CHEMSEX – How Ontario Can Get Ahead of an Emerging Epidemic of Sexualized Drug Use Among Gay, Bisexual and Other Men Who Have Sex With Men

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With gratitude and respect, we acknowledge that we are on the traditional territory of the Mississaugas of the Credit First Nation, the Haudenosaunee, and the Huron-Wendat. Today, this land is home to many diverse First Nations, Metis and Inuit people from across Turtle Island and we are grateful to have the opportunity to work in this territory.
Disclaimers

- Drugs
- Sex

I will work to take us out of our comfort zone. Chemsex requires that we do that as healthcare providers.
Who is in the room?

"I'm right there in the room, and no one even acknowledges me."

*The New Yorker, 9/18/06*
Chemsex is a term commonly used by gay, bisexual, queer and other men who have sex with men (GBMSM) to describe the use of certain drugs in a sexual context. It is a very specific form of drug use.

**Associated drugs:**
- GHB/GBL
- Mephedrone
- Crystal meth (Tina)
- Might also include: Ketamine, Cocaine, MDMA, Viagra, poppers

In the North American context, Chemsex is referred to as “Party n Play”
An emerging picture

- Public Health England reports more gay men injecting drugs than ever before
- More gay men accessing mainstream drug services
- More presentation's for nPeP
- More reports of sexual assault
- More HIV, repeated STBBI’s
Chemsex first appears in 2013

“Some gay men are preferring to have sex without condoms for a variety of complicated reasons associated with a changing HIV health situation and using drugs to manage a complex relationship to sex, intimacy, and gay identity. Mix this with an alarming increase in injecting use and a reluctance to access traditional drug services, and the potential for a costly and culturally harmful epidemic of HIV and HCV and drug use is enormous” - David Stuart
Community Context

- HIV as a medically manageable chronic condition
- Stable rates of HIV incidence - noted increases among younger gay & bisexual men
- Year over year increases in STI incidence notably syphilis
- Advent of PrEP and Undetectability (U=U)
- Changing landscape of social spaces and hookup-culture and rise of online communities/ sexual health negotiations
- HIV criminalization
- Stigma prevalent (sex, drugs, HIV, PrEP)
- Experiences of social marginalization, trauma, violence
It gets better?

- N=910 participants from across Ontario
  - Cisgender and transgender GBMSM
  - 14 years old+
  - Live in Ontario

- Highly educated/low income sample
- Older/younger age distribution
- Good rural presentation (12% of sample)

Number of adverse childhood events:
18% of sample reported 5 OR more events

Depression levels:
- Moderate (10-14) 117 (12.9%)
- Moderately severe (15-19) 86 (9.5%)
- Severe (20-27) 80 (8.8%)

** PHQ ≥10 considered to be clinically significant

Gay men today...

- Are navigating the most complex social and community norms...
  - Communicating what we want
  - Communicating what we don’t want
  - Facing rejection
  - Performance anxiety
  - Forming relationships
  - More connected online while feeling more isolated
  - Economic stressors- income, cost of living, gentrification

Gay men are taking so much to the bedroom.

How can we support skill development in these area’s?
Very specific about intention to meet and have sex while high.
Chemsex serves us

- Chemsex can meet emotional and sexual needs for some gay men
- Serves a range of social purposes for participants
  - Creation of social networks
  - Bonding/ reduced social isolation
- Coping mechanism in response to syndemics, societal homophobia, minority stress, marginalization, current/historical insecurities, HIV stigma and all the shit we deal with as gay and bisexual men
- Cyclical nature reported by men (sober sex unsatisfying, use, great sex, shame ...
Sexual adventure & experimentation
- Cognitive barriers/ personal limits of sexual behaviour discarded
- Fulfilling sexual fantasises

More sex for longer periods of time

Sex while high feels really good – relaxation, confidence, sensations, performance, rituals, euphoria, raised pain threshold
- These feelings are valued and contribute to sexual enjoyment
So what does this mean for our health & wellbeing?

- Increased risk for HIV, HCV and other STBBI's
  - # of partners, cuts/abrasions, barebacking
- Inconsistent treatment adherence for HIV positive gay men
- Acute effects of the drugs
  - Come downs
  - Psychosis
  - Overdose / black outs
- Interruption in activities of daily living
- Sexual assault and violence

HCV incidence increasing for gay men living with HIV & HIV negative men. – (Hagan H et. al, 2015)

Poly drug users more likely to report HIV risk behaviours- (Halkitis & Parsons, 2002)

Gay men having Chemsex are five times more likely to have a new HIV diagnosis than other gay men (Pakianathan M et al, 2018)
Approximately twice as many men aged 35 to 44 years reported PnP compared with all other age groups.

Men who identified as gay were significantly more likely to report PnP than those who did not identify as gay.

PnP use did not vary significantly income group. Participants earning incomes less than $30,000 per year tended to report PnP somewhat more than those making more.

N. Lachowsky, University of Victoria, 2017
A window into Chemsex...

A drugs awareness film about "ChemSex"; to help health practitioners better understand the context of sexualised drug use.

*Produced by Three Flying Piglets (UK).*
What can we do?

- Data collection - we have fallen behind other jurisdictions
- Appropriate assessments
  - **Ask 3 questions:**
    - Do you like to party when you have sex?
    - What are you using?
    - Are you having fun?
- Increase our own capacity to respond
  - Cultural awareness
  - Harm reduction
- Scale up evidence based interventions
- Reduce silos and work towards interdisciplinary models of care
Gay men would benefit from the type of “patient-centred care” recommended by the Patients First policy of the Ministry of Health and Long Term Care, which mandates: “Focus on people, not just their illness. Provide care that is coordinated and integrated, so a patient can get the right care from the right providers. [and] Help patients understand how the system works, so they can find the care they need when and where they need it” (Ontario, 2015).
The ideal...

Substance Use / Harm Reduction

Community Based Organizations

Sexual Health

Addressing acute harms: withdrawal, overdose, syringe distribution, referrals

STI/HIV/HCV testing, nPeP/PrEP, prevention, treatment, referrals

Specialist Chemsex support based in sexual health clinic preferred by guys - (Tomkins et al, 2017)

GMSH workers, volunteers, peers who are familiar with gay hookup-culture, apps, sexual contexts
Contact Us

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