Supplementary Material

Using the pharmacy retail model to examine perceptions and biases of a UK population sample towards regulation of specific psychoactive drugs

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Aversion	Mean rating
It is simply not practical or realistic	7.76
It would damage the economy	5.61
Alcohol should be classified as food and drink	5.47
It would harm many people's livelihoods	6.16
Alcohol consumption has no medical benefits and	7.76
therefore alcoholic drinks do not belong in pharmacies	

Supplementary Table 1: Aversions to alcohol in pharmacies (38/105 participants).

Aversion	Mean rating
It is simply not practical or realistic	7
It would damage the economy	5.94
Some addicts would find it hard to adapt to the changes	6.03
It would harm many people's livelihoods	5.17
Smoking tobacco has no medical benefits and therefore	7.4
tobacco does not belong in pharmacies	

Supplementary Table 2: Aversions to tobacco in pharmacies (35/105 participants).

## INTRODUCTION

# Perceptions of the costs and benefits of recreational drug use

This study concerns the relative perceptions and psychology of risk and risk management of specific drugs.

The online survey is split into three sections:

- 1. Three preliminary questions regarding relative perceptions of risk
- 2. Review data and information sheets
- Questions related to harm reduction and the psychology of risk management

The data will be used to determine the perceptions of participants and to discover whether there are any trends regarding the demographics of participants. The data can be used as a basis for further studies and help guide policy.

I understand that my participation in this project will involve completing an online survey about recreational drugs.

I understand that participation in this study is entirely voluntary and that I can withdraw from the study at any time without giving a reason.

I understand that I am free to avoid responding to any questions that I feel uncomfortable answering and that I can discuss my concerns with Professor Andy Smith at the email address below.

I understand that the survey information provided by me will be stored anonymously. I understand that this information may be retained indefinitely.

I also understand that at the end of the study I will be provided with additional information and feedback about the purpose of the study.

Professor A.P.Smith, School of Psychology, 63 Park Place, Cardiff CF10 3AS e-mail: smithap@cardiff.ac.uk

By checking the box below and continuing, I consent to participate in the study conducted by project students, School of Psychology, Cardiff University with the supervision of Professor Andy Smith.

- O I consent to participate in the study
- O I do not consent to participate in the study

## **DEMOGRAPHIC INFORMATION**

Age (years)

- O Under 18
- 0 18-24
- 25-34
- 35-44
- **45-54**
- O 55+

## Gender

- Male
- Female

# Nationality / Global Region of Origin

- O UK
- Other European
- O US and Canada
- Contract Latin America
- O South Asia (e.g. India and Pakistan)
- East Asia (e.g. China and Malaysia)
- Africa
- Australasia
- Middle East

# Religion

- Atheist
- Agnostic
- Christian
- Muslim
- Hindu
- Sikh
- Jewish
- Buddhist
- Other
- No religion
- O Prefer not to answer

#### Education

- None
- O Completed secondary school / high school (e.g. GCSEs)
- A-levels or equivalent
- 0

Vocational training (e.	.g. apprenticeship)	
O Bachelor's degree		
Master's degree		
O PhD		
Occupation		
Other relevant persor	nal information	

## **Societal Pressure**

Assess whether **your understanding of the danger** the following psychoactive substances pose to the individual health of the consumer and to others is **based on verifiable facts and evidence** or **prejudice and societal pressure**.

# Alcohol



Don't know what it is (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

#### **Tobacco**



Don't know what it is (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

## **Cannabis**

Prejudice and societal pressure									Scientific evidence
1	2	3	4	5	6	7	8	9	10

Don't know what it is (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

#### **MDMA**

Prejudice and societal pressure									Scientific evidence
1	2	3	4	5	6	7	8	9	10

Don't know what it is (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

## **Psilocybin**

Prejudice and societal pressure									Scientific evidence
1	2	3	4	5	6	7	8	9	10

Don't know what it is (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

#### BASIC INFORMATION

# **Basic Information**

**Alcohol** (ethanol) is the psychoactive substance in drinks such as beer, wine and vodka responsible for their well-known intoxicating effects.

**Tobacco** is a plant used in products such as cigarettes and cigars and is typically smoked. Tobacco can be used for its psychoactive properties and is often used as an aid to relaxation.

**Cannabis** (hemp / marijuana) is a plant used in a broad range of ways and some individuals consume cannabis for its psychoactive properties.

**MDMA** (3,4-methylenedioxymethamphetamine) is the primary psychoactive compound typically found in the tablets or powders commonly referred to as ecstasy.

**Psilocybin** is the primary psychoactive compound found in a broad range of different fungi commonly referred to as magic mushrooms.

## **HARMFULNESS**

Please give each of the five substances listed a number between 1-5 where (1) is not at all harmful to the consumer and to others and (5) is very harmful based on your understanding and experience.

Please take addictive potential, typical regularity of consumption and longterm effects over an individual's lifetime into account.

Alcohol (e.g. beer/wine/vo	dka)		
Not at all harmful Not very harm (1) (2)	mful Somewhat harmful (3)	Quite harmful (4)	Very harmful (5)
Tobacco (smoked)			
Not at all harmful Not very harm (1) (2)	mful Somewhat harmful (3)	Quite harmful (4)	Very harmful (5)
Cannabis (herbal form vap	orised/smoked/ing	ested)	
Not at all harmful Not very harm (1) (2)	mful Somewhat harmful (3)	Quite harmful (4)	Very harmful (5)
MDMA (high purity pharma	ceutical quality)		
Not at all harmful Not very harman (1) (2)	mful Somewhat harmful (3)	Quite harmful (4)	Very harmful (5)

Psilocybin (when consumed as mushrooms)



Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

## **DEATHS**

How many deaths due to the following psychoactive substances per 100,000 consumers do you think happen each year in the UK?

# Alcohol

0-1 O	1-10	10-100	100-400	400-800	800-1200
Tobacco					
0-1	1-10	10-100	100-400	400-800	800-1200
Cannabis					
0-1 O	1-10	10-100	100-400	400-800	800-1200

# **MDMA** (illicit black market quality- often not MDMA but other compounds)

0-1	1-10	10-100	100-400	400-800	800-1200
0	0	0	0	0	0

# **Magic Mushrooms**

0-1	1-10	10-100	100-400	400-800	800-1200
0	0	0	0	0	0

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

## DATA AND INFORMATION SHEETS

# **Data and Information Sheets**

There has been considerable research on these topics in recent years. Relevant references can be found in the debrief section.

Deaths attributed to alcohol per 100,000 consumers per year 100	= 10-
Deaths attributed to tobacco per 100,000 consumers per year 1200	= 800-
Deaths attributed to cannabis per 100,000 consumers per year	= 0-1
Deaths attributed to ecstasy per 100,000 consumers per year	= 1-10
Deaths attributed to psilocybin per 100,000 consumers per year	= 0-1

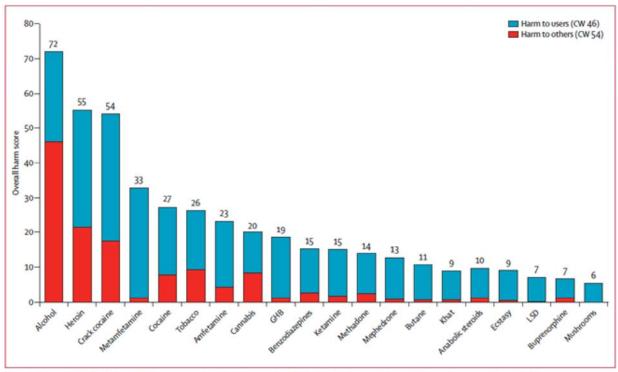


Figure 2: Drugs ordered by their overall harm scores, showing the separate contributions to the overall scores of harms to users and harm to others. The weights after normalisation (0-100) are shown in the key (cumulative in the sense of the sum of all the normalised weights for all the criteria to users, 46; and for all the criteria to others, 54). CW=cumulative weight. GHB=γ hydroxybutyric acid. LSD=lysergic acid diethylamide.

Research has suggested that of the five substances listed, alcohol is the most harmful to consumers and to others followed by tobacco as the second most harmful, then cannabis, then MDMA and the least harmful are magic mushrooms (psilocybin):

## Most harmful

- Alcohol
- Tobacco
- Cannabis
- MDMA
- Magic Mushrooms

#### Least harmful

Research has suggested that out of alcohol, cannabis, MDMA and psilocybin, the most positive is psilocybin followed by MDMA when the long-term effects on physical and mental wellbeing are taken into consideration:

## Most positive

- Psilocybin
- MDMA
- Cannabis
- Alcohol

# Least positive

# **Cannabis**

Cannabis has been found to be an effective therapeutic aid for the treatment of medical and psychological disorders including:

- Spasticity
- Nausea
- · Loss of appetite
- · Chronic pain
- Asthma
- Anxiety
- Epilepsy
- Glaucoma
- Neurodegenerative diseases including multiple sclerosis and Parkinson's
- Insomnia
- Involuntary muscle twitching as observed in Tourette's syndrome
- Depression
- Neuropathy
- Spinal cord injury

- Panic attacks
- Arthritis
- Gastrointestinal problems
- Cramps
- Migraine
- Unwanted weight loss
- Allergies
- Chronic fatigue syndrome
- Fibromyalgia
- · Bone disorders
- Stress
- Carcinoma
- Anger
- Visual impairment
- · Genitourinary problems
- · Limited mobility

## **MDMA**

MDMA has shown a lot of potential as being a useful therapeutic agent:

- Currently in clinical trials for post-traumatic stress disorder (PTSD) therapy.
- Clinical trials are ongoing for MDMA-assisted psychotherapy for anxiety associated with life-threatening illness.
- Has been used in empathy training for couples experiencing interpersonal difficulties.
- MDMA may prove to be an effective probe and treatment for a range of social behaviours.

MDMA is one of the most commonly used recreational drugs across the globe:

- MDMA enhances emotional empathy and prosocial behaviour.
- It is known as an 'empathogen' as it enhances empathy.
- Please consider how the psychosocial effects of MDMA contrast to the effects of alcohol.
- Due to MDMA's illegal status as a recreational drug the MDMA taken by consumers is often poor quality and in many cases does not include MDMA and does include other more harmful compounds such as PMA.
- As the contents of ecstasy pills and MDMA powders are extremely variable, and no reliable advice on safe consumption practices are typically given by distributors, the dangers of recreational consumption of MDMA are greatly worsened by the current methods of production and distribution.

# **Psilocybin**

Psilocybin has shown a lot of potential as being a useful therapeutic agent:

- "Psilocybe mushrooms have been used for millennia for healing purposes, but were only discovered by modern science in the late 1950s."
- Clinical trials are ongoing for the treatment of anxiety in patients with advanced-stage cancer.
- Clinical trials are ongoing for the treatment of alcohol dependence.
- Studies have suggested that psilocybin could be an effective aid for the treatment of depression.

Magic mushrooms are a naturally occurring entheogenic psychoactive substance (can be used in a religious, shamanic, or spiritual context):

- It has been found that psilocybin can induce 'mystical' experiences.
- Mystical experiences induced by psilocybin can lead to a long-term increase in the personality trait of openness.

## **QUESTIONNAIRE PART 2**

# **Questionnaire Part 2**

In light of the previously presented data and other referenced information, do you think the **legal classifications** of the five substances discussed do **correlate well** (match up well) with the **dangers** the drugs genuinely pose to users and to wider society and any potential **therapeutic uses**?

## **Alcohol**

• Freely available in regulated shops to people aged 18 and over

Not at all						Very much so
	3			8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

## **Tobacco**

• Freely available in regulated shops to people aged 18 and over

Not at all							Very much so
1	2	4	5		8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

## **Cannabis**

- Class B, Up to 5 years in prison for possession and an unlimited fine (on the spot £90 fines for possession are common)
- Schedule 1, "No therapeutic value"

Not at all							Very much so
1	3	4	5	6	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

#### **MDMA**

- Class A, "Treated by the law as the most dangerous" with up to 7 years in prison for possession and an unlimited fine
- Schedule 1, "No therapeutic value"

Not at all									Very much so
1	2	3	4	5	6	7	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

# **Magic Mushrooms**

- Class A, "Treated by the law as the most dangerous" with up to 7 years in prison for possession and an unlimited fine
- Schedule 1, "No therapeutic value"

Not at all									Very much so
1	2	3	4	5	6	7	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

#### HARM REDUCTION POINT OF

From an overall recreational drug use **harm reduction point of view**, the way that the five substances discussed are treated by the **law**, **police and the medical healthcare profession** in the UK **is** the **best approach** for the public interest.

#### **Alcohol**

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

#### Tobacco

Totally disagree									Totally agree
1	2	3	4	5	6	<b>7</b>	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

### Cannabis

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

## **MDMA**

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

# **Magic Mushrooms**

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

## HARM MINIMISATION

From the point of view of **harm minimisation** to the individual consumer and to society as a whole, which type of vendor is **most suited** to being **legally permitted** to sell the five substances discussed?

#### Alcohol

Pharmacist with available NHS support from GPs and mental health workers

Not at all suitable									Very suitable
1	2	3	4	5	6	7	8	9	10

Shop that follows laws and regulations (e.g. supermarket)

Not at all suitable									Very suitable
1	2	3	4	5	6	7	8	9	10

Unregulated black market street / online vendor

Not at all suitable									Very suitable
1	2	3	4	5	6	7	8	9	10

Selling alcohol should not be legal under any circumstances (click option below, please do not tick this choice if you have answered the questions above)

O I am unable to answer this question

## Tobacco

Pharmacist with available NHS support from GPs and mental health workers

Not at all very suitable

1 2 3 4 5 6 7 8 9 10 0 0 0 0 0 0

Shop that follows laws and regulations (e.g. supermarket)

Unregulated black market street / online vendor

Not at all Very suitable

1 2 3 4 5 6 7 8 9 10 0 0 0 0 0 0

Selling tobacco should not be legal under any circumstances (click option below, please do not tick this choice if you have answered the questions above)

O I am unable to answer this question

#### **Cannabis**

Pharmacist with available NHS support from GPs and mental health workers



Shop that follows laws and regulations (e.g. supermarket)

Not at all suitable									Very suitable
1	2	3	4	5	6	7	8	9	10

Unregulated black market street / online vendor

Not at all suitable									Very suitable
1	2	3	4	5	6	7	8	9	10

Selling cannabis should not be legal under any circumstances (click option below, please do not tick this choice if you have answered the questions above)

O I am unable to answer this question

#### **MDMA**

Pharmacist with available NHS support from GPs and mental health workers

Not at all suitable									Very suitable
1	2	3	4	5	6	7	8	9	10

Shop that follows laws and regulations (e.g. supermarket)

Not at Very all suitable



Unregulated black market street / online vendor



Selling MDMA should not be legal under any circumstances (click option below, please do not tick this choice if you have answered the questions above)

O I am unable to answer this question

## **Magic Mushrooms**

Pharmacist with available NHS support from GPs and mental health workers

Not at all suitable									Very suitable
1	2	3	4	5	6	7	8	9	10

Shop that follows laws and regulations (e.g. supermarket)

Not at all suitable									Very suitable
1	2	3	4	5	6	7	8	9	10

Unregulated black market street / online vendor

Not at all suitable									Very suitable
Sullable									
	2	3	4	5	6	7	8	9	10
4	$\bar{\frown}$	Ŏ		_	Ŏ		Ŏ	Č	
1	$\cup$	$\cup$	$\cup$	0	0	$\circ$	$\circ$	$\cup$	$\mathbf{O}$
$\cap$									

Selling magic mushrooms should not be legal under any circumstances (click option below, please do not tick this choice if you have answered the questions above)

O I am unable to answer this question

## PHARMACIES AS VENDORS

Making **pharmacies** the primary **legal vendors** of the five substances discussed is practical and realistic.

## Alcohol

Alconor									
Totally disagree									Totally agree
0	2	3	4 O	5	6	<sup>7</sup>	8	9	10
Tobacco	)								
Totally disagree									Totally agree
0	2	3	<b>4 O</b>	5	6	7 O	8	9	10
Cannabi	i <b>s</b> (both	for the	rapeutic	and red	creation	al use)			
Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

# **MDMA** (both for therapeutic and recreational use)

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

# **Magic Mushrooms** (both for therapeutic and recreational use)

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

#### PHARMACY ALCOHOL

If pharmacies were to be the primary legal vendors of **alcoholic** drinks with available NHS support from GPs and mental health workers to help manage problem drinking this would be a *positive* change that you would support.

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

If you chose 4 or under for the first question this is because:

It is simply not practical or realistic

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

It would damage the economy

Totally disagree									Totally agree
1	2	3	4	5	6	<b>7</b>	8	9	10

Alcohol should be classified as food and drink

Totally disagree									Totally agree
1	2	3	4	5	6	<b>7</b>	8	9	10

It would harm many people's livelihoods

Totally disagree									Totally agree
1	2	3	4	5	6	7 O	8	9	10

Alcohol consumption has no medical benefits and therefore alcoholic drinks do not belong in pharmacies

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

#### PHARMACY TOBACCO

If pharmacies were to be the primary legal vendors of **tobacco** products with available NHS support from GPs and mental health workers to **1**. Help people quit smoking and **2**. Advise people about the dangers before trying smoking for the first time and during the consumer's lifetime, this would be a *positive* change that you would support.

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

If you chose 4 or under for the first question this is because:

It is simply not practical or realistic

Totally disagree									Totally agree
1 O	2	3	<b>4 O</b>	5	6	7	8	9	10

It would damage the economy

Totally disagree									Totally agree
1	2	3	4	5	6	<b>7</b>	8	9	10

Some addicts would find it hard to adapt to the changes

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

It would harm many people's livelihoods

Totally disagree									Totally agree
1	2	3	4	5	6	<b>7</b>	8	9	10

Smoking tobacco has no medical benefits and therefore tobacco does not belong in pharmacies

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

## **PHARMACY CANNABIS**

If **cannabis** were to be legalised for medicinal and recreational use and sold in pharmacies with available NHS support from GPs and mental health workers, as **1**. A safer recreational drug alternative to alcohol and tobacco **2**. A source of therapeutic compounds (such as THC, CBD and other cannabinoids) and **3**. So pharmacists can give advice and guidance on safe usage practices, this would be a *positive* change that you would support.

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)



I am unable to answer this question

If you chose 4 or under for the first question this is because:

# It is too dangerous

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

# You have a religious objection

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

# It is immoral

disagree									agree
1	2	3	4	5	6	7	8	9	10

# It feels wrong

l otally disagree									l otally agree
1	2	3	4	5	6	7	8	9	10

# It sends the wrong message to people

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

You feel comfortable things staying the way they are as it is what you are used to

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

You cannot accept or approve of people who use cannabis

Totally disagree									Totally agree
1	2	3	4	5	6	<b>7</b>	8	9	10

You do not like the smell of cannabis

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

#### PHARMACY MDMA

If **MDMA** were to be legalised for therapeutic and recreational use and sold in pharmacies with available NHS support from GPs and mental health workers, as **1**. A safer recreational drug alternative to alcohol and tobacco **2**. A rational evidence-based solution to the ongoing problem of unregulated party drugs such as mephedrone **3**. A potential therapeutic tool for psychotherapy and **4**. So pharmacists can give advice and guidance on safe usage practices, this would be a *positive* change that you would support.

Totally disagree									Totally agree
1	2	3	4	5	6	7 O	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

If you chose 4 or under for the first question this is because:

# It is too dangerous

Totally disagree									Totally agree
0	2	3	4	5	6	7 O	8	9	10
You have	e a relig	gious ob	jection						
Totally disagree									Totally agree
0	2	3	4	5	6	7 O	8	9	10
It is immo	oral								
Totally disagree									Totally agree
0	2	3	<b>4 O</b>	5	6	<sup>7</sup>	8	9	10

# It feels wrong

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

It sends the wrong message to people

Totally disagree									Totally agree
1	2	3	4	5	6	<b>7</b>	8	9	10

You feel comfortable things staying the way they are as it is what you are used to

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

You cannot accept or approve of people who take MDMA

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

You do not like the idea of people using psychoactive drugs for entertainment

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

#### PHARMACY PSILOCYBIN

If **magic mushrooms** were to be legalised for therapeutic and recreational use and sold in pharmacies with available NHS support from GPs and mental health workers, as **1**. A safer recreational drug alternative to alcohol and tobacco **2**. A potential therapeutic tool for psychotherapy and **3**. So pharmacists can give advice and guidance on safe usage practices, this would be a *positive* change that you would support.

Totally disagree Totally

10

Don't know (click option below, please do not tick this choice if you have answered the question above)

O I am unable to answer this question

If you chose 4 or under for the first question this is because:

# It is too dangerous

Totally disagree									Totally agree
1	2	3	4	5	6	<sup>7</sup>	8	9	10

# You have a religious objection

disagree									agree
1	2	3	4	5	6	7	8	9	10

## It is immoral

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

# It feels wrong

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

It sends the wrong message to people

Totally disagree									Totally agree
1	2	3	4	5	6	7 O	8	9	10

You feel comfortable things staying the way they are as it is what you are used to

Totally disagree									Totally agree
1	2	3	4	5	6	<b>7</b>	8	9	10

You cannot accept or approve of people who consume magic mushrooms

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

You do not like the idea of people using psychoactive drugs to have mystical / religious experiences

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

## **HUMAN RIGHT**

Being legally permitted to consume the five substances discussed is a **human right**.

## **Alcohol**

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

# **Tobacco**

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

## Cannabis

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

# **MDMA** (high quality)

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

# **Magic Mushrooms**

Totally disagree									Totally agree
1	2	3	4	5	6	7	8	9	10

Don't know (click option below, please do not tick this choice if you have answered the question

O I am unable to answer this question

#### **DEBRIEF**

# Debrief – Perceptions of the costs and benefits of recreational drug use

Thank you for completing the questionnaire. The questions you answered are intended to provide information about perceptions of the relative risks of different drugs, attitudes to harm reduction and the psychology of risk management.

The data you provided will be used to determine whether there are any emerging trends on this topic which will form the basis for future research and help guide policy.

Information about the studies from which the data and information sheet is based are shown on the next sheet.

If you have any queries or concerns about the research, please contact the supervisor (Andy Smith) using the contact details below.

Thank you again for your participation.
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