

Healthcare Profession

Those who were employed in the healthcare sector did not display significant differences in overall attitudes towards psilocybin when compared to those who did not work in that profession ($d = .16, p = .72$), nor any of the subscales (see <https://osf.io/asxwk/>). Previous studies targeting mental health professionals tend to display cautious, yet curious, attitudes toward psychedelic-assisted therapies and PAT (Davis et al., 2022; Meyer et al., 2022). Despite this trend in studies targeting professionals specifically, this lack of significance between professionals and laypeople is also reflected in previous studies (Žuljević et al., 2022). We did not make a specific effort to target this population, although 9.7% of our sample indicated they were healthcare workers, which is slightly less than the national average for this population (10.8% as of 2023; Telsford et al., 2024). Nevertheless, the sample size of healthcare workers ($n = 23$) still limits statistical power for this specific variable.

Data Source

Participant source (social media, MTurk, SPN, and Reddit) was highly predictive of attitudes toward PAT ($\eta^2 = .13, p < .001$). The group with the most positive opinions of psilocybin were volunteers from SPN

($M = 80.3$, $SD = 11.4$), followed closely by survey exchange subreddits ($M = 79.5$, $SD = 79.5$). The lowest score was produced by participants from MTurk ($M = 62.5$, $SD = 14.4$). These notable differences were reflected in the four subscales as well (legal use $\eta^2 = .11$, $p < .001$; effects $\eta^2 = .13$, $p < .001$; risk assessment $\eta^2 = .09$, $p < .001$; openness $\eta^2 = .11$, $p < .001$; see <https://osf.io/asxwk/>). SPN and reddit users were all volunteers presumably motivated to either exchange their survey participation for interest in their surveys or to take academic surveys of interest to them. SPN is a site dedicated to sharing surveys and online experiments among academics, students, and those interested in social psychological research. Thus, people more open to psilocybin may have been more willing to take the survey. Similarly, those on the reddit sites may have been more or less inclined to take a survey titled “Attitudes towards psychedelic-assisted therapies,” based on their interests. Therefore, it is possible the motivation for participants from Reddit and SPN was based on prior interest in the subject of psilocybin and a desire to share their views with someone, rather than a motivation to either get paid (MTurk) or help out someone already known to them on social media.

Knowledge of Psilocybin

Participants self-reported how much knowledge they had about psilocybin with a single item (“Prior to taking the current survey, how much knowledge would you say you have about psilocybin?”). These responses were compared against mean APQ scores. There were significant differences between the five knowledge groups (none, a little, moderate, a lot, a great deal; $\eta^2 = .25$, $p < .001$). Those who reported “a great deal” of knowledge had the most favorable opinions ($M = 83.4$, $SD = 12.3$) while those who reported no prior knowledge had the lowest ($M = 59$, $SD = 13.5$). These notable differences were also found in the scale’s four subscales (see <https://osf.io/asxwk/>). Prior knowledge was found to be significant in five other studies (Bhuiya et al., 2023; Meir et al., 2023; Meyer et al., 2022; Wang et al., 2023; Žuljević et al., 2022), suggesting that prior knowledge may be a reliable predictor of PAT attitudes. Knowledge towards psilocybin has been measured in both a verifiable way through administering a test to participants (see Žuljević et al., 2022), and via self-report methods (Meyer et al., 2022). Although providing a “knowledge test” to participants may have been a more reliable measure of prior knowledge of psilocybin, Žuljević et al. (2022) found that this test ended up increasing the number of participants who dropped out of the study, due to feeling like they did not have enough knowledge on the subject to continue. Thus, we utilized a self-report

measure despite the risks that come with self-reporting. The more knowledge an individual claims to have on the subject, the more comfortable they seem to be with PAT. This is backed by Carter et al.’s 2023 study, in which participants displayed more positive views of psychedelic therapy following education on it.

Framing of Prior Knowledge

We asked respondents to rate the valence of their prior knowledge with a single question (“From what you’ve seen or heard, how has psilocybin been portrayed?”) using a 5-point scale (anchored by “all negative” to “all positive”). Presumably, more positive information would be associated with more positive attitudes. We grouped respondents into three possible groups based on their ratings (mostly or all positive, neutral, or mostly or all negative) and found a large statistical difference between those three groups ($\eta^2 = .27$, $p < .001$) on APQ scores. Participants with positively framed prior knowledge displayed more positive attitudes towards psilocybin, while those with negative framing displayed lower attitudes (see Table 1). Large effect sizes were also found in each of the subscales, with negative framing being associated with lower subscale means across every category (<https://osf.io/asxwk/>). Arguably, this measure of prior knowledge is highly subjective and likely influenced by biases such as selective memory, confirmation bias or availability heuristics. Furthermore, its relationship with attitudes probably goes in both directions. For example, someone who reports negative perceptions may be more likely to report that what they have seen or heard about psilocybin is also negative. Nevertheless, prior research has shown that education about psilocybin can increase positive attitudes toward it (Carter et al., 2023). Thus, education about PAT might be one means of reducing stigma around this treatment and increasing openness to it.

Prior Experience with Psychedelics

Participants self-reported prior experience with psychedelics by describing their use of nine different psychedelics (min. = 0, max. = 9, $M_{\text{experience}} = 1.6$, $SD = 2.2$). Experience with psychedelics was found to be positively correlated with APQ score ($r = .13$, $p = .042$). Out of every subscale analysis, experience with psychedelics was only significantly correlated with the effects of psilocybin ($r = .22$, $p < .001$). This correlation makes sense, as those who have more personal experience with psychedelics as a whole would also have a greater understanding and be less wary about the effects of psilocybin. In previous research, prior experience with psychedelics was also associated with more positive attitudes towards psilocybin specifically (Corrigan et al., 2022; Meir et al., 2023; Meyer et al., 2022). Not surprisingly, those who

have felt confident in trying other psychedelics, even if they have not tried psilocybin, would likely have more positive attitudes about this drug too.

Prior Experience with Psilocybin

The participant's prior experience with psilocybin was analyzed separately, as psilocybin was the subject of the study. Among our sample, 105 participants (44.7%) reported having used psilocybin. This percentage is higher than the previous work conducted by Yockey and King (2021), which is consistent with their finding of a steady increase in usage over time. As one might expect, those who had used psilocybin in the past reported extremely positive attitudes toward psilocybin ($M = 79.5$, $SD = 13.4$, $\eta^2 = .16$, $p < .001$) when compared to those who have not used psilocybin ($M = 66.4$, $SD = 16.7$). This stark difference between these two groups was reflected in differences in the subscales as well (see <https://osf.io/asxwk/>). Meyers et al. (2022), Corrigan et al., (2022), and Žuljević et al. (2022), also reported more positive attitudes from those who have experience with the drug at hand.

Conclusion

The goal of our study was to understand what relationship exists between demographics and attitudes toward psilocybin and PAT. This research provided insight into what attitudes a general U.S. population may hold towards this emerging therapy. Overall, attitudes were fairly positive ($M = 72.1$) compared to prior studies (Žuljević et al., 2022) and several predictors were consistent with prior research. Namely, men, those without religious affiliations, and those who had experience using psilocybin had more positive attitudes (Corrigan et al., 2022; Žuljević et al., 2022). Prior knowledge was also a predictor of positive attitudes, which was consistent with previous studies (Wang et al., 2023; Žuljević et al., 2022).

It is important to take these differences in opinions into account when considering the future of PAT. Unlike other hallucinogens (e.g., LSD, PCP, Ketamine), psilocybin can be grown at home and there is no shortage of resources available to anyone willing to try. In some ways, this sets psilocybin apart from other psychoactive drugs and makes research into their use all the more pressing. According to Yockey and King (2021), the number of adults using psilocybin doubled in just three years, underscoring how rapid acceptance of this drug is becoming. Understanding the role that attitudes play in this process is crucial.

One likely reason for changing attitudes is the increasing awareness of positive results coming from clinical trials. Several news outlets have called this period of time a type of “psychedelic revolution” due to the success of psychedelics in medicine (Jacobs, 2021). Furthermore,

there has been an upsurge in popular media (e.g., “How to Change Your Mind,” “Have a Good Trip,” and “Luminous”) about the therapeutic potential of psilocybin and other hallucinogenic drugs. This is in stark contrast to the way hallucinogenic drugs and their proponents were once described (Nichols, 2020). Our survey results indicate that when people have more positive knowledge about psilocybin, they also have more positive attitudes. Thus, it stands to reason that as news stories and personal accounts of successful use of psilocybin become widespread, so might openness and curiosity. With this in mind, education on psilocybin should be presented factually and without bias. In the event that psilocybin continues to perform well in clinical trials, prospective patients deserve to receive honest education on PAT so they may make the best decision for their health and beliefs.

Limitations

The limitations of this study must be considered alongside its strengths. The descriptive nature of the current study requires a focus on demographic characteristics, which can be quite reductionistic. For example, our method of analysis was limited to looking at each demographic variable independent of others, which discounts the intersectionality of identities among respondents. In addition, our findings are likely limited by biases inherent in any nonrepresentative sample. For example, we found large differences between the platforms we used to find participants. Additionally, we could not use most of our MTurk responses due to the prevalence of bots and duplicate responses. Furthermore, this study is simply a snapshot of attitudes in the U.S. as of the fall of 2023. Based on prior trends, it is possible that attitudes may have already shifted, so this study may best serve as a baseline to compare future attitudes (Yockey & King, 2021). Finally, any data based on self-report is subject to recall bias; especially in regards to the “framing” variable.

Future Research

We did not ask respondents about their intent to use psilocybin in the future, but it would be worthwhile to see if attitudes are predictive of future usage, and if so, which aspects. Future research may inquire about the purpose of usage and whether participants would be willing to experiment with other innovative treatments. A deeper dive into some of the variables explored here may be effective as well (e.g., looking at specific religious identities rather than the presence of a religious affiliation). By examining these areas, we can continue to gain insight into the impact of emerging perspectives on psilocybin's role in healthcare.

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