



COLORADO

**Department of
Regulatory Agencies**

Division of Professions and Occupations

Date: June 12, 2025

RE: Federally Recognized American Tribes and Indigenous Community Working Group Report

The following report was produced by members of the Federally Recognized American Tribes and Indigenous Community Working Group (Working Group), in conjunction with Project Mosaic LLC¹, for the Colorado Department of Regulatory Agencies (DORA) regarding the Natural Medicine Health Act.

The Working Group was established in accordance with the requirements of Senate Bill 23-290. The purpose was to engage in and create a dialogue to identify issues related to the commercialization of natural medicine, natural medicine products, and natural medicine services for Tribal and Indigenous people, communities, cultures and religions. The Working Group convened monthly from May 2024 to February 2025 and was tasked with studying the following:

1. *Avoiding the misappropriation and exploitation of the Federally Recognized Tribes and Indigenous people, communities, cultures, and religions;*
2. *Avoiding the excessive commercialization of natural medicine, natural medicine product, and natural medicine services;*
3. *Any conservation issues associated with the legalization and regulation of natural medicine or natural medicine products, including the potential for further depletion of Peyote due to Peyote being a source of Mescaline; and*
4. *Best practices and open communication to build trust and understanding between the Federally Recognized Tribes and Indigenous people and communities, the Board, the Division, the State Licensing Authority, and law enforcement agencies for the purpose of avoiding unnecessary burdens and criminalization of traditional, Tribal, and Indigenous uses of natural medicine.*

The Working Group is a diverse assembly of Indigenous leaders and experts. Seven of the nine members are from Federally Recognized American Tribal Nations, one is Indigenous from a Non-Federally Recognized American Tribe, and one is Indigenous from outside the U.S.

The report cannot be construed as the findings of the Department of Regulatory Agencies or the Division of Professions and Occupations. The Department of Regulatory Agencies and the Division of Professions and Occupations reserve the right to evaluate this report, and any additional information, and establish its own policies, decisions, and recommendations.

We recognize this work was very difficult for members of the Working Group. We deeply appreciate their time, effort, and sacrifices in producing this report.

Sam Delp, Director

Colorado Department of Regulatory Agencies

Division of Professions and Occupations

¹ Project Mosaic is a Denver-based, Native-woman-owned consulting group which was hired by DORA to moderate the working group meetings and assist with the writing of this report. Jennifer Wolf, owner and CEO of Project Mosaic, served as project support and supervisor for the project.



COLORADO

**Department of
Regulatory Agencies**

Division of Professions and Occupations

2025 Report

**FEDERALLY RECOGNIZED AMERICAN TRIBES AND
INDIGENOUS COMMUNITIES WORKING GROUP**

Natural Medicine Program



I. Table of Contents

Contents

I.	1
	<i>About this Report</i> 2
II.	4
	<i>Historical Context and Policy Implications</i> 4
	<i>Key Issues and Challenges</i> 5
	<i>Recommendations</i> 5
III.	7
	<i>The Working Group Mandate</i> 7
	<i>The Formation of the Working Group</i> 8
	<i>Historical Context</i> 10
	<i>Literature Review</i> 15
IV.	21
	<i>Avoiding Misappropriation and Exploitation</i> 21
	<i>Avoiding Excessive Commercialization</i> 24
	<i>Conservation Issues</i> 26
	<i>Best Practices for Building Trust</i> 28
V.	39
	<i>Positionality Statements</i> 40
	<i>Final Recommendations</i> 44
VI.	54
	<i>Additional Definitions and Terminology</i> 54
	<i>Voting Matrix</i> 56
	<i>Biographies: Working Group Members and Moderator</i> 57

About this Report

This report is submitted to the Colorado Department of Regulatory Agencies (DORA) and the Natural Medicine Advisory Board. It was compiled on behalf of the members of the Federally Recognized American Tribes and Indigenous Community Working Group (Working Group) for DORA regarding the Natural Medicine Health Act by Christine Diindiisi McCleave, PhD(c), a consultant at Project Mosaic LLC.¹ Christine served as the moderator for the monthly Working Group meetings and project manager for the written report and is not an appointed member of the Working Group.

This report summarizes the public meeting discussions and written submissions of working group members. The Working Group abided by Colorado's Open Meetings Law (OML), often referred to as the "Sunshine Law," the OML, enacted in 1972, is designed to guarantee that public policy decisions at the state level are made transparently and openly. This law promotes transparency, accountability, and public trust by mandating that deliberations and decisions of public bodies be conducted in a public forum, with limited exceptions for confidential matters.

Disclaimers

While much of this report discusses legal issues, legislation, and rights, it is not intended to be legal advice.

Additionally, while the Working Group brings together Tribal and Indigenous leaders and experts from diverse tribal affiliations and regions from across the U.S. and outside the U.S., they are not exhaustive of all Indigenous voices globally. There is a vast diversity among Indigenous peoples and cultures around the world. While the working group attempted to represent Indigenous perspectives to the best of their ability, they could not encompass every Indigenous community or viewpoint impacted by the legislation. The working group remains committed to inclusivity and encourages ongoing dialogue with all Indigenous communities to make sure their voices are heard regarding the implementation and ongoing presence of the Natural Medicine Health Act.

The term "psychedelic" is used in this report to refer to the Western ways of relating to Indigenous Peoples' traditional medicines. Many Working Group members pointed out that this is not their word. However, it is used here when discussing the larger social movement.

Acknowledgments

The Working Group is grateful to the sacred medicine holders, the many community members, and the many Indigenous peoples impacted by this legislation, especially those who have advocated for and offered prayers for this work. We are grateful to the medicines—the powerful spiritual beings who guide us in our lives and work.

We extend our gratitude and acknowledgment to the Southern Ute Indian Tribe, the Ute Mountain Ute Tribe, and the Native Americans from dozens of other Tribal Nations living in Colorado. We especially

¹ Project Mosaic is a Denver-based, Native-woman-owned consulting group which was hired by DORA to moderate the working group meetings and assist with the writing of this report. Jennifer Wolf, owner and CEO of Project Mosaic, served as project support and supervisor for the project.

thank the Ute Mountain Ute Tribe for sending Tribal representatives to the Working Group. We acknowledge that while there are only two federally recognized tribes with reservations in Colorado, the state has been historically inhabited by the Apache, Arapaho, Cheyenne, Pueblo, Shoshone, Comanche, Kiowa, and Navajo tribes.

We are especially grateful to the following guest speakers, subject matter experts, and Indigenous leaders who came to share their time, thoughts, and knowledge with us in our public meetings: Dr. Osiris Garcia; Bia'ni Madsa' Juárez López; Miriam Volat, Ariel Clark, JD; and Dr. Enrique Antunes.

Project Mosaic is grateful to the division director, the director of the natural medicine program, the attorney general's office, and the staff for their support and trust in us with this work.

We are all grateful to the Colorado Indigenous community members and activists from various tribes who worked with Senate President Steven Fenberg and his team to draft amendments to this legislation to establish what is now the Federally Recognized American Tribes and Indigenous Communities Working Group. Without their efforts, this group and the language supporting the protection of Native and Indigenous traditional ways would not exist.

Recommended citation: Colorado Department of Regulatory Agencies. Federally Recognized American Tribes and Indigenous Communities Working Group Report. 2025.

II. Executive Summary

The Federally Recognized American Tribes and Indigenous Communities Working Group (Working Group) was established by the Colorado Department of Regulatory Agencies (DORA) under the Natural Medicine Health Act (NMHA) to address issues related to natural medicines affecting tribal and Indigenous communities. The Working Group, convened from May 2024 to February 2025, engaged in monthly discussions to evaluate key themes, including misappropriation, commercialization, conservation, and best practices for collaboration.

Historical Context and Policy Implications

The NMHA emerged within a broader historical framework of Indigenous oppression and cultural erasure. Indigenous communities have long faced systemic barriers to practicing traditional healing methods, exacerbated by colonial legal structures that criminalized their sacred medicines, highlighting the irony of the psychedelic movement. The passage of Proposition 122, which led to the NMHA, occurred without adequate tribal consultation, prompting concerns over the process and Indigenous representation and the harm of Indigenous exploitation.

Members of the Working Group emphasized that the NMHA was developed without consent from many Indigenous communities, reinforcing patterns of exclusion in policymaking. The law was framed within a colonial legal system that does not align with Indigenous governance structures, creating a disconnect between legislation and Indigenous cultural practices. The Working Group also noted inadequate tribal representation on the National Medicine Advisory Board, particularly from Federally Recognized Tribal Nations, as well as a lack of consideration of the rights of the Native American Church. The late inclusion of Indigenous perspectives through the amended bill was perceived as an afterthought that delayed meaningful integration into the rulemaking process.

The working group's primary objectives were taken directly from the amendments in the Senate Bill 23-290, which include discussing and addressing the following:

1. *Avoiding the misappropriation and exploitation of the Federally Recognized Tribes and Indigenous People, Communities, Cultures, and Religions;*
2. *Avoiding the excessive commercialization of natural medicine, natural medicine product, and natural medicine services;*
3. *Any conservation issues associated with the legalization and regulation of Natural Medicine or Natural Medicine Products, Including the potential for further depletion of Peyote due to Peyote being a source of Mescaline; And*
4. *Best Practices and open communication to build trust and understanding between the federally recognized Tribes and Indigenous people and communities, the board, the division, the state licensing authority, and law enforcement agencies for the purpose of avoiding unnecessary burdens and criminalization of traditional, Tribal, and Indigenous uses of Natural Medicine*

The NMHA reflects a broader history of imposed restrictions on Native American spiritual and ceremonial practices. Indigenous languages and traditions have been systematically suppressed, notably through forced assimilation in U.S. Indian Boarding Schools. Many families had to practice their traditions in secrecy due to legal prohibitions and social stigma, leading to deep and lasting harm within Native communities. Addressing these historical injustices requires a more inclusive and respectful approach to policymaking that acknowledges natural medicines' cultural and spiritual significance.

Key Issues and Challenges

1. **Misappropriation and Exploitation:** The Working Group underscored the risks of cultural appropriation and biopiracy, where Indigenous knowledge is commercialized without consent or equitable benefit-sharing. The historical exploitation of Indigenous plant knowledge, such as the use of peyote by non-Native entities, exemplifies the urgent need for protective measures.
2. **Commercialization of Natural Medicines:** The rapid expansion of the psychedelic industry threatens to transform sacred medicines into commodities, disregarding their cultural and spiritual significance. Members of the Native American Church (NAC) expressed concerns that increased demand for mescaline could endanger peyote populations, further restricting access for traditional practitioners.
3. **Conservation and Environmental Sustainability:** Overharvesting and habitat destruction pose serious risks to natural medicines like ayahuasca, iboga, and San Pedro cactus. Conservation efforts must prioritize sustainable harvesting practices and uphold Indigenous stewardship rights to ensure the long-term viability of these medicines.
4. **Best Practices for Building Trust:** The Working Group emphasized the importance of meaningful tribal consultation and community-driven decision-making processes. Historical injustices necessitate proactive engagement strategies that center Indigenous leadership in regulatory frameworks.

Recommendations

To increase the effectiveness of the Natural Medicine Program, the following should be established:

- **Integrating Indigenous Communities:** Establish quarterly meetings between regulatory agencies and Indigenous representatives to assess progress and address emerging concerns.
- **Data Collection and Impact Assessment:** Conduct ongoing research to measure NMHA's socioeconomic and environmental impact on Indigenous communities and sacred plant populations.
- **Legislative Adjustments:** Review and revise existing policies to ensure they align with Indigenous rights frameworks and environmental sustainability principles.

To address these concerns, the Working Group proposed the following recommendations:

- **Tribal Consultation and Representation:** Establish permanent Indigenous advisory roles within regulatory bodies to ensure ongoing engagement with affected communities.
- **Ethical Standards and Cultural Protections:** Implement legal safeguards against misappropriating Indigenous knowledge and restrict commercial enterprises from exploiting traditional practices.
- **Sustainability Measures:** Introduce conservation policies that protect endangered plant species and promote Indigenous-led environmental initiatives.
- **Economic Equity:** Develop mechanisms for revenue-sharing and reinvestment in Indigenous communities, ensuring they benefit from the commercial use of natural medicines.
- **Educational Initiatives:** Mandate cultural competency training for policymakers, healthcare professionals, and entrepreneurs working with natural medicines.

Further Implementation of the NMHA

The Working Group also deliberated on specific substances within the Natural Medicine Program and voted on the following recommendations:

- **Mescaline:** It recommended that Colorado not implement mescaline due to its connection to peyote, which is a sacred sacrament for Indigenous communities and faces sustainability concerns. (5 in favor, 1 abstention)
- **Iboga:** Recommended against implementation due to public safety concerns, limited research at high altitudes, and sourcing issues tied to international regulations. (5 in favor, 1 abstention)
- **Dimethyltryptamine (DMT):** Recommended against implementation due to concerns over Indigenous cultural misappropriation and sustainability issues. (4 in favor, 2 abstentions)
- **Psilocybin:** Recommended pausing implementation until Working Group recommendations are fully reviewed, particularly regarding cultural protections and equitable access. (6 in favor)

By integrating these recommendations, policymakers can foster a regulatory environment that respects Indigenous sovereignty, promotes sustainability, and mitigates commercialization risks. The Working Group's findings underscore the necessity of an equitable approach that upholds Indigenous rights while navigating the evolving landscape of natural medicine legalization. Implementing these measures effectively requires ongoing collaboration, commitment to Indigenous leadership, and continuous evaluation to adapt to emerging challenges.

III. Introduction and Background

The Working Group Mandate

In November 2022, Colorado voters approved Proposition 122, which led to the enactment of the Natural Medicine Health Act (NMHA). The legislation aimed to regulate the use of specific natural medicines within the state that are restricted under the Controlled Substances Act.

The NMHA includes the following medicines:

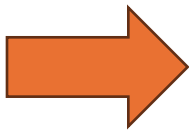
- Psilocybin mushrooms
- Dimethyltryptamine (DMT)
- Iboga and
- Mescaline-containing cacti (excluding Peyote)

See “Appendix” for the full definition of natural medicines according to SB23-290.

The NMHA allows people 21 and older to use and grow these natural medicines for personal, non-commercial purposes. It also establishes state-regulated “healing centers” where licensed facilitators can administer them in supervised settings.

The NMHA mandated that the Natural Medicine Advisory Board include members with “traditional tribal or Indigenous use of natural medicines.” The legislative declaration stated that,

“Considerable harm may occur to the federally recognized American tribes and Indigenous people, communities, cultures, and religions.”



However, despite these declarations, **the final advisory board did not include representatives from Federally Recognized American Tribes.**

Therefore, with the advocacy and input of community members, in May 2023, the Colorado legislature amended the law through Senate Bill 23-290 (SB23-290), which established the Federally Recognized American Tribes and Indigenous Communities Working Group. The amended bill emphasizes that the state should “consider the potential for direct and indirect harm that may occur to the federally recognized American tribes and Indigenous people, communities, cultures, and religions that have a connection to natural medicine.”

SB23-290 mandates the creation and purpose of the Working Group as follows:

(1) the director shall establish the Federally Recognized American Tribes and Indigenous Community Working Group for the purpose of engaging and creating a dialogue to identify issues related to the commercialization of natural medicine, natural medicine product, and natural medicine services for Tribal and Indigenous people, communities, cultures, and religions. The community working group shall study the following:

- (a) avoiding the misappropriation and exploitation of the Federally Recognized American Tribes and Indigenous people, communities, cultures, and religions;
- (b) avoiding the excessive commercialization of natural medicine, natural medicine product, and natural medicine services;
- (c) any conservation issues associated with the legalization and regulation of natural medicine or natural medicine product, including the potential for further depletion of peyote due to peyote being a source of mescaline; and
- (d) best practices and open communication to build trust and understanding between the Federally Recognized American Tribes and Indigenous people and communities, the board, the division, the state licensing authority, and law enforcement agencies, for the purpose of avoiding unnecessary burdens and criminalization of traditional tribal and Indigenous uses of natural medicine.

(2) the working group shall advise the board and the division on its findings and recommendations pursuant to the subjects identified in subsection (1) of this section.

(3) the director is encouraged to engage with the Federally Recognized American Tribes and Indigenous people who have significant experience with traditional use of natural medicine and other persons deemed necessary by the director for the purpose of this section, natural medicine product, and natural medicine services.

The Formation of the Working Group

The Federally Recognized American Tribes and Indigenous Communities Working Group (Working Group) is a diverse assembly of Indigenous leaders and experts convened to address the impacts of the Natural Medicine Health Act (NMHA) on tribal communities.

The Department of Regulatory Agencies (DORA) published an online application for the Working Group in January 2024. A total of 47 applications were submitted. The NMHA Program Director, Lorey Bratten, and the Project Manager, Christine Diindiisi McCleave, conducted first-round interviews with 24 applicants. DORA's Senior Advisor, Sam Bahrami, joined the Director and Project Manager for final interviews with 16 applicants. Applicants who identified as members of Federally Recognized Tribes were asked to submit tribal identification or enrollment information as part of the verification process. Finally, nine applicants were invited by the Director to join the Working Group. Of the nine working

group members, seven are from Federally Recognized American Tribal Nations, one is Indigenous from a Non-Federally Recognized American Tribe, and one is Indigenous from outside the U.S.

Five members reside within Colorado, and four live outside the state.

Three members identify as female, five as male, and one as non-binary.

The Federally Recognized American Tribes and Indigenous Communities Working Group is comprised of the following members:



- Thomas Allen (Arvada, Colorado)—Sac and Fox Nation of Oklahoma, Northern Arapaho
- Daniel Castro (Boulder, Colorado)—Mestizo Kichwa from Ecuador
- Katsi Cook (Akwesasne, New York)—St. Regis Mohawk Tribe
- Frank Dayish (Gallup, New Mexico)—Navajo Nation (Diné)
- Belinda P. Eriacho, MPH, MT (Tempe, Arizona)—Navajo Nation (Diné)
- Dr. Santiago Ivan Guerra (Colorado Springs, Colorado)—Chicano (Coahuiltecan)
- Terry G. Knight, Sr. (Towaoc, Colorado)—Ute Mountain Ute Tribe
- Marlena Robbins (Berkeley, California)—Navajo Nation (Diné)
- Councilman Darwin Whiteman Jr. (Towaoc, Colorado)—Ute Mountain Ute Tribe

The Working Group brought together Indigenous leaders and experts from diverse tribal affiliations and regions. Their collective insights were instrumental in representing Tribal communities in the implementation of the Natural Medicine Health Act.

Please see “Final Recommendations” for positionality statements and “Appendix” for full biographies.

Historical Context

The global and historical context behind this report, the NMHA, and the psychedelic movement involves a complex landscape and world history. The NMHA includes natural medicines from lands and Indigenous traditions worldwide, making the Working Group task enormous in scope. This legislation emerges against historical cultural, religious, and ceremonial prohibitions for Native Americans in the United States. For centuries, Indigenous peoples have faced restrictions on their traditional practices, including the use of natural medicines in spiritual and healing ceremonies. Indigenous languages, culture, and spiritual practices were prohibited and demonized through policies of forced assimilation and religious conversion in U.S. Indian Boarding Schools. Families with traditions of ceremony were often forced to practice in secret due to legal prohibitions and social stigma.

On the one hand, this historic legislation and the working group mandate have created an incredible opportunity to hear from members of Tribal Nations in the U.S. on the impacts of the psychedelic movement and legislation on Indigenous peoples, their religious practices, and their access to their traditional medicines.

On the other hand, while this legislation was historic in nature, the Working Group emphasized that history has not always been fair for Indigenous peoples. Members of the Working Group pointed out that this legislation was not consented to or led by many Indigenous peoples or members of Tribal Nations engaged in these religious practices with these medicines—a serious flaw in the legislation.

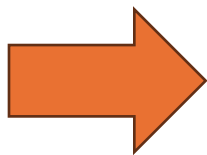
What the NMHA and the psychedelic movement at large seem to ignore is that since the beginning of time, plants have been used by Indigenous people around the globe for medicinal, utilitarian, and subsistence purposes. It has been estimated that over 70,000 plant species are classified for medicinal use in the world. Some of these plants have been and continue to be used in ceremonial practices to reach non-ordinary states of consciousness. From an Indigenous perspective, these entheogens or “sacred medicines” are part of the cosmology of Indigenous cultures and have been for millennia. This cosmology includes an interrelationship between humans and the plant kingdom. Each plant holds a wealth of wisdom and potential for healing humanity. Historically, throughout the globe, scientists and industry have looked to Indigenous knowledge and uses of plant medicines to create products and medicines for mainstream consumption and commodification. Many refer to this as biopiracy.

In addition to a history of exploitation, Indigenous peoples have endured religious persecution, demonization, and ethnocide at the hands of ethnocentric colonial worldviews, dogmas, and policies. Since the Federal Indian Boarding School Initiative started its 2021 investigation, over 500 Indian boarding schools were found to have operated in the U.S.² A *Washington Post* investigation found three times as many children died at U.S. schools than previously reported, and at least 76 Native American

² U.S. Department of the Interior. (n.d.). *Federal Indian Boarding School Initiative*. U.S. Department of the Interior. Retrieved January 20, 2025, from <https://www.doi.gov/priorities/strengthening-indian-country/federal-indian-boarding-school-initiative>

children died at boarding schools in Colorado.³ The boarding school policy was widely known to be a tactic of the U.S. government to diminish Tribal Nations, assimilate their children into Western society, and make way for the Westward expansion of the country. Since the gold rush created the territory and the subsequent state of Colorado, it has been complicit in the theft of American Indian homelands and the massacre of innocent Indigenous people in the name of American progress. The Truth, Restoration, and Education Commission (TREC) of Colorado collaborated with the People of the Sacred Land (PSL) to examine the cost of widespread land displacement and genocide of Native peoples in Colorado. The recently published TREC report explores the value of Indigenous homelands taken by the state of Colorado and the federal government, finding that approximately \$1.17 trillion worth of Indigenous homelands and over \$546 billion worth of minerals were extracted from Colorado.⁴

“The boarding school policy was widely known to be a tactic of the U.S. government to diminish Tribal Nations, assimilate their children into Western society, and make way for Westward expansion of the country.”



These assimilative Indian boarding schools prohibited the use of Indigenous languages and the practice of cultural ceremonies. It wasn't until the passage of the American Indian Religious Freedom Act (AIRFA) in 1978 that some legal protection was granted for Indigenous religious practices.

The Native American Church considers peyote sacred and uses it as a sacrament in their religious ceremonies. Some integrate traditional beliefs with Christian elements. Despite the peyote religion's profound significance, the use of peyote was criminalized under federal and state laws targeting controlled substances. However, the initial version of AIRFA lacked enforcement mechanisms and did not explicitly protect the use of peyote. Significant progress occurred with the 1994 amendments to AIRFA, known as the American Indian Religious Freedom Act Amendments. These amendments expressly protected the sacramental use of peyote by members of federally recognized tribes, stating that the use, possession, or transportation of peyote by Indigenous people for traditional ceremonial purposes would not be prohibited by the United States or any state.

³ The Denver Post. (2025, January 9). *Colorado examines Native American boarding school deaths*. *The Denver Post*. Retrieved January 20, 2025, from <https://www.denverpost.com/2025/01/09/colorado-native-american-indian-boarding-school-deaths/>

⁴ Village Earth. (2024, June). *Historic Loss Assessment*. People of the Sacred Land. Retrieved from https://peopleofthesacredland.org/wp-content/uploads/2024/06/Village-Earth-Historic-Loss-Assessment-Dave_Digital.pdf

In the context of peyote, some Chicanos (Mexican Americans), as detribalized people of the Southwest, have also had a significant stake in the effects of evolving access to psychoactive plant medicine (specifically peyote). At present, only four individuals are certified by the Drug Enforcement Agency (DEA) to harvest and provide peyote to the Native American Church. All 4 of these individuals are Chicanos/Mexican Americans from the South Texas-Tamaulipas border and older.

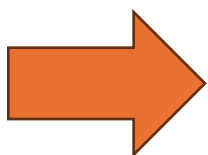
In addition to peyote, other natural medicines such as psilocybin mushrooms, ibogaine, and ayahuasca have long-standing historical and cultural significance among Indigenous communities around the world.

Recently, there has been a resurgence of the use of these sacred plants for their therapeutic potential to address and minimize conditions such as post-traumatic stress disorder, depression, suicidal ideation, addictions, and so much more. The Working Group expressed honor and gratitude to these plant relatives and the Indigenous lineage holders of these medicines.

Ongoing Challenges

Despite the historical and cultural significance of these natural medicines, Indigenous communities continue to face challenges related to legal restrictions, cultural appropriation, and conservation concerns. Strict drug enforcement policies have often criminalized the possession and use of natural medicines, even for traditional and ceremonial purposes. This has led to arrests and prosecutions of Indigenous practitioners and has disrupted the transmission of cultural knowledge. Although the movement to decriminalize these plant medicines is based on the idea that nature shouldn't be illegal, it fails to consider that natural medicines like peyote already have legal protections and decriminalization legislation conflicts with the AIRFA and threatens the medicine with endangerment from overharvesting, black market activity, illegal poaching, and increased demand on a vulnerable population.

The growing popularity of natural medicines in Western contexts has led to the commodification of sacred plants through the psychedelic underground and burgeoning legislative efforts. Commercial enterprises often profit from these substances without proper consent, recognition, or benefit-sharing with the Indigenous communities safeguarding these traditions.



Overharvesting and unsustainable sourcing of natural medicines threaten these plants' ecological balance and availability. For example, increased demand for ayahuasca and peyote can lead to the depletion of these species, impacting both the environment and the ability of Indigenous communities to access their traditional medicines.

Members of non-federally recognized tribes lack the same legal protections under AIRFA for their traditional practices, creating disparities within U.S. Indigenous populations regarding the right to use natural medicines.

Although some legislative efforts, including the Natural Medicine Health Act, seek to address these challenges by recognizing the traditional uses of natural medicines and involving Indigenous voices in the policymaking process, more work remains to respect Indigenous knowledge, protect cultural practices, and promote the sustainable use of natural resources.

The psychedelic movement and state legislation efforts in the United States have global implications for Indigenous communities around the world.

Elders and tradition holders of these sacred medicines have a long history of protecting the medicines from religious persecution by colonial legislation, criminalization, and anti-Indigenous religious rhetoric and institutions. In *Abya Yala* (South America), they are called *Huachuma* (San Pedro), *Ayahuasca* (vine of the soul in the Quechua), and *Ninos Santos* (little saints or psilocybin mushrooms). Stories exist of cartel movements in South America that have further criminalized, contaminated, and desecrated these sacred medicines, including tobacco and coca leaves. Indigenous peoples and leaders have been assassinated in the cartel drug wars and the global black market for these traditional medicines.

“More work remains to respect Indigenous knowledge, protect cultural practices, and promote the sustainable use of natural resources.”

The violence against Indigenous peoples has resulted in land theft, displacement, and ecosystem destruction, severely affecting their ability to grow their medicines and practice sacred rituals. Despite these challenges, Indigenous peoples have worked to preserve their traditions. In the late 1970s, elders of the Condor Nations (in South America) began sharing their medicine with Westerners to help raise awareness about colonialism, racism, oppression, and extractivism. However, the rise of New Age spiritual tourism has led to cultural appropriation, exploitation, gentrification, and environmental harm, undermining Indigenous communities' control over their traditions.

The psychedelic movement, a part of this New Age phenomenon, has spread pseudo-spirituality that further erases Indigenous practices and reinforces oppressive systems across the Americas. This has led to more violence against Indigenous ways of life and their connection to the land and ancestral medicines. Despite these challenges, Indigenous peoples continue to fight for representation and inclusion in both private and political sectors, often facing marginalization and a lack of acknowledgment of their cultural heritage.

The following Indigenous groups have released public statements and official letters expressing their concerns about the emerging legislation and decriminalization of ancestral medicines that lack effective Indigenous protections, harm reduction, and respect for their rights:

- National Congress of American Indians,
- 25th Navajo Nation Council,
- Native American Church of North America,
- Indigenous Medicine Conservation Fund,
- Peyote Way of Life Coalition,
- Shipibo-Conibo-Xetebo Council (COSHITOX),

- Association of Onanyabo Shipibo-Konibo, Ancestral Doctors (ASOMASHK),
- Oni Xobo Intercultural Organization (OIOX),
- Regional Organization of the Amazonian Nationalities or Ucayali (ORNAU),
- Colectivo Huachuma that represents the Curanderos and Curanderas of North Peru,
- Mazatec, Wixárica, Na'ayeri, O'dam, Audam and Meshikan Nations, and
- Caracol Mazateco and Mazatecos Autónomos en Resistencia.

Overall, there are too many Indigenous groups, communities, and Tribes impacted globally by this legislation to be able to speak on everyone's behalf. The Working Group has acknowledged the limitations of their representation in this process and encourages the State to continue to conduct Tribal and community outreach.

Literature Review

The Working Group has reviewed a selection of scholarly articles and public documents related to its mandate. The following is a summary of the discussion and findings of the literature review.

Psilocybin Mushrooms

Psilocybin-containing mushrooms have been used for millennia by Indigenous peoples in Mesoamerica for religious and healing purposes. Known as “teonanácatl,” or “flesh of the gods,” by the Aztecs, these mushrooms played a central role in spiritual ceremonies aimed at connecting with the divine, seeking guidance, and healing illnesses. The Mazatec people of Oaxaca, Mexico, have maintained a rich tradition of mushroom ceremonies led by healers or curanderas.

In the mid-20th century, Western interest in psilocybin mushrooms grew after ethnomycologist R. Gordon Wasson published accounts of his experiences with Mazatec curandera María Sabina in 1957. However, this attention led to the exploitation and disruption of Indigenous communities, as well as increased legal restrictions. By 1970, psilocybin was classified as a Schedule 1 substance under the Controlled Substances Act in the United States, effectively criminalizing its use and creating barriers for traditional practitioners.

According to Gerber et al. (2021), the current approach to psilocybin research focuses on how pharmaceutical companies are patenting innovations derived from Indigenous knowledge without offering compensation or reciprocity to the communities, such as the Mazatecs, who have preserved these practices for centuries.⁵ Gerber et al. (2021) argue that this exploitation is part of a broader neoliberal and colonial mindset that disregards the rights and contributions of Indigenous peoples, noting that researchers often conduct studies without properly consulting or respecting these communities and even claim to have received permission. However, the details of these agreements are unclear. “Since these Mazatec rituals became public in 1957, no one has sought reparation or reciprocity with the communities in a fair manner. This implies extraction in all aspects and meanings, including abuse of the Mazatec people’s hospitality.” Gerber et al. (2021) call for justice and reparation, emphasizing that the Mazatec people should benefit from recognizing and using their knowledge. It suggests that reflecting on these ethical issues could lead to more equitable relationships with Indigenous communities and a shift from extractive practices favoring reciprocal arrangements.

Ayahuasca

Ayahuasca is a traditional Amazonian brew made from the *Banisteriopsis caapi* vine and the leaves of the *Psychotria viridis* plant, which contain the psychoactive compound DMT (dimethyltryptamine). Indigenous peoples of the Amazon basin—including the Shipibo-Conibo, Asháninka, and Shuar among others—have used ayahuasca for centuries in rituals, healing ceremonies, and spiritual exploration. The brew is considered a sacred medicine that facilitates communication with the spirit world, provides guidance, and promotes physical and psychological healing.

⁵ Gerber K., García F, Ruiz, A, Ali I, Ginsberg, N, and Schenberg, E. “Ethical Concerns about Psilocybin Intellectual Property” *ACS Pharmacology & Translational Science* 2021 4 (2), 573-577. DOI: 10.1021/acsptsci.0c00171 <https://pubs.acs.org/doi/epdf/10.1021/acsptsci.0c00171>

In recent decades, Ayahuasca has attracted global interest for its potential therapeutic benefits in treating depression, PTSD, and other mental health conditions. However, its legal status remains complex. In the United States, DMT is classified as a Schedule I substance, but certain religious groups have obtained legal exemptions for ceremonial use. Notably, the União do Vegetal (UDV) and the Santo Daime churches won legal battles that recognized their rights under the Religious Freedom Restoration Act, allowing them to import and use ayahuasca in their religious ceremonies.

Hay (2020) discusses the development of three distinct Brazilian ayahuasca religions: Barquinha, Santo Daime, and União do Vegetal (UdV).⁶ The Santo Daime faith, which has a large following in Brazil, Europe, and North America, integrates Catholicism with ayahuasca rituals. It uses hymns and visions to explore inner turmoil. The rituals, which increasingly involve spirit possessions, reflect the beliefs of its wealthier urban followers. Santo Daime also emphasizes communalism, where one person's spiritual journey impacts everyone in the group.

Hay (2020) notes that Western adaptations of ayahuasca rituals, particularly in tourist-focused settings, have diverged from traditional practices according to Marc Aixelà of the International Center for Ethnobotanical Education. These rituals have shifted to cater to Western desires for psychological healing, often eliminating Amazonian spiritual elements, such as icaros (traditional songs), and replacing them with soothing music. Additionally, rituals have been altered to lengthen dietary restrictions and enhance the brew's effects, leading to more intense visions. Some critics, including anthropologists and Indigenous groups, view this trend as a form of cultural colonization.

Bufo with N,N-Dimethyltryptamine (DMT)

According to Villa (2023), the Sonoran Desert Toad (*Incilius alvarius*) is the only vertebrate known to produce the psychedelic substance known as 5-MeO-DMT.⁷ However, various factors already threaten the species, including climate change, habitat loss, industrial mining, agriculture, pollution, invasive species, and poaching. Amphibian populations have been declining globally, with the Sonoran Desert region facing similar challenges. *I. alvarius*' range is predicted to shrink by 23%, moving closer to riparian and coastal areas. Addressing this issue requires a bio-cultural approach that combines technical, legislative, and public efforts to raise awareness, promote respect for the species, and protect biodiversity. This approach should emphasize mutual reciprocity and oppose the exploitation of bio-cultural heritage.

Ibogaine

Ibogaine is a naturally occurring psychoactive substance found in the root bark of the iboga plant (*Tabernanthe iboga*), native to West Africa. For centuries, it has been used in traditional Bwiti ceremonies among the Fang, Mitsogo, and other ethnic groups in Gabon, Cameroon, and the Republic of Congo. Ibogaine is also used in spiritual initiation rites, healing rituals, and communication with ancestral spirits.

In the 1960s, ibogaine gained attention in Western countries for its potential in treating substance use disorders, particularly opioid addiction. Despite promising anecdotal reports, concerns over safety and

⁶ Hay, M. (2020, November 4). The Colonization of the Ayahuasca Experience. *JSTOR Daily*. Retrieved from <https://daily.jstor.org/the-colonization-of-the-ayahuasca-experience/>

⁷ Villa, R. A. (2023). Toad in the road: Biocultural history and conservation challenges of the Sonoran Desert Toad. *Journal of Psychedelic Studies*, 7(S1), 68–79. <https://akjournals.com/view/journals/2054/7/S1/article-p68.xml>

its psychoactive properties led to ibogaine being classified as a Schedule I substance in the United States. This classification limited research opportunities and restricted access, impacting both scientific understanding and the preservation of traditional practices.

Recent developments have brought attention to ibogaine as a potential treatment for opioid use disorder, with Kentucky almost allocating \$42 million for research, a California bill proposing its decriminalization, and a new film debut at the Tribeca Film Festival about the healing powers of Iboga. However, this growing interest raises concerns about the ethical stewardship of ibogaine, a powerful compound derived from the iboga plant, which has sacred and ecological significance to Indigenous cultures in Africa.

In 2024, a woman died at an Iboga retreat in Costa Rica, bringing heightened scrutiny to the psychedelic retreat industry, especially concerning iboga, one of the most powerful psychedelic medicines. According to *DoubleBlind* magazine, a 40-year-old woman died from cardiac arrest during treatment at a retreat called Soul Centro.⁸ The case follows other fatalities linked to ibogaine, raising concerns about safety protocols, medical screening, and regulatory oversight. Costa Rica lacks specific laws to regulate these retreats, with authorities struggling to address the industry's lack of permits and accountability. Further investigations are ongoing.

According to Eastman and Barsuglia (2023), the surge in demand for ibogaine has not been matched by proper education, safety protocols, or sustainable practices, leading to potential risks such as medical complications and environmental damage.⁹ The authors highlight, “the seriousness of potential medical complications, harm and risk that individuals have experienced when attempting to take this plant on their own, including death or hospitalization” and note that Colorado has already had one indictment for an ibogaine-related death in 2023.

Iboga, which takes five to seven years to mature, is highly sensitive to growing conditions and is primarily found in the equatorial jungles of Gabon. The Gabonese government has protected Iboga by implementing the Nagoya protocol and making its exportation illegal.

Eastman and Barsuglia (2023) note that while Colorado might legalize ibogaine services by 2026, concerns remain about the risks of using ibogaine at high altitudes, where medical complications, such as arrhythmias, are more likely. The authors stated the following regarding Iboga safety:

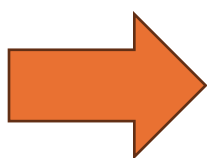
One major oversight has yet to be addressed regarding the potential safe use of iboga or ibogaine in Colorado. The average altitude elevation in Colorado is 6,800 feet above sea level. Working with ibogaine or iboga in high elevations increases medical risk, with severe risks at around 8-9,000 feet. At 5,000 feet, the risk of altitude sickness is amplified, which includes common symptoms of headache, nausea, trouble sleeping, and lethargy. Research from Swacon International Hospital in Nepal has found that

⁸ Lhooq, M. (2024, September 4). *Iboga clinics in Costa Rica go underground after woman's death*. *DoubleBlind*. <https://doubleblindmag.com/iboga-death-at-soul-centro/>

⁹ Eastman, T., & Barsuglia, J. (2023, June 15). Ibogaine's surge in popularity could be a huge loss for the Gabonese people unless we shift course. *Psychedelic Alpha*. <https://psychedelicalpha.com/news/ibogaines-surge-in-popularity-could-be-a-huge-loss-for-the-gabonese-people-unless-we-shift-course>

exposure to altitudes of 5,400 feet (roughly that of Denver) could lead to an increase of 14 mmHg in systolic blood pressure and 10 mmHg in diastolic blood pressure within a 24-hour period. Moderate to high altitudes are also associated with increased risk of arrhythmia. Ibogaine causes QT prolongation, which means that it increases the time between QT intervals, which can lead to fatal arrhythmias. Elevation decreases the oxygenation in the blood which can amplify this effect. These factors would theoretically increase the risk of medical complications of administering ibogaine in many regions of Colorado.

To our knowledge, there is no research on individuals ingesting iboga at high altitudes. According to David Nassim, Co-Director from Blessings of the Forest, the iboga plant grows best at sea level and currently it is not known if it can even grow far above that elevation. In decriminalizing or promoting ibogaine, a central element of responsibility and stewardship with this powerful medicine is informing the public of the added risks that high elevation may create, although medical supervision can help reduce some of these risks. High altitudes are not the historic location for administration of iboga.



The authors express that addressing these issues, including safety, sustainability, and respect for the plant's cultural significance, is crucial to avoid exploitation and harm moving forward.

Mescaline-Containing Cacti

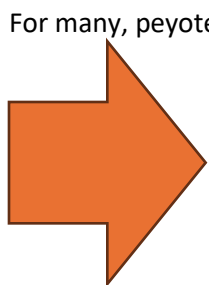
The growing interest in psychedelics, especially peyote, is raising alarms among American Indians, particularly the Diné tribe, who see it as a threat to their sacred traditions. They fear that decriminalizing peyote could lead to poaching and a black market, endangering the plant's survival due to its slow growth and limited habitat. There's also concern over the medicalization of peyote and the creation of synthetic mescaline, which some see as a disrespectful commercialization of a sacred medicine.

Indigenous leaders argue that synthetic alternatives diminish the spiritual significance of peyote, similar to cloning a religious figure. For many in the community, peyote is more than a plant—it's a spiritual elder that has helped them endure the trauma of colonization. The movement to commodify it is seen as an attack on their cultural heritage, prompting strong resistance to any efforts that threaten its preservation.

According to an article written in the *Guardian*, Justin Jones, a Diné peyote practitioner and legal counsel for the Native American Church of North America, a non-profit organization that advocates for more than 300,000 members said about synthetic mescaline, "How would Christians feel if Jesus Christ was cloned? And while the real Jesus is protected, people could do whatever they wanted to the clone."¹⁰

Frank Dayish, a member of the Working Group, was also interviewed for the same *Guardian* article. He shared how tribal law enforcement showed up at his home and seized his community's supply of peyote when he was younger, "The Navajo Nation police put all the peyote in a pile and poured gasoline on it and burned it. After they left, my father and his brothers would try to salvage what was too green to burn."

¹⁰ McGivney, A. (2023, December 19). Indigenous communities are protecting psychedelics like peyote from corporations. *The Guardian*. Retrieved from <https://www.theguardian.com/us-news/2023/dec/19/Indigenous-communities-protecting-psychedelics-peyote-corporations>



For many, peyote is seen as a sentient being, a sacred gift that has helped them survive the effects of colonization. Efforts to commodify it or turn it into a recreational drug are seen as offensive, with people fearing that the destruction of peyote could further harm their spiritual traditions. Many Native Tribes emphasize the emotional and cultural importance of preserving peyote, which they view as part of their heritage and survival. **For many members of the Native American Church, mescaline is inseparable from peyote as an inextricable part of the sacred being. For them, legalization or decriminalization of any mescaline-containing cacti is a threat to peyote.**

Regarding mescaline-containing San Pedro, the Huachuma Collective is a nonprofit dedicated to its conservation. They note that Peru contains 95% of San Pedro's wild habitat but that climate change, longer drought cycles, excess water affecting cacti, overharvesting, and increasing urbanization are all leading to its declining population and loss of habitat.¹¹

The Huachuma Collective's 2023 Statement includes the following:

This statement is our response to the mistreatment of Huachuma in Peru and around the world. It makes our position clear about issues such as commercial "San Pedro powder" and urges practitioners to give back to Andean communities. The statement is an urgent call from the guardians of Huachuma to the world to stop consuming wild Huachuma and to cultivate their own plants.

1. Huachuma Collective calls on practitioners of San Pedro ceremonies in Peru and around the world to stop using wild San Pedro and instead start cultivating the plant en masse from cuttings and seeds.
2. Huachuma Collective calls on practitioners of San Pedro ceremonies in Peru and around the world to recognize and honor the Andean communities of North Peru as the traditional guardians of the medicine, past and present, and to engage in reciprocity with those communities by giving back financially.
3. Huachuma Collective opposes the use of commercial "San Pedro powder" or "San Pedro chips," which exploits Andean communities and does not represent a sacred harvest or an honorable use of wild San Pedro.¹²

No literature was found on the impacts on Bolivian Torch, another mescaline-containing cactus. The Huachuma Collective asserts that human overexploitation is the principal threat to wild plants.

Indigenous Rights

Regarding "Ethical principles of traditional Indigenous medicine to guide Western psychedelic research and practice," Celidwen et al. (2022) note that key Indigenous policy considerations emphasize the importance of protecting traditional knowledge and practices, particularly regarding Indigenous medicine. These considerations include respecting Indigenous worldviews and ways of knowing and

¹¹ Sugden, L. (2023, May 5). The Visionary San Pedro Cactus: Healing, Sustainability, and Sacred Relationships [Video file]. Adventures Through The Mind. Retrieved from <https://www.youtube.com/watch?v=tXVEssTtdSM&t=1s>

¹² Huachuma Collective. (2023, December 2). A New Collective Statement from the Huachuma Collective. Retrieved from <https://huachumacollective.substack.com/p/a-new-collective-statement-from-the>

recognizing ethical principles such as reverence for nature, respecting Indigenous knowledge systems, and ensuring knowledge translation and education.¹³

According to Celidwen et al. (2022), a central issue is a need for stronger legal frameworks to protect the intellectual property of traditional Indigenous medicine at both national and international levels. The process involves Indigenous communities taking leadership in determining cross-border cooperation, capacity building, technology transfer, and collaboration to manage and preserve their knowledge. However, significant gaps remain in legal protections for Indigenous intellectual property, and formal regulation of traditional medicines is limited. Solutions require self-determined Indigenous laws that create policies which are culturally sensitive. The overall goal is to restore Indigenous authority, reconcile relations with Western systems, and establish fair reparations and benefit sharing for the use of Indigenous knowledge.

In May of 2024 the World Intellectual Property Organization (WIPO) at the United Nations, finalized a treaty to protect Indigenous traditional knowledge and cultural heritage. A traditional chief from the Huni Kui people of the Amazon attended and was interviewed by *The News Herald*. They reported that leader of the Huni Kui people of the Brazilian Amazon, Ninawa, remains optimistic about a potential United Nations treaty to combat biopiracy—the exploitation of traditional knowledge and genetic resources. Ninawa, dressed in traditional attire, participated in a ceremonial blessing at the WIPO diplomatic conference, where a treaty under negotiation for over 20 years was established to require patent applicants to disclose the origin of genetic resources and traditional knowledge.¹⁴

According to *The News Herald*, the Huni Kui, with communities in Brazil and Peru, are particularly concerned about biopiracy in the context of ayahuasca, which has become part of psychedelic tourism and is being researched for mental health treatments. Ninawa emphasized the threat posed by exploiting their culture and knowledge, which they consider sacred and integral to their spirituality, not mere economic resources. He highlighted the need for global recognition of Indigenous communities' non-economic, life-affirming relationship with nature, urging that the treaty could mark a crucial step in protecting their heritage.

“There are a lot of laboratories that want to do research (on ayahuasca) to treat people with psychological or mental problems,” said Ninawa. The community he leads, comprising 17,000 people in Brazil and 4,000 in Peru, feels in danger from biopiracy. “The way they enter our community, in search of traditional and ancestral knowledge, represents a very real, very strong threat,” he said. “We came here to bring a declaration from the Indigenous peoples of Brazil, to highlight the problems that the appropriation of our knowledge causes for our communities,” explained the Huni Kui

¹³Celidwen Y, Redvers N, Githaiga C, Calambás J, Añaños K, Chindoy ME, Vitale R, Rojas JN, Mondragón D, Rosalío YV, Sacbajá A. Ethical principles of traditional Indigenous medicine to guide western psychedelic research and practice. *Lancet Reg Health Am*. 2022 Dec 16;18:100410. doi: 10.1016/j.lana.2022.100410. PMID: 36844020; PMCID: PMC9950658. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9950658/>

¹⁴Pedrero, A. (2024, May 14). Amazonian chief at UN to combat traditional knowledge piracy. *The News-Herald*. https://www.news-herald.net/news/national/amazonian-chief-at-un-to-combat-traditional-knowledge-piracy/article_69781d12-f8a2-5e81-bf74-c59597d70007.html

leader. This knowledge “is part of our spirituality, it is not resources for the economy”. “It is very important that governments and leaders know: our relationship with Mother Nature is not economic but a way of being in a relationship with life.”

IV. Addressing the Themes Within the Mandate

Avoiding Misappropriation and Exploitation

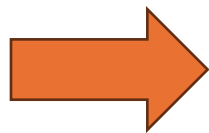
Defining Cultural Misappropriation

Misappropriation is the unauthorized and improper use of Indigenous cultural elements, traditional knowledge, or sacred practices by individuals, organizations, or entities for their own benefit, often without permission, acknowledgment, or compensation to the Indigenous communities.

Examples of misappropriation include using sacred symbols or designs in commercial products without permission, researching Indigenous knowledge or natural medicines and patenting the findings without involving or compensating the Tribal Nations, or appropriating traditional ceremonies or practices for tourism or financial gain.

The etymology of word misappropriation Prefix “mis-”: This prefix comes from the Old English/Norse “mis-,” meaning “wrongly,” “badly,” or “incorrectly.” The root word “appropriation” comes from the Latin word “appropriatus,” which means “to make one’s own” or “to take possession of.”

According to Roger Williams School of Law, cultural misappropriation is “[t]aking intellectual property, traditional knowledge, cultural expressions, or artifacts from someone else’s culture without permission.



This can include unauthorized use of another culture’s dance, dress, music, language, folklore, cuisine, traditional medicine, religious symbols, etc. It’s most likely to be harmful when the source community is a minority group that has been oppressed or exploited in other ways or when the object of appropriation is particularly sensitive,

e.g. sacred objects.”¹⁵

Cultural misappropriation includes the unauthorized or improper sharing of sacred medicine ceremonies by people other than those from the Indigenous lineage from which the ceremony originated.

The Native Governance Center’s Guide on Cultural Appropriation and the Wellness Industry defines cultural appropriation as “a particular power dynamic in which members of a dominant culture take elements from a culture of people who have been systematically oppressed by that dominant group.”¹⁶ Cultural appropriation often involves profit. Members of the dominant culture tend to profit off what they’ve stolen and do not compensate those from whom they’ve stolen.

¹⁵ Roger Williams University School of Law, “What Is Cultural Misappropriation And Why Does It Matter? 03-31-2021” (2021). SchoolofLawConferences,Lectures&Events. 134. https://docs.rwu.edu/law_pubs_conf/134

¹⁶ Native Governance Center. (n.d.). *Cultural appropriation and wellness guide*. Native Governance Center. Retrieved January 14, 2025, from <https://nativegov.org/resources/cultural-appropriation-guide/>

Additionally, the Intellectual Property Issues in Cultural Heritage Project at Simon Fraser University in British Columbia, Canada, defines appropriation as follows:

“At its most basic, ‘appropriation’ means to take something that belongs to someone else for one’s own use. In the case of heritage, appropriation happens when a cultural element is taken from its cultural context and used in another.”¹⁷

Furthermore, they define *misappropriation* as “a one-sided process where one entity benefits from another group’s culture without permission and without giving something in return. This becomes even worse when it involves intentionally or unintentionally harming a group through misrepresentation or disrespect of their culture and beliefs. Misappropriation can also entail considerable economic harm when it leads to profiting from the use of a cultural expression that is vital to the wellbeing and livelihood of the people who created it.”

Moreover, many Indigenous people agree that selling ceremonies is a clear violation of Indigenous ethics, values, and worldview.

Defining Exploitation

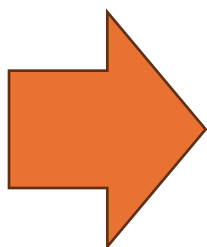
Exploitation refers to the unfair and unethical use of Indigenous resources, knowledge, or cultural practices, often for profit, while ignoring the rights, interests, and welfare of the Indigenous communities. It often involves taking advantage of power imbalances.

Examples of exploitation include extracting natural resources, such as medicinal plants, from Indigenous lands without consent and without sharing the benefits, setting up commercial enterprises that sell Indigenous-inspired products or experiences without fair compensation or involvement of the Indigenous communities, and using Indigenous knowledge in scientific research or product development without recognizing the source or providing equitable benefits.

The etymology of the word “exploitation” includes the root word “exploit” which comes from the Old French word “exploiter,” which means “to accomplish” or “to achieve.” This Old French term is derived from the Latin word “explicitare,” which means “to unfold” or “to set forth.” Thus, exploitation is the act of using something or someone unfairly or improperly for one’s own advantage, often in a harmful or unjust way.

According to Karoll (2024), “Many Indigenous communities in the United States and abroad have historically been exploited by biopiracy, executed by individuals and companies. This process often involves using patent law to grant the patent holder the sole right to manufacture and distribute a plant. Consequently, Indigenous peoples are criminalized for using the plant in their traditional way if they lose

¹⁷Indigenous Cultural Heritage Advisory Group. (2016). *Think before you appropriate: A guide for creators and designers*. Intellectual Property Issues in Cultural Heritage Project, Simon Fraser University. Retrieved from https://www.sfu.ca/ipinch/sites/default/files/resources/teaching_resources/think_before_you_appropriate_jan_2016.pdf



their rights to it.”¹⁸ **This is what members of the Native American Church are concerned about regarding the patenting of mescaline.**

Exploitation often goes hand in hand with cultural appropriation. Exploitation allows people to be rewarded for the heritage and labor of marginalized (Indigenous) communities without respect for cultural meaning or significance.

In defining exploitation in the context of natural medicines, it is important to consider how indigeneity is used to sell certain ceremonies' authenticity. An example would be a retreat center offering multiple medicine experiences and relying on Indigenous healers to bring legitimacy or authenticity to their retreats.

Impacts on Communities, Cultures, and Religions

The impact of misappropriation and exploitation on Native communities, cultures, and religions is profound, affecting cultural, economic, social, and psychological aspects. These practices can lead to the loss or dilution of cultural traditions, symbols, and knowledge that are integral to the identity and heritage of Indigenous peoples. Unauthorized use of sacred practices and symbols diminishes their significance, causing spiritual harm.

Indigenous communities often do not receive fair compensation for the use of their knowledge and resources, perpetuating economic disparities. Exploiting natural resources without benefit-sharing undermines their traditional livelihoods and economic sustainability. Additionally, ongoing exploitation reinforces the marginalization and disempowerment of Indigenous communities, damaging social cohesion and self-esteem. It also perpetuates historical and intergenerational trauma, negatively impacting the mental health and well-being of individuals and communities.

Some Indigenous people are leaving their traditional cultural training to work at profit-driven retreat centers, raising concerns about whether they can truly give informed consent without feeling exploited. Ensuring fair compensation and respect for individuals and their communities is crucial.

The NMHA further perpetuates the erasure of Indigenous self-determination and fails to honor the rights of Indigenous and Tribal Nations in decisions that directly affect them. **Psychedelic leaders who lack cultural and historical understanding and do not represent Federally Recognized Tribes or Indigenous communities impacted by the legislation exemplify the disconnect between psychedelic policymaking and the Indigenous communities they affect.** As a result, stakeholders, including private and pharmaceutical interests, as well as the general public, fail to fully grasp the consequences of their decisions for Tribal Nations and Indigenous communities.

Cultural appropriation dismisses the history and stewardship of Indigenous peoples, while exploitation distorts traditions, removing them from their original context and ignoring ongoing oppression. It also perpetuates harmful stereotypes of Indigenous peoples.

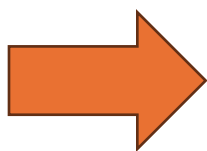
¹⁸ Karoll, L. (2024). The Psychedelic Surge and its Threats to Native American Communities. Brandeis University Law Journal, 11. <https://journals.library.brandeis.edu/index.php/blj/article/view/2305>

Dr. Garcia Cerqueda made several important points in his presentation to the Working Group on October 9, 2024. In particular, he mentioned that the implementation of the NMHA does not align with Mazatec practice in that they are using psilocybin to treat their illnesses (depression, anxiety, etc.) and are not related to or understanding the medicine the same way as traditional Mazatecans.

Indigenous ethics should be incorporated into psychedelics ethics, creating bridges between Western science and traditional holders and stewards of sacred plant medicines. Training programs should include (a) involvement of Indigenous knowledge holders when developing curriculum, (b) coursework on Indigenous ethics, and (c) training modules on Indigenous ways of knowing, including respect of sacred medicines, reciprocity to lineage and wisdom holders of medicines, resiliency, interconnectedness, and Indigenous views of altered states of consciousness.

Avoiding Excessive Commercialization

Defining Commercialization of Natural Medicines



“Excessive commercialization” means making something too focused on profit, often to the point where it overshadows the original purpose or value of that thing. Essentially, it turns everything into a product to be sold, which can be seen as exploitative or in poor taste.

The etymology of the word “excessive” as an adjective, “beyond what is necessary, proper, or right,” includes the root word “excess” meaning a going beyond ordinary, necessary, or proper limits; superfluity; undue indulgence of appetite, want of restraint in gratifying the desires; the amount by which one number or quantity exceeds another,” and which comes from Latin “excessus” meaning “departure, a going beyond the bounds of reason or beyond the subject,” from stem of *excedere* “to depart, go beyond,” or in Old French “exces” meaning extravagance or outrage.

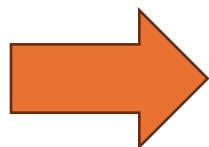
Commercialization is the process of managing or running something principally for financial gain. The etymology of “commercialization” includes the root word “commerce” meaning an “interchange of goods or property, trade,” especially trade on a large scale by transportation between countries or different parts of the same country, from French *commerce*, from Latin *commercium* “trade, trafficking,” from *com* “with, together” + *merx* (genitive *mercis*) “merchandise”. As a verb, “have dealings with.”

Additionally, the legislation of psychedelic medicines from around the world is also perpetuating and endorsing **biopiracy**. According to the Merriam-Webster Dictionary, biopiracy is “the unethical or unlawful appropriation or commercial exploitation of biological materials (such as medicinal plant extracts) that are native to a particular country or territory without providing fair financial compensation to the people or government of that country or territory.”

Impacts on Communities, Cultures, and Religions

There is great concern about the over-commodification of these medicines and their impact on communities, ecosystems, and cultural practices. The entry of ancient sacred medicines into the commercial industry presents potential harm to Indigenous Peoples by circumventing their authority as traditional stewards of this natural medicine. There is much complexity to consider and decipher surrounding Indigenous groups regarding federally recognized status within the United States or the

vast diversity of Tribal representation on different continents. **Indigenous peoples are being left out of critical policy, process, clinical, infrastructure, and associated therapies due to a lack of outreach or racial bias.** There is potential for an increase in interest and participation of non-native individuals in tribal ceremonies, thus endangering the medicine and core principles of the ceremonies. Tribal sovereignty in the U.S. is also at stake because it is not acknowledged through these types of legislation.



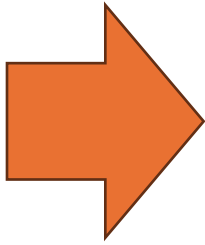
This legislation creates the circumstances for continued harm to Tribal Members and Indigenous People on several expected and indeterminable fronts. First, and perhaps most significantly, the popularity of these plant medicines potentially jeopardizes Indigenous communities' access to these ancestral plant medicines.

Overharvesting of ayahuasca source plants, Iboga, San Pedro, Peyote, and Bolivian torch, compromise the potential longevity of this significant plant medicine for the Indigenous communities that have relied on these plant medicines for centuries as more individuals seek access to the psychoactive compounds contained within these plants. The Bufo frog's longevity is also similarly compromised with the popularization of 5-MeO-DMT. Individuals seeking out these substances contribute to a global clandestine economy that increasingly compromises the ecologies of the regions where these plants naturally occur. Since the organisms naturally occur outside of Colorado's territorial boundaries, it is difficult, if not impossible, for us to be conscious or cognizant of the potential ongoing harm that the popularization of plant medicines has created in these communities and ecologies. Finally, historically, these plant medicines have been accessed through the exploitation and appropriation of the ancestral practices of Indigenous communities by Westerners. It is not without historical precedence to assume that a similar process of appropriating ancestral Indigenous practices will occur during the renewed popularization of these plant medicines.

Further impacts of commercializing sacred medicine through psychedelic legislation are exemplified by the fact that the NMHA was developed **without the input or consent of Tribal Nations** and Indigenous communities whose sacred traditions are central to the bill. Initially presented as a citizen-led initiative to address mental health, NMHA was driven by private interests and political action committees, overlooking the profound impacts on Indigenous peoples.

Colorado's Indigenous population is underrepresented, with many not participating in the decision-making process for NMHA, resulting in a severe lack of engagement with Indigenous voices. Although some Indigenous leaders have been included, they were tokenized—used for validation without genuine involvement. Furthermore, the rushed timeline of NMHA has placed undue burdens on Indigenous peoples to organize and mitigate harm, with significant delays in engaging Indigenous leaders.

The NMHA's oversight is especially apparent in its failure to represent the global scope of medicines included in the bill, which affects not only Native American tribes but also Mesoamerican, South American, and West African communities. The bill ignores the historical and ongoing harm caused by the U.S. government's policies against Indigenous people, including criminalization and displacement. Cultural misappropriation, biopiracy, and exploitation of Indigenous sacred practices remain major concerns, as the legislation commodifies their traditions without their consent.



NMHA also neglects the ethical issues surrounding the commercialization of Indigenous spiritual practices, particularly regarding new-age movements that appropriate sacred traditions for profit. The bill fails to address power imbalances or provide meaningful pathways for reconciliation, further perpetuating the erasure and exploitation of Indigenous cultures. Additionally, NMHA disregards the interconnectedness of ecosystems and the cultural wisdom of Indigenous peoples, with no mention of reciprocity or rights of nature.

Additionally, the legislation's approach to sacred medicines, like mushrooms and ayahuasca, lumps them together without recognizing their unique cultural and spiritual significance. This approach exacerbates the harm, as it enables further genocide and ethnocide through the involvement of policymakers with histories of anti-Indigenous policies.

Furthermore, commercializing natural medicines can potentially increase (not decrease) the black-market activity of these plants and fungi. Of major concern is how these plants, which are not indigenous to Colorado, **will begin to be cultivated within the state for use within the NMHA**. They will likely arrive through the black market illegally.

Conservation Issues

The conservation and ethical management of sacred plant medicines, such as Ayahuasca, Bufo frog, Iboga, San Pedro, Bolivian torch, and mushrooms, present significant challenges, including over-harvesting, mismanagement, and cultural harm from commercialization.

Ayahuasca: The components of Ayahuasca, particularly *Banisteriopsis caapi* and *Psychotria viridis*, face the risk of depletion due to overharvesting and poaching. This valuable medicine is also increasingly commercialized, with tourism and unregulated use threatening its sustainability and the integrity of its ceremonial and cultural contexts. Conservation efforts should focus on supporting the legitimate custodians of Ayahuasca and ensuring their voices and input are central to any initiatives. These efforts must be ethical, trauma-informed, and aimed at preserving biodiversity, protecting habitats, and promoting sustainable practices. There should also be strong safeguards against abuse and exploitation, ensuring that Ayahuasca is used responsibly and respectfully.

Bufo Frog: The Bufo alvarius frog, used for its psychoactive secretion, faces serious threats from overbreeding to meet demand, poaching, and the commodification of its secretions. The frog needs to be designated a protected species, with strict regulations and heavy fines for illegal possession and use. Additionally, there should be populations of Bufo frogs free from human interaction, allowing for natural breeding and preservation of the species' genetic diversity.

Iboga: Originating in Central Africa, Iboga is endangered due to overharvesting for its psychoactive properties. The international demand for Iboga presents complex challenges, involving local and global conservation efforts. More outreach and focused conservation efforts are needed to guarantee the long-term sustainability of Iboga as a natural resource and sacred medicine. According to *Psychedelic Alpha*, "Iboga is a plant that takes a minimum of five to seven years to grow before the alkaloids mature and the root bark can be harvested for use in ceremonies, and older plants yield a greater prominence

of iboga alkaloids.⁶ The plant is susceptible to its growing environment: Iboga is only known to successfully grow near sea level and in soil conditions found within the equatorial jungles on the planet. Some Bwiti elders dispute the ability to grow quality medicinal iboga outside of Gabon, due to iboga's unique relationship to its ecosystem, and the assertion that the principal alkaloids such as ibogaine are only produced in certain growing conditions."¹⁹

San Pedro: Similar to Peyote, San Pedro (*Echinopsis pachanoi*) faces the threat of overuse and commercialization. Efforts must be made to protect and respect this medicine as a sacred psychoactive plant, ensuring that it is not exploited or misused. There are concerns regarding the intersections between San Pedro and Peyote, particularly regarding the shared mescaline compound. Proper legal definitions and protections must be established to avoid undermining federal protection for Peyote. The sustainability of San Pedro requires clear guidelines for conservation and responsible use.

Bolivian Torch: A relative of San Pedro, Bolivian Torch (*Echinopsis lageniformis*) is becoming more recognized for its psychoactive properties. As demand for these cacti grows, there is a risk of hybridization and the creation of new varieties that blur the legal lines around these medicines. Like San Pedro, Bolivian Torch requires protections to prevent over-sourcing and guarantee its responsible use within Indigenous contexts.

Peyote: According to The Guardian, "concerns are multifold. Decriminalizing peyote could fuel poaching and a black market for the slow-growing cactus, whose limited habitat is already threatened by climate change and development. Traditional practitioners say that a sudden surge in demand might completely wipe out peyote from its natural environment."²⁰

Mushrooms: The growing popularity of psilocybin mushrooms presents similar challenges, particularly in the commodification and commercialization of Indigenous knowledge and practices. Conservation efforts must prioritize the preservation of native uses of these mushrooms and their ecosystems. It is important to document and protect the historical use of these medicines by Indigenous communities, ensuring that the commercialization of mushrooms does not harm their cultural and spiritual significance.

In summary, these plant medicines require careful conservation, ethical stewardship, and protection from over-exploitation. Collaborative efforts with Indigenous communities and conservation experts should guide the sustainable management of these resources, prioritizing the preservation of biodiversity and the cultural integrity of the traditions that have long used these medicines. Proper legal frameworks, accountability, and ethical considerations are crucial to prevent exploitation, mismanagement, and harm from commercializing sacred plants.

¹⁹ Eastman, T., & Barsuglia, J. (2023, June 15). Ibogaine's surge in popularity could be a huge loss for the Gabonese people unless we shift course. *Psychedelic Alpha*. <https://psychedelicalpha.com/news/ibogaines-surge-in-popularity-could-be-a-huge-loss-for-the-gabonese-people-unless-we-shift-course>

²⁰ McGivney, A. (2023, December 19). Indigenous communities are protecting psychedelics like peyote from corporations. *The Guardian*. Retrieved from <https://www.theguardian.com/us-news/2023/dec/19/Indigenous-communities-protecting-psychedelics-peyote-corporations>

Best Practices for Building Trust

There is a historical rift and context in which to consider regarding how to build trust with Indigenous communities. Biocultural approaches, community assessments, tribal consultation, following international laws, and observing Indigenous rights will go a long way. Some issues for Indigenous communities include access to defined Indigenous lands and jurisdiction.

Further exacerbating any trust-building process is the fact that **no agency, organization, or government has obtained consent from any Indigenous group or Tribal Nation to utilize their traditional medicines for ceremony, therapy, research, or any other activities.**

There are significant health disparities that need to be addressed for Native American populations. Many Native Americans in Colorado report higher levels of anxiety, excessive worrying, grief, and difficulty focusing. Approximately 66% have experienced anxiety, and 58% have dealt with excessive worrying in the past year. Despite these challenges, only 37% have consulted a health professional regarding their mental health.²¹ Native Americans in Colorado are more likely to perceive and experience unfair treatment in healthcare settings. This perception contributes to disparities in access to care and overall health outcomes.²² Systemic issues, including historical displacement and ongoing socioeconomic challenges, have led to housing instability among Native American populations in Colorado. Homelessness is a key determinant of poor health, exacerbating existing health disparities.²³ Older Native American adults in Colorado face compounded health disparities due to a lack of access to healthcare, health insurance, affordable food, and stable housing. These factors contribute to worse health outcomes among aging Native populations.²⁴

The following American Indian organizations in Colorado should be supported by anyone benefiting from Indigenous plant medicines, including the state of Colorado:

- **Native American Counseling and Healing Collective:** This is currently the only Native American and women-founded group practice in the Denver metro area.

²¹ Woodrum, J. (2021, November 3). *What Native Americans are worried about right now*. The Colorado Health Foundation. Retrieved from <https://coloradohealth.org/news/blog/what-native-americans-are-worried-about-right-now>

²² Thomas, T. (2022, October 13). *Racial discrimination and access to care in Colorado*. Colorado Health Institute. Retrieved from <https://www.coloradohealthinstitute.org/research/racial-discrimination-and-access-care-colorado>

²³ Denver Indian Health and Family Services, Denver Indian Family Resource Center, & Denver Indian Center. (2019, August). *Native American housing: Needs & opportunity in the Denver-Metro area*. The Colorado Health Foundation. Retrieved from <https://coloradohealth.org/sites/default/files/documents/2019-08/2019%20Native%20American%20Housing%20Presentation.pdf>

²⁴ Esposito, C. (2021, April 19). *Racial and ethnic health disparities lead to worse health outcomes among Colorado's aging population*. Colorado Health Institute. Retrieved from <https://www.coloradohealthinstitute.org/research/racial-and-ethnic-health-disparities-lead-worse-health-outcomes-among-colorados-aging>

- **Centers for American Indian & Alaska Native Health:** Established in 1986, CAIANH is the largest and longest-standing program of its kind in the country, striving to improve health outcomes for Native peoples through research, education, and information dissemination.
- **Denver Indian Health and Family Services:** As Denver's only Urban Indian Health Program, DIHFS provides culturally appropriate healthcare services to American Indian and Alaska Native adults, children, and families in the Denver Metropolitan area.
- **Denver Indian Center:** Founded in the 1970s, DIC serves the urban American Indian community in Denver by offering programs, support, resources, and connections to cultural heritage.
- **Native American Housing Circle:** Established in 2019, NAHC is a coalition of Native-led and Native-serving organizations focused on addressing the need for affordable housing for Native American people in Colorado.
- **Four Winds American Indian Council:** FWAIC provides a community space for Denver Native Americans, offering resources to meet cultural and physical needs while activating community members to advocate for political change.

The following recommendations focus on cultural sensitivity, legal considerations, and community involvement to effectively address the complexities surrounding the development of psychedelic legislation, particularly in relation to Native peoples and their sacred medicines. This approach validates respect for Indigenous sovereignty, fosters equitable access, and addresses concerns over the commercialization and exploitation of sacred plant medicines.

1. Cultural Sensitivity and Respect

- **Incorporate Indigenous Perspectives Early:** Creating the Federally Recognized American Tribes and Indigenous Working Group is a positive step. However, it was formed only after the framework was finalized, which led to excluding Indigenous voices in the legislative process. To avoid further marginalization, future legislation must involve Indigenous communities from the outset, respecting their deep connection to the land and sacred medicines.
- **Adopt Ethical Principles:** Legislation should adopt guiding principles such as reverence, respect, responsibility, relevance, regulation, reparation, restoration, and reconciliation. This framework can help address past harms and prevent the commodification and appropriation of sacred plant medicines.

2. Stakeholder Involvement and Representation

- **Establish Advisory Boards and Committees:** Form an advisory board of direct medicine carriers and stewards of natural, earth-based medicines to guarantee meaningful engagement and prevent cultural appropriation. Such a group would represent various tribes, communities, and Indigenous traditions, fostering an equitable and inclusive legislative process.
- **Guarantee Tribal Consultation:** The consultation process should be broad, involving diverse Tribal Nations, councils, families, and elders who have practiced traditional ceremonial ways for

at least 10 years. This should include those from both federally recognized and non-recognized tribes, ensuring all relevant voices are heard.

- **Foster Equity in Leadership:** Confirm leadership within these advisory boards and committees, reflect a balance of elders, gender equity, and community recognition, and avoid conflicts of interest, particularly those linked to financial benefits from commercialization.

3. Legislative Framework and Ethical Concerns

- **Learn from Past Colonial Dynamics:** Reflect on the history of plant medicines, such as Tobacco, Cannabis, Opioids, and Coca, that have been exploited and commodified. Understanding these cycles of exploitation can help avoid repeating mistakes, ensuring that sacred plant medicines are treated with the respect and reverence they deserve.
- **Support Indigenous Wisdom:** Elevate and amplify Indigenous knowledge not only in the context of plant medicine but also in areas like climate change, food conservation, and mental health. This broader recognition will guarantee that Indigenous contributions are valued and integrated into policy.

4. Economic Considerations and Community Benefits

- **Revenue Reallocation:** Implement a permanent tax on natural medicine facilities to fund Indigenous empowerment projects and environmental conservation efforts. This tax should be based on the facility's annual gross profits, and the funds should be directed toward cultural preservation, education, mental health support, and community-building initiatives.
 - **Tax Rate Structure:** Apply a tiered tax rate, with a lower percentage (0.5-1%) for smaller businesses and higher rates (1.5-3%) for larger, more profitable companies. This guarantees that businesses of all sizes contribute to Indigenous and environmental causes while maintaining financial viability for smaller enterprises.

5. Education and Training

- **Mandate Cultural Competency Education:** All educational training programs and licensure renewals for natural medicine professionals are required, including specialized courses on Native American history, the ethics of working with natural medicines, and Indigenous perspectives on healing and spirituality. Indigenous instructors should teach these courses with direct ties to the traditions and practices being taught.
 - **Curriculum Details:** Programs should cover the ongoing denial of spiritual practices, cultural misappropriation, and diversity, equity, and inclusion in relation to plant medicine. Continuing education requirements should include a minimum number of hours of relevant Indigenous studies to guarantee that the knowledge shared is culturally competent and respectful.

6. Ongoing Monitoring and Accountability

- **Form an Indigenous Concerns Taskforce:** Create a taskforce within the Natural Medicine Division to monitor ongoing issues related to the exploitation and appropriation of Indigenous practices. The taskforce would guarantee that cultural and ethical considerations remain central to policy development and enforcement.
- **Global Indigenous Council:** Establish a Global Indigenous Council to guide, monitor, and inform initiatives related to the Natural Medicine Health Act (NMHA) and other policies. This council would guarantee that global Indigenous perspectives shape the evolution of natural medicine laws.

7. Environmental Considerations

- **Conservation Efforts:** Include provisions for conserving sacred plant medicines, ensuring that their cultivation and harvesting do not deplete natural resources. Educate regulators and the public on the importance of sustainable practices to protect the environment where these medicines grow.

By integrating these recommendations into the legislative process, the state can create a framework that respects Indigenous sovereignty, guarantees equitable access to natural medicines, and promotes these practices' ethical, cultural, and environmental sustainability. This approach would not only honor Native peoples' contributions but also establish a model for responsible, culturally competent engagement with sacred plant medicines.

Additional Considerations

Multiple frameworks exist for including Indigenous rights in the psychedelic sector. Some of them are as follows.

The United Nations Declaration on the Rights of Indigenous People (the Declaration) is a global human rights instrument that establishes minimum standards for the well-being, dignity, and survival of Indigenous peoples. The following articles of the Declaration identify priorities for maintaining the rights of Indigenous populations in the wake of the potential concerns and harms presented by the popularization of natural medicine globally.

Article 12

1. Indigenous peoples have the right to manifest, practice, develop, and teach their spiritual and religious traditions, customs, and ceremonies; the right to maintain, protect, and have access in privacy to their religious and cultural sites; the right to the use and control of their ceremonial objects; and the right to the repatriation of their human remains.
2. States shall seek to enable the access and/or repatriation of ceremonial objects and human remains in their possession through fair, transparent, and effective mechanisms developed in conjunction with the Indigenous peoples concerned.

Article 13

1. Indigenous peoples have the right to revitalize, use, develop, and transmit to future generations their histories, languages, oral traditions, philosophies, writing systems, and

- literatures, and to designate and retain their own names for communities, places, and persons.
2. States shall take effective measures to guarantee that this right is protected and also to guarantee that Indigenous peoples can understand and be understood in political, legal and administrative proceedings, where necessary through the provision of interpretation or by other appropriate means.

Article 19

States shall consult and cooperate in good faith with the Indigenous peoples concerned through their own representative institutions in order to obtain their free, prior and informed consent before adopting and implementing legislative or administrative measures that may affect them.

Article 24

1. Indigenous peoples have the right to their traditional medicines and to maintain their health practices, including the conservation of their vital medicinal plants, animals and minerals. Indigenous individuals also have the right to access, without any discrimination, to all social and health services.
2. Indigenous individuals have an equal right to the enjoyment of the highest attainable standard of physical and mental health. States shall take the necessary steps with a view to achieving progressively the full realization of this right.

Article 31

1. Indigenous peoples have the right to maintain, control, protect and develop their cultural heritage, traditional knowledge and traditional cultural expressions, as well as the manifestations of their sciences, technologies and cultures, including human and genetic resources, seeds, medicines, knowledge of the properties of fauna and flora, oral traditions, literatures, designs, sports and traditional games and visual and performing arts. They also have the right to maintain, control, protect and develop their intellectual property over such cultural heritage, traditional knowledge, and traditional cultural expressions.
2. In conjunction with Indigenous peoples, States shall take effective measures to recognize and protect the exercise of these rights.

The Nagoya Protocol was adopted on October 29, 2010, in Nagoya, Japan, during the tenth meeting of the Parties to the Convention on Biological Diversity. The protocol focuses on sustainability, shared benefits, and rightful relationships. Under the benefit-sharing obligations, the following is stated:

Domestic-level benefit-sharing measures are to provide for the fair and equitable sharing of benefits arising from the utilization of genetic resources with the contracting party providing genetic resources. Utilization includes research and development on the genetic or biochemical composition of genetic resources, as well as subsequent applications and commercialization. Sharing is subject to mutually agreed terms. Benefits may be monetary or non-monetary such as royalties and the sharing of research results.

The Nagoya Protocol addresses traditional knowledge associated with genetic resources with provisions on access, benefit-sharing and compliance. It also addresses genetic resources where Indigenous and local communities have the established right to grant access to them. Contracting Parties are to take measures to guarantee these communities' prior informed consent, and fair and equitable benefit-sharing, keeping in mind community laws and procedures as well as customary use and exchange.²⁵

Rights of Nature laws represent a legal and philosophical approach that recognizes nature as having its own rights, independent of human interests or property ownership. These laws transcend traditional environmental protection by granting legal personhood or rights to natural elements such as rivers, forests, and ecosystems. The idea is that nature can have legal standing and the ability to bring lawsuits or defend its rights in court, much like a corporation or individual.

Key Concepts of Rights of Nature Laws:

1. **Legal Personhood for Nature:** Under Rights of Nature laws, natural entities (like rivers, forests, mountains, or ecosystems) can be granted "legal personhood." This means they are recognized as entities with rights that can be defended and upheld in a court of law. For example, a river might be granted the right to flow freely without obstruction, or a forest might have the right to exist and regenerate without being destroyed by logging.
2. **Intrinsic Value of Nature:** These laws acknowledge that nature has intrinsic value beyond its utility to humans. They shift away from the traditional view that nature exists primarily to serve human needs. Rights of Nature laws advocate for protecting the environment based on its inherent worth, not just for the benefits it provides to people.
3. **Legal Standing for Nature:** Rights of Nature laws grant natural elements the ability to have "standing" in court. This means that advocates (such as local communities, environmental groups, or governments) can bring lawsuits on behalf of nature to protect its rights. This is a shift from traditional environmental law, where only humans, corporations, or governments can bring suits regarding environmental damage.
4. **Protection and Restoration:** The rights granted to nature are typically focused on ensuring ecosystem preservation, health, and restoration. For example, if a river is polluted or a forest is damaged, legal action can be taken to restore it, and the offending activities (such as pollution or deforestation) can be stopped.
5. **Holistic Approach:** Rights of Nature laws generally take a holistic approach to ecosystems, recognizing the interconnectedness of all living and non-living elements within a natural system. This contrasts with conventional environmental law, which often deals with specific issues in isolation (such as water pollution, air quality, or endangered species).

Historical Development and Key Examples:

1. **Ecuador:** One of the most significant examples of Rights of Nature laws is in Ecuador, which incorporated the rights of nature into its Constitution in 2008. Ecuador became the first country to recognize the constitutional rights of nature. The Constitution includes a specific chapter (Chapter 7)

²⁵ Secretariat of the Convention on Biological Diversity. (n.d.). *Access and Benefit-Sharing Clearing-House (ABS)*. Convention on Biological Diversity. Retrieved December 14, 2024, from <https://www.cbd.int/abs/>

that grants nature the right to exist, persist, maintain, and regenerate its vital cycles and processes. This constitutional framework has allowed for legal actions on behalf of natural entities, such as the rights of rivers or forests, to be upheld in court.

2. **Bolivia:** Bolivia also passed Rights of Nature legislation, notably the Law of the Rights of Mother Earth (2010), which recognizes the rights of the earth and its ecosystems to exist and flourish. The law acknowledges the Earth's ecosystems as sacred and worthy of legal protection. Bolivia's approach is deeply rooted in Indigenous worldviews that regard the Earth as a living entity deserving of respect and care.
3. **The Pueblo of Jemez:** The Pueblo of Jemez in New Mexico adopted a Rights of Nature resolution in 2010. The law acknowledges the intrinsic rights of the Jemez River and its tributaries to exist, flow, and be protected from harm. Pueblo's legal framework also aligns with its broader cultural and spiritual values, emphasizing the sacredness of water and the protection of natural resources that are vital for the community's survival.
4. **The Winnebago Tribe of Nebraska:** The Winnebago Tribe was the first Native American tribe to adopt Rights of Nature laws in the U.S. in 2019. The tribe passed a resolution recognizing the rights of the Winnebago River and other natural elements in their traditional territory. This resolution grants legal standing to the Winnebago River, empowering tribal members to defend the river's rights, ensuring it remains free from pollution and degradation. The law is a significant step towards embedding Indigenous environmental stewardship practices into modern legal frameworks, aligning with the tribe's traditional view of nature as sacred and interrelated with human life.
5. **The Nez Perce Tribe:** The Nez Perce Tribe in Idaho passed a resolution in 2012 that recognized the right of the Clearwater and Snake Rivers to exist, flow, and be free from pollution. This law was part of the tribe's efforts to protect their ancestral lands and waters from contamination and destruction by mining, water diversions, and other extractive industries that harm the ecosystem. The Nez Perce tribe has also consistently advocated for the rights of salmon to migrate freely and for the protection of their traditional fishery practices.
6. **The White Earth Nation:** In 2017, the White Earth Nation in Minnesota passed a Rights of Nature law that recognized the legal rights of natural elements within their territory, including rivers, lakes, and forests. The tribe's law focuses on protecting the environment from exploitation and degradation and empowers the tribe to legally protect ecosystems and the rights of natural entities from environmental harm.
7. **The Puyallup Tribe of Washington (2019)** The Puyallup Tribe, located in the state of Washington, also adopted a Rights of Nature resolution in 2019. The tribe recognized the Puyallup River as a legal entity with rights to be free from pollution and environmental harm. The Puyallup Tribe has historically fought against environmental threats to their waterways, especially from industrial pollution and habitat destruction, and their Rights of Nature law empowers the tribe to protect their natural environment through legal means.
8. **The Shawnee Tribe:** The Shawnee Tribe passed a Rights of Nature resolution in 2020, which recognized the rights of rivers and ecosystems within their ancestral lands. This resolution underscores the tribe's commitment to the protection and preservation of natural resources for future generations, reflecting Indigenous principles of environmental stewardship.

9. **New Zealand:** New Zealand recognized the Whanganui River as a legal person in 2017, making it one of the first natural entities to be granted personhood under the Rights of Nature framework. The river is now recognized as having legal standing, and representatives of the river (the local Māori people) have the authority to defend its rights in court.
10. **India:** In 2017, the High Court of Uttarakhand, India, declared the Ganges and Yamuna Rivers to be legal persons, with rights and duties. This was a pioneering decision in the country, based on the argument that the rivers are sacred and vital for the well-being of the people and the ecosystem.
11. **United States (Local Movements):** In the United States, Rights of Nature laws have primarily been passed at the local level. Communities in various states have adopted ordinances recognizing the rights of nature. For example:
 - **The city of Pittsburgh, Pennsylvania,** passed an ordinance granting the rights of nature to local ecosystems.
 - **The city of Toledo, Ohio,** passed a measure granting the Lake Erie watershed legal personhood after toxic algae blooms in the lake threatened local water supplies.
 - **Colorado** and other states have seen grassroots movements pushing for local legislation to recognize the rights of rivers, such as the Colorado River.

The impact of Tribal Rights of Nature laws aligns with broader global movements that seek to grant legal rights to nature to ensure environmental protection and sustainability. By recognizing the rights of nature, these tribes challenge conventional legal frameworks and assert their sovereignty in managing natural resources in ways consistent with their cultural traditions and worldviews.

These actions also inspire other communities and organizations, both Native and non-Native, to adopt similar frameworks for environmental protection. However, these rights-based approaches face challenges in terms of enforcement, as they often conflict with state and federal laws, which traditionally view natural resources as property that can be exploited for economic gain.

While not yet widespread, the Rights of Nature movement within Native American tribes represents a powerful reassertion of Indigenous knowledge, governance, and environmental stewardship. It is an affirmation of the deep connection that Native peoples have with the land, water, and other natural elements, and it serves as a model for integrating environmental protection with cultural and spiritual practices. As more tribes explore or adopt these laws, they may pave the way for broader national and international recognition of the rights of nature.

The eight ethical principles applied within Western psychedelic research to help orient a consensus process more directly toward solutions, includes:

1. **Reverence** for Mother Nature
2. **Respect** Indigenous ways of knowing and being
3. **Responsibility** for use, benefits, harms
4. **Relevance** of Indigenous knowledge in psychedelic medicine
5. **Regulation** of tangible and intangible use of traditional Indigenous medicines
6. **Reparation** and sharing of benefits
7. **Restoration** of Indigenous authority

8. **Reconciliation** of Indigenous-Western relations²⁶

²⁶ Celidwen, Y., Redvers, N., Githaiga, C., Calambás, J., Añaños, K., Evanjuanoy Chindoy, M., Vitale, R., Rojas, J. N., Mondragón, D., Vázquez Rosalío, Y., & Sacbajá, A. (2022). Ethical principles of traditional Indigenous medicine to guide western psychedelic research and practice. *The Lancet Regional Health – Americas*, 18, 100410. <https://doi.org/10.1016/j.lana.2022.100410>

Of particular concern to the Federally Recognized Tribes of the U.S. regarding the psychedelic movement are protecting the hard-won rights of the American Indian Religious Freedom Act.

The **American Indian Religious Freedom Act (AIRFA)** of 1978 was a significant piece of legislation aimed at protecting Native American religious practices and beliefs, particularly those that involve the use of sacred sites, ceremonies, and ceremonial objects. Before this law, Native American religious practices had been heavily restricted due to policies that sought to assimilate Indigenous peoples into mainstream American culture and religion. These policies included bans on traditional religious practices, such as the use of peyote in religious ceremonies and access to sacred sites like burial grounds and ceremonial areas.

Key Provisions of AIRFA (1978):

- **Protection of Religious Practices:** AIRFA recognized the importance of religious freedom for Native Americans and sought to protect the right to practice their traditional religious ceremonies, which may involve sacred objects, rituals, and access to specific locations, including sites and objects previously prohibited or restricted.
- **Government Responsibilities:** The Act called for the federal government to make efforts to protect and preserve Native Americans' right to practice their religion, including safeguarding their religious practices from disruption by government policies, laws, and actions.
- **Access to Sacred Sites:** AIRFA specifically focused on granting Native American religious practitioners access to land and sacred sites that were important to their traditions, even if these sites were on public lands.
- **Exemption from Federal Laws:** It provided certain exemptions from federal laws for practices that are essential to the religious traditions of Native American tribes. For example, it sought to guarantee that Native people could use peyote in religious ceremonies, which had been outlawed for non-religious use.

1994 Amendments to AIRFA:

The **1994 Amendments** to the **American Indian Religious Freedom Act** were introduced to strengthen the protections granted under the 1978 Act and address some of the limitations and challenges that had emerged in the years following its passage. These amendments focused on providing a more robust legal framework for protecting the religious practices of Native American peoples, especially concerning the use of sacred sites and ceremonial practices.

Key Provisions of the 1994 Amendments:

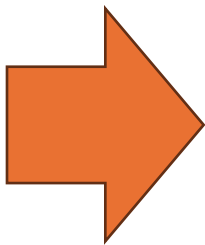
- **Protection of Sacred Sites:** One of the most important changes in the 1994 amendments was an emphasis on protecting and preserving sacred sites. These amendments directed federal agencies to consider the religious significance of Native American lands and the impact of development or government actions on these sacred areas. The amendments also provided for better consultation with tribes when decisions related to these lands were being made.
- **Expanded Federal Responsibilities:** The amendments increased the federal government's responsibility to guarantee that Native Americans were not denied access to sacred sites or religious practices, even in cases where these practices might conflict with other federal laws or policies.
- **Tribal Consultation:** The amendments established requirements for consulting tribal representatives regarding federal actions affecting sacred sites or religious practices. This was meant to guarantee

that Native American voices were heard in decisions that could impact their spiritual and cultural traditions.

- **Clarification on Peyote Use:** While the original 1978 AIRFA provided some protection for the religious use of peyote, the 1994 amendments reaffirmed this protection. They clarified that the use of peyote in religious ceremonies would not be subject to prosecution under federal drug laws. This was particularly important because the government had previously criminalized the use of peyote in Native American religious practices.

Impact and Challenges:

- **Positive Impact:** The 1978 AIRFA and its 1994 amendments provided essential legal protections for Native American religious practices. The recognition of sacred sites and the protection of religious ceremonies were crucial steps in reversing the cultural and spiritual repression faced by Native Americans for centuries.
- **Challenges and Limitations:** Despite these protections, challenges remained, particularly in enforcing these laws. In practice, the government and other entities sometimes fail to fully uphold the AIRFA provisions. Economic development, mining, and other land-use decisions often undermined the protection of sacred sites. Furthermore, some tribes argued that the consultation process, while required, was often inadequate or ignored, leading to continued threats to their religious practices and lands.
- **Court Rulings:** Courts have sometimes interpreted AIRFA and its amendments in ways that limited its effectiveness. For example, some court rulings suggested that the government's interest in land use and development could outweigh the religious interests of Native American groups. This has led to ongoing legal battles over the scope and application of AIRFA protections.

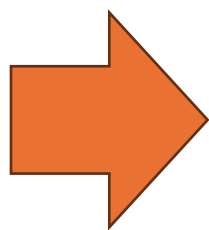


The **American Indian Religious Freedom Act of 1978** and its **1994 amendments** were crucial legislative actions to protect Native Americans' religious practices. They recognized the importance of sacred traditions and sites to Indigenous communities and sought to provide a legal framework to preserve and protect these cultural practices. However, the implementation and enforcement of these protections have faced challenges, and the struggle to fully protect Native American religious freedom continues today. The psychedelic movement is one of the biggest threats to the protection of AIRFA.

V. Summary and Conclusion

The Working Group faced numerous challenges as it navigated the complexities of engaging with the state of Colorado under its established frameworks. The group met ten times throughout the year, to learn to operate within the constraints of Colorado's Open Meeting Law and comprehend the roles of various state agencies such as DORA, DOR, and the Advisory Board. In addition, the group had to understand the legislative processes related to Prop 122 and SB23-290, the rule-making processes, and the evolving landscape of the psychedelic sector. These systems, inherently colonial in nature, created significant barriers for members of the group who had to navigate the differences between their own cultural worldviews and the Western regulatory and operational paradigms. They also had to manage the emotional toll of confronting historical trauma, a result of the ongoing colonization of Indigenous peoples' resources, medicines, cultures, and practices. Much time was spent processing these traumatic feelings in public meetings and wrestling with motives for engaging in these inequitable systems. Despite these challenges, which were never really overcome, the working group successfully reviewed empirical documents, heard from subject-matter experts, integrated traditional cultural knowledge and made recommendations for the final report.

The emotional, spiritual, mental, and time-consuming burden placed on Indigenous people to serve public groups disproportionately forces them to bear the weight of making recommendations and resolving issues within oppressive systems of government, commodification, and colonialism. This demand exploits their knowledge and labor while perpetuating historical inequalities without adequately addressing the structural issues. The extractive nature of Western governance and its transactional approach to engaging with Indigenous peoples were deeply harmful to the working group members. They found the government's engagement to be short-term and lacking the trust-building relationships necessary for long-term collaboration. Several key issues were identified, notably with the decriminalization aspect of the law, including problems with access to peyote, the lack of enforcement against cultural appropriation of religious ceremonies, and the black-market supply. Additionally, concerns were raised about the perpetuation of biopiracy—the theft of Indigenous biomedicines and biocultures—and the absence of reciprocity or reparations for Indigenous peoples.



The Working Group also highlighted significant due process issues, such as insufficient tribal consultation with U.S. Tribes, particularly regarding engagement with groups like the Native American Church. The upside-down process of Prop 122 also stood out, with those who lobbied for the law failing to engage Indigenous groups and Tribal Nations and Colorado voters passing the law without considering its impacts on these communities.

Furthermore, the Senate Amendments that created the Tribal Working Group were seen as an afterthought, leading to delays in integrating Indigenous perspectives into the rulemaking process. This timing issue hindered the proper incorporation of recommendations before the program's launch.

Another major concern was the lack of education around critical issues such as cultural appropriation, how to engage with Indigenous communities, and how to mitigate harm to Indigenous peoples while integrating reciprocity and reparations into the legislation. The endangerment of peyote, particularly

due to illegal poaching, black market sales, and cultural appropriation of Native American spiritual practices, was highlighted as one of the greatest threats to U.S. Tribal citizens. Additionally, concerns were raised about the black-market procurement of natural medicines to establish cultivation programs in Colorado, which undermines the principle of free, prior, and informed consent from Indigenous peoples. This procurement process also negates any fair-trade agreements or profit-sharing arrangements that could have been established with Tribes and Indigenous peoples.

While the Working Group made significant progress in navigating these challenges, the experience underscores the need for more inclusive, respectful, and long-term engagement with Indigenous communities in policymaking. The Working Group recommends a process of conciliation to correct this injustice.

The recommendations outlined below highlight the urgency of addressing these issues to avoid further marginalization and exploitation of Indigenous peoples, their lands, and their sacred practices.

Positionality Statements

Because the Working Group members did not always share the same perspectives or beliefs and honor the group's diversity with a spirit of transparency and help the public understand their positions heading into the recommendations section, they agreed to include positionality statements. The following are statements for members who chose to submit them:

Katsi Cook:

Over 50 years ago, my mother-in-law, the late Beatrice Long Visitor Holy Dance, invited me to sit among my relatives of the Ancient Native American Church of South Dakota. A beloved water woman and traditional midwife on the Peyote Road of Life, Beatrice pointed to the tipi set up behind her home in the Slim Buttes district of the Pine Ridge reservation for a night-long “back-to-school” peyote ceremony. “Daughter-in-law, if you want to learn midwifery, you have to go in that tipi,” she instructed. That sublime night carries me to this day in my work, life, and service as an Indigenous midwife elder and grandmother.

I am a Wolf Clan member of the Mohawk Longhouse of Akwesasne, one of the Six Nations of the Haudenosaunee Confederacy, the oldest continuous representative democracy in the world. Our chiefs and appointed speakers are responsible for advancing the Indigenous presence and processes at the United Nations, beginning in 1923 with Cayuga Chief Deskaheh's journey to address the League of Nations in Geneva, Switzerland. Our core commitment is to appreciation, gratitude, and reciprocity to the natural world, our Creator, and the Seventh Generation to come.

I am a co-founder and supporter of our Akwesasne Mohawk NACNA Chapter. Haudenosaunee spiritual principles of peace and justice guide our actions in promoting family stability and well-being.

I am in support of the legalization of traditional medicines in the context of bringing coherence to a field that will continue to grow unchecked without a legislative, research, cultivation, communications, and education framework such as the Working Group recommendations to mitigate harm to sacred medicines, Indigenous communities who co-evolved cultures with them, and citizens of the State of

Colorado. Uplifting respect for the Rights of Nature, women, and Mother Earth can advance a social tipping point process necessary for social transformation.

Belinda Eriacho:

As a member of the Diné (Navajo) with paternal ties to the A:shiwi (Zuni) of New Mexico and Yoeme (Yaqui) lineages of Mexico, I bring my cultural heritage and experience to my work. Raised on the Navajo reservation in Arizona, I have lived and continue to practice the traditions and cultures of my ancestry. These traditions and cultures have given me a deep understanding of Indigenous healing practices and the importance of sustaining culture. In addition, I have had the opportunity to witness and participate in the healing traditions of the Shipibo in Peru.

My experiences with sacred medicines are supported by formal training in the Multidisciplinary Association for Psychedelics Studies (MAPS) Therapy and Psychedelic Ketamine-Assisted Therapy. Academically, I hold a Bachelor of Science in Health Sciences, a Master in Public Health, and a Master in Technology. This diverse educational background equips me to navigate the intersections of traditional practices and modern therapeutic approaches.

I view the use of sacred medicines, both synthetic and natural, as a profound privilege and personal prerogative that demands respect and care. The stewardship of these medicines is a collective responsibility, necessitating thoughtful environmental considerations to protect natural resources, conserve biodiversity, and maintain ecological balance. I firmly believe that integrating Indigenous ways of knowing and values into medical, therapeutic, and decriminalized frameworks is essential. This integration must include the active involvement of Indigenous and Native American tribal people at every stage of legislative design and implementation.

While the State of Colorado's Natural Medicine Health Act primarily addresses the therapeutic and decriminalization aspects of natural medicines, I believe the inclusion of synthetic sacred medicines will be important for this movement. This approach can alleviate the pressure on natural resources by reducing the reliance on our plant relatives and the ecosystems.

Dr. Santiago Ivan Guerra:

As a Chicano/Mexican descendant of the mixed-race settler and Indigenous populations of South Texas, I have a strong connection to the peyote lands and spiritual and medicinal traditions of this borderlands' region. My life has been shaped through the practices of curanderismo (healing) that my community utilized to maintain our health and well-being. My family and community along the South Texas border have been significantly impacted by drug trafficking, drug policing, and drug abuse. All of this in many ways shaped my career path in higher education, eventually completing a Ph.D. in anthropology, with specializations in legal and medical anthropology.

My career has been dedicated to understanding and teaching students about the impacts of the drug war and the significance of Chicano and Indigenous knowledge systems and medicinal practices. This trajectory has allowed me to recognize the harms of draconian drug policy as well as the productive capacity of Indigenous medicinal practices. However, this has also exposed me to the harms of settler-colonial practices and the negative impacts of the psychedelic movement on Indigenous communities

across the United States and Mexico. This complex personal and professional trajectory informs my approach to policy changes and recommendations.

Daniel Castro:

I am a Mestizo Indigenous Two Spirits, member of the Condor Nation by birth and heritage and a Curandere Ayahuasquere by invitation and consent from my Elders. I am also a Paqo Initiate in the Inca Path, El Camino del Sol and a Land Protector. I understand the social responsibilities and limitations of my light colored skin and the cultural gap from being born in the city as opposed to a rural upbringing. I also understand my social privileges as male presenting, English speaking (2nd language) able bodied, financially stable, partially white person living in the United States as a recent U.S. Citizen. I started the path of Curanderismo at the age of 12 and at 28 I more deeply returned to my ancestral worldviews, bridging my city cultural gap with Earth-based worldviews, educating myself around my social privileges and elevating my ancestral Indigenous voice and tradition.

As a social justice activist and Land Protector, I collaborate with Indigenous leaders across the Americas to protect Indigenous self-determination, worldviews, heritages and culture, supporting the integrity and revitalization of ancestral ways and minimizing colonial harms.

I've been granted the title of Yachack (Medicine Elder) from my community and received their consent to carry my ancestral heritage and to speak as one of the leaders of our tradition. I understand the importance of not speaking for medicines and traditions I do not belong to and refrain from speaking on Peyote. I support the voices in this working group that represent the Peyote Elder. As the only person who's disclosed Indigenous lineage from South America in this working group, with consent to carry sacred medicine, I have the responsibility to protect our plant relatives from South America.

Reviewing the draft, I noticed that the language used is unsettling as it continues to center and represent a normative colonial narrative and worldview. Considering the time and restraints this working group enforces upon us, it is difficult to provide adequate and more meaningful feedback to promote a narrative that best and adequately represents what I would like to convey. This document does not fully represent my contribution to this working group. I would like to request more time to review this document.

Thomas Allen:

There should be a number of perspectives present to keep things open and reflective of the multitude of communities. I have to bridge the many different worlds that exists for Native Americans. I do understand the factors of colonialism in all aspects of society and strive to preserve the original intent and ideals my relatives and ancestors worked toward. While having one's traditional viewpoints of the world, there has to be room to grow and accept the different ways humanity is using natural medicine.

I wish to preserve what is left and continue to fight against the constant attempts at assimilation, which include colonialism and exploitation under the guise of innovation and advancement. Near extinction of Native Americans were the cost of today's America, I wish this pattern to not repeat itself in any iteration in this legislation and implementation of Natural Medicine.

Marlena Robbins:

My journey into psychedelics began with the belief that healing myself was the first step toward healing my family. For me, healing is inherently relational—intertwined with family, community, and the natural world. This understanding comes from my Diné lineage and reflects broader Indigenous knowledge systems, where collective well-being is prioritized alongside personal transformation.

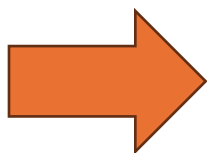
Today, as psychedelics enter mainstream consciousness, they are increasingly shaped by commercial and individual interests, drawing attention from venture capitalists and global industries. While I believe in the right of all people to heal, this surge of interest risks perpetuating biopiracy, cultural misappropriation, and inequitable benefits, echoing colonial systems of extraction.

For millennia, Indigenous peoples across the so-called Americas cultivated networks of relational exchange, sharing medicines, foods, and cultural practices. Colonization fractured these systems, imposing borders—both physical and psychological—that disrupted connections and forced ceremonies underground. For Indigenous communities, addressing the intergenerational trauma caused by colonization is core. This work rebuilds healthier families, restores clan ship systems, strengthens sovereign tribal nations and is a model of healing that holds transformative potential for global society.

Sacred plants and fungi, long revered as holy beings in Indigenous traditions, are now commodified, often stripped of their cultural significance and divorced from the relational contexts in which they are most effective. Corporations patent traditional practices and medicines, profiting from knowledge that was cultivated and protected by Indigenous peoples without offering reciprocity or acknowledgment.

The modern psychedelic movement must reckon with the legacies of colonization. True reckoning demands that non-Indigenous participants in the psychedelic movement reflect on their own roles within colonial histories and systems. Acknowledging privilege, redistributing resources, and building authentic partnerships with Indigenous communities to foster a just and inclusive psychedelic movement. Only by addressing these historical and ongoing imbalances can the potential of psychedelics to heal and transform truly be realized.

Final Recommendations



Overall, there is more work to be done to fully understand the impacts of the psychedelic movement and legislation on Indigenous peoples globally, as well as to explore further the application of culturally appropriate psychedelic facilitation for Indigenous peoples.

Historically, these medicines traveled to Indigenous communities in the North from Indigenous communities in the South. Our ancestors laid down the medicine roads with prayer, ceremony, respect, and reciprocity to help our tribal communities. It unified us and made us well. Incorporating Indigenous perspectives and safeguarding their cultural practices are crucial in developing the psychedelic movement, specifically in legislation. By fostering genuine partnerships, promoting equity, and protecting sacred traditions, we can create a legislative framework that honors Native peoples while addressing the complex intersections of public health, legal frameworks, and economic considerations. These policies must be inclusive, culturally sensitive, and respectful to help prevent harm and exploitation, promote healing, and ensure that Indigenous communities benefit from their rightful place

in the dialogue surrounding natural medicine. We can achieve a more ethical and holistic approach to regulating plant medicines through thoughtful engagement and long-term commitment.

The development of psychedelic legislation must consider various factors to respect Native peoples' traditions and properly incorporate their perspectives into legal frameworks. Key aspects include cultural sensitivity, legal considerations, and community involvement. Indigenous communities should be consulted early in the legislative process to reflect their voices and perspectives in policy decisions, **including formal government consultation with Federally Recognized Tribal Nations**. This involves forming advisory boards, ensuring proper tribal consultation, and adopting ethical principles that protect Indigenous knowledge and practices. Furthermore, the legislation should prevent cultural appropriation, promote equitable access to natural medicines, and address concerns over commercialization. Economic considerations should also be prioritized, such as revenue reallocation through taxes to fund Indigenous empowerment projects and environmental conservation. Education and training programs must be culturally competent, ensuring professionals understand Native American history, ethics, and perspectives on natural medicines. Finally, monitoring bodies such as Indigenous Concerns Taskforces and Global Indigenous Councils are needed to monitor ongoing accountability and the protection of Indigenous practices from exploitation.

Avoiding Impacts on Communities, Cultures, and Religions

To protect Indigenous knowledge, cultures, and resources from misappropriation, clear guidelines and protocols must be developed in partnership with Indigenous peoples. These should focus on ethical usage and intellectual property rights to safeguard Indigenous communities. Intellectual property laws must be strengthened so communities retain ownership, and fair compensation for their resources and knowledge and benefit-sharing mechanisms must be established for their contributions, such as through the Nagoya Protocol. In research, ethical guidelines should facilitate the active participation of Indigenous communities as equal partners, with oversight by Indigenous-led ethics committees with respect to Indigenous data sovereignty and data governance for Tribal Nations. Investing in education and training programs will empower these communities to manage their knowledge effectively and fortify Indigenous representation in decision-making, particularly concerning natural medicines and cultural elements. This can be achieved through advisory boards with significant Indigenous representation.

Public awareness campaigns are necessary to educate people about the importance of respecting Indigenous rights and preventing misappropriation and exploitation. Highlighting examples of respectful partnerships can set positive precedents. Additionally, conservation efforts aligned with Indigenous environmental stewardship principles are necessary to uplift sustainable harvesting and conservation practices for natural resources. Restitution and reparation initiatives, encouraging the return of cultural, intellectual, and spiritual property, will help repair historical and ongoing harms.

The U.S. Department of the Interior recently released a handbook titled **"Procedures for the Inclusion and Application of Indigenous Knowledge."**²⁷ This handbook covers the historical context and

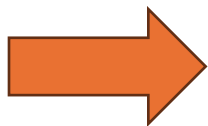
²⁷ U.S. Department of the Interior. (n.d.). *301 DM 7 Handbook: Procedures for Inclusion and Application of Indigenous Knowledge*. U.S. Department of the Interior. Retrieved January 21, 2025, from

disruption of Indigenous Knowledge, including how to elevate, include, and apply it in departmental actions and scientific research. The historical context includes listing detrimental federal policies throughout the history of the United States, which resulted in separation from ancestral homelands and loss of ways of life for Indigenous peoples. The historical context also covers the forced assimilation and loss of cultural identity that took place through Indian boarding schools, resulting in the loss of language and religious conversion, as well as historical trauma for lasting generations.

The Handbook notes that disruption of Indigenous knowledge continues today, as does Indigenous resilience. In the section on including and applying Indigenous knowledge in state actions and research, the handbook notes that longer timelines may be necessary than a traditional timeline for a given action or research project.

The DOI handbook also suggests compensating knowledge holders for their time and services as a best practice and for the co-production of knowledge going forward. Page 26 of the handbook suggests engaging with tribal nations and Indigenous communities, including allocating time for engagement and relationship building and securing free prior and informed consent to address protocols and receive and apply Indigenous knowledge.

The Handbook highlights government-to-government consultation for tribal nations and notes that, in some cases, it may be necessary to assess a given Tribe's capacity to engage. The Department handbook also highlights Indigenous methodologies, including relationality, reciprocity, and responsibility. A section discusses reconciling conflicts between knowledge systems, as Indigenous epistemologies can differ from Western ones. The Handbook highlights the need to protect Indigenous knowledge when disseminating results and to inform knowledge holders about potential disclosure risks.



The Handbook mentions Indigenous data sovereignty and ethics and Indigenous data governance practices, highlighting that Indigenous knowledge is not to be extracted, misappropriated, or exploited but respected and properly cited.

The Natural Medicine Advisory Board should develop a **Code of Ethics** that includes (a) acknowledgment of Indigenous traditional knowledge and practices, (b) knowledge for culturally appropriate and accurate translation of Indigenous knowledge within Western practices, and (c) the creation of standards on respecting cultural intellectual property and cultural heritage rights according to the United Nations World Intellectual Property Organization (WIPO) Treaty on Intellectual Property, Genetic Resources and Associated Traditional Knowledge adopted in May of 2024.²⁸

<https://www.doi.gov/document-library/handbook/301-dm-7-hb-procedures-inclusion-and-application-Indigenous-knowledge>

²⁸ World Intellectual Property Organization. (2024, May 24). *WIPO Treaty on Intellectual Property, Genetic Resources and Associated Traditional Knowledge*. WIPO. Retrieved from https://www.wipo.int/edocs/mdocs/tk/en/gratk_dc/gratk_dc_7.pdf

Tribal Consultation

Consultation with Federally Recognized Tribes from diverse regions, medicine groups, and cultures is critical. This should involve multiple representatives rather than a single group to guarantee inclusiveness. Ideally, consult those who have practiced traditional ceremonial ways for at least 10 years, regardless of their federal recognition status.

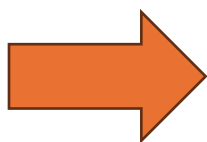
This consultation process must prioritize traditional and ceremonial leaders with longstanding recognition in their communities, ensure proper gender equity, and avoid conflicts of interest related to commercialization.

Nation-to-nation (Government-to-Government) Consultation is a critical framework that guarantees the federal government engages directly with Tribal governments respectfully, transparently, and accountable.

Established by Executive Order 13175 on November 6, 2000, this order mandates that federal agencies consult and coordinate with Indian Tribal Governments before implementing policies that may affect them.²⁹ It emphasizes the importance of providing 30 days' notice to Tribal governments, a written comment period, and recordings of meetings, ensuring that Tribes have a fair opportunity to express their views. Key principles such as free, prior, and informed consent are central to the consultation process, ensuring that Tribes are fully informed about the potential impact of policies and can provide meaningful input before decisions are made. Additionally, an Environmental Impact Assessment is required in many cases to evaluate the potential consequences of actions on Tribal lands, resources, and cultural heritage.

These requirements are designed to strengthen the government-to-government relationship and guarantee that policies respect Tribal sovereignty and incorporate Indigenous perspectives, ultimately promoting a more inclusive and collaborative governance framework.

Furthermore, the **Colorado State-Tribal Consultation Guide** provides guidance on conducting formal consultations with Federally Recognized American Indian Tribes and working with the Colorado Commission of Indian Affairs.³⁰



Additionally, DORA should create a dedicated **Tribal Liaison** position within the Natural Medicine program. This role will facilitate effective communication and foster collaboration between the State, state agencies, and Tribal Nations concerning matters related to natural medicines.

The Tribal Liaison can create an approach to natural medicines that is inclusive, respectful, and collaborative, recognizing the invaluable contributions and traditional knowledge of Tribal Nations. This

²⁹ The White House. (2022, November 30). *Memorandum on uniform standards for tribal consultation*. The White House. Retrieved from <https://www.whitehouse.gov/briefing-room/presidential-actions/2022/11/30/memorandum-on-uniform-standards-for-tribal-consultation/>

³⁰ Colorado Commission of Indian Affairs. (n.d.). *Colorado State-Tribal Consultation Guide*. Colorado Department of Regulatory Agencies. Retrieved January 21, 2025, from https://ccia.colorado.gov/sites/ccia/files/documents/CO%20State-Tribal%20Consultation%20Guide_0_0.pdf

role will support the development of policies and practices that honor Indigenous peoples' cultural significance and expertise while promoting the responsible and ethical use of natural medicines. The primary objective of the liaison would be to cultivate long-term, meaningful relationships with Tribal Nations and Indigenous peoples, moving beyond transactional interactions. This involves a sustained commitment to partnership through consistent, respectful engagement. The key responsibilities include relationship building, facilitation of communication, cultural competence, and regular engagements with Tribal representatives.

Concerning Further Implementation of the NMHA

The Working Group discussed and voted on the following motions on February 5, 2025, with the results as follows:

- ***Recommendation that Colorado does not implement mescaline***
 - **Motion passed** with 5 out of 6 votes in favor and 1 abstention.
 - **Discussion:** The consensus among the working group members was that mescaline should not be implemented in Colorado's Natural Medicine Program due to several significant factors. Of most importance during many discussions was protecting the hard-won religious freedom rights of the Native American Church and members of Federally Recognized American Indian Tribes to use peyote as a sacrament *and the connection of any source of mescaline with peyote*. Additionally, there was extensive discussion about the threat to peyote (*Lophophora williamsii*) as an endangered species with a limited natural habitat controlled by private landowners. Members felt that the legalization of other mescaline-containing cacti or the decriminalization of mescaline in general would have serious negative impacts on the American Indian communities, cultures, and religions to access to their traditional medicine and practices, including increased black-market activities, cultural misappropriation, and peyote extinction.
 - **Minority Opinion:** Implementing programs with San Pedro might take some of the pressure and demand off peyote as a natural medicine. A similar minority opinion exists for synthetic versions of natural medicines supporting conservation.
- ***Recommendation that Colorado does not implement iboga***
 - **Motion passed** with 5 out of 6 votes in favor and 1 abstention.
 - **Discussion:** The consensus among the working group members was that iboga should not be implemented in Colorado's Natural Medicine Program due to serious public safety concerns. There is currently not enough research about the effects of iboga at high altitudes, which would likely produce an increased cardiac risk. Additionally, there are significant questions about how iboga would be cultivated and where it would initially be sourced from since Gabon has made the export of iboga illegal. Respect for the Ibwiti tribal medicine council working through the Nagoya Protocol for fair trade and benefit sharing of their traditional medicine should be considered.
 - **Minority Opinion:** Synthetic ibogaine might be a more ethical and sustainable public health model for the treatment of opioid addiction.

- *Recommendation that Colorado does not implement dimethyltryptamine*
 - **Motion passed** with 4 out of 6 votes in favor and 2 abstentions.
 - **Discussion:** The consensus among the working group members was that dimethyltryptamine (DMT) should not be implemented in Colorado's Natural Medicine Program due to the misappropriation and exploitation of Indigenous communities, cultures, and religions of South America. Serious concerns exist regarding the commodification of sacred medicines and practices without regard for the rights of Indigenous peoples to protect and steward their own cultural heritage. Indigenous people from the Amazon who work with ayahuasca have expressed concern about neo-shamanism, cultural tourism, and those claiming to have their permission to serve the medicine. The global demand for ayahuasca has impacted the limited supply of naturally growing plants in the Amazon, even as Indigenous peoples still face issues regarding access to land and resources and protection of their human rights. The number and diversity of tribes with an ayahuasca tradition in the Amazon make it difficult to form a tribal council to engage in a consent process for market production.
 - **Minority Opinion:** Several syncretic ayahuasca religions have proliferated around the globe as some Indigenous people of the Amazon believe in sharing ayahuasca freely to help humanity understand their cultural worldview.
- *Recommendation that Colorado pause implementation of psilocybin*
 - **Motion passed** with 6 out of 6 votes in favor.
 - **Discussion:** The consensus among the working group members was that Colorado's Natural Medicine Program should pause the implementation of psilocybin because the program rolled out before completing the Working Group report and recommendations. There are considerable concerns around cultural misappropriation, exploitation, and the rights of Indigenous peoples who traditionally used psilocybin mushrooms in cultural and religious practices. The Natural Medicine Program should be paused until the Working Group report and recommendations are reviewed, considered, and implemented along the lines of reparation or reciprocity, more equitable relationships with Indigenous communities, and a shift from extractive practices favoring reciprocal arrangements.
 - **Minority Opinion:** Some view psilocybin mushrooms as the best-positioned traditional medicine to serve the public health sector. Due to their ease of cultivation, there are no serious conservation issues, and the medicine has largely reached social acceptance globally, including Denver's decriminalization of psilocybin mushrooms in 2019.

See "Appendix" for a voting matrix of how individual members voted.

Recommendations for Sales and Advertising

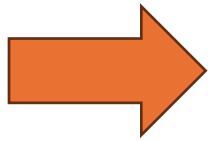
For advertising and sales of natural medicine products, packaging should be generic black and white, and there should be no use of traditional Indigenous names, Tribes, images, symbols, etc. This is particularly important for psilocybin, the first medicine implemented under the NMHA. Avoid the use of Tribes with traditional uses of psilocybin, such as the "Mazatec" and especially the likeness of Maria Sabina, which has been misappropriated and exploited heavily in the psychedelic spaces.

The Bureau of Indian Affairs (BIA) website lists federally recognized tribes in the U.S. A portion of the sales tax should go towards Indigenous groups' land conservation. See "Revenue Reallocation for Indigenous and Conservation Initiatives" below.

It is also important to find a way to identify Indigenous groups from Mexico, South America, and Africa as well with respect to not using Indigenous names for marketing traditional medicines from those countries and continents.

Protections for Peyote under the American Indian Religious Freedom Act

There are concerns regarding the conflict between state and federal law, particularly regarding peyote. Although excluding peyote from the facilitation side of the NMHA prevents a violation of the American Indian Religious Freedom Act (AIRFA), **Colorado's religious freedom law would include peyote, potentially violating AIRFA.** A recommendation is to amend this law to ensure American Indian protections for peyote in accordance with AIRFA.



Additionally, significant harm arises from the decriminalization and lack of enforcement related to the sale of ceremonies, cultural appropriation, false claims of traditional lineage, and the rise of new-age shamans profiting from Indigenous spiritual practices.

This also encourages black market activity, which often comes from poachers who don't take conservation or sustainable harvesting into account.

Furthermore, Native Americans are always seeking to reestablish ceremonies that were not practiced due to assimilation policies and tactics like the Trail of Tears. Many relatives recall the U.S. Military destroying medicines when we were forced to migrate to Indian Territory. Acknowledgement and support are points of healing. We need help getting back what was taken from us.

Reflection on Colonial Cycles

Recognize and reflect on the historical impacts of colonialism on plant medicines and natural resources, learning from the exploitative histories of medicinal plants turned harmful, such as Tobacco, Cannabis, Opioids, and Coca. Policies should seek to minimize the perpetuation of these cycles and address the inequities created by past practices.

As part of the curriculum in training programs, there should be cultural competency training for facilitators, specifically around the history of U.S. Indian Boarding Schools, historical trauma, and the impacts of colonization on Indigenous peoples with the following definitions:

- **Historical Trauma (HT):** "the cumulative emotional and psychological wounding over one's lifetime and from generation to generation following the loss of lives, land and vital aspects of culture." (Braveheart, 2003)
- **Historical Loss Scale:** "a standardized measure that assesses the frequency with which Indigenous individuals think about the losses to their culture, land, and people as a result of European colonization" (Armenta, Whitbeck, & Habecker, 2018)

Additionally, content should address how to avoid cultural misappropriation and respect and cite Indigenous knowledge. This can be found in the aforementioned DOI handbook, “Procedures for the Inclusion and Application of Indigenous Knowledge.”³¹

Economic Equity and Fair Trade through Relationship Building and Nagoya Protocol

Overall, the government process that voters can legalize medicines from other countries without any free and prior informed consent from the communities where the medicine comes from is not compatible with any respectful relationship with Indigenous peoples. These plants did not just magically appear in Colorado to be cultivated—they were taken from their homelands and trafficked to the U.S. If these medicines are going to continue to be commodified and used outside their ancient traditional cultural use, the Nagoya protocol should be implemented, and fair-trade agreements should be established with the Indigenous peoples who traditionally stewarded these medicines. **Without benefits sharing and fair trade, the State of Colorado and its citizens participate in biopiracy.** With benefits sharing, free prior and informed consent, and fair-trade agreements, Colorado and its citizens could support Indigenous peoples in the self-determination of managing their own lands and biocultural resources.

Indigenous peoples from multiple countries and cultures need time to organize and understand the implications before responding. We have seen this with the Tribal Working Group—they were asked to form recommendations within 6 months, but it took them 6 months just to begin understanding the system in which they were operating regarding regulatory agencies, open meetings law, etc. More time and relationship building are needed for sustainable systems to be built around the psychedelic sector. This is contradictory to the conventional Western capitalist paradigm.

Revenue Reallocation for Indigenous and Conservation Initiatives

Implement a permanent tax on natural medicine facilities to reallocate a portion of their profits for Indigenous empowerment projects and environmental conservation. This initiative should direct funds to support cultural preservation, education, mental health services, and community-building initiatives. The process must be transparent and legally documented to guarantee accountability.

A sliding scale tax could be applied, depending on the facility's size and profits:

- **0.5-1%** for smaller businesses (under \$1 million in gross profit).
- **1.5%** for mid-sized businesses (\$1-\$10 million in profits).
- **2-3%** for larger businesses (over \$10 million in profits).

³¹ U.S. Department of the Interior. (n.d.). *301 DM 7 Handbook: Procedures for Inclusion and Application of Indigenous Knowledge*. U.S. Department of the Interior. Retrieved January 21, 2025, from <https://www.doi.gov/document-library/handbook/301-dm-7-hb-procedures-inclusion-and-application-Indigenous-knowledge>

Indigenous Participation in Policy and Medicine Preservation

To protect and respect Indigenous beliefs and practices, programs must include an understanding of their social, cultural, and political contexts. Collaboration with various Indigenous leaders and communities shapes policies and practices. This involves creating structures where Indigenous voices are central in decision-making processes related to natural medicines and cultural practices, helping to sustain these traditions while respecting their integrity.

One critical concern is the future of peyote populations, particularly as mescaline is included in the Natural Medicine Health Act. The public's lack of understanding and the potential for overharvesting, especially in South Texas and northern Mexico, are significant risks. Conservation of peyote and other sacred plants must be prioritized, considering ecological and cultural implications.

The Natural Medicine Advisory Board should include members of Federally Recognized American Tribes and Indigenous medicine carriers who steward these natural plant medicines. The design of the State of Colorado's Natural Medicine Health Act followed a Western legislative framework that did not fully incorporate or consider Indigenous cosmology in the relationship with natural medicines. Specifically, it overlooked Indigenous Ways of Knowing, which are deeply rooted in traditional knowledge, legal safeguards, and community involvement. By failing to incorporate these perspectives during the creation of this legislation, opportunities were not considered that embed Tribal knowledge into the framework, including education, training programs, and ethical standards.

“The design of the State of Colorado’s Natural Medicine Health Act followed a Western legislative framework that did not fully incorporate or consider Indigenous cosmology in the relationship with natural medicines.”

Ensuring Ethical Practices in Facilitating Psychedelic-Assisted Therapy

Facilitators must be transparent about conducting sessions when incorporating Indigenous practices in therapeutic settings, especially when using traditional knowledge or rituals. State-mandated patient evaluations and oversight from Indigenous ethics boards are essential. Facilitators should seek approval from these boards if using Indigenous songs or protocols, ensuring strong community support and ethical compliance.

Commercial entities must be prohibited from exploiting Indigenous symbols, practices, or cultures in advertising. If they do, fines should be levied, and reciprocity initiatives should be established to direct funds back to the Indigenous communities from which these practices originated.

Approaching Overharvesting, Conservation, and Cultural Considerations

To protect plant populations and honor Indigenous cultures, the following strategies are recommended:

1. **Sustainable Harvesting Practices:** Encourage wild crafting only a portion of the plant and non-destructive harvesting methods.
2. **Cultivation and Domestication:** Support the controlled cultivation of psychoactive plants to ease pressure on wild populations.
3. **Community-Based Conservation:** Empower Indigenous communities to manage their cultural resources and traditional knowledge.
4. **Regulatory Measures:** Governments should implement stronger protections for threatened species and create frameworks for sustainable trade.
5. **Ethnobotanical Research:** Work with Indigenous communities to document traditional knowledge and guarantee culturally appropriate conservation efforts.

Indigenous Representation in Legislation

It is crucial to include Native practitioners and stakeholders in legislative processes to foster positive relationships between Indigenous and mainstream communities. Collaborative efforts between Indigenous leaders and government representatives can guarantee that policy development is informed by those most affected. By integrating Indigenous perspectives, policies can better address the complex dynamics surrounding the use of Indigenous medicines.

Incorporating Indigenous leadership into decision-making processes, such as forming advisory groups or committees, helps guarantee that policies reflect the needs and values of Indigenous communities. This is particularly important in relation to the Natural Medicine Health Act and its potential impact on sacred plants. Legislative initiatives must avoid exploiting Indigenous cultures and work toward restitution and healing through public acknowledgment and compensation.

Recommendations for Moving Forward

1. **Indigenous Community Task Force:** The Natural Medicine Program should create a permanent working group to address ongoing and upcoming concerns about the exploitation and appropriation of Indigenous ancestral practices. This would serve as a community engagement opportunity for the Natural Medicine Program.
2. **Public Education and Reporting Systems:** Establish public education initiatives to raise awareness about potential exploitation. Implement an anonymous reporting system for concerns about misappropriation.
3. **Plant Medicine Registries:** Create registries for plant medicines like San Pedro and Bolivian torch to reduce the risks of illicit trade and promote sustainable use of these plants.
4. **Indigenous Consultation in Policy Development:** Future policies should prioritize consultation with Indigenous communities and incorporate their cultural, philosophical, and ecological knowledge in policy development.
5. **Global Indigenous Council:** Establish a council led by Indigenous leaders and elders to guide policy, provide recommendations, and advise the psychedelic sector, ensuring that Indigenous voices are central to all discussions.

6. **Funding and Support for Indigenous Initiatives:** Allocate resources to support Indigenous-led conservation efforts and the development of culturally responsive education frameworks. Potential funding sources include taxes from licenses, certificates, facilitation, and natural medicine products.
7. **Framework for Community Engagement and Ownership:** Adopt models that emphasize genuine community engagement and ownership, ensuring that Indigenous communities are consulted and have control over the direction of policies affecting their traditions and resources.

Conclusion of Recommendations

To mitigate the risks of exploitation and environmental harm, Indigenous communities must lead and shape the policies surrounding their sacred practices and natural resources. This approach will foster genuine respect for Indigenous cultures while upholding conservation efforts and sustainable practices. Engaging with Indigenous communities, ensuring fair compensation, and protecting their intellectual property are crucial steps toward a more equitable and just system.

Additional Considerations

While some of these recommendations are outside the scope of the Advisory Board and Director of the Natural Medicine Program in Colorado, they should be considered by the voters and legislators of Colorado for additional legislation or amendments to the NMHA.

VI. Appendix

Additional Definitions and Terminology

American Indian: The legal term used in federal legislation regarding the Federally Recognized American Tribes who inhabited the land before the U.S. Although a misnomer, this term cannot be eliminated when discussing the inherent rights of sovereign U.S. tribal nations.

Biopiracy: The unauthorized extraction or commercialization of biological resources and traditional knowledge from Indigenous peoples or local communities, often without fair compensation or acknowledgment.

Bioprospecting: The exploration of biological resources, such as plants and fungi, for scientific research or commercial development. While not inherently exploitative, it can lead to biopiracy if conducted without ethical safeguards or consent.

Indigenous Peoples: Communities with historical continuity in a specific region, distinct from dominant populations, who maintain cultural traditions and sovereignty.

Native American: Used to refer to the Indigenous peoples of what is now the United States. “Native American” is more commonly used in contemporary contexts, while “American Indian” is still used in legal frameworks.

Natural Medicines for the purposes of this report are defined according to Colorado SB23-290 as follows:

(12) (a) “Natural medicine” means the following substances:

(I) Psilocybin; or

(II) Psilocin.

(b) In addition to the substances listed in subsection (12)(a) of this section, “natural medicine” includes:

(I) Dimethyltryptamine, if recommended by the board and approved by the director and the executive director of the state licensing authority for inclusion on or after June 1, 2026;

(II) Ibogaine, if recommended by the board and approved by the director and the executive director of the state licensing authority; or

(III) Mescaline, if recommended by the board and approved by the director and the executive director of the state licensing authority for inclusion on or after June 1, 2026.

(c) “Natural medicine” does not mean a synthetic or synthetic analog of the substances listed in subsections (12)(a) and (12)(b) of this section, including a derivative of a naturally occurring compound of natural medicine that is produced using chemical synthesis, chemical modification, or chemical conversion.

(d) Notwithstanding subsection (12)(b)(III) of this section, “mescaline” does not include peyote, meaning all parts of the plant classified botanically as *lophophora williamsii* lemaire, whether growing or not; its seed; any extract from any part of the plant, and every compound, salt, derivative, mixture, or preparation of the plant; or its seeds or extracts.

Psychedelics: Substances that induce altered states of consciousness, often characterized by changes in perception, mood, and cognition. These include both synthetic compounds (e.g., LSD) and naturally occurring substances (e.g., psilocybin mushrooms). **Entheogens:** Substances used in a ceremonial or spiritual context to facilitate experiences of divine connection, insight, or healing. The term is often associated with traditional and Indigenous practices.

Traditional Medicines: Medicinal substances derived from plants, fungi, or other natural sources, often used in both traditional and modern therapeutic contexts with healing practices and remedies grounded in the cultural traditions and knowledge systems of a particular Indigenous community, often passed down through generations. Examples include tobacco, sage, sweetgrass, and other non-psychoactive as well as psychoactive animal or plant substances.

Voting Matrix

At the February 5, 2025 meeting of the Federally Recognized American Tribes and Indigenous Communities Working Group, voting took place as follows:

1. Recommendation that Colorado **not** implement **Mescaline**
2. Recommendation that Colorado **not** implement **Iboga**
3. Recommendation that Colorado **not** implement **Dimethyltryptamine (DMT)**
4. Recommendation that Colorado **pause implementation of Psilocybin**
5. Consensus to **accept the report** with edits as discussed

	#1	#2	#3	#4	#5
<i>Katsi Cook</i>	Yes	Yes	Yes	Yes	Yes
<i>Belinda Eriacho</i>	Abstained	Yes	Abstained	Yes	Yes
<i>Dr. Santiago Ivan Guerra</i>	Yes	Yes	Yes	Yes	Yes
<i>Frank Dayish</i>	Yes	Abstained	Yes	Yes	Yes
<i>Daniel Castro</i>	Yes	Yes	Yes	Yes	Yes
<i>Thomas Allen</i>	Yes	Yes	Abstained	Yes	Yes
<i>Marlena Robbins</i>	Not present	Not present	Not present	Not present	Not present
<i>Councilman, Darwin Whiteman Jr.</i>	Not present	Not present	Not present	Not present	Not present
<i>Terry G. Knight, Sr.</i>	Not present	Not present	Not present	Not present	Not present

Biographies: Working Group Members and Moderator

Thomas Allen (he/him), Sac and Fox Nation of Oklahoma, Northern Arapaho—Arvada, Colorado



Thomas Allen is a full-blooded Native American with Tribal affiliations of: Sac and Fox Nation of Oklahoma, Northern Arapaho, and Euchee Tribe of Oklahoma. He is the statewide NEOGOV System Administrator and Denver American Indian Commissioner dedicated to advancing the well-being of Denver's Native American community. With expertise in historical trauma and epigenetics, he provides strategic guidance on addressing intergenerational challenges and fostering resilience through culturally informed solutions.

A trusted advocate and thought leader, Thomas has been a featured presenter for Colorado Health Fund, AARP, and Mathematica, where he shared insights on Native American health disparities, community engagement, and policy development. As a Data Analyst, he contributed to Colorado's landmark Executive Order D2022 015, championing skills-based hiring practices.

In addition to his professional contributions, Thomas is an active member of the Native American Church. He blends traditional Native American arts with contemporary mediums, preserving cultural heritage while inspiring new generations. His passion extends to safeguarding Native American medicines and practices, ensuring their continuation and accessibility.

Thomas's work is especially valuable to professionals in healthcare and policy, as well as Native American communities seeking innovative and culturally rooted approaches to systemic challenges.

Daniel Castro (they/them/elle), Mestizo Kichwa from Ecuador—Boulder, Colorado

Daniel, 44, is an Mestizo Indigenous Kichwa Two Spirits born and raised in Quito, Ecuador. They began their path of curanderismo at the age of 12, following their ancestral heritage laid out in the Andes Cosmology along with medicine elders from Ecuador, Colombia, Peru, and Chile. In 2009, Daniel initiated a deeper acculturation and apprenticeship process under the guidance of the medicine elders of the Kuyaloma community of Napo, Ecuador. Daniel was eventually adopted and invited to be a medicine carrier of the altar of Ayahuasca and to be a lineage holder. They were given the title of Yachak and received their final regalia in 2017 and have since carried their elders' heritage with great respect, responsibility, and love for their Kichwa Amazonian tradition. As a member of the Condor Nation, Daniel felt the invitation to root deeper into their father's maternal Kichwa lineage from Isinlivi, Ecuador in 2019. Subsequently, Daniel was initiated in the Paq'o (Andean Priest) tradition of the Rainbow Condor



Nation and Inca teachings. They are under apprenticeship with an Incan family lineage in Chinchero, Peru.

In 2017, Daniel received a vision and guidance from the Bald Eagle Spirit to bring the Rainbow Condor teachings and the Andes Cosmovision to Turtle Island (North America). Listening to this vision and their ancestors, Daniel currently resides as a guest in Tehuayo (Boulder region), the homelands of the Apache, Arapaho, Cheyenne, Ute, and Uto-Aztec peoples. As a guest on the homelands of 48 local and displaced Indigenous communities, Daniel advocates for their inherent rights of sovereignty, self-governance and self-determination,

Land Back, rematriation, reparations to Indigenous nations and social equity. They have collaborated with Indigenous leaders and communities in Colorado for 6 years and are a dancer and member of the Danza Mexico community, Grupo Tlahuiztcalli. They are part of “The Great Flight of the Eagle and Condor Prophecy,” a unity between the Indigenous peoples of Turtle Island and Abya Yala (North and South America).

Daniel’s advocacy for Indigenous rights and the protection of Indigenous sacred medicine and cultural practices have built trust and collaboration with various Indigenous leaders in North America. Daniel is a member of the Native Coalition of Colorado, a growing movement of urban Natives who utilize their social privileges to center, uplift and protect the voices of bona-fide Indigenous plant medicine traditions in community, educational, political and national levels, currently under threat by the State of Colorado, pharmaceutical industries, private interests and industry intent on the commercialization and privatization of medicines. Daniel was one of the Native Coalition of Colorado activists who led the peaceful protest at the closing event of the 2023 MAPS psychedelic conference in Denver, CO that hosted over 12k attendees. Daniel vocalized an urgent concern around the prevalent cycles and impacts of ongoing settler colonialism, reflected deeply in the extractive and deceptive approach of the so-called “Psychedelic Renaissance” movement. Members of the Apache Nation that reside in Colorado have expressly invited Daniel to keep them informed of the process and progress of the Native Coalition of Colorado to assure that the interests of the tribe are appropriately addressed.

Additionally, Daniel is a licensed clinical mental health counselor candidate (LPCC) and provides mental health support to the Colorado community through their private online practice, Decolonial Counseling, LLC. Their expertise are in transpersonal counseling, social justice advocacy, cultural awareness, equity and inclusion, trauma and resiliency, sexuality, LGBTQ++ support, decolonial and systemic work, and relationship dynamics. Through an Indigenous De-colonial and Re-indigenizing lens, Daniel has been guiding people from all walks of life bringing about their intergenerational healing by reconnecting to themselves, expanding their cultural awareness, grieving their ancestral disruption, and repairing the intergenerational colonial harm that impacts everyone in different forms.

Katsi Cook (she/her), St. Regis Mohawk Tribe—Akwesasne, New York



Katsi (Guh Jee) Cook, Wolf Clan Mohawk, is an Indigenous midwife and Elder of the National Council of Indigenous Midwives. The umbilical cord of her identity, she points out, lies in the intergenerational narratives of her lineages, which extend across the Six Nations Iroquois communities of Akwesasne, Kahnawake, QC, and Six Nations, ON to the early 1700s.

As a professional member of the Interim Regulatory Council of the College of Midwives of Ontario in 1991, Katsi worked with pre-registration colleagues to implement the exemption for Aboriginal Midwives and Healers in the 1991 Midwifery Act and the Regulated Health Professions Act in Ontario.

Katsi's work in environmental reproductive health has spanned many worlds and disciplines and demonstrates a lifelong career of advancing the superlatives of Indigenous Knowledge. She is a member of The Grandmothers Leadership Circle working closely with the Executive of First Exposure (www.firstexposure.ca) to determine research priorities for Indigenous community projects and oversee data governance, cultural safety of First Exposure materials, and privacy of Indigenous health data.

Currently, Katsi is the executive director of Spirit Aligned Leadership, a program that works to elevate the lives, dreams, and voices of Indigenous women's cultural leadership. With its fifth sisterhood circle of ten legacy projects, twenty-seven North American Indigenous women leaders are focusing on Indigenous Midwifery and the Sacred Cycle of Life, sharing their voices and experiences to advance the aims of "Bringing Birth Back" and "An Indigenous Midwife Working in Every Indigenous Community."

Frank Dayish (he/him), Navajo Nation (Diné)—Gallup, New Mexico



Former Vice President of the Navajo Nation, Frank has 30 years of extensive Tribal, Federal and commercial procurement experience in the health, aerospace, and mining (Surface and Underground) industries. He has wide ranging experience in the political landscape at the tribal and national levels. Possess thorough understanding of Federal contracting through streamlining to meet private industry and tribal business objectives while maintaining procurement integrity.

Frank has experience in leading a Tribal Government as Vice President consisting of 6,000 employees with 16 divisions. Experienced in lobbying Federal, State and Tribal governments in public programs such as health education and tribal veteran affairs. This unique knowledge combination allows him to lead, manage and prescribe the appropriate degree of personalized analysis on developing strategic objectives consistent with organizational goals accentuating maximum return to shareholders and tribal organizations. He is currently the President of the Peyote Way of Life Coalition.

Belinda P. Eriacho, MPH, MT (she/her), Navajo Nation (Diné)—Tempe, Arizona



Belinda is of Dine' (Navajo) and A:shiwi (Zuni) descent. Her maternal clan is One-Who-Walks-Around and she was born for the Zuni Pueblo people. Her maternal grandparents are from the Black Sheep clan and paternal grandparents are Zuni.

Belinda holds degrees in Health Sciences, Technology, and Public Health. In addition, she has participated in the Multidisciplinary Association for Psychedelic Studies-MDMA People of Color, Eye Desensitization and Reprocessing Therapy, and Ketamine Assisted-Therapy Training Programs. Belinda is also a co-founding board member for the Church of the Eagle and the Condor. She joined the board of directors of the Psychedelic Association of Arizona in 2024.

She is an author of articles on topics impacting Native American communities. In addition, a contributing author to several psychedelic books that help bring innerstanding of Indigenous views and bridge gaps of understanding.

Dr. Santiago Ivan Guerra (he/him), Chicano (Coahuiltecan) from the South Texas-Tamaulipas Border—Colorado Springs, Colorado



Santiago Ivan Guerra, Ph.D. currently serves as the W.M. Keck Director of the Hulbert Center for Southwest Studies, and Director and Associate Professor of the Southwest Studies academic program at Colorado College. He is an interdisciplinary borderlands scholar working at the intersection of anthropology, history, Chicana/o/x Studies, and Indigenous Studies. His work has appeared in *Text, Practice and Performance*, *Latino Studies*, *Uncharted Terrains: New Directions in Border Research Methods and Ethics*, *Anthropology News*, *Border Policing: A History of Evasion and Enforcement in North America*, and the *Wicaso Za Review*. He was born and raised in Starr County, Texas and has strong ties to the ancestral communities of the Texas-Tamaulipas borderlands.

Terry G. Knight, Sr. (he/him), Ute Mountain Ute Tribe—Towaoc, Colorado



Terry Knight has served the Ute Mountain Ute Tribe for over four decades in various capacities. Born on the Ute Mountain Ute Reservation in Towac, CO, Terry (an enrolled Tribal Member) was raised in a traditional household, spoke Ute as his first language, and participated in tribal ceremonies and celebrations. After high school, he enlisted in the United States Airforce and later graduated from Fort Lewis College with his BA in Political Science. After graduation, he returned to his community and was elected as a Councilmember in 1977 and later Chairman for the Ute Mountain Ute Tribal Council in 1984. Terry is a respected spiritual leader in the Native American Church who has also held the position of Bear Dance Chief, and Sundance Chief and continues to serve as the Tribe's Official Cultural Preservation Representative. Terry was hired as the Native American Graves Protection and Repatriation Act (NAGPRA) Coordinator for the Ute Mountain Ute Indian Tribe due to his traditional and spiritual background. Over the years, he has worked closely and tirelessly with Ute Mountain community members; Cultural Preservation Representatives from the Southern Ute and Ute Indian Tribes; Tribal, federal, and state

government representatives; elected public officials, and academics to protect and educate others about Ute places of cultural importance (per the National Historic Preservation Act), and protect Ancestral graves, as well as repatriate and rebury Ute Ancestors under NAGPRA. In 2010, he played a crucial role in the establishment of Ute Mountain's Tribal Historic Preservation Office and was appointed as the first Tribal Historic Preservation Officer (THPO).

Terry has held positions on several committees and boards associated with culture preservation initiatives within the state of Colorado and advocated for legal change on a state level. For instance, he advocated for and worked with Tribal and State representatives to establish the State Process for Consultation, Transfer, and Reburial of Culturally Unidentifiable Native American Human Remains and Associated Funerary Objects Originating from Inadvertent Discoveries on Colorado State and Private Lands. In addition to overseeing and co-leading the cultural preservation program for the Animas La Plata Project, which resulted in the construction of Lake Nighthorse in Durango, CO; held the Tribal Representative position for Colorado Council of Professional Archaeologists; and continues to be the Tribe's representative for Colorado's Indian Boarding School Initiative; Colorado Lands Workgroup; Ft. Lewis College NAGPRA Committee; Bears Ears Inter-Tribal Coalition; and Pioneer Museum Ute Exhibit Committee. His devotion to preserving and protecting Ute heritage throughout Colorado has and will continue to inspire future generations of Ute culture preservationists.

Marlena Robbins (she/her), Navajo Nation (Diné)—Berkeley, California



Marlena Robbins, a proud member of the Diné Nation, is pursuing a doctoral degree at UC Berkeley's School of Public Health. Her research focuses on the integration of psychedelic-assisted therapies into Indigenous mental health care. Her dissertation examines regulatory barriers, healthcare adaptations, and programmatic effectiveness of culturally informed psychedelic therapies within Tribal communities. Robbins aims to develop policy recommendations, health system strategies, and evaluation models that center Indigenous knowledge systems and address systemic inequities.

Robbins is honored to serve as the Indigenous Science Student Fellow at the Berkeley Center for the Science of Psychedelics (BCSP), focusing on psilocybin mushrooms' roles across generations in urban Native communities. She is a Graduate Student Researcher at BCSP's Certificate Program in Psychedelic Facilitation, where she develops surveys and conducts data analyses to refine the program's structure.

Her residency with the Substance Abuse and Mental Health Services Administration (SAMHSA) led to the development of a tribal engagement toolkit, showcasing the significance of psychedelics in spiritual and recreational contexts among Native American communities.

Robbins' work contributes significantly to the academic field, advocating for culturally sensitive approaches to psychedelic science. Her efforts aim to illuminate the roles of psilocybin mushrooms within Native communities and influence policies that respect traditional knowledge and modern therapeutic potentials.

Councilman Darwin Whiteman Jr. (he/him), Ute Mountain Ute Tribe—Towaoc, Colorado



Darwin Whiteman Jr. is an enrolled member of the Ute mountain Ute tribe. Currently, he is one of the seven members of the Ute Mountain Ute tribal Council members.

His background is in the public safety field. His previous experience includes wild land firefighting, Ute Mountain EMS voluntary EMT, Montezuma County Sheriffs office (reserve deputy), BIA Law enforcement (BIA police officer), Ute Mountain Ute Tribe (Police officer), US Army, Ute Mountain Gaming Commission, Ute Mountain Casino Compliance Investigations and Casino Security. Personal life roles include Ceremony Craftsman of ceremony instruments and Ute Mountain Ute Native American Church Priest.

Christine Diindiisi McCleave, PhD(c) (she/her), Turtle Mountain Ojibwe—Minneapolis, Minnesota

Christine Diindiisi McCleave, enrolled citizen of the Turtle Mountain Ojibwe Nation, is currently a doctoral candidate in Indigenous Studies at the University of Alaska Fairbanks. Her research is focused on healing with Peyote and the impacts of the psychedelic movement. Formerly, she was the CEO of the



National Native American Boarding School Healing Coalition where she worked with the U.S. Department of the Interior to investigate Indian Boarding Schools and helped write the Truth and Healing Commission on Indian Boarding Schools bill for U.S. congress.

With a Bachelor of Science in Communication Studies and a Master of Arts in Leadership, she conducted her master's thesis on Native American spirituality and Christianity and the spectrum of Native spiritual practices today including Peyote religion. As a nonprofit executive, she pioneered an unprecedented national research scope, advocated for Indigenous rights at the United Nations in New York and Geneva, and raised over \$13M to support the boarding school

healing movement.

As an independent consultant, she was part of the Truth and Reconciliation Workgroup for the City of Minneapolis after the murder of George Floyd. She conducted primary source research on Alaska boarding schools for the Alaska Native Heritage Center and facilitated youth program development for the Association on American Indian Affairs. She has also worked at the grassroots community level for the exclusion of Peyote in the decriminalization of entheogens for the City of Minneapolis. A consultant for Project Mosaic, Christine served as moderator for the Federally Recognized American Tribes and Indigenous Community Working Group under Colorado's SB23-290 Natural Medicine Health Act legislation.

In 2023, she was listed as one of 75 influential, innovative, and disruptive women in Psychedelics by *DoubleBlind* magazine. She is currently a member of the board directors for the Board of Psychedelic Medicine and Therapies as well as the Vice President of the board for the Psychedelic Society of Minnesota. As a professional, an academic, and a mother of two, she continues to focus her work on Native American rights and healing of intergenerational, historical trauma resulting from genocidal U.S. Indian boarding school policies and ongoing colonization.