Chemsex internship training and intervention program: Sex, Drugs and You

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INTRODUCTION:

•Relatively high prevalences of drug use during sexual intercourse (chemsex) have been reported in certain groups of men who have sex with men in various European countries, including Spain (MSM) (33% -57%)

•Among MSM, those with HIV infection appear to practice Chemsex more frequently.

•This type of practice has been associated with a greater number of diagnoses of sexually transmitted infections (STIs), as well as an increase in HIV and HCV infections. According to data from the U-SEX study conducted in 22 HIV clinics in the community of Madrid, of 742 HIV + MSM, 29% have practiced chemsex, which has been associated with risky sexual practices and increased presence of STIs.

•From the beginning of detection of cases of problematic chemsex and in the absence of specific resources, the NGO Apoyo Positivo created the multidisciplinary program "Sex, Drugs and You". After the reception and psychological / psychiatric evaluation we designed an individualized intervention plan.

OBJECTIVES:

•Train socio-health staff to detect people with ChemSex practices and skills to

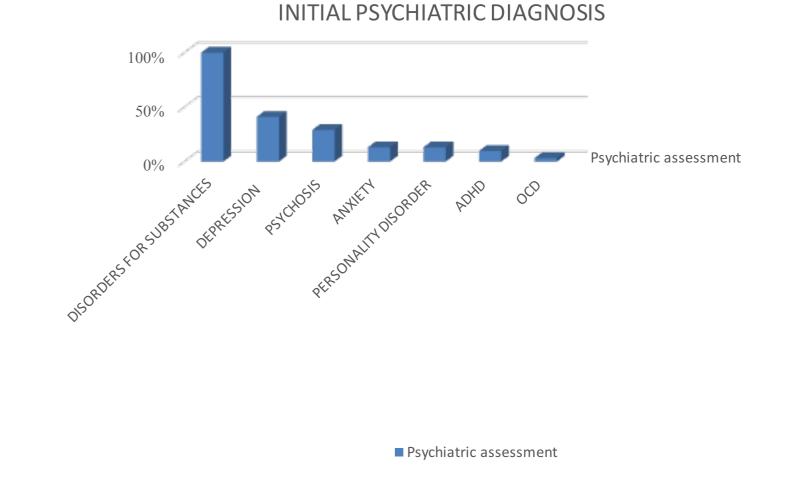
Main motivations for chemsex practice

Intensification of pleasure / time of sexual activity, avoidance of distress due to HIV, internalized homophobia, duels or ruptures, feelings of loneliness, normalization of drug use in gay environments, image stereotypes.

Others activities

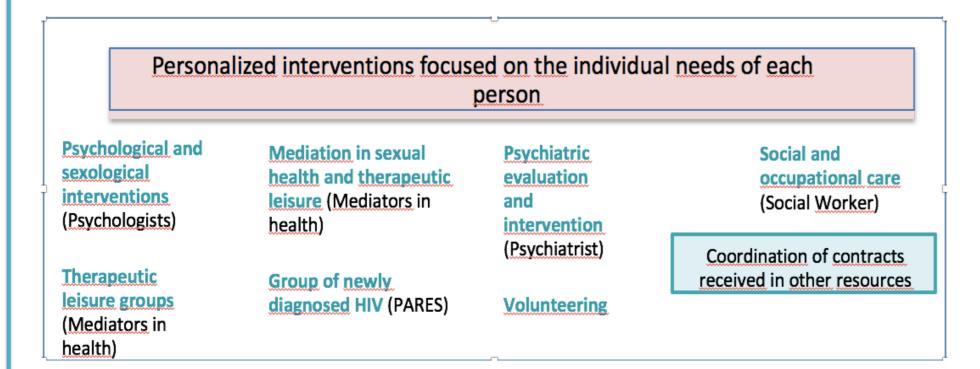
64.5% of the users participated in: newly diagnosed groups, mindfulness, sexuality workshops, therapeutic leisure and volunteering

43 users (65.2%) were referred to a psychiatric evaluation



facilitate intervention.

• Implement a comprehensive care for Chemsex users, which includes personalized psychological care, psychiatric approach, sex education programs, therapeutic leisure, risk reduction and damage programs related to drug use, risky sexual behavior and use of Apps of contacts.



Material and Methods

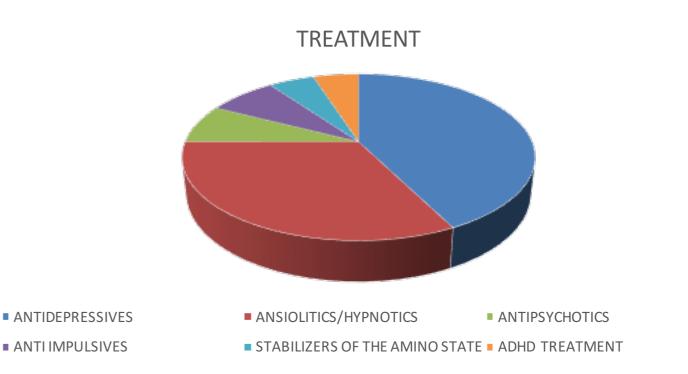
We analyze the type of care performed from January to December 2017. We describe the profile of users served according to socio-demographic, medical, psychopathological and drug-related characteristics. On the other hand, we analyze an anonymous on-line survey of satisfaction made by users.

Results

A total of 79 users were attended in the aforementioned period of time. 17.7% made only one visit and 83.5% (n = 66) started treatment The median age of the users was 36.5 years (RIQ: 32-44.2). 71% born in Spain, 21% in Latin America, 6% other places in Europe and 1.5% in Africa. 73% were actively working and 4.5% were students. 64% had used intravenous drugs during sex (slamsex) at some time and 77% are PPHIV+ (most of the cases derived from the HIV medical units where we have done training for professionals on the program Sex, Drugs and you)

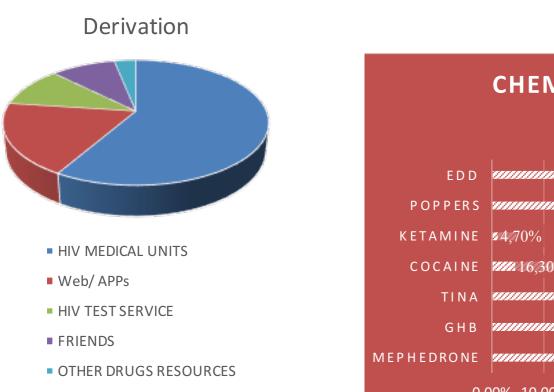
USER DERIVATION

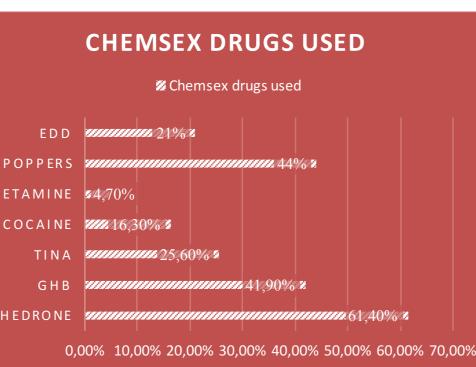
48.8% (n = 21) were already taking psychotropic drugs. In 44%, the psychopharmacological treatment was initiated or modified.



A total of 33/78 users (42.3%) answered the anonymous on-line survey.

Questions	N (%)
HASNEVER BEEN TO CAD, CAID	19 (61.3)
BEFORE COMING TO AP GO TO CAD, CAID	5 (16.1)
DERIVATIVE TO CAD, CAID SINCE AP	6 (19.4)
UTILITY PERCEIVED BY THE ATTENTION RECEIVED	29 (93.5)
MORE DRUGS INFORMATION	12 (38.7)
REDUCED FREQUENCY OF CONSUMPTION AND AMOUNT OF DRUGS	16 (51.6)
I have stopped using these drugs and the sessions	9 (29)
I have reduced risks in relation to the drug (share material)	11 (35.5)
I have exposed myself less to situations of aggression or physical risk	8 (25.8)
I've been more aware of having a problem and I've started making changes that I had not done before	22 (71)
I have reduced risky sexual behaviors (more condom use, protected fisting, lubricants)	13 (41.9)
I am able to enjoy more sex without drugs	13 (41.9)
I know my emotions better and I can handle them more easily	20 (64.5)
I feel calmer or less depressed having started treatment with the psychiatrist	16 (51.6)
I have increased my leisure activities in healthy contexts	19 (61.3)
I feel like i ve more social supports	13 (41.9)
I have improved my experience about HIV	11 (35.5)
Improved my experience of homosexuality	5 (16.1)
I felt better to share my problem, it was difficult for me to share it with people around me	17 (54.8)
Experience of the treatment in Apoyo Positivo	
Good	3 (9.7)
Very Good	24 (77.4)
Some diagnosis STds	24 (77.4)
HIV	9 (37.5)
HCV	7 (29.1)
Syphilis	14 (58.3)
Gonorrhea	5 (20.8)
Chlamydia	4 (16.6)
Diagnosis STds before AP	21 (87.5)
Diagnosis STds after AP	3 (12.5)





CONCLUSIONS:

We observed a high prevalence of substance use disorders and mental disorders in users of Chemsex, which has required psychological, psychiatric intervention and referral to specific centers of drug addiction. The initial approach through Positive Support has allowed the comprehensive approach of users of chemsex, as well as the creation of inter-institutional work networks.

References:

Zaro I, Navazo T, Vázquez J, García A, Ibarguchi L. Aproximación al Chemsex en España 2016. MSSSI.

González-Baeza A, Dolengevich-Segal H, Perez-Valero I, et al. Sexualised drug use is associated with high-risk sexual behaviours and sexually transmitted infections in HIV-positive men who have sex with men: Data from the USEX GESIDA 9416 study. AIDS Patient Care and STDs. In press.

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