



Psychedelic Institute Australia

COURSE BROCHURE · 2027 INTAKE

— THE FLAGSHIP PROGRAM

Essential skills for *psychedelic-assisted therapy*

A five-day clinical skills intensive for mental health and other allied health professionals.

DATES

February 8–12, 2027

LOCATION

Abbotsford Convent

Melbourne, Victoria

5 DAYS IN PERSON + ONLINE PREPARATION

SMALL COHORT

[PSYCHEDELICINSTITUTE.COM.AU](https://www.psychedelicinstitute.com.au)

Why psychedelic therapy training is needed

The Australian Therapeutic Goods Administration rescheduled MDMA and psilocybin as Schedule 8 Controlled Medicines from 1 July 2023, following emerging evidence that MDMA-assisted psychotherapy and psilocybin-assisted psychotherapy are effective in treating PTSD and Major Depressive Disorder. The change is narrow: MDMA may be prescribed for PTSD and psilocybin for treatment-resistant depression, by psychiatrists approved as Authorised Prescribers. Safe use depends on the clinicians delivering the therapy being trained for it.

Research shows evidence for the effectiveness of MDMA and psilocybin-assisted therapy. Training turns that evidence into safe practice.

Two Phase 3 randomised controlled trials have examined MDMA-assisted psychotherapy for PTSD. Between 67% and 71% of participants receiving MDMA-assisted therapy no longer met the criteria for PTSD, compared with 32% of those who received a placebo. These studies used the MAPS MDMA-assisted Psychotherapy Manual.

For psilocybin, the COMPASS COMP360 Phase 2b trial (233 participants, 10 countries) found a single 25 mg dose achieved a 29% remission rate and a 54% response rate in patients who had failed two to four prior antidepressants; two Phase 3 trials met their primary endpoints in February 2026. Unlike MDMA-assisted psychotherapy, the psychotherapy component has not been standardised: several treatment manuals are in use, informed by different schools of psychotherapy but outlining a similar structure: preparation, administration and integration.

Two of the present trainers (PS & SB) authored systematic reviews of preparation (k = 83 studies) and administration sessions (k = 82 studies) in substance-assisted psychotherapy, finding wide variation in both. The key qualities and competencies required of psychedelic-assisted therapists, however, have been well defined, and are the focus of this training.

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AT A GLANCE

35 hours

APS CPD approved

Small cohort

Kept deliberately intimate

5 days

9am to 5pm, in person

5 modules

Online, before the intensive

Previous intakes have been held in Byron Bay, NSW. The February 2027 intensive runs at the Abbotsford Convent in Melbourne.

PIA's bespoke training model

Three processes are involved in developing new therapist skills: acquiring *theoretical knowledge*, learning *procedural skills*, and engaging in *reflective practice*. The Essential Skills program addresses all three.

Theory

Declarative knowledge, acquired through pre-course online learning and a limited amount of didactic content during the intensive.

Procedural skills

The primary focus. Acquired through pairs and group role-plays, demonstration and self-experiential learning.

Reflective practice

Structured self-reflection running throughout the five days, and continuing after the training concludes.

OUR GOAL

This five-day intensive prepares you to take your first clinical steps as a psychedelic-assisted therapist.

Competence, however, requires ongoing clinical experience, supervision, and reflective practice beyond the training. The training goal is to equip you with foundational clinical skills, protocols, and safety knowledge. You'll need clinical supervision and a commitment to continued learning as you integrate this modality into your practice.



Didactic content is kept deliberately limited; most of the five days is spent practising, including self-experiential work.

The Four S's

Psychedelic-assisted therapy rests on four conditions. Each one is something the therapist actively learns, practises and refines over time. Our curriculum is built around developing competence in all four, together rather than in isolation.

Set

PREPARING THE CLIENT

The client's mental and emotional state going into the experience shapes everything that follows. This involves assessing psychological readiness, working with a client's expectations and ambivalence, and developing the clinical judgement to know when a client is ready to proceed, and when they are not.

Setting

THE THERAPEUTIC ENVIRONMENT

The context in which therapy occurs, including the relational environment, is an active therapeutic variable. This involves designing and managing a space that supports a non-ordinary state of consciousness: the physical environment, the music, the safety protocols, and the relational conditions that allow a client to engage with the work safely.

Skills

CLINICAL COMPETENCIES

Competencies specific to psychedelic-assisted therapy (preparation, dosing-session presence, working with difficult experiences as they emerge, and integration) are practised through role-plays, supervised exercises and live demonstrations. These are the techniques that cannot be acquired through reading alone.

Self

THE INNER WORK

Countertransference is heightened in psychedelic-assisted therapy. Working therapeutically with your own responses and emotions in the presence of clients' non-ordinary states requires ongoing self-examination of blind spots, edges, and the ways the therapist's inner state becomes part of the treatment.



The July 2026 Byron Bay cohort at the close of the five-day intensive.

Course structure

PART 1 · ONLINE

Five online eLearning modules via Psychedelics Today, covering pharmacology, research evidence, clinical protocols and ethical frameworks. Access is granted as soon as your enrolment is confirmed, and the modules are completed ideally before the in-person intensive.

Five quizzes assess competency and video viewing is optional. Completion is required for the certificate.

PART 2 · IN PERSON

The five-day intensive is delivered at the Abbotsford Convent, Melbourne, from 9am to 5pm daily, in a small cohort.

A Zoom integration session with the facilitation team follows two to four weeks after the intensive.

Hybrid structure: online preparation modules, five days in person, and a post-program Zoom session.

Learning outcomes

UPON COMPLETING PART 1, PARTICIPANTS CAN

- Name the main categories of psychedelic substances
- Identify key events and figures in psychedelic history (western context)
- Name the main research areas of the 1950s and 60s
- Summarise the main research findings of contemporary psychedelic science
- Describe Grof's model of the psyche and apply it to understand a participant's experience
- Explain the key components and dimensions of altered states induced by psychedelics
- Describe the fundamental principles and methodologies of psychedelic therapy
- Evaluate the potential benefits and risks associated with psychedelic-assisted treatment

UPON COMPLETING PART 2, PARTICIPANTS CAN

- Understand inclusion and exclusion criteria for the treatment
- Select, administer and evaluate appropriate baseline and outcome assessments
- Manage communication and collaboration with wider treatment professionals
- Set up and manage the treatment environment: music, lighting, comfort, safety equipment
- Demonstrate an understanding of how to conduct preparation sessions and build client readiness
- Thoroughly understand safety concerns and implement safety protocols
- Conduct integration sessions that consolidate gains, and help participants develop integration strategies
- Understand the ethical principles of conducting this therapy, and identify supervision pathways

Daily schedule

9am to 5pm daily · Morning and afternoon tea provided · Lunch in nearby cafés

DAY ONE

Orientation & foundations

- Working with psychedelic medicines
- Ethical practice
- Reflective practice and self-awareness
- Set, setting and the therapeutic frame

DAY TWO

Preparation session

- Core therapist skills
- Setting up the therapeutic space
- Conducting a preparation session
- Pairs and group role-plays

DAY THREE

Experiential day

- Two guided breathwork sessions
- Group debrief and shared reflection
- Discussion, feedback and peer learning
- Post-session guidelines and documentation

DAY FOUR

Dosing & integration

- Integration circle and reflective practice
- Managing the dosing session
- Addressing challenges and difficult experiences
- Reflection and therapist self-care

DAY FIVE

Integration & beyond

- Managing the integration session with clients
- Future sessions and ongoing support
- Supervision and therapist development pathways
- Next steps: practice under supervision

Schedule is subject to change.

A Zoom integration session with the facilitation team follows two to four weeks after the intensive.

About Psychedelic Institute Australia

A multidisciplinary team of pioneers — clinical psychologists, psychiatrists, and specialist practitioners committed to advancing ethical, evidence-based psychedelic-assisted therapy in Australia.



A PIA public panel discussion.

OUR STORY

Australia's recognition of psilocybin and MDMA as medicines by the TGA has highlighted the growing need for training, advice and consultancy in psychedelic-assisted therapy.

Our trainers work as therapists and investigators on Australian MDMA and psilocybin trials, and publish in the field. We offer theoretical and practical training for clinicians at a range of levels of experience, with a particular focus on the Australian context.

OUR MISSION

To train Australian clinicians in psychedelic-assisted therapy to a standard that supports safe practice and good treatment outcomes for people with PTSD or treatment-resistant depression.

We also contribute to the ethical and culturally responsible standards the field will need as it establishes itself in Australia.



Expansion within safety

Our symbol represents the expansion of consciousness within a safe container, the core principle of psychedelic-assisted therapy. It was designed by local artist Scarlet Barnett.

Meet your trainers

Australian researchers and clinicians who have helped shape the field, with direct clinical and research experience in MDMA, psilocybin and end-of-life trials, and in psychedelic education.



Renee Harvey

CLINICAL PSYCHOLOGIST

A therapist on Imperial College London's psilocybin versus escitalopram trial, with trial experience in the UK and Australia and over 30 years working in mental health with individuals with severe difficulties. She has run therapist training courses in the UK and internationally, speaks at conferences and on podcasts, and wrote the chapter on training psychedelic therapists in *Into the deep: Integrating psychedelics and psychotherapy* (2021). Renee has a particular interest in depth psychology and the potential for psychedelics to facilitate transformative change.



A/Prof Petra Skeffington

CLINICAL PSYCHOLOGIST & RESEARCHER

A clinical psychologist in private practice and an academic at Murdoch University in Perth. Her research and clinical work centres on psychological trauma and recovery: resilience to trauma, prevention of post-trauma pathologies, and new approaches to treatment. She was the first MAPS-certified clinician in Australia, is a lead therapist on a clinical trial investigating MDMA-assisted psychotherapy, and is part of the therapy team on a psilocybin-assisted psychotherapy trial. With Dr Bright she was first to administer MDMA in an Australian clinical trial.



Dr Stephen Bright

PSYCHOLOGIST & RESEARCHER

A clinically trained psychologist with 18 years' experience working with people experiencing a substance use disorder co-morbid with one or more mental disorders. A MAPS-certified clinician, he is principal investigator of Australia's first clinical trial of MDMA-assisted psychotherapy, where he works as a co-therapist with A/Prof Skeffington, and an associate investigator and lead therapist in a Phase 2 trial of psilocybin-assisted psychotherapy for PTSD. A psychology board approved supervisor, he is Senior Lecturer and course coordinator of the Addiction Studies program at Edith Cowan University.



Diego Pinzon, MA

PSYCHEDELIC EDUCATOR

Diego has worked in the psychedelic field across the non-profit sector and the Psychae Institute, and teaches in the Psychedelics Today Vital training program. He contributes to the psilocybin trial for end-of-life depression and anxiety at St Vincent's Melbourne. He holds a Bachelor's degree in Psychology from the University of Canberra and a Master's degree in Transpersonal Psychology from Sofia University in Palo Alto, California.

Program details

DATES

February 8–12, 2027

LOCATION

Abbotsford Convent

1 St Heliers Street, Abbotsford, Melbourne, Victoria.

TIME

Five full days, 9am–5pm

COST

\$4,295 AUD early bird

Early bird closes December 1, 2026. Full price \$4,695 AUD. Payment plans are available, so talk to us. We don't want cost to be the reason a clinician can't access this training.

HOW TO APPLY

Places are limited and cohorts are kept small. Submit an application form and we will be in touch to discuss whether the program is right for you.

[Apply now →](#)

TALK TO US FIRST

Questions, feedback or more information: we are happy to discuss the program before you apply.

info@psychedelicinstitute.com.au

psychedelicinstitute.com.au

Included: five days of in-person training, 35 hours of APS-approved CPD, the online preparation modules, all training materials, a certificate of completion and the post-training Zoom session. Not included: travel, accommodation and meals outside training hours. We are transparent about what the program does and does not qualify you for: it is foundational training in the clinical practice of psychedelic-assisted therapy, not a licensure pathway, and Australia does not yet have a national accreditation framework.

Psychedelic Institute Australia acknowledges the Traditional Custodians of the lands on which we live, learn and work, and pays respect to Elders past and present.

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February 8–12, 2027 · Abbotsford Convent, Melbourne · Small cohort. Applications are open at psychedelicinstitute.com.au, or write to us and we will talk it through with you first.

Small cohort. Intensive. No hype. Evidence and practice-based.