

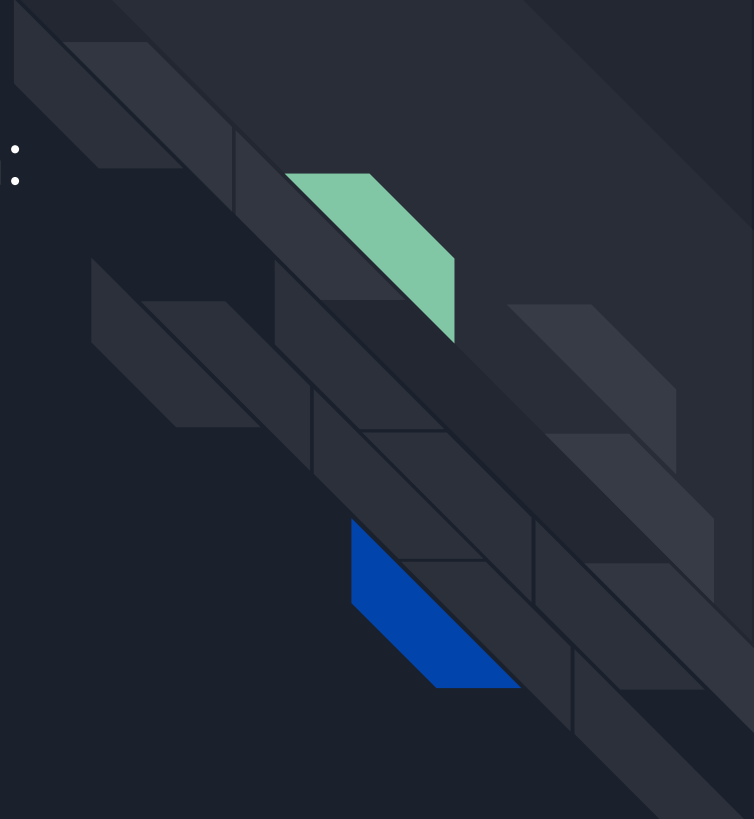


Crystal Meth & Sex

Vincent Francoeur (He-Him) - November 2023
Presentation for RAAM clinics

Populations I worked with:

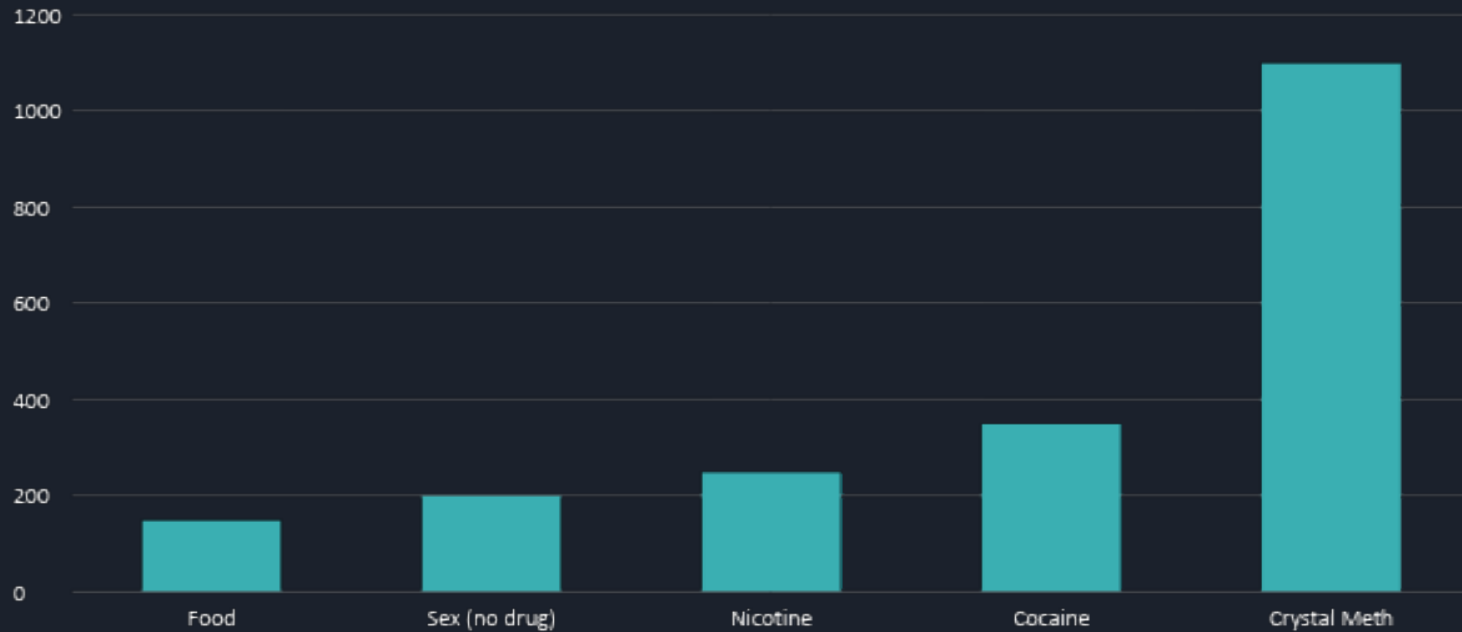
- Gay, bi and queer men (PnP)
- (Male) sex workers



What is Crystal Meth

- Metamphetamine – Speeds up the body central nervous system
- Main ingredient is Ephedrine (or Pseudoephedrine) – current in cold medication
- Other chemicals are added; mostly extracted from common products:
 - Rubbing alcohol
 - Lye (Sodium hydroxide)
 - Lithium (from batteries)
 - Toluene (Break cleaner)
 - Ether (Engine starter fluid)

Dopamine



Effect of the drug

- Extreme amount of dopamine (“feel good” neurotransmitter) in the brain
- High boost on energy level – Euphoria, increased confidence, talkativeness
- Perceived increasing effect on focusing faculties
- Increase horniness – When dopamine release gets linked with sexuality
- Increase visual memory, decrease auditory memory
- Shuts down the “self-critic”, and “self-preservation” (survival) voices in the head
- Dopamine responds to novelty; doing the same thing each time procures less pleasure
This explains why some user have a clear escalation of a need for new stimuli

Sexuality

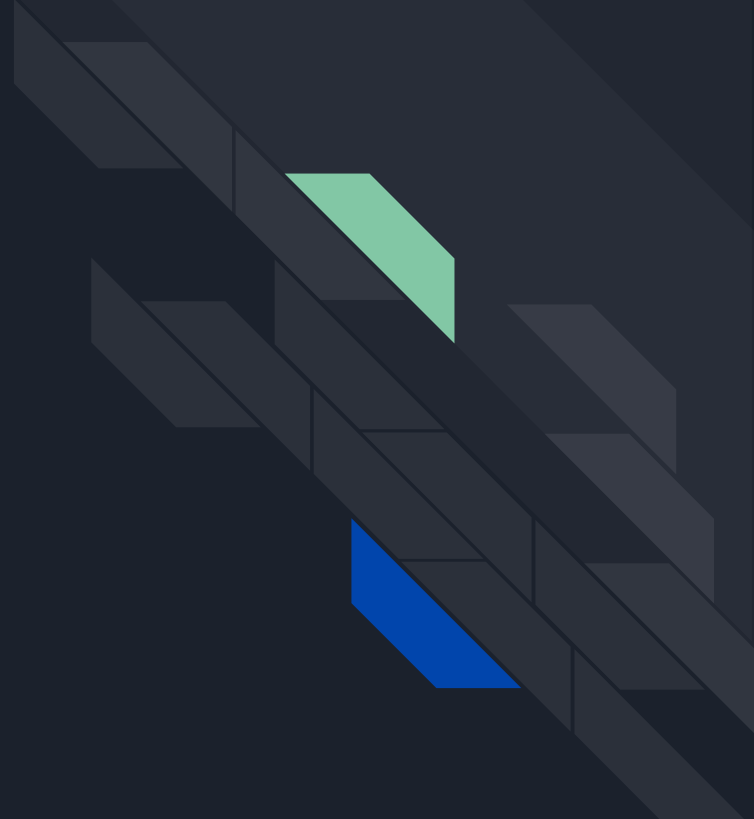
- Increase sex drive and sex pleasure
 - increased energy, longevity of sex, and number of partner
 - decrease boredom, social anxiety, and sense of time
- Escape guilt and shame
- Lower sexual inhibition
- Helps dealing with rejection
- Weight loss can increase perceived desirability

Abstinence can be very difficult to achieve.

A lot of the work needs to be in harm reduction.

Too many (health) institutions value abstinence as better than harm reduction.

Cultural competence,
the absence of
judgment and shame,
comfort around sex and
substance use,
no homophobia.



If a MSM (men having sex with men)
feels judged - even just once -
for their sexual life,
they will stop coming or they will lie.

If you don't know who and what you are treating, you can't offer the right treatment.

Intake

What does your current use look like?
In the past 3 months/1 month?

What is your current method of use?

When was your last use?
How many days were you awake?

How many days are you usually awake?

Intake (Continued)

Do you experience visual or auditory hallucination?

Do you experience paranoia?

Do you only have sex when you use Meth?

When was your last time having sober sex?

Do you masturbated without use?

With porn?

Regular porn or “using porn”?

What does a typical week looks like?

MSM living outside of larger urban centers

- Higher the stigma around sex, STIs and drug use, the less likely people will access resources and get tested.
- Use normally looks more like binges when visiting a city
- Many complaints that the drug is “not as good” outside of Toronto-Ottawa
- MSM living double lives (more likely to hide at clinic)
- Some MSM quit larger urban centers to try to stay away from triggers and temptation; often dealing with loneliness and isolation becomes a new trigger

Sex work

- Sex work:
 - Using drugs to be able to perform sex work
 - Doing sex work to pay for their addiction (selling drugs)
 - The stories are not always that clear
- May use Crystal Meth even when not their drug of choice
- May use crystal meth as a cheaper alternative to their drug of choice
- May have less stigma around injection; depending of method of use for their drug of choice

Psychosis

- Feeling like people are listening through the door/ out the window / in the next apartment / outside.
- Feeling like phone / electronics are bugged or have hidden cameras.
- Feeling at the center of a plot or conspiracy.
- Hearing whispers, cruel voices. Being followed.
- Seeing floating presence in periphery of vision.
- Feeling like insects are under skin. Picking skin.
- Awareness of incredible coincidence that only I can interpret.
- Feeling that everyone is judging me for being high and/or having (gay) sex.

Psychosis – What to do

- Logic-based arguments do not have a lot of impact on someone in active psychosis
- It IS real for the person experiencing it
- Visual memory > Auditory memory
 - Texting > Talking (over the phone)
- Do not get caught in the paranoia
- Rest and sobriety are the best cure
 - “Get some rest and we’ll talk about it tomorrow.”

Resources

Party and Play by **GMSH**

www.partyandplay.info



Episodes 22 to 28



www.himynameistina.com



www.torontovibe.com