Letter from Dr Simon Longstaff AO
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My hope for Mind Medicine Australia (MMA) is that it will play a direct role in reducing the incidence of avoidable suffering in Australia. I think we are obliged to reduce harm in the world by pursuing ends that are good through means that are right. Thus, MMA should always aim to relieve suffering through ethically justifiable means. Yet, even as I write these words, I feel that something is missing. The preceding formulation is correct, but it is fundamentally deficient in that it tends to obscure the gritty, disturbing reality of those who suffer. That reality can never be forgotten or glossed over.

So, how are we to proceed?

In the case of MMA, our approach is to support further exploration of psychedelic-assisted treatments for specific forms of suffering associated with mental illnesses, like depression and PTSD. However, we also hope to contribute to the alleviation of other forms of suffering, such as the dread of approaching death.

For those affected, suffering is not a ‘concept’; it is a lived experience. Unless you have been there, it is hard to imagine what it is like when the ‘black dog’ takes a hold. The world literally shrinks, energies flag, the blame-of-self gnaws at your deepest parts. Then there are those who suffer PTSD – who carry permanent wounds no less deep and debilitating for being unseen.

The tragedy is that the world turned its back on psychedelic-assisted therapies that could have relieved the suffering of millions. There are many ideas as to what caused the rejection of psychedelic-assisted therapies – despite their showing so much promise during the early days of research. This is not the place to rake over those old coals – except to note the role played by Nixon-era politics (rather than science and medicine) in determining the outcome. Instead, we should be looking to the future: which is why the establishment of MMA is so timely.

MMA wishes to encourage and support scientific research to unlock new therapeutic possibilities. However, that is only half the challenge. We also need to take a lead from the emerging data and inform a change in thinking amongst regulators, policy makers, and mental health service providers. This will require MMA to name and allay old fears and prejudices. We will need to engage citizens so that they hold governments accountable for the effects of their policies.

Most politicians love to be associated with the men and women who serve in the defence forces, as police, in emergency services, etc. It is an easy thing to extol their virtue, to take advantage of a photo opportunity, to bask in their reflected glory. Easier still is to turn a blind eye to the suffering they needlessly endure, due to traumatic stress. I feel this very personally – having played some minor role in the preparation of defence force personnel prior to their deployment to theatres of war in Iraq and Afghanistan. It sickens me to think
that we would be laggards in the development of promising therapies to assist those who suffer – without adequate treatment options – as a consequence of their service.

With every passing day, the science in support of psychedelic-assisted therapies is becoming more compelling. Where other treatments fail, it succeeds. The only downside to the science is that not enough of it is happening in Australia. That needs to change.

So, my hope is that in five years’ time we will be enjoying mature, evidence-based discussions about how best to fund and deploy a new class of clinical services that augment existing approaches to the treatment of mental illness. I hope that governments have developed the courage to put the welfare of their citizens ahead of their fear of controversy – and that our politicians have used their considerable skills and positions of influence to nurture a balanced and objective understanding amongst the public.

Finally, I return to my simple hope that fewer people are suffering.

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