

Medical Psilocybin Equity, Access, and Cultural Considerations Committee Meeting Minutes

Location: Virtual

Date: February 4, 2026

Time: 5:15 pm to 6:30 pm

Minute Taker: Adrian Estrada, DOH

**This meeting was recorded. For specific details pertaining to the meeting, please refer to the recording located on the Medical Psilocybin Advisory Board Website: [Psilocybin Advisory Board](#)*

Agenda items

1. Call to Order and Opening Statements

- DOH staff (Dominick Zurlo) opened the meeting and invited DOH staff to introduce themselves.
- Participants were reminded that the meeting was being recorded and publicly posted, and to avoid profanity.
- Cameras remained off to preserve connectivity and avoid inappropriate backgrounds.
- While awaiting the Chair, DOH shared program and board information.
- Chair DezBaa joined, introduced herself and invited participant introductions, especially from new attendees.

2. Introductions

Participants introduced themselves verbally or in chat and shared location, background, and interests related to equity, access, and cultural considerations. Introductions included clinicians, counselors, attorneys, researchers, mycologists, advocates, tribal community members, and public participants.

Key introductions summarized:

- Kate Hawke: Santa Fe based, 40 years working in psychedelics and traumas, MAPS member, experience with Native American trauma projects and Colorado facilitator licensing.
- Cheves Flemming: Questa based mycologist with 30 years' experience, teachers mushroom classes, uses psilocybin for cluster headaches.

- Gregory Evans: Santa Fe resident, independent researcher, and home mycologist, no formal affiliations.
- Brett Phelps: Attorney based in Las Vegas, NM residing in Mora, interested in rural access.
- Catherine Warnock: Las Cruces based licensed counselor and advocate for psilocybin-assisted healing.
- Meredith McBranch: Future clinical psychology practitioner, works with justice impacted populations, interested in integrating psychedelic assisted therapies.
- Zoe Spyralatos: Psychiatric Nurse Practitioner and professor in Buffalo, NY, invited by a colleague in NM, research focus on equity, access, and cultural considerations.

3. Equity, Access, and Rural Considerations

Chair DezBaa framed discussion around statewide equity, access, and cultural alignment, particularly for rural and tribal communities.

Topics discussed:

- How to define populations most in need of access, including those experiencing marginalization or lack of services.
- Concerns that needs vary significantly across New Mexico, with different realities in places like Roswell versus Farmington.
- Reference to Wisconsin model where grant funding for SUD/ODD services was directed to four tribal nations to administer culturally aligned programs.
- Suggestions that community led approaches would inform NM psilocybin implementation.
- Discussion of barriers to tribal engagement, including unclear points of contact and formal liaison pathways.
- Recognition that industries such as film may classify Las Cruces as “rural,” highlighting differing definitions of rurality.

4. Public Comment Process

Participants were reminded of the formal written public comment process:

- Submit written comments to medical.psilocybin@doh.nm.gov
- If referencing external documents, include only a working hyperlink and brief context.
- Include full legal name and any organizational affiliations.
- Deadline for inclusion in this meeting record: February 5, 2026 at 5:00 pm.

5. Tribal Engagement and Program Planning

- DOH shared that conversations with State Tribal Liaison were underway.
- A tentative March convening was discussed to invite all Native governments in New Mexico for a day of dialogue on health topics, including Medical Psilocybin.
- Dan Huson noted that in Oregon, tribal participation in psilocybin discussions has been limited, partly due to cost and concerns about ritual use.
- Catherine Warnock raised questions about which committee would address licensing pathways for Indigenous healers who may not pursue formal degrees.
- DOH indicated the Training and Education Committee is reviewing licensure levels and certification pathways.
- Chair DezBaa asked whether DOH planned to provide training, outreach, or liaison support to assist Indigenous communities in engaging with the program.

6. Midwifery Analogy and Traditional Practice

- A participant (KM) compared Wisconsin's licensed midwifery framework, which recognizes both formally trained midwives and "traditional" midwives serving Amish and Mennonite communities.
- Suggestion that New Mexico could consider a comparable model to protect traditional ceremonial practices involving whole plant medicines within the Medical Psilocybin Act.

7. Next Steps and Future Meetings

- DOH recommended developing a concrete list of equity and access priorities for future meetings.
- Next meeting tentatively scheduled for Wednesday, March 11 at 1:00 pm.
- Chair DezBaa requested both morning and evening options for future meetings to accommodate broader participation.

8. Adjournment

- Meeting adjourned at approximately 6:30 pm.

Attendance

**Medical Psilocybin Equity, Access, and Cultural Considerations Committee
February 4, 2026**

Chair

DezBaa

DOH Staff

Adrian Estrada, DOH

Jorge Gonzales, DOH

Ismail Zoutat, DOH

Dominick Zurlo, DOH

Robert Truckner, DOH

Participants and Public Attendees

Kate Hawke

Cheves Fleming

Brett Phelps

Catherine Warnock

Meredith McBranch

Zoe Spyralatos

Dan Huson

Shane McDaniel

Ash Shelton

Matthew Armstrong

Alyia Doughty

KM

Committee Chat**Contact information:**

- Email: Medical.Psilocybin@doh.nm.gov
- Program Website: <https://www.nmhealth.org/about/mcpp/mpp/>
- Advisory Board Website: <https://www.nmhealth.org/about/mcpp/mpp/mpab/>

Medical Psilocybin

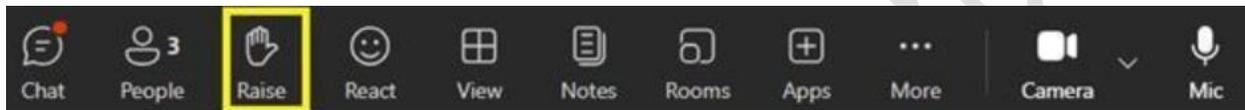
How to submit written public comments:

- Please send written public comment to the program email at: medical.psilocybin@doh.nm.gov
- If referencing documents from other sources/websites, do not include the document, only a working hyperlink; and explain the context.

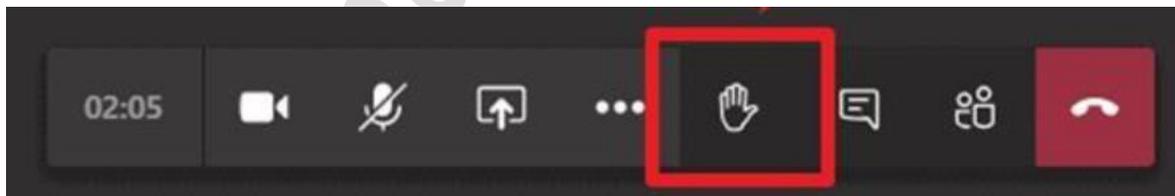
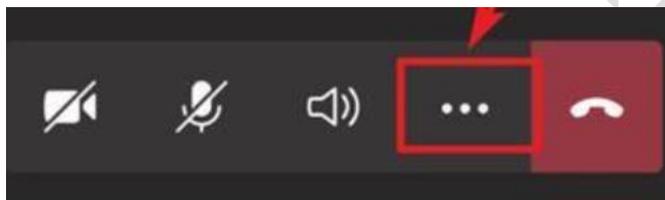
- o If a document is sent without context, it will not be considered public comment and will not be included.
- Please remember to include your full, legal name and any organizational affiliations you may be representing (if any) on the documents.
- It will then be included in the meeting record.
- To be included, please send your comment by Thursday, February 5th at 5:00 PM.

How to raise your hand to speak:

- If on a computer – click on the “hand” icon near the top of the Teams window (it says “Raise” under the icon)



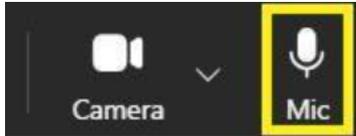
- If on the Teams app on a phone, please press the ellipses (three dots) in the menu and then the “hand” icon will appear, and you can select it



- If you are joining through voice only on a phone, press *5 to raise or lower your hand

How to Unmute:

- Once your name is called, you will be able to unmute:
- To unmute/mute on Teams on a Computer or on the Teams Phone App click on the microphone icon:



- On a computer it is in the upper right area of the Teams window.
- On a phone it is usually in the lower left of the Teams App, however, different models of phone (Apple, Android, etc...) may have the mute/unmute icon in a different location:
- Telephone: voice only - press *6 to unmute/mute

It's happening again. I will type into the chat.

The Second Session of the 57th Legislature

January 2, 2026 - January 16

Legislation may be prefiled

January 20

Opening day (noon)

February 4

Deadline for introduction

February 19

Session ends (noon)

March 11

Legislation not acted upon by governor is pocket vetoed

May 20

Effective date of legislation not a general appropriation bill or a bill carrying an emergency clause or other specified date

<https://www.nmlegis.gov/>

Home - New Mexico Legislature

My name is Zoe Spyralatos and I am a Psych NP and professor in Buffalo, NY (buried in snow, haha). I was invited by a colleague who teaches in NM and I was interested because this is my area of research and I'd like to bring into practice. I am very familiar with the topic of equity, access, and cultural considerations. I can give more detail on that a different time, but wanted to at least say hello and thank you for having me.

Rich truths, DezBaa. Gratitude for bringing concern for historical reckoning, wholeness and elevating the strength into the circle.

It's my first time.

Ash Shelton (Unverified) left the chat.

UW Milwaukee and the State of WI had grant monies to utilize for SUD/AODA programs in Indigenous communities. Instead of those state institutions administering grant monies, they turned it over to four nations in the state to create their own programs to serve their communities closest to home in the most culturally aligned means possible.

This might sound naive, so I apologize for my ignorance... how can we get the tribes and nations in NM to come to the table? Do we send representatives to their community to invite them? Are there any liaisons out there that already have connections? I remember hearing that some of the death doulas have these connections.

It is not

massive in comparison to a lot of cities

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Ash Shelton (Unverified) left the chat.

What committee will be responsible for licensing requirements for this program? I think one very important thing is to create a path for indigenous healers that don't require degrees and such. That is a big part of what will enable them to be a part of this program.

The training and education committee is looking at the licensure levels and certifications.

But, please remember, there is overlap among the committees regarding these topics.

I suppose this is where education and cultural equity overlap then.

Catherine Warnock (Unverified)

I suppose this is where education and cultural equity overlap then.

Yes, exactly

The other issue I see is that the native communities worry about losing federal funding.

Right on DezBaa. I think it's a good approach.

Sorry, bringing to the table what I know (as a naturopathic midwife) for consideration in NM. With regard to LMs (licensed midwives) in WI (Wisconsin) there are two recognized groups of midwives who serve primarily in out-of-hospital/home birth settings. One group needs to have completed a fairly rigorous education and testing program. The other group allows for what I believe the state refers to as "traditional" midwives to allow Amish/Mennonite midwives to legally practice in ways they have for generations. I wonder if something similar could be worked into NMs Medical Psilocybin Act to allow for those to continue traditional ceremonial practices in use for generations perhaps with whole plant medicine.

Pending Final Approval