The Perfect Storm: Gay Men, Crystal Meth and Sex

Cultural Considerations for Gay Affirming Treatment

Craig Sloane, LCSW, CASAC Private Practice New York City

> newleafnyc@gmail.com 917-670-0483





How did Crystal Meth become so popular with Gay Men?

In order to figure this out we need to understand:

- Pharmacology of Crystal Meth
- Cultural considerations
- Crystal meth, gay men and sex
- Crystal meth and HIV
- Gay Male Sex and Drug Sub-Cultures
- Gay Men's Vulnerabilities to Substance Abuse and Why Crystal Meth is such a "Good Fit"



How can addiction professionals help?

In order to figure this out we need to understand:

- Gay Affirmative Treatment
- How to Treat the Fusion of Crystal Meth Use and Sex
- How to Overcome the Unique Challenges of Treating this Population



Pharmacology of Methamphetamine



Street Names for Methamphetamine

Chrissy

- Ice
- Crystal
- Speed

Meth

Crank

• Tina

Glass



What is Crystal Meth?

Crystal meth can be found as a white, yellowish or reddish powder, a waxy solid or a clear rock. A 1/4 gram dose costs about \$20.

As a stimulant, crystal increases the release of dopamine and norepinephrine, the brain's pleasure and alert chemicals. This produces euphoria, increases energy, prolongs sexual performance, and suppresses appetite. Crystal can also produce feelings of power, confidence, invulnerability, and intense sexual desire.

The high can last 8 to 12 hours (depending on tolerance) and is followed by a period of exhaustion, depression, irritability, and (sometimes) paranoia known as the "crash." Crystal is extremely addictive. Many gay and bi men overestimate their ability to keep recreational use from escalating into dependence

History of Methamphetamines

- 1887 synthesized by German pharmacologist L. Edeleono
- 1919 Methamphetamine first created in Japan
- 1927 British chemist Gordon Ailes discovers the stimulating affects of meth and realizes potential for increasing alertness, alleviating fatigue and creating euphoria. Ailes studies their ability to mimic an adrenaline rush in the body and the well known "fight or flight" response.
- 1932 US pharmaceutical company buys the patent to Ailes discovery. Drug marketed as nasal decongestant that could be inhaled called Benzedrine.
- WWII amphetamines used extensively by Germany, US and Japan for energizing and antidepressant properties. By end of the war 2% of Japanese dependent.
- 1959 first use of IV injection of contents of Benzedrine inhaler reported in US
- 1971 last non prescription inhaler was removed from US market



History of Methamphetamines – Gay Men

- In the late 1990s and early 2000s methamphetamine became the most widely used illicit drug among urban gay and bisexual men
- Increasing meth use among gay/bisexual men now reported in Midwest and eastern cities as well
- Connection between meth use, sexual compulsivity including sexual risk behaviors, and sexually transmitted infections is clear
- Many cities are have taken action both on community and institutional level
- More attention at national level (congressional hearings, media reports, prime time TV specials, films)
- Fastest growing drug problem in the US (SAMHSA, 2003)



Routes of Administration

- Swallowing
- Snorting
- Smoking
- Hard Railing
- Booty Bumping
- Injecting (slamming)



Meth Intoxication

- Euphoria, sense of invulnerability
- Sharpened/narrowed focus/attention
- Talkative
- Stimulation of "pleasure centers" in brain greatly enhance desire for and experience of sex
- Insomnia
- Irritability
- Tremors
- Hypothermia
- Cardiovascular: increased heart rate, blood pressure, tachycardia, dysrhythmia
- Respiratory: increased respirations, pulmonary hypertension, decreased lung capacity particularly when smoked



Meth and the Brain

- Meth use causes changes in brain function
- Damage to transmission of dopamine and serotonin (neurotransmitters that affect pleasure)
- Decreases function of brain cells in the thalamus (motor sensory, emotional signals)
- Decreases function of striatum (reward-linked motivation, planning, impulse control)
- Operates on the same pleasure center of the brain that becomes activated during sexual activity

Neurological/Psychological Effects of Meth

Perceived **Positive** Effects

- Sense of invulnerability
- Sense of power
- Inflated sense of confidence
- Hypersexuality
- Neutralizes negative feelings
 - Self doubt
 - Social anxiety
 - Isolation
 - Poor self image



Neurological/Psychological Effects of Meth

Perceived **Negative** Effects

- Anxiety
- Hypervigilance
- Hypersexuality
- Paranoia
- Persecutory delusions
- Auditory/tactile hallucinations ("meth bugs")
- Presents as paranoid schizophrenia
- Loss of impulse control
- Impaired decision making



Signs of Withdrawal from Meth

The Crash

- Subjective and physiological depression
- Extreme irritability
- Shaking, nausea, palpitations, sweating
- Excessive drowsiness or difficulty sleeping
- Increased appetite
- Suicidal ideation
- Lingering psychotic symptoms
- Overwhelming sense of shame



Crystal Meth and Gay Men



Life as a Gay Man

- Societal and internalized homophobia and heterosexism
- HIV/AIDS
- Emphasis on youth and beauty in gay male subcultures
- History of sexual abuse (more prevalent for gay men)
- Mental illness (more prevalent in LGBT population)
- Higher rates of substance abuse in LGBT populations
- Compartmentalization of sex and intimacy
- Shame, fear and Isolation
- Substance use is the norm in certain segments of gay culture
- Lack of support for gay relationships including when the



Cultural Factors – 1970s

- Post Stonewall
- Sexual freedom
- Institutionalization of gay rights movement
- Homosexuality was removed from DSM as a disease
- Lots of HOPE and lots of SEX
- Coming out and having sex as a political act
- Gay bars and clubs were "community centers"
- Disco!
- Drugs of choice: ETOH, poppers, mescaline, LSD, canna

Cultural Factors – 1980s

- Continuation and globalization of gay rights movement
- Bowers v Hardwick (upheld criminalization of gay sex)
- AIDS Grief, Loss and Trauma
- Bath houses shut down
- Community Organizing Empowers the Community (ACT-UP, GMHC, etc.)
- Ronald Reagan
- "Fighting for our rights and fighting for our lives"
- Drugs of choice: ETOH, cocaine, ecstasy and "club drugo"



Cultural Factors – 1990s

- Protease inhibitors
- HIV seems no longer to be a death sentence
- Domestic partnership/Marriage equality begins
- Resurgence of gay club scene
 - Circuit Parties
 - Sex Parties
 - Poz Parties
- "Mainstreaming" of gays in the media
- Crystal Meth Anonymous (NYC)

And....

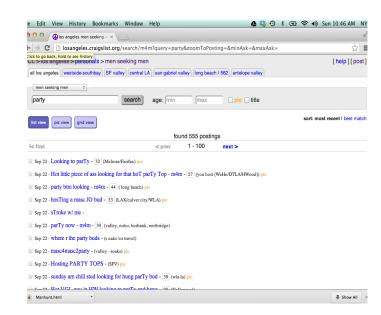


Cultural Factors – 1990s

• The Internet!







• Drugs of choice: ETOH, crystal meth, GHB, club drugs, Viagra, ste



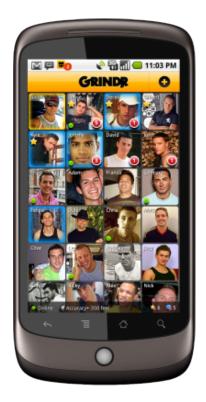
Cultural Factors – 2000s

- Marriage equality
- Lawrence v. Texas (rules anti-sodomy laws unconstitutional)
- Partner benefits
- Right wing backlash increase in anti-gay violence
- "Long-term survivors"
- HIV infection rates among gay/bi men soar despite 20 years of prevention efforts – many blame on crystal meth use
- HIV infection 3x higher among gay/bi meth users in LA
- Meth/Sex subculture spreads from traditional gay white neighborhoods and infiltrates minority gay communities of color
- And....



Cultural Factors – 2000s

Apps!





• Drugs of choice: ETOH, crystal meth, GHB, steroids



Crystal Meth, Gay Men, Sex Raymond's Story

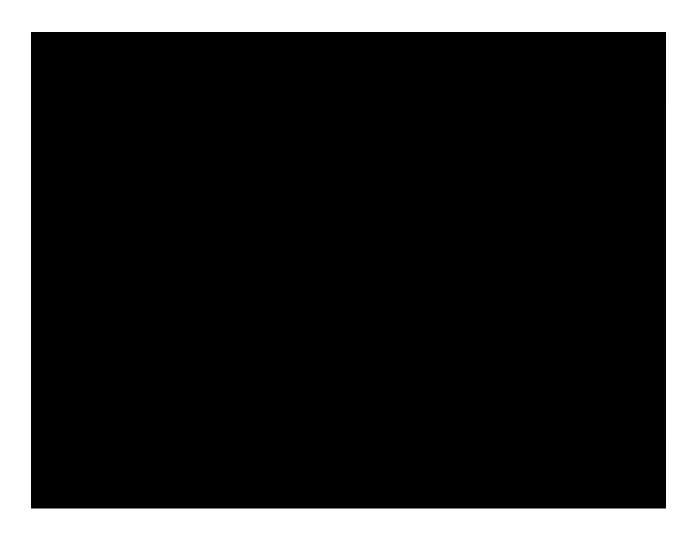
"Somewhat similarly to the discos of the 1970s, crystal sex is a place where gay men can escape the real world, be with like-minded men and not have a care in the world other than to think about sex. One word that I have found that describes sex on Tina is *delicious*. My experience is that the beginning part of shooting crystal into my veins is the phenomenal horniness that is just so delicious. It's like nothing I've ever experienced. It is what causes me to relapse after I get some clean time and it's what I hope I am finally being able to put behind me. I have come to realize that I will never experience that level of sexual pleasure again. Luckily, or unluckily, I have come to realize that the time it takes me to recover is not worth feeling that feeling.

That drug is BRILLIANT at making the entire world go away. If you want escapism, crystal is your drug. And if you LOVE sex, there is nothing greater than sex on crystal.

And I am not alone. It doesn't surprise me in the least that many of my comrades in CMA have lost their retirement, their houses, their jobs, their significant others, their families all for the sake of having amazing sex fueled by a seemingly amazing drug. I've seen men of every race, economic status, intellectual ranking, etc...it goes all across the board and it makes absolutely no sense other than it provides some absolutely great sex at the beginning and you end up wanting that over and over again. And with that drug you lose all sense of time so the next thing you know it's 2 days later and you haven't eaten, taken your meds, put any water into your body etc.

Whoever invented this drug must have gay men in mind and what a brilliant strategy!!"







- Perceived Sexual Benefits of Meth
 - Increases sex drive and sexual pleasure
 - Weight loss increases perceived desirability
 - Escape from guilt and shame associated with gay sex
 - Eases social anxiety
 - Lowers sexual inhibitions
 - Facilitates "intimacy"
 - Increases longevity of sex and number of sex partners
 - Can have sex with "guys that are out of my league"



- Sex and crystal meth BOTH stimulate dopamine-mediated mesolimbic pathway – natures way of tricking animals to repeat behaviors such as sex and eating (survival)
- Crystal meth overstimulates this pathway which stimulates sex drive to a pathological extreme, resulting in compulsive sexual behaviors



The combination of stimulant drug use and sex, two extremely potent reinforcers, creates a "super high" that is more addicting than the drug use alone. Individuals who experience these potent effects become addicted not only to the drug, but to the combination of the drug-induced high and the highly charged drug-induced sexual experiences. For these individuals, drugs and sex are [often] inseparable.

Cocaine and Methamphetamine Addiction: Treatment, Recovery, and Relapse Prevention By A.M. Washton & J.E. Zweben. Norton Professional Books, 2009.



Crystal Meth, Gay Men and HIV

- When used by gay and bisexual men meth is closely connected to sexual identity and sexual expression (Reback, 1997; Frosh et al. 1996; Gorman et al., 1995)
- Strong connection between meth use and sexual risk behaviors (Shoptaw et al. 2005; Reback, 1997)
- 56% of MSM surveyed in 4 US cities who reported meth use in past 6 months also reported unprotected anal intercourse (CDC, 2001)



Crystal Meth, Gay Men and HIV

- Sexual behaviors associated with meth use puts users at significant risk for transmission and/or infection with HIV and numerous other STI's (Peck et al, 2005; Molitor et al., 1998)
- High number of sexual partners (Shoptaw et al., 2005; Reback & Grella, 1999)
- Decreased condom use (Semple et al, 2002)
- Of the 24% of MSM in pacific region reporting recent meth use, those reporting unprotected anal intercourse are 4 times more likely to have used MA before or during sex than those reporting no unprotected anal intercourse (Hirshfield et al., 2004)

Crystal Meth, Gay Men and HIV

- Decreased medication adherence
- Contributes to development of medication-resistant strains of HIV (Salomon et al. 2005; Ahmad, 2002; Simon et al., 2002)
- Binge use associated with weight loss, hallucinations, and paranoia further challenges already immunecompromised individuals



Meth, Gay Men and HIV



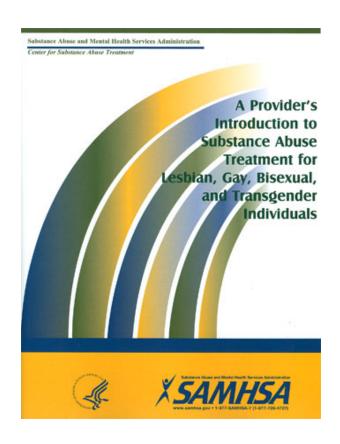




Considerations for Gay Affirming Treatment



What is Gay Affirmative Treatment?



http://store.samhsa.gov/

- Treatment that promotes self acceptance
- Creates a safe, non-judgmental environment
- Does not pathologize gay sex or desire, including kink, fetishes, etc.
- Empathizes with the trauma of societal homophobia/ heterosexism



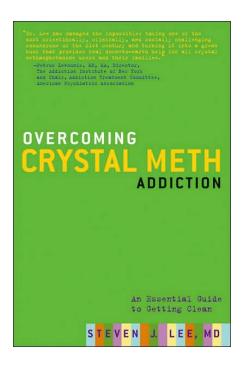
Counseling Strategies

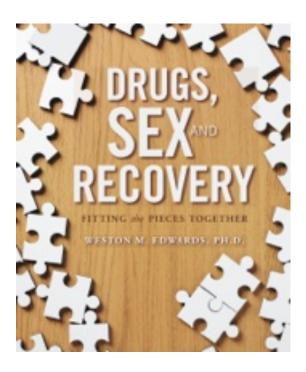
- Gay affirming
- Group counseling the power of community combats shame and internalized homophobia
- Crystal Meth Anonymous
- Differential diagnosis (mental disorders, sex)
- Behavioral approach (retrain the brain)
- Harm reduction as a pathway to recovery

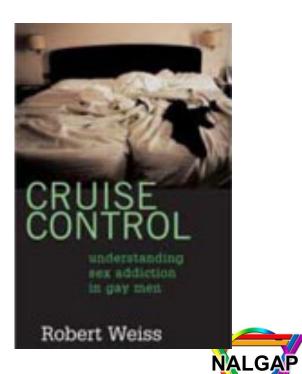


Counseling Strategies

Psychoeducation: Knowledge = Power







Sex itself often becomes a trigger for meth use.
Sex can become a barrier to treatment and lead to relapse. When under the influence of meth, the sexual pleasure is so intense that many addicts fear they will never experience the same level of sexual pleasure sober.



Perceptions of users

- Sober sex isn't possible or will be boring
- Sex will never be the same (as good) again
- Having sex will arouse fantasies of sex on drugs and will lead to relapse
- Meeting people for sex will lead back to using drugs
- Not being able to have sex will lead to using drugs



- Acknowledge the powerful pleasure experienced with crystal and sex.
- Understand that this was "unnatural"
- Accept that sober sex will not be as intense and may not be as pleasurable.
- Combat fantasies that one day it will be just as good without crystal as it was with crystal



- Period of abstinence
 - Not forever
 - Give your body and brain time to heal
 - Disentangle the connection between sex and crystal
- Relearn sex
 - People, places, things (net nanny)
 - Ease you way in (no pun intended!)
 - Disentangle the connection between sex and crystal
 - No more compartmentalization



- What about sex addiction?
 - Differential diagnosis
 - If sexually compulsive behaviors persist into recovery seek specific help for sexual compulsivity/addiction (professional and self-help)
 - Some will need specialized treatment for co-occurring crystal meth addiction and intimacy disorder



Recovery is Possible!





Q&A

