

DREAM BIGLEY

COACHING



AN EDUCATIONAL GUIDE

MICRODOSING PSILOCYBIN IN COLORADO

Science, personal use, licensed facilitation,
and the wisdom of the Earth. What the research actually shows, what
Colorado law permits, and what this work is not.

REVERENCE FOR THE MEDICINE. RESPONSIBILITY FOR THE EXPERIENCE.

THERE IS A DIFFERENCE BETWEEN BELIEVING NATURE HAS
SOMETHING TO TEACH US AND PRETENDING WE ALREADY
UNDERSTAND EVERYTHING IT IS TEACHING.

That difference matters.

Psilocybin has moved rapidly from cultural taboo into mainstream conversation. Executives talk about microdosing. Researchers study psychedelic compounds for depression and other serious conditions. Colorado has built the country's most ambitious state framework around natural medicine. The FDA is actively developing guidance for psychedelic-drug research.

And yet there is still a great deal we do not know. That may be exactly where a responsible conversation should begin.

NOT WITH HYPE.
NOT WITH FEAR.
WITH RESPECT.

Respect for the science. Respect for the law. Respect for Indigenous and ancestral traditions that worked with psychoactive fungi long before modern medicine took an interest in them. Respect for the person considering the experience. And respect for the simple reality that something being found in nature does not automatically make it harmless, or make every claim made about it true.

At Dream Bigley, the deeper philosophy is not that mushrooms contain a shortcut to becoming someone new. It is that sometimes changing the conditions around us can help us see differently what has been within us all along.

That is a much more interesting conversation. And a much more honest one.

Section One

FIRST, WHAT IS MICRODOSING?

In contemporary psychedelic culture, microdosing generally refers to taking a very small amount of a psychedelic substance with the intention of producing subtle effects rather than a conventional psychedelic experience.

There is no single universally accepted clinical definition of a psilocybin microdose, and research protocols vary considerably. That matters because the word **microdose** can make something sound standardized when it isn't.

Researchers commonly describe microdosing as repeated exposure to low or very low doses intended to avoid the pronounced perceptual changes associated with larger psychedelic doses. The National Center for Complementary and Integrative Health notes that people commonly report using microdoses in hopes of improving mood, stress, productivity, focus, or pain, but also states clearly that it is not yet known whether microdosing psilocybin is safe or effective.

HOLD THIS LIGHTLY

Microdosing is better understood as an emerging practice under active scientific investigation, not an established medical treatment. That distinction is foundational to everything that follows.

Section Two

JOHNNY BIGLEY'S STORY: WHY LIVED EXPERIENCE MATTERS, AND WHERE IT STOPS

Johnny Bigley's relationship with psilocybin did not begin as a productivity experiment. It began in pain.

In 2023, *The Denver Post* told part of Johnny's story in an article titled "These Coloradans sought out psilocybin-assisted therapy before it was legal. Here's why." The newspaper reported that in 2021 Johnny sat in a Denver apartment preparing for a facilitated psilocybin experience after carrying decades of unresolved childhood trauma and grief surrounding the death of his father when Johnny was 13.

He had spent years accomplishing things externally while struggling internally. The experience described by the *Denver Post* was emotional and intense. Johnny described moving through fear, grief, forgiveness and tears, and eventually being able to speak aloud things he had held privately for decades. For Johnny, that experience became part of a much larger personal transformation.

But an important distinction needs to be made.

Johnny's experience described in the *Denver Post* was not microdosing. It was a substantially larger guided psychedelic experience. His story should not be used as scientific evidence that microdosing produces the same effects.

His story demonstrates something different. It demonstrates why he became interested in this work at all. It demonstrates what can happen when a person who has spent decades avoiding parts of himself finally becomes willing to look inward.

And perhaps most importantly, it demonstrates that the substance itself was not the end of the story. There was still a marriage. A family. A business. Patterns. Choices. Relationships. Responsibility. And life after the experience.

That is where integration enters the conversation.



JOHNNY IN CEREMONY

Section Three

THE MEDICINE MAY OPEN A DOOR. YOU STILL HAVE TO WALK THROUGH IT.

One of the most dangerous narratives surrounding psychedelics is the idea of the miracle experience. Take something. Have a revelation. Become healed.

Human beings rarely work that way. A person may have an extraordinary realization and still return home to the same marriage, the same employees, the same triggers, the same body, the same habits, the same unfinished conversations.

AN EXPERIENCE MAY CHANGE WHAT SOMEONE CAN SEE.

THE HINGE OF THE WHOLE THING

INTEGRATION DETERMINES WHAT THEY DO WITH WHAT THEY SAW.

This is one reason Colorado's regulated model doesn't treat natural medicine as simply a product someone purchases and walks away with. The regulatory framework includes preparation, informed consent, screening, administration and integration as distinct pieces of natural medicine services. Licensed facilitators also carry obligations involving participant safety, documentation, transportation planning, risks, benefits, boundaries and other safeguards.

CONTEXT MATTERS.

Section Four

THE WISDOM OF THE EARTH, WITHOUT TURNING NATURE INTO MARKETING

The phrase “plant medicine” is widely used culturally. But accuracy matters here too. Psilocybin mushrooms are not plants. They are fungi.

Psilocybin is a naturally occurring compound produced by numerous species of mushrooms. Research into the evolutionary ecology of psilocybin suggests that the compound existed as part of fungal biology long before humans ever encountered it, although scientists still do not know its precise ecological role. That fact actually makes the story more extraordinary, not less.

Humans encountered organisms in the natural world capable of radically changing human perception. And some cultures learned to approach those organisms not merely as intoxicants but within systems of ritual, community, responsibility and meaning.

Historical and ethnomycological research documents the ceremonial and healing use of psilocybin-containing mushrooms among Indigenous peoples of Mesoamerica. The Mexica and Aztec term *teonanácatl* is commonly translated as “flesh of the gods,” and historical accounts describe mushrooms being incorporated into religious and healing practices.

Modern psychedelic culture should approach that history with humility. It would be inaccurate to claim that ancient cultures practiced today's Western concept of microdosing. It would also be disrespectful to flatten sophisticated Indigenous traditions into an inspirational slogan.

What we can learn is something larger. For much of human history, medicine, community, spirituality, nature and meaning were not always separated into entirely different categories.

TWO QUESTIONS, KEPT HONEST

The Western scientific model asks: what does this molecule do? Traditional systems may also ask: what is our relationship with it? Those questions don't have to compete. They can keep each other honest.

Section Five

MOTHER EARTH IS NOT A GUARANTEE OF SAFETY

NATURAL DOES NOT MEAN HARMLESS.

Nature gives us nourishment. Nature also gives us poison. The same Earth produces medicines, toxins, allergens, venom and organisms capable of killing us. Respect for nature therefore shouldn't produce recklessness. It should produce humility.

Psilocybin can produce powerful changes in perception, emotion and cognition. Reported adverse effects can include anxiety, confusion, nausea, headaches, increased blood pressure or heart rate, paranoia, panic and other difficult psychological experiences. Certain psychiatric conditions can significantly increase risk, and researchers routinely use careful screening criteria in clinical studies.

Even at lower doses, NCCIH notes reports of insomnia, increased anxiety, poor mood, physical discomfort, problems with concentration and other unwanted effects.

THE POSTURE THAT KEEPS PEOPLE SAFE

REVERENCE SHOULD NEVER MEAN PRETENDING RISK DOESN'T EXIST.
REVERENCE MEANS TAKING RESPONSIBILITY SERIOUSLY.

Section Six

WHY ARE SO MANY PEOPLE SAYING MICRODOSING IS MAKING A DIFFERENCE?

Here the story becomes fascinating, because there are really two bodies of evidence. There is what people report. And there is what researchers have been able to demonstrate under controlled conditions. They do not perfectly match.

In a large 2022 observational study, researchers followed 953 people who were microdosing psilocybin and 180 people who were not. The microdosing group showed small-to-medium improvements in measures of mood and mental health over approximately one month. That is interesting. But observational research cannot establish that microdosing itself caused those changes.

Someone who begins microdosing may simultaneously begin meditating, exercising, drinking less, journaling, spending more time outside, entering therapy, changing relationships, sleeping differently, joining a community, or simply believing strongly that change is coming. All of those things matter.

Controlled research has therefore produced a more cautious picture. A 2022 double-blind, placebo-controlled study of psilocybin mushroom microdosing found noticeable subjective and brain-activity effects at low doses but did not find evidence supporting improvements in well-being, creativity or cognitive function. The researchers concluded that expectation appeared to explain at least some commonly reported benefits.

But even the placebo question isn't completely settled. A 2024 review of 19 placebo-controlled microdosing studies concluded that low-dose psychedelics appear capable of producing measurable changes in physiology, neurobiology, subjective experience and some aspects of cognition. The authors argued that available research was still too limited to conclude that microdosing is simply a placebo phenomenon.

More recent randomized research has remained cautious. Two double-blind placebo-controlled trials found no significant sustained improvement in the behavioral or subjective outcomes researchers studied after statistical correction. And a 2026 systematic review and meta-analysis covering 24 studies and 3,681 participants found that controlled trials showed subjective and neurophysiological effects from microdosing but minimal consistent benefit for cognition, creativity or sustained mood, with no clear evidence of immediate reductions in depression, anxiety or stress compared with placebo.

So what is the responsible conclusion? Not “microdosing doesn't work.” And not “science proves microdosing heals people.”

THE MORE ACCURATE CONCLUSION

SOMETHING IS HAPPENING. WE ARE STILL DETERMINING EXACTLY WHAT, FOR WHOM, UNDER WHAT CIRCUMSTANCES, AND HOW MUCH OF THE REPORTED BENEFIT COMES FROM THE SUBSTANCE ITSELF VERSUS EXPECTATION, CONTEXT AND ACCOMPANYING BEHAVIORAL CHANGE.

That uncertainty isn't a weakness. That's what honest science looks like.

Section Seven

MAYBE THE QUESTION IS BIGGER THAN THE MOLECULE

This is where lived experience and laboratory research can have an intelligent conversation. When someone decides to work intentionally with natural medicine, they may simultaneously decide: I am going to pay attention. I am going to stop numbing myself. I am going to examine my relationships. I am going to listen to my body. I am going to spend time in nature. I am going to tell the truth. I am going to create space. I am going to change something.

Science has to isolate variables. Life doesn't. That doesn't mean the medicine deserves credit for everything that changes. It means transformation is complicated.

A BETTER QUESTION

Perhaps the most useful question isn't "does this mushroom change my life?" Perhaps it is "what am I doing differently with my life because I have decided to pay attention?" That is where natural medicine can become a teacher rather than a product.

Section Eight

HOW COLORADO CHANGED THE CONVERSATION AROUND PSILOCYBIN

Colorado has created something unusual in American law. There are effectively two distinct pathways to understand: personal use and regulated natural medicine services. They should not be confused.

COLORADO · PATH ONE

PERSONAL USE

Colorado voters approved Proposition 122, the Natural Medicine Health Act, in 2022. The General Assembly subsequently refined the law through SB23-290 and later legislation. For adults 21 and older, Colorado law generally protects personal possession, consumption, cultivation and noncommercial sharing of qualifying natural medicine within defined limits.

Colorado's statutory definition of personal use also recognizes sharing with another adult in contexts that can include counseling, spiritual guidance, beneficial community-based use and healing, supported use, or related services. But the word **personal** is important. Personal use does not mean a free-for-all commercial marketplace.

Selling natural medicine for remuneration outside the regulated framework remains prohibited. Colorado's Department of Natural Medicine expressly warns that sales and commercial distribution outside the licensed system remain unlawful. Cultivation also carries requirements: it must occur on private property, with restrictions intended to prevent access by people under 21. Public consumption remains unlawful.

In other words, Colorado changed criminal law around personal use. It did not turn psilocybin mushrooms into ordinary retail merchandise.

COLORADO · PATH TWO

LICENSED NATURAL MEDICINE FACILITATION

Separate from personal use, Colorado created a regulated system for natural medicine services. The Colorado Department of Regulatory Agencies oversees professional facilitator licensing, while the Department of Revenue regulates natural-medicine businesses and the regulated supply chain.

Licensed facilitation is much more structured than simply sitting with someone while they take mushrooms. Colorado's rules address screening, informed consent, preparation, participant goals, risk assessment, safety and support plans, transportation planning, administration, professional boundaries, documentation, and integration.

The rules also require licensed facilitators to represent their credentials accurately and disclose the licenses they hold.

A MAJOR 2026 CHANGE: ADVERTISING RULES TIGHTENED

Colorado enacted HB26-1325 in 2026, with the relevant session law effective August 12, 2026. Among other changes, the law prohibits advertising natural medicine or natural-medicine products and restricts advertising of bona fide harm-reduction or support services offered for remuneration in the personal-use framework. It also prohibits using those services as a mechanism for conducting natural-medicine sales.

This means businesses must be careful about the difference between educating people about natural medicine, providing appropriately structured coaching or support, providing services through Colorado's regulated system, and advertising an arrangement that effectively sells access to mushrooms. Those are not necessarily the same thing legally. For Dream Bigley, that distinction is a feature rather than an inconvenience. Clarity creates trust.

ON CREDENTIALS, SAID PLAINLY

Colorado does not issue a separate credential called a “microdosing license.” A person may hold a Colorado Natural Medicine Facilitator or other applicable natural-medicine credential. That credential should be described by its actual legal title. Not expanded for marketing. Not renamed. Not implied.

DOES THE REGULATED SYSTEM ALLOW LOWER-DOSE EXPERIENCES?

Yes. Colorado's facilitator regulations specifically contemplate lower-dose administration. Current rules state that when a regulated administration session involves under 10 milligrams of total psilocin, the session must last at least three hours and continue until the participant is showing no obvious adverse effects. Higher-dose categories require longer minimum administration periods. That does not mean Colorado legally defines every dose under 10 milligrams as a microdose. It means the framework recognizes lower-dose administration and sets minimum safety requirements for it.

COLORADO LEGAL DOES NOT MEAN FEDERALLY LEGAL

Psilocybin and psilocin remain Schedule I controlled substances under federal law as of October 2026. Colorado's protections operate under Colorado law. They do not repeal federal law. At the same time, federal attitudes toward psychedelic research are evolving rapidly. In July 2026, the FDA finalized industry guidance specifically addressing clinical investigation of psychedelic drugs, and the agency continues to support research into possible future psychedelic treatments for serious mental-health conditions. But research interest is not the same thing as blanket medical approval.

WHAT MICRODOSING IS NOT

Perhaps the most responsible way to understand microdosing is to be equally clear about what it is not.

◆ NOT A PROVEN CURE

Promising stories are not the same thing as clinical proof. Current controlled research does not establish microdosing as a reliable treatment for depression, anxiety, trauma, ADHD or other conditions.

◆ NOT GUARANTEED TO IMPROVE CREATIVITY OR PRODUCTIVITY

Some people report those outcomes. Controlled studies have frequently failed to reproduce them consistently.

◆ NOT RISK-FREE BECAUSE THE DOSE IS SMALL

Lower dose does not mean zero effect, zero interaction or zero psychological risk.

◆ NOT APPROPRIATE FOR EVERYONE

Health history, mental-health history, medications and other individual circumstances matter. Colorado's regulated system requires safety screening for precisely this reason.

◆ NOT THE SAME AS PSYCHEDELIC-ASSISTED THERAPY

Microdosing, full-dose psychedelic experiences, psychotherapy, coaching, personal use and regulated facilitation are distinct concepts. They should not be casually blended together.

◆ NOT A SUBSTITUTE FOR APPROPRIATE MEDICAL OR MENTAL-HEALTH CARE

Someone with significant physical or psychological symptoms should not be encouraged to abandon established care because of claims made about psychedelics.

◆ NOT PERMISSION TO SELL MUSHROOMS IN COLORADO

Colorado's personal-use protections do not create an unrestricted commercial market.

◆ NOT FEDERALLY LEGAL SIMPLY BECAUSE COLORADO CHANGED ITS STATE LAWS

Federal and Colorado law currently differ.

◆ NOT PROOF THAT NATURAL EQUALS SAFE

That may be the most important myth of all. Nature deserves more respect than that.

Section Ten

WHAT RESPONSIBLE NATURAL-MEDICINE WORK LOOKS LIKE

The future of natural medicine should probably not be built by people promising miracles. It should be built by people willing to say what they know, and what they do not.

- ◇ We know this. We don't know this yet.
- ◇ This was my experience. This is what the research actually demonstrates.
- ◇ This is what Colorado permits. This is what Colorado prohibits.
- ◇ This is where my professional competence begins. And this is where it ends.

That kind of honesty creates a safer container than certainty ever could. A responsible approach values preparation before experience and integration afterward. It respects consent. It screens rather than assumes. It recognizes when another professional needs to become involved. It does not pressure. It does not promise a cure. It does not sell transformation by the milligram. And it never confuses surrender with giving away personal agency.

Section Eleven

FIVE TEACHERS, ONE SOURCE

At Dream Bigley, nature becomes more than scenery around the work. It becomes metaphor.

FIVE TEACHERS, ONE EARTH

EAGLE	JAGUAR	SNAKE	ELEPHANT	HUMMINGBIRD
Teaches perspective	Asks us to enter what we fear	Shows that life grows by shedding	Teaches grounded strength	Life happens in the moment we inhabit

Different lessons. One Earth.

Psilocybin belongs within that same larger conversation. Not because a mushroom possesses every answer, but because humans have repeatedly encountered something in the natural world capable of disrupting the certainty with which we normally see ourselves. Sometimes that disruption can be meaningful. Sometimes it can be uncomfortable. Sometimes it may be both.

THE GOAL IS NEVER WORSHIP OF THE SUBSTANCE. THE GOAL IS RELATIONSHIP WITH THE LESSON.

Section Twelve

THE REAL QUESTION ISN'T "SHOULD EVERYONE MICRODOSE?"

No. That isn't the question. Microdosing will not be right for everyone. Some people will decide it isn't right for them at all. Some will find that meditation, therapy, exercise, community, time outside, spiritual practice or honest conversation gives them precisely the doorway they were looking for. Others will choose to explore natural medicine within the boundaries of Colorado law and with appropriate professional guidance.

Human transformation has never belonged to one modality. The deeper question is this.

THE DEEPER QUESTION

WHAT HELPS YOU BECOME MORE HONEST, MORE PRESENT AND MORE RESPONSIBLE FOR THE LIFE YOU ARE CREATING?

Johnny's story did not become meaningful because a mushroom magically repaired his life. It became meaningful because an experience helped him encounter things he could no longer continue carrying in silence, and because he chose to do something with what he encountered. That's the part of this conversation worth protecting.

THE MEDICINE MAY CHANGE PERCEPTION. THE PERSON STILL CHOOSES THE LIFE THAT FOLLOWS.

In Closing

REVERENCE FOR THE MEDICINE. RESPONSIBILITY FOR THE EXPERIENCE.

Perhaps modern science and ancient wisdom don't need to defeat one another. Science can teach us to measure. Tradition can remind us to respect. Law can create boundaries. Facilitation can create a safer container. Integration can return the insight to ordinary life. And nature can continue doing what it has done long before any of us arrived, teaching without demanding that we understand everything at once.

LISTEN CAREFULLY.

QUESTION BOLDLY.

RESPECT WHAT YOU DON'T KNOW.

AND NEVER SURRENDER RESPONSIBILITY FOR YOUR OWN LIFE.

That may be the beginning of real wisdom.

Heal yourself, then your family, then the world.



FAMILY IS THE REASON, AND THE FIRST PLACE THE WORK GOES HOME

ABOUT THE GUIDES



JOHNNY W. BIGLEY

COACH • MENTOR • SPEAKER

Johnny is a coach and speaker in Lakewood, Colorado. He spent two decades building a commercial construction company before his own healing became the work of his life. He now walks with others through theirs.



NIKOLE SUNSHINE BIGLEY

GUIDE • SOMATIC PRACTITIONER

Nikole brings nervous system work, somatic processing, and ceremony held with care. She and Johnny do much of this work side by side, each holding a pole so no one gets handled by only half of them.

IMPORTANT EDUCATIONAL AND LEGAL NOTICE

This article is provided for general education and does not constitute medical, psychiatric or legal advice. It does not recommend that any person use psilocybin or another psychedelic substance.

Colorado's natural-medicine laws and regulations continue to evolve. The information above reflects publicly available law and regulations reviewed through October 1, 2026. Anyone relying on Colorado's personal-use provisions or operating a natural-medicine-related business should obtain current guidance from qualified Colorado legal counsel.

People considering natural-medicine services should disclose relevant health conditions and medications to appropriate qualified professionals, and should verify the licensing status and scope of practice of anyone representing themselves as a Colorado natural-medicine facilitator.

If any part of this guide brings up a personal crisis: in the U.S., call or text 988 for the Suicide & Crisis Lifeline, any hour, any day. Veterans can press 1.

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