Sex, lies and crystal

To better understand what motivates people to use crystal meth, Dr. Steven Kurtz at the University of Delaware’s Center for Drug and Alcohol Studies conducted several small focus groups with gay and bisexual men who used this drug. Some of the men involved in the study were HIV positive. Although the number of participants was relatively small (15 men) the findings begin to reveal the state of mind that predisposes some people to use crystal meth. Moreover, the findings could be used to design other studies with more diverse populations in other cities so that researchers can better understand what places some people at risk for crystal meth exposure and addiction.

Study details
In 2003, Dr. Kurtz recruited and interviewed 15 men between the ages of 33 and 50. Eight men were Hispanic and seven were white. Seven of the men were using crystal meth during the period when the research was conducted. The remaining eight men described themselves as recovering from addiction to this substance. Six of the seven current users said that they were HIV negative, while six of the eight former users said that they were HIV positive.

Why use crystal meth?
Dr. Kurtz found that there were three general patterns that underlay participants’ perceived vulnerability to substance use. For some people, crystal meth appeared to initially help them do the following:

- escape loneliness
- deal with feelings of sexual unattractiveness
- lower sexual inhibitions

What is perhaps disturbing is that, as a result of the interviews, Dr. Kurtz says that “these problems appeared to stem from deep-seated feelings of being unloved and unlovable.”

All of the focus group members agreed that substance use among men who have sex with men (MSM) was a way of coping with “the social difficulties that they faced living in a homophobic culture.” Substance use helped these men avoid the realities of being “alone, unacceptable and unloved.”

Aging and illness: releasing the inner chemist
According to Dr. Kurtz, middle-class American gay male culture “values sexual attractiveness and prowess to a degree that is unreachable for many men.” Therefore, some MSM who are aging, ill or both worry about their attractiveness. One doctor who was part of the focus group said the following:

“I see guys when they get into their late thirties and early forties, that’s when they get into real trouble: ‘I’m in my late thirties, early forties; I’ve got to get everything I can get now before my hair falls out.’ And they just get annihilated. See, guys in their twenties, they call it partying. They take ecstasy before they go to a dance club. These guys in their late thirties are the ones that are doing the ‘I need a little bit of this, a little bit of that,’ and they think they’re chemists. They do one little thing, too much of something that doesn’t balance out something else, and they’re in trouble.”

Sex and crystal meth
All of the participants had used crystal meth while having sex and all but four of them did so in group settings. One former user noted that there are reasons for this:

“Being high on crystal in sexual situations, you need excessive amounts of input, of stimulation, just to keep that end of the buzz going…. The most important thing for you is that you are doing it with other people who are of the same mindset, but also at the same level of buzz. It does not matter who you are having sex with, near or whatever, as long as they are just as high as you and on the same thing. That becomes your overriding concern.”
The dark side of crystal

Participants who were recovering from crystal meth addiction were previously able to use the drug on a regular basis for as little as a few months to as much as 10 years before serious problems developed. What is interesting from their personal accounts, according to Dr. Kurtz, is that “events that led the men to begin using the drug were similar to ones that led them to stop—events that revolved around personal relationships and sex.”

Perhaps a common thread that linked many participants’ initiation of crystal meth was “making connections.” Yet for many men, regular use of crystal meth “became a barrier rather than an aid to friendships,” according to their interviews. According to one interviewee who found that using crystal meth became a substitute for dating:

“It gets to the point where you feel like people are against you. Well, let me say that I’ve messed up my relationships because I’ve chosen to be on crystal meth, and then I start thinking to myself, ‘You know what, I really don’t need a relationship.’ Where before the initial high I was thinking, ‘Oh yeah, I’m going to have a relationship with this guy, so let me go meet him.’ I’ve lost many relationships because of my stupid high.”

Initially, the sexual adventures and stamina that were part of crystal meth’s allure began to cause problems for many users who had long-term relationships.

Not only did several men lose their romantic relationships because of crystal meth, they also lost their jobs and businesses because it caused the following problems:

- interfered with reporting to work on time
- interfered with their judgment while at work
- caused them to lose the trust of coworkers

Many users developed paranoia, which, according to Dr. Kurtz, “led to increasing isolation from the sex scenes that participants initially claimed to have found so enlightening and liberating.”

Crystal’s wear and tear

Some men may have initially felt better about their appearance when using crystal meth. But long-term use of this substance began to take its toll on users, many of whom began to disappear from public life, as one participant noted:

“People who get sucked into crystal use very, very quickly drop out of sight. You don’t see what happens to them. You don’t see that they plucked all the hair out of their eyebrows. You don’t see the sores on their skin. You don’t see the sunken-in cheeks. You don’t see their pupils bigger than their whole head. You don’t see that really ugly thing, the ugly, physically ugly side of it, because people who get like that have long since disappeared.”

Initially, crystal meth seemed to help the men have uninhibited sex, but Dr. Kurtz also found that its use “led many men to take sexual risks that they would not have if they had not been high on the drug.” For some participants, the discovery that they had health problems, such as infections with STDs, including HIV, was a sign that their use of crystal meth was out of control.

Shattered dreams

In addition to the risk of HIV and other STDs, many users found that repeated exposure to crystal meth became “less fulfilling with time.”

Perhaps a clearer understanding of the type of connection that crystal meth really fosters is revealed by one man who still uses the drug:

“When I first signed up on one of the ‘party and play’ websites, I posted a picture of my face on my profile. I wasn’t getting so many hits. When I posted a picture of my dick instead, then I became really popular right away.”

The fantasy becomes reality

Because exposure to crystal meth causes people to have difficulty distinguishing between reality and fantasy, quitting isn’t easy, according to one former user:

“A lot of people don’t realize exactly how quickly crystal becomes addictive. The thing that makes crystal so insidious is that even if you were basically a mentally healthy, well-adjusted, happy person beforehand, the first couple of
times after you do crystal it manages to convince you that the state you are in when you are high on crystal is the normal, desirable, natural state, and that what happens to you when you are off crystal is the abnormal condition that needs to be rectified. I don’t think that a lot of people are prepared for how fundamentally it changes the way you think on and off the drug.”

**Repairing the damage**

Although this study was small, its findings provide some insight into why crystal meth becomes so alluring. It also highlights the many dangers of the drug. Perhaps what is most useful about this study is that it is a snapshot of some aspects of middle-class gay male culture that is generally not glamourized in gay media. Dr. Kurtz states that the participants in his study revealed that “many gay men feel isolated, often use drugs in an attempt to bond with others, and find that connectedness and intimacy remain elusive.”

Programs that aim to reduce the harm from crystal meth exposure and sexual risk-taking may be more effective, he says, if they can address “the men’s needs for—and skills at attaining—social connectedness to other individuals.”

Dr. Kurtz has presented some ideas that need to be tested. Hopefully, other researchers will confirm and extend his findings so that successful interventions to reduce the harm posed by crystal meth can be developed.

**REFERENCE:**


Created on: 2005 June 6

Author: Hosein SR
Disclaimer

Decisions about particular medical treatments should always be made in consultation with a qualified medical practitioner knowledgeable about HIV- and hepatitis C-related illness and the treatments in question.

CATIE provides information resources to help people living with HIV and/or hepatitis C who wish to manage their own health care in partnership with their care providers. Information accessed through or published or provided by CATIE, however, is not to be considered medical advice. We do not recommend or advocate particular treatments and we urge users to consult as broad a range of sources as possible. We strongly urge users to consult with a qualified medical practitioner prior to undertaking any decision, use or action of a medical nature.

CATIE endeavours to provide the most up-to-date and accurate information at the time of publication. However, information changes and users are encouraged to ensure they have the most current information. Users relying solely on this information do so entirely at their own risk. Neither CATIE nor any of its partners or funders, nor any of their employees, directors, officers or volunteers may be held liable for damages of any kind that may result from the use or misuse of any such information. Any opinions expressed herein or in any article or publication accessed or published or provided by CATIE may not reflect the policies or opinions of CATIE or any partners or funders.

Information on safer drug use is presented as a public health service to help people make healthier choices to reduce the spread of HIV, viral hepatitis and other infections. It is not intended to encourage or promote the use or possession of illegal drugs.

Permission to Reproduce

This document is copyrighted. It may be reprinted and distributed in its entirety for non-commercial purposes without prior permission, but permission must be obtained to edit its content. The following credit must appear on any reprint: This information was provided by CATIE (the Canadian AIDS Treatment Information Exchange). For more information, contact CATIE at 1.800.263.1638.

© CATIE

Production of this content has been made possible through a financial contribution from the Public Health Agency of Canada.

Available online at: