### Gay Men and the Crystal Meth Epidemic

#### Making the case for harm reduction

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### Today's Presenters...

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Why we're here... To share promising new strategies being used to address the Crystal Meth epidemic.



## **Crystal Meth Use is Rising**

- Meth use increased 43% from 2015-2019
- Frequent or problematic use increased 66%
- 62% increase in Meth Use Disorder



# **Dynamics of Meth Addiction**

- Highly addictive
- Acts on dopamine sensors of the brain
- Users progress rapidly to problematic use



# Meth Use Among Gay Men

- Substance misuse is significantly higher in the LGBTQ community
- Meth use among gay men is 4 times higher than heterosexual men
- Meth use during sex leads to risky behavior resulting in:
  - Higher HIV infection rates
  - Increased sexually transmitted infections
  - Higher Hepatitis A, B and C infections

## Meth use in West Hollywood

- Meth related ED visits tripled since 2005
- Ranks highest for treatment admissions, hospitalizations



# **Risk Factors Driving Meth Use Among Gay Men**

- Meth is widely used during sex creating a link between sex and meth which can be difficult to break
- Most gay men who use meth were introduced to the drug in a sexual situation
- Meth is a neurotoxin which destroys dopamine sensors leaving users unable to experience pleasure without the drug

### A unique addiction dynamic for gay men

- The combination of stimulant drug use and sex creates a super high that is more potent than the drug alone
- Individuals who experience these potent effects become addicted not only to the drug but to the combination of the drug and sex
- For these individuals, the drug and sex become inseparable

(Washton and Zweben, 2009)

# The success rate is not promising

Meth addition is extremely powerful and a difficult cycle to break

- Fewer than 6% of gay men sustain abstinence
- Most experience on average 7 failed attempts before quitting

# **Paving the Way for Harm Reduction**

- A complex problem requires a varied approach
- Standard prevention messaging only goes so far
- Harm reduction has a proven record of success
- Began in the early 1990's with needle exchange programs which are still the most common harm reduction service

# S T I G M A

A social process which reinforces relations of power and control. In relation to harm reduction, stigma plays out in a lack of public support.

# What is Stigma?

# What is Stigma?

- Stigma is shaped by our thinking a bias and perception that substance users are bad and immoral rather than suffering with a chronic condition requiring care and treatment.
- Stigma is communicated by words and language, tone, interpersonal attitude, indifference and body language.
- Stigma becomes internalized by the person seeking help. The person views themselves as bad or weak which fuels the shame of stigma

# **Common stigma around harm reduction**

- It enables drug use
- Ignores negative outcomes from drug use
- Rewards negative behavior

'Anything goes'

Shaking off the Stigma: Harm Reduction does **NOT** 

Enable, endorse, or encourage use

Exclude or dismiss abstinencebased treatment options

Harm reduction acknowledges the use of drugs and seeks to mitigate the consequences without judgement.

# **Focusing on harm reduction**

- Meets people where are they are, but doesn't leave them there
- Spectrum of strategies and methods
- Allows people to act as their own agents of change without judgement

# Moving Forward

### Harm reduction methods

- Syringe exchange services
- Medically Assisted Treatment
- Safe smoking supplies to help injection users find a less harmful method of use
- Supervised Injection Sites

- Overdose Prevention Education
- NARCAN distribution
- Education, therapy, and discussion groups aimed at managed, reduced or safer drug use

# Harm Reduction Outcomes

- Approximately 50% reduction in HIV/STI/HCV transmissions
- Provide a linkage to SUD treatment and other services
- Reduce discarded syringes
  - Most SSP's take in more than they give

**Effective Solutions** 

# Harm Reduction Outcomes

#### **Health Outcomes**

- Up to 50% decrease in HIV infections
  - Savings of up to \$450K in annual healthcare costs per person
- Reduced substance use hospital costs up to \$700 million annually

#### **Public Safety**

- Reduction in discarded syringes
  - Cities without SSP's showed 8 times higher rate of discarded syringes
  - Data shows that people using SSP's were more likely to properly dispose of waste

Evidence demonstrates that harm reduction programs do not increase crime or drug use in major metropolitan areas surveyed

# Where Prevention and Harm Reduction Meet

#### Policy

Programs and policies aimed at informing the public

#### Community

Building stronger communities to prevent meth-related harms

#### Individual

Acknowledging and addressing those who are actively using meth and working to mitigate the associated harms

# **Substance Use Programs**

Party Wise Program Los Angeles, CA

APLA Health

Roger A. Sediles

# Substance Use Programs

- Party Wise Crystal Meth Program for Gay Men who use Meth Los Angeles Department of Public Health, Division of HIV and STD Programs (DHSP)
  - This program aims to empower participants to make informed choices, reduce the negative consequences related to the use of drugs, and focuses on key public health areas through the implementation of Health Navigation Sessions (HNS), Contingency Management (CM), support groups, workshops, Medication-Assisted Therapy (MAT), free fentanyl test distribution, and other behavioral treatment-based interventions
- Project Impact Youth Program For Queer Men of Color 18- 24 <u>Substance Abuse and</u> <u>Mental Health Services Administration (SAMHSA)</u>
  - Designed for individuals seeking support in the areas of substance use/abuse, sexual health, and HIV prevention. The program also provides linkages to services that may include; HIV/STD testing and treatment, PEP/PrEP, as well as care for newly diagnosed and out-of-care HIV-positive young Latino MSM.

# Party Wise Program

- Developed in consultation with Rafael Diaz and the Cesar Chavez Institute (UCSF).
- Founded by the County of Los Angeles, Department of Public Health, Division of HIV and STD Programs.
- Harm Reduction based HIV/STD prevention program working with active Crystal Meth using MSM's since 2005.
- Program goal is to reduce the opportunities for active Crystal Meth using MSM's, to acquire or transmit HIV/STD and Hep C - through their sexual and drug using behaviors.

# Meth Use - Public Health Issues

- According to a data brief from March of 2019 by The Los Angeles County, Substance Abuse Prevention and Control (SAPC), at a national level 195,000 individuals initiated meth use in 2017.
- According to death certificate data from the Centers for Disease Control and Prevention, the number of deaths in LAC listing meth poisoning as a cause of death and drug overdose as the underlying cause of death (meth-related) increased to 707%, from 43 in 2008 to 347 in 2017.
- According to the Los Angeles County, Latinos accounted for the majority of clients with a primary meth problem in LAC, with a 63%, followed by White (22%), Black (10%), and Asian/Pacific Islander (2%) FY17-18.
- In 2017, 66% of clients who reported meth as the primary drug problem had used meth before or during sex in the past year.

# Why Harm Reduction Based Program?

- Injection and non-injection drug using men that have sex with men are at elevated risk of HIV infection.
- In many occasions active drug users also happen to fall out of the system for HIV and STD testing and Treatment.
- When experiencing withdrawal a person can experience irritability, body aches, anxiety, sadness and fatigue. Leading to a lower number of services available to them due to client/patient and service providers interactions.
- Despite the belief of many service providers that substance users can't maintain or even start their HIV treatment due to their drug use, in our experience 95% of our program participants have been capable of maintaining medication adherence.

# Why Harm Reduction Based Program?

- Methamphetamine use impaired judgment/decision-making.
- Party and play leads to an increased number of sexual partners.
- Not knowing the risk related to needle sharing and the options to reduce the risk.
- High number of untreated STD infections within individuals not interested or ready to access drug treatment services, increasing their risk for HIV acquisition and STD transmission.
- When not aware of the risk, HIV+ methamphetamine using MSM could decrease medication adherence, which in some cases threatens viral suppression and increases the opportunities of transmission.

# Party Wise Activities

Contingency Management integration into Party Wise, under DHSP funding within existing SOW:

- Working with Gay men who use meth.
- Outreach (virtually and in-person) to 628 Gay who use meth.
- Link Referrals; 209 Gay men who use meth.
- Individual Health Navigation Sessions; minimum 196 Gay men who use meth.
- 30 days follow up; Minimum103 Gay men who use meth.
- 6-8 weeks 24 visits, Contingency Management Program; 24 participants per contract year.
- All activities occur over a 12-month period.

### Party Wise Activities

Harm Reduction Based Workshops re-integration under Sierra Health Foundation founding

- Target population Black and Latino MSM who use meth.
- Outreach (virtually and/or in-person) to 300 meth users.
- Monthly English and Spanish harm reduction based group, 3-session workshop series;132 participants.
- Topics; Crystal Meth 101 (including history, harm, harm reduction strategies, fentanyl, naloxone, needle exchange, mental health services), HIV/STD 101 (Including treatment as prevention, PrEP/PEP, harm/risk reduction strategies, Hepatitis C risk and staphylococcus infection), Triggers and Addiction (How do identify your triggers, how to work on your triggers-what works for you/what doesn't, drug treatment options like detox/outpatient/inpatient).
- 30 days follow up; 132 participants.
- Distribution of fentanyl test strips and naloxone spray to program participants as requested. Currently a total of 1,407 test strips have been distributed between July 2021 and October 2021.

# Party Wise Program Challenges and Successes

# Party Wise Program Challenges

- Substance users that are not ready to seek and/or receive drug treatment happen to fall out of the system for HIV and STD testing and treatment making it harder to re-engage them into these type of services.
- Clients express their fear of blood and urine test for HIV and STDs, because of their belief that they might be tested for drugs without their knowledge/consent and be reported.
- Program participants express lack of confidence in themselves, in most cases accept defeat before trying to make any changes.
- Misinformation about HIV treatment and medication interaction with substance use.
- Fear of an HIV test result while dealing with their drug addiction.

# Party Wise Program Response

- Assist clients in the creation of a social support network for HIV/STD testing, and referrals to other services.
- Include former and current participants in the implementation of program planning for outreach.
- Provide accurate and reliable information about testing and treatment
  - Refer to reliable service providers.
  - Explain what can be reportable and what is not (not testing for drugs).
- Give clients ownership of their own process on creating a pathway to recovery.
- Use free HIV/STD testing to get clients to our doors and use the opportunity to expand the conversation about meth use and vise versa.

# Party Wise Program Response

- Ask ALL participants about their HIV and STD status through an intake form.
  - All participants are referred to HIV/STD testing.
  - HIV Negative clients are offered PrEP services when appropriate.
  - Medical Care adherence is discussed with HIV Positive clients during Health Navigation sessions.
  - These services are offer on site or in our adjacent clinic.
- Reduce clients stigma on HIV/STD testing and treatment by making it routine.
- Partnering with mobile testing units or needle exchange units during outreach.
- Remind group participants about the availability of HIV/STD testing as much as possible, during intake, groups/health navigation sessions and follow up.

# Party Wise Program Demographics Program Data 2019 -2020

- The collection of this data came from the participant's intake form, collecting data on demographics, risky sexual behaviors, substance use and referrals/linkage for 201 clients.
- The majority of clients identified as gay cis men (200 clients) with the exception of one cis bisexual man.
- 19.90% (40) were homeless, 65.17% (131) clients rent or share a unit, 13.43% (27) had "other" living arrangements, only 1.49% (3) owned a home.
- Race and ethnicity.
  - 53.23% (107) Latinx participants
  - 32.34% (65) Black/AA
  - 9.95% (20) white
  - 1.99% (4) Asian
  - 1% (2) Native American/Alaskan Native
  - 0.5% (1) Pacific Islander
  - 0.5% (1) other and no Native Hawaiians

# Party Wise Program Successes Program Data 2019-2020

- The use of substances, whether in exchange for sex or for recreational use, was very common among program participants (at the point of intake).
- At total of 86.5% of clients (174) reported having had exchanged drugs for sex in the past 6 months. While meth was the predominant substance used, with 100% of clients reporting having had used it, other substances were reported as well.
- A total of 79 individuals were referred to PrEP services.
- 27 program participants were linked into HIV testing.
- 73 program participants were linked into HIV and STD testing simultaneously.
- 97 program participants were linked into STD testing.
- With a total of 197 participants linked into HIV prevention services.
- 201 clients committed to change a sexual or drug using behavior, and 150 of them reported to reach their goal and showed changed behavior.

# Party Wise Program Successes Program Data 2014 - 2018

- We identified and recruited high-risk individuals and their peers, who may not have accessed HIV/STD testing through conventional HIV testing programs.
- From July 2014 June 2018 only, we had a total of 801 participates who completed our four sessions weekly workshop.
- Within these years, a minimum of 475 clients were tested for HIV/STDs each contractual year. With a total of 1,903 individuals tested for HIV/STDs.
- 184 former group participants completed three or more weekly support group sessions.
- 38 former group participants completed a 16 hour Peer Health Educator training with a minimum of 85% score on their PHEs Certification test.

# Party Wise Program, Lessons Learned

- It is vital to re-enforce clients confidence, remind them that they are competent to make choices and changes in their lives.
- As service providers it is important to remind ourselves not to take clients actions personal.
- Keep in mind that change cannot be imposed.
- Rewards and encouragement are more effective than punishment and judgment.
- It is essential to make sure that your testing department or allies understand your clients; their behaviors, their fears and challenges.

# Party Wise Program, Lessons Learned

- Same as with harm reduction strategies for drug use, when illustrating the benefits of knowing clients HIV status, testing for STDs, adherence, PrEP, PEP and other strategies to minimize risk, clients are more receptive when the information is presented by a peer who has used and benefitted from the previously mentioned services.
- Client's misinformation is hard to amend even when you are providing accurate information and it is difficult to change their beliefs about HIV/STDs testing and treatment. You and your HIV/STD testing partners should be aware when giving information, as clients might not always trust in the information that you are giving them.

# **Coming Soon**

# Party Wise Program Expansion

- Target population gay men who use meth.
- Implementation of "Getting Off Curriculum (8-week, 24 session gay-specific behavioral therapy (GCBT) intervention that follows the manual, Getting Off: A behavioral Intervention for Gay and Bisexual Methamphetamine Users).
- Weekly harm reduction based groups.
- Monthly digital campaign on Grindr and other social media venues.
- Quarterly town halls/community forums about meth to increase community awareness.

# Thank You!

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