



SURVEY

**USE OF PSYCHOACTIVE SUBSTANCES
AMONG TRANSGENDER, NON-BINARY,
QUEER AND INTERSEX PEOPLE**

BRIDGE THE GAPS: HIV AND CHEMSEX

SURVEY
USE OF PSYCHOACTIVE SUBSTANCES
AMONG TRANSGENDER, NON-BINARY,
QUEER AND INTERSEX PEOPLE

SUMMARY

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Brief information about HPLGBT:

HPLGBT is a national organization led by transgender people. The most important areas of activities for HPLGBT is ensuring comprehensive development of the transgender community, including all cross- and subgroups, reducing the level of discrimination and violence against transgender people and strengthening the influence of LGBTI communities on human rights policies.

Together with its partners, HPLGBT makes every effort to consolidate representatives of the transgender community to protect and promote the rights and fundamental freedoms of transgender people in Ukraine.

You can find more information about us and our activities on our website www.HPLGBT.org

The report has been prepared within the project "BRIDGE THE GAPS: HIV AND CHEMSEX" implemented by HPLGBT in 2019-2020. The project is implemented with support of the Emergency Support Fund for Key Populations in Eastern Europe and Central Asia.

Disclaimer: *AFEW International* and *Aidsfonds* are not responsible for the data presented herein and may not agree with all the content of this report.

No activities were carried out on the occupied or non-controlled territories of Ukraine. All the activities with internally displaced people were implemented on the territories controlled by the Ukrainian government.



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GLOSSARY

GLOSSARY:

Binge	Process of uninterrupted use of PAS/NPS stimulants during an extended period of time, sometimes up to several days, often without sleep.
Chemsex (chemical sex)	Sex under the influence of mind-altering psychoactive/narcotic or other substances (drugs).
CNS	Central nervous system.
Drug policy	Strategies and methods used by the government in the area of drug control in line with the national interests of Ukraine and the UN conventions.
Harm reduction	This term is used to describe policies, programs and approaches aimed at mitigating harmful health, social and economic consequences related to the use of psychoactive substances.
HIV	Human immunodeficiency virus.
KPs	Key populations.
MSM	Men who have sex with men.
NGO	Non-governmental organization.
NPS	New psychoactive substances not controlled by the Single Convention on Narcotic Drugs 1961 (as amended in 1972) of the United Nations Office on Drugs and Crime (UNODC). It is a general name to refer to substances, which can be divided into the following groups: synthetic cannabinoids, synthetic stimulants, synthetic hallucinogens and synthetic depressants; such substances often have the characteristics of several groups.
OST	Opioid substitution treatment.

PAS	Psychoactive substances, which affect the functioning of the central nervous system.
PDI	Peer-driven interventions.
PUD	People who use drugs.
Risky sexual practices	Sexual practices, which can be harmful for health.
Slamming	Injecting PAS/NPS.
SOGI	Sexual orientation and gender identity.
STI	Sexually transmitted infections.
THC	Tetrahydrocannabinol.
TNQT	Transgender (trans), non-binary, queer, and intersex people.
Transgender (trans) people	People whose gender identity differs from their sex assigned at birth. In some cases, a short form – trans – can be used.
UN	United Nations.
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs.

RELEVANCE OF THE SURVEY

RELEVANCE OF THE SURVEY:

Nine countries of the world¹ criminalize transgender people at the legislative level. Criminalization can take various forms, including criminal responsibility.

In Ukraine, the lives of many people changed because of the humanitarian crisis on the territories not controlled by the Ukrainian government. Carrying out the survey on the government-controlled areas, we were able to get valuable information from internally displaced people who were forced to leave their homes.

The armed conflict is still ongoing in the east of Ukraine. Among other things, it led to the growth of mortality from tuberculosis. Civilians are still dying and being wounded, while critical infrastructural objects are regularly attacked and damaged. According to UNOCHA, as of November 2019² all the humanitarian response efforts were coordinated within six clusters: Shelter and Non-Food Items (Shelter/NFI); Protection; Health and Nutrition; Education; Water, Sanitation and Hygiene (WASH); Food Security and Livelihoods (FSL). Internal migration as a result of armed conflict and low access of the target groups to employment directly leads to the high level of engagement in sex work.

Analysis of the drug situation within this survey shows that, despite the ongoing reforms and democratic processes, Ukrainian society is still not ready to leave behind prohibitive and punitive norms in relation to the problems of PAS/NPS. Respondents have confirmed that despite all the efforts to overcome stigma, negative attitudes are still widespread in the society ("drug users are an absolute evil"), which has a negative impact on the rights of people who use drugs.

1. Human Rights Watch

http://internap.hrw.org/features/features/lgbt_laws/index-june15.html

2. Ukraine Situation Report

www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/UNOCHA-Report_Ukraine_November-2019.pdf

Results of the survey demonstrate a close correlation between the growth of HIV cases in the target groups and their chemsex practices. The survey confirmed higher risks of getting infected with viral hepatitis and STIs as well as other negative consequences for the target groups, such as drug dependence as well as negative effect of PAS/NPS on sexual and mental health.

INTRODUCTION

INTRODUCTION:

HPLGBT observes that in the recent years there has been a rapid growth in the number of transgender people who use various non-injecting substances, which affect their sexual behavior, making it more risky and increasing their chances of getting infected with HIV/STIs. As for non-binary, queer and intersex people, situation with the use of PAS/NPS among them remains in shadow and, thus, requires further studies to allow developing harm reduction programs specifically aimed at such cross groups.

There are very few studies on the use of psychoactive substances among transgender people. According to behavioral study and assessment of the needs of transgender people in HIV prevention services in Ukraine³, chemsex is associated with higher risks of HIV.

Alternative report based on the results of human rights monitoring in relation to transgender women engaged in sex work⁴ confirmed that there are certain trends leading to the risky sexual behaviors, fulfilling sexual fantasies not caring about the consequences, reducing the adherence to ART, not using condoms, lengthy (and often traumatic) sexual practices, frequent change of sexual partners and many other negative consequences of chemsex.

At the same time, NPS are gaining popularity because of their low price, accessibility and effects similar to the traditional PAS. However, NPS are not always made of high-quality materials, with their purity and strength being unknown. When using NPS, people quickly make irreparable harm to their health.

3. Behavioral study and assessment of the needs of transgender people in HIV prevention services in Ukraine.

www.HPLGBT.org/publish/Research_TG_HIV-AIDS_UKR/RESEARCH_TG_HIV-AIDS_UKR_ru.pdf

4. Alternative report on implementation of the International Convention on the Elimination of All Forms of Discrimination against Women.

www.HPLGBT.org/publish/TG-Monitoring_2019/report_ua.pdf

Some PAS/NPS are injected, while the respondents of this survey are not always aware that injecting any drugs is dangerous and can lead to considerably exceeding safe dose of the drug.

In this survey, non-binary people asked for a special focus, so the research team would like to learn more about the specifics of TNQI community and the problems, which various cross groups are facing.

METHODOLOGY

METHODOLOGY:

Goal of the survey:

Study the specifics of PAS/NPS use among TNQI to facilitate and scale up the effective response to the HIV epidemic in TNQI cross groups in Ukraine based on the strategic information obtained.

Objectives and activities:

- Organize all the steps to be taken in communities and hold a national survey among TNQI (100 people maximum).
- Analyze the received data on the specifics of TNQI community members using PAS/NPS.
- Develop relevant recommendations based on the analysis of the information received.
- Prepare a final report with an overview of the results and conclusions.
- Send recommendations on developing sensitive services to the organizations working with TNQI.
- Send recommendations on humanizing drug policy to the Ombudsman - Commissioner for Human Rights at the Ukrainian Parliament.

Target groups:

- Transgender people, including those with a potential chemsex experience.
- Non-binary people, including those with a potential chemsex experience.
- Queer people, including those with a potential chemsex experience.
- Intersex people, including those with a potential chemsex experience.

Eligibility criteria:

- Identification with the target groups.
- Being at least 18 years old as of the date of survey.
- Living in Ukraine (government-controlled areas) for at least six months.

Recruiting:

The respondents (first "seeds") were recruited through the activists and leaders of HPLGBT initiative groups with strong links to the target groups. A webinar was organized for the leaders of initiative groups, with the project manager providing mentor support and further consultations in the course of the survey. The number of respondents recruited was limited to 100 people because of the economic considerations.

Using the pre-defined survey model, the survey participants educated their peers about chemsex, with their further recruitment to take part in the survey. TNQI community leaders and activists not only used their personal connections to recruit participants, but also used various internet resources, including closed web platforms.

Method used to select the respondents:

PDI (Peer Driven Intervention) model was developed by sociologists as one of the methods used in HIV prevention. The model is based on using the "snowball sampling" method and "peer-to-peer" principle. This model proved itself as an effective tool to reach new populations to implement HIV programs as the PDI model is used to achieve big coverage of interventions.

Survey method:

Structured interviews using questionnaires to obtain qualitative data.

Hypotheses:

1. Members of the TNQI communities using PAS/NPS can be in a state, which significantly facilitates the use of risky sexual practices, such as not using condoms and lubricants, thus considerably increasing the risks of getting infected with HIV, hepatitis and STIs.
2. Members of the TNQI communities using PAS/NPS can experience new and/or stronger depressed conditions, have mental health problems or suicidal thoughts.

3. Aggravated quality of life⁵ among members of the TNQI communities using PAS/NPS, including those in remission, because of their lifestyle.

5. According to the definition of the World Health Organization (WHO), this term includes physical, psychological, emotional and social health and well-being of an individual based on his/her perception of his/her place in the society. Quality of life is used by the UN to assess and compare social and economic status of people in different countries.

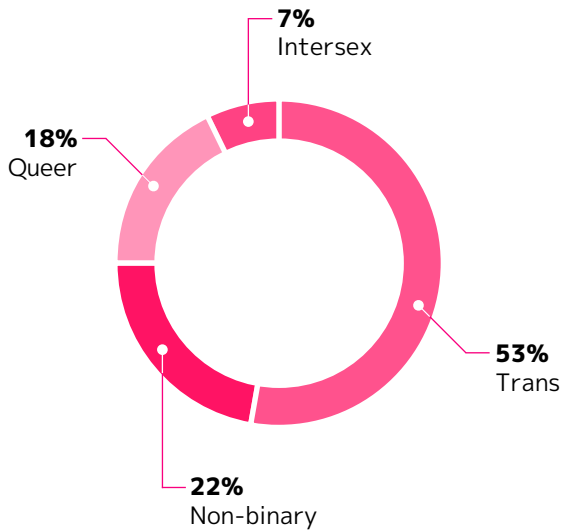
RESULTS

RESULTS:

Section 1. Social and demographic profile (n=100)

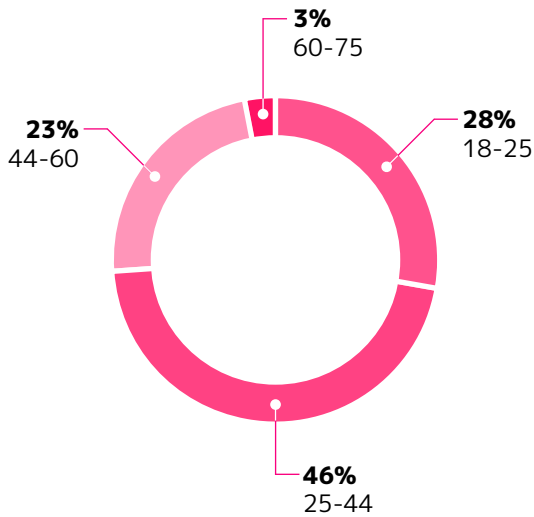
The perception of chemsex is affected not only by personal characteristics, individual experience and mindset, but also by social and demographic profile. One of the most common gaps when developing programs aimed at the provision of medical and social services is lack of attention to the social and demographic profile of the target groups.

Division of the respondents by target groups

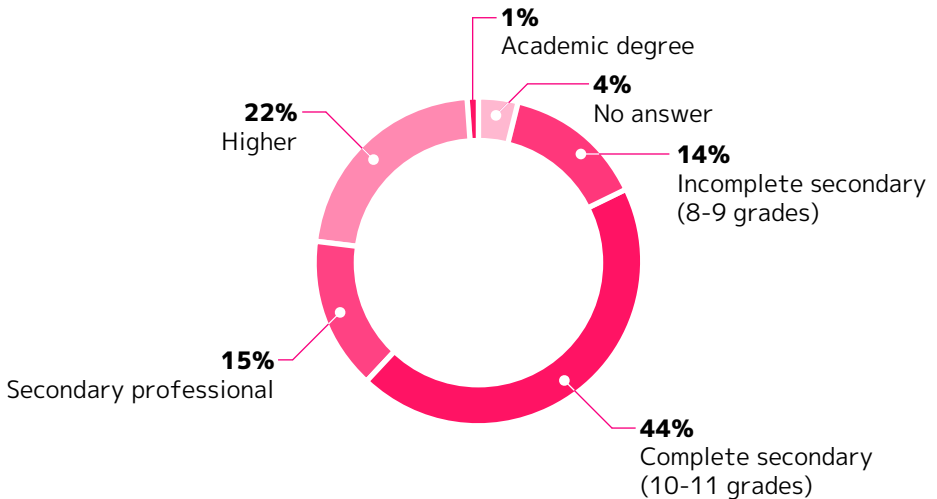


Biggest access to the group of transgender people is due to the fact that HPLGBT is a self-organization of transgender people. There were no pre-determined quotas for recruiting respondents, so, based on the data received, we can make preliminary conclusions about the size of the groups studied.

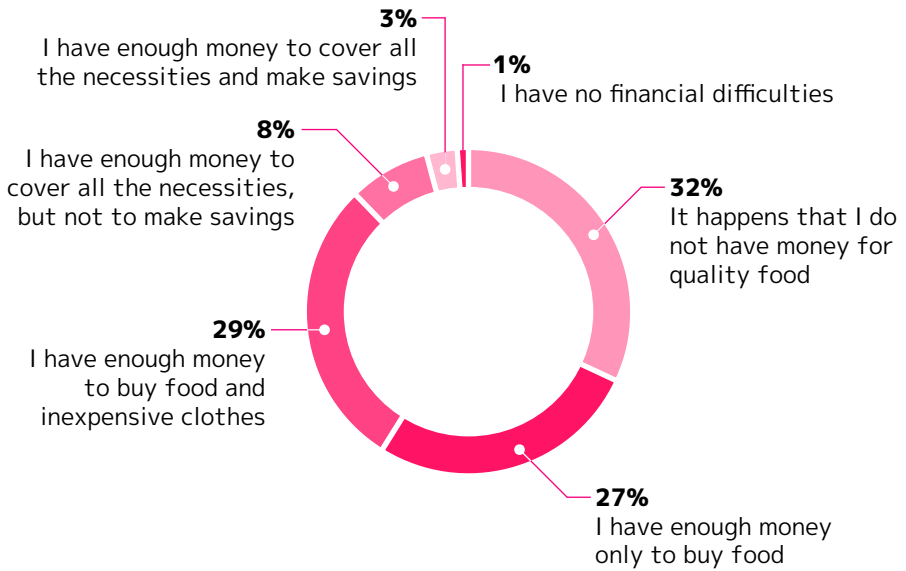
Division of the respondents by age



Education of the respondents



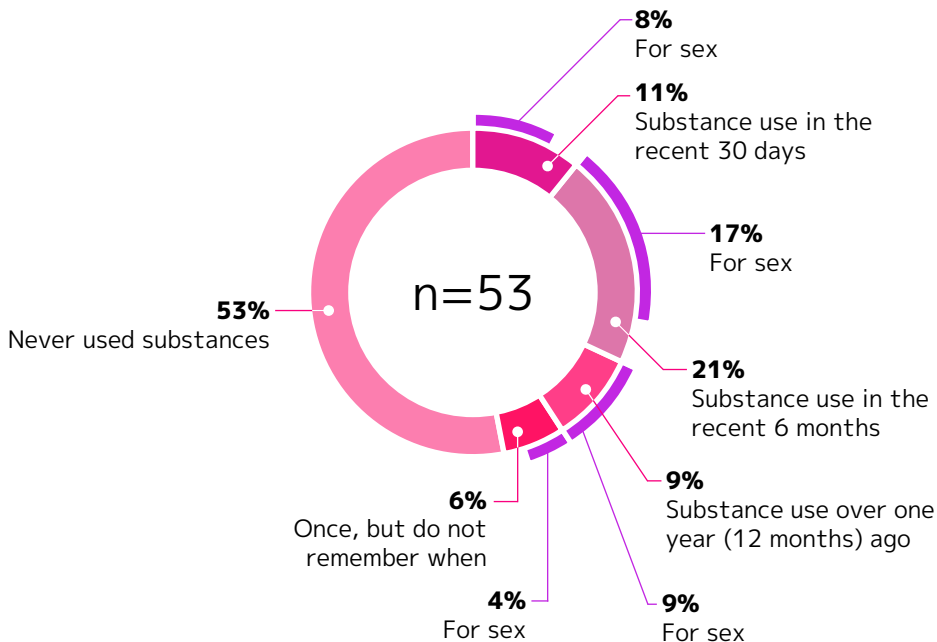
Financial status of the respondents



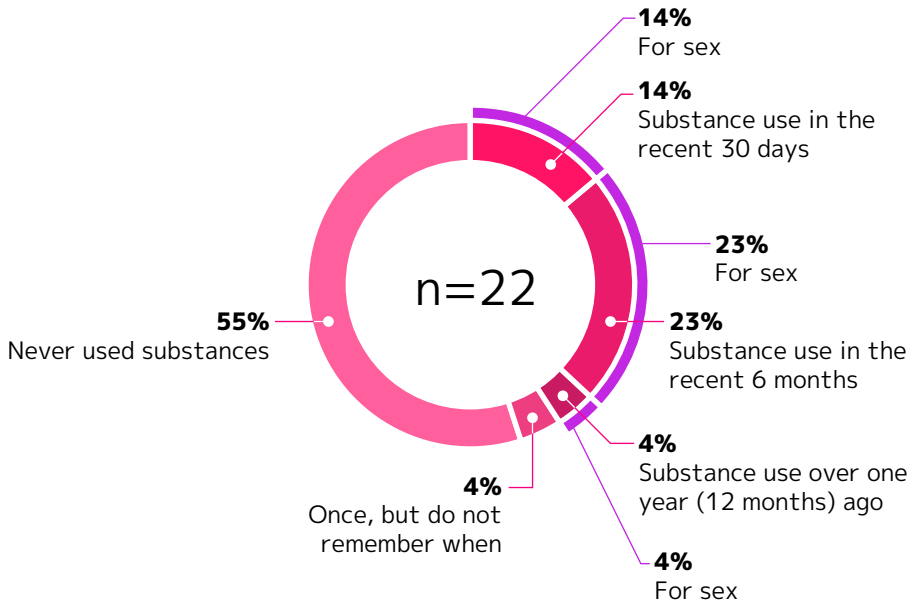
Section 2. Chemsex among transgender, non-binary, queer and intersex people in Ukraine. Sexual practices and drug scene specifics (n=100)

The respondents who practice chemsex say that different PAS/NPS have very different effects in terms of their strength, duration, quality and general experience, but almost always the euphoria in the course of sexual intercourse is at the highest level. This situation can be explained with the fact that sex under the influence of PAS/NPS brings more pleasure, while the respondents have the feeling of inner liberation and intimacy with their sexual partners.

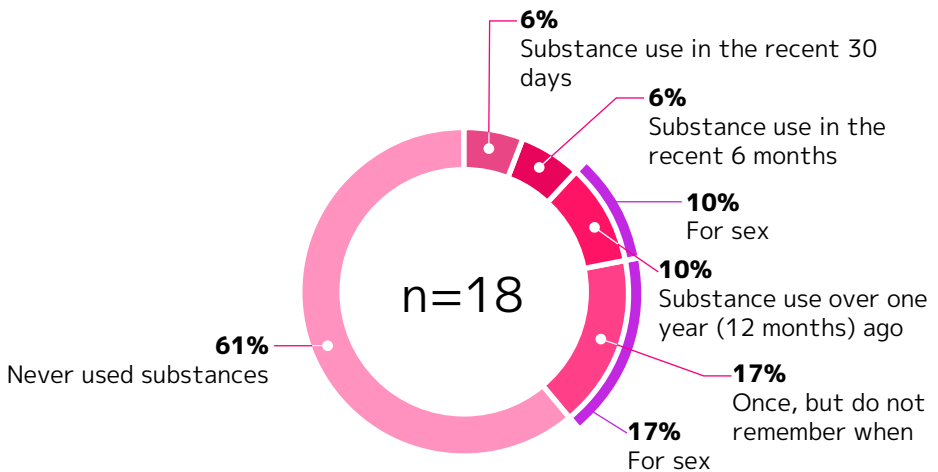
Use of PAS/NPS among transgender people



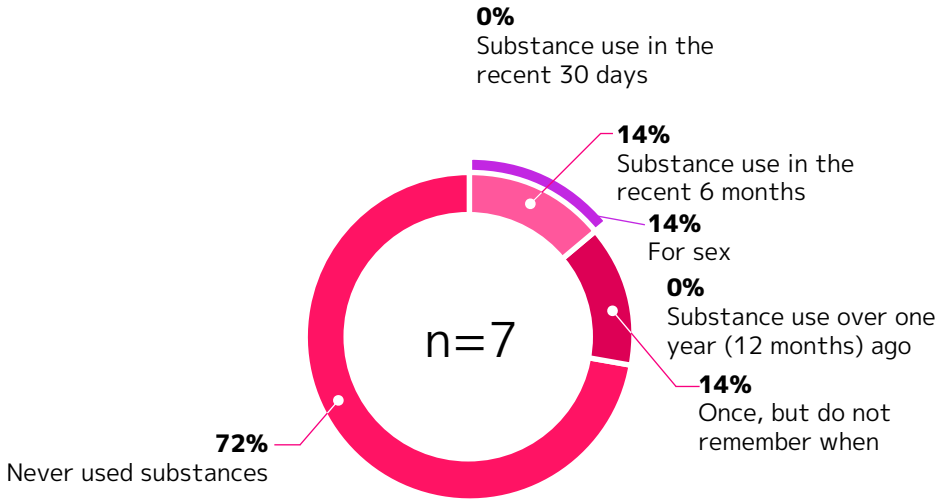
Use of PAS/NPS among non-binary people



Use of PAS/NPS among queer persons



Use of PAS/NPS among intersex people



Many respondents did not identify their sexual practices under the influence of PAS/NPS with chemsex straight away because they did not call such practices this way and did not know the word "chemsex", while the use of PAS/NPS for sex was not new for them.

//

YES, I USE STIMULANT DRUGS FOR SEX AND YOU KNOW WHAT - I AM TOTALLY HAPPY WITH IT! I HAVE NO PROBLEM AT ALL AND I ONLY ASK FOR UNDERSTANDING AND SUPPORT. YOU CAN EVEN TELL ME WHAT YOU USUALLY SAY, LIKE "DARLING, PLEASE USE A LITTLE BIT LESS TODAY"

//

The respondents who practice or used to practice chemsex more often use amphetamine-type stimulants. The main reason why stimulants are gaining popularity as sex drugs is that under their influence people feel strong sex drive, while it is becoming easier and easier to access stimulants due to the new drug sale models appearing, when drug dealers do not meet their buyers in person and use the so-called "stash."

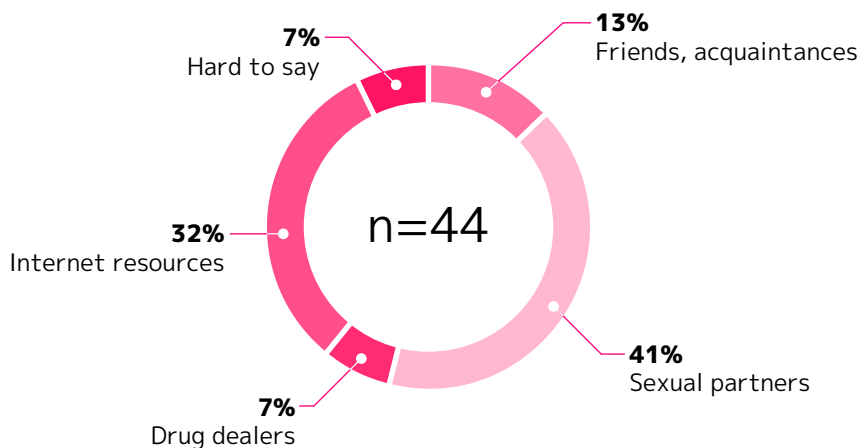
The survey participants confirmed that they were informed about the approaches that can be used to mitigate the harmful consequences of PAS/NPS drug dependence without necessarily quitting their use, but many respondents said that they never saw any information on harm reduction specifically in the context of chemsex.

//

I WANT TO GET INTERESTING, CLEAR
AND ACCURATE INFORMATION. THE
MAIN THING IS THAT THERE SHOULD BE
NO BIAS OR JUDGMENTS BECAUSE ALL
I WANT IS TO JUST SAFELY USE DRUGS
AND CONTINUE ENJOYING CHEMSEX

//

Sources where TNQI get PAS/NPS

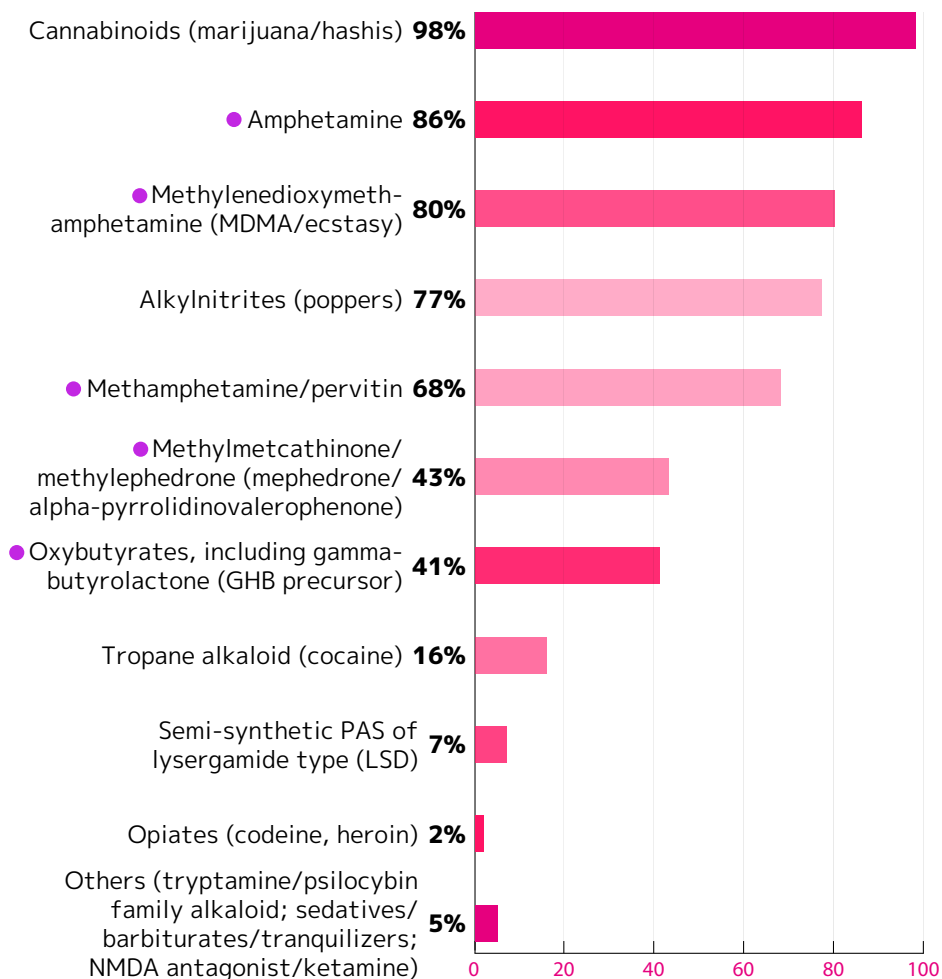


The respondents said that they were well aware that buying PAS/NPS could be qualified as an administrative and/or criminal offense, so they were reluctant to answer the question about the sources of drugs. According to the law⁶, selling drugs is a much more serious offense than their possession – we explained it to every survey participant and only then they agreed to answer the question about where they buy drugs.

The respondents said that judgmental attitude towards people who use PAS/NPS or social stigma directly lead to the spread of negative bias in the society and discrimination against a group of people with the scorned characteristics. As for the TNQI community members, they face multiple discrimination. Besides, the respondents mentioned that such situation causes human rights violations, with stigma leading to the growing number of deaths, incarcerations and mental health problems among drug users with strong PAS/NPS dependence.

6. Criminal Code of Ukraine (Section XIII).
<https://zakon.rada.gov.ua/laws/show/2341-14>

Division of PAS/NPS by the share of respondents who used them at least once in their lives (n=44)

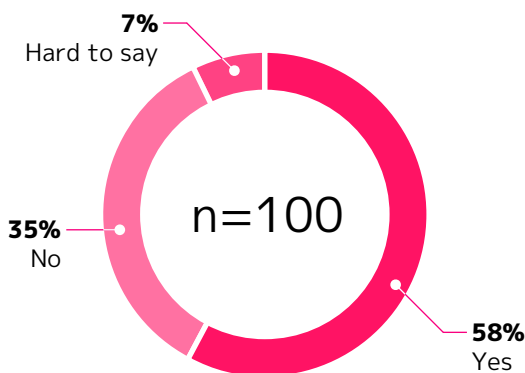


Answering the question about the most frequently used PAS/NPS, the respondents could select more than one option. Many respondents were surprised to see marijuana in the list, as they did not perceive it as a drug at all. Besides, the respondents are well informed that many research studies show that THC has anti-inflammatory qualities and significantly reduces the level of anxiety, so that people feel more relaxed and can become more easily engaged in the emotional contact with their sexual partner(s). However, the use of marijuana only can hardly be called chemsex, except cases when marijuana is used to open a party, where stronger PAS/NPS are to be used.

Sex after using only cannabinoids or alkyl nitrites cannot be called chemsex. Thus, based on the responses received we can see that in the target groups chemsex is mostly linked with the use of five types of PAS/NPS: amphetamine, MDMA/ecstasy, methamphetamine/pervitin, mephedrone and oxybutyrates (GHB precursor).

The respondents were able to choose more than one response. It is because many people use several types of PAS/NPS at once or one by one. It happens during lengthy binges, which often lead to people losing their orientation in time and space. Often this process is associated with mixing various PAS/NPS with different effects, when people are experimenting with substances.

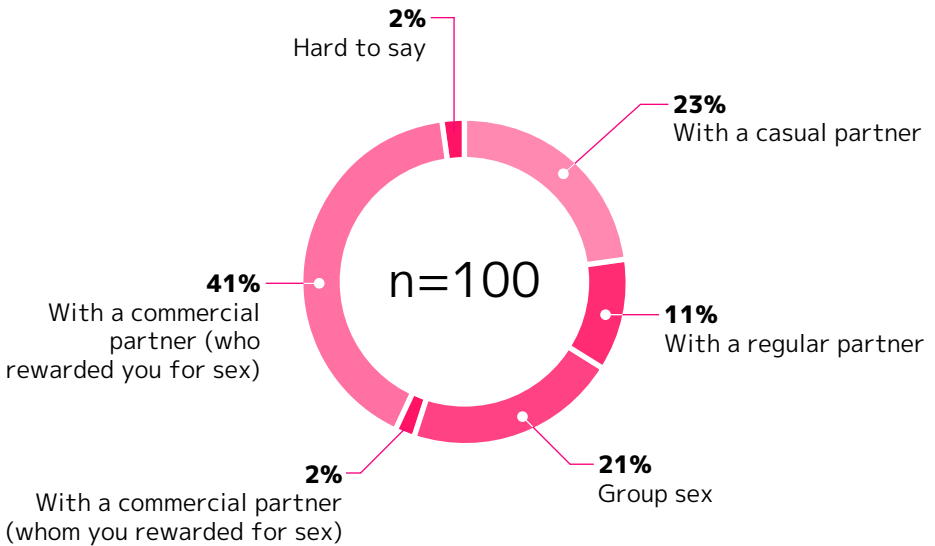
*Division of responses to the question
"Do you think that you had any risky sexual practices
while you and/or your partners were using PAS/NPS
before and/or during sex?"*



The question about risky sexual practices was answered by all the respondents because not only the respondents themselves can be under the influence of drugs but also their sexual partners. Besides, the respondents said that during group sex not all, but only some of the partners could be under the influence of PAS/NPS, but risky sexual practices were typical for all the participants. The respondents also mentioned that lack of PAS/NPS during sex and failure to use them did not mean that they or their partners were not under the influence of one or several psychoactive substances, because people could use PAS/NPS with long-term effect before the sexual intercourse itself.

Some respondents who use PAS/NPS and live with HIV said that in case if they are raped they are reluctant to report to the police because they are afraid they could face a negative attitude because of their PAS/NPS use and their HIV status could be disclosed. Such respondents also said that when they were informed by doctors that they had HIV, the doctors told them they could no longer have sex as they were potential offenders.

Division of the responses about most frequent sexual contacts in the recent six months



The respondents could select only one option to characterize the type of partners they most often had sex with in the last six months. Sexual contacts included various sexual practices, including risky sex.

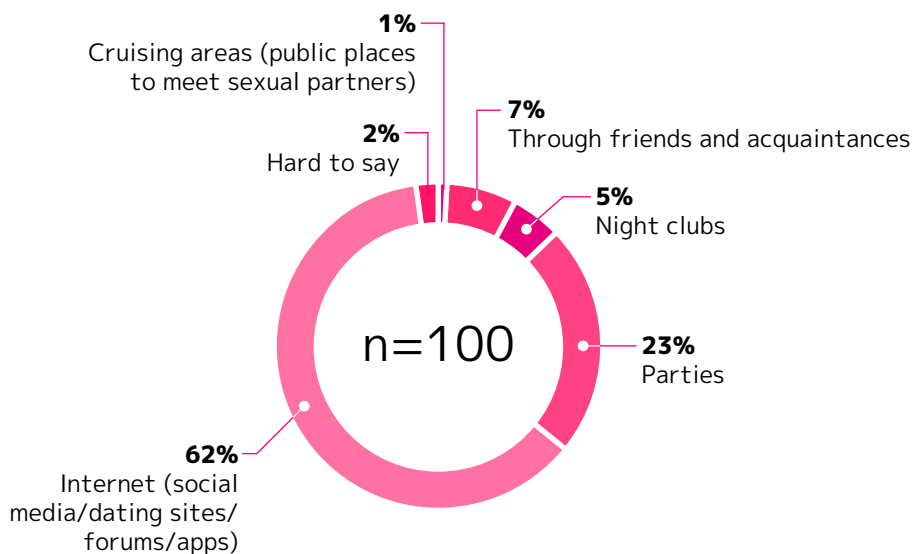
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IF YOU ASK WHAT IS GOOD SEX FOR
ME? THAT'S WHEN I LISTEN TO DEEP
HOUSE, HAVE A PARTNER THAT I LIKE
AND LOTS AND LOTS OF COCAINE

//

In the behavioral study and assessment of the needs of transgender people in HIV prevention services in Ukraine⁷, the respondents (n=438) described in more detail what types of sex they practice more often: 3% said that they practice penetrating vaginal sex as a receptive partner (my partner's penis in my vagina), 2% said that they practice penetrating vaginal sex as an insertive partner (my penis in my partner's vagina), 81% said that they practice penetrative anal sex as a receptive partner (my partner's penis in my anus), 11% practice penetrative anal sex as an insertive partner (my penis in my partner's anus), and 3% of the respondents mostly practice non-penetrative (receptive) sex.

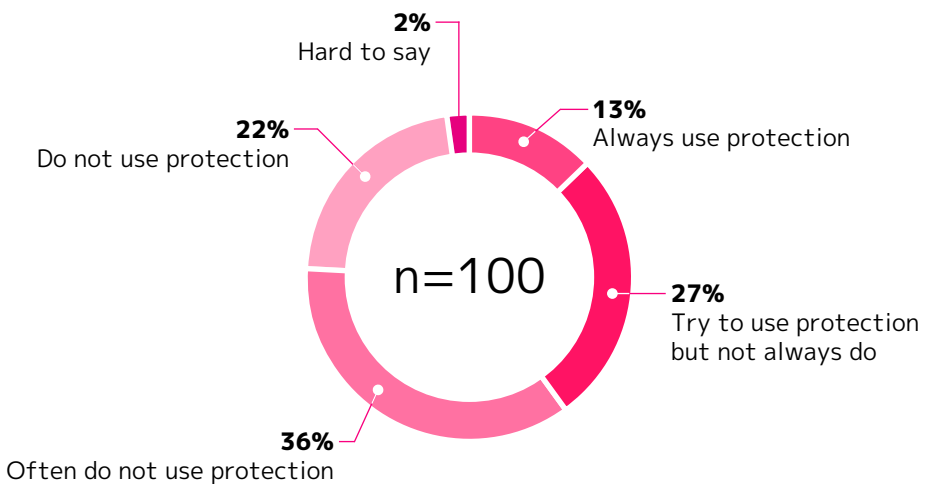
Division of responses about the most widely used locations/channels to find sexual partners in the last six months



7. Behavioral study and assessment of the needs of transgender people in HIV prevention services in Ukraine.
www.HPLGBT.org/publish/Research_TG_HIV-AIDS_UKR/RESEARCH_TG_HIV-AIDS_UKR_ru.pdf

Sexual activities of the respondents who are under the influence of PAS/NPS during sex greatly increase the risks of contracting and/or transmitting STIs, especially if no condoms are used. Authors of the study⁸ analyzing chemsex among MSM also underline that chemsex practices can lead to traumatic sex with higher risks of sexually transmitted infections, including HIV.

Division of responses about how often the respondents used protection during risky sexual practices in the last six months



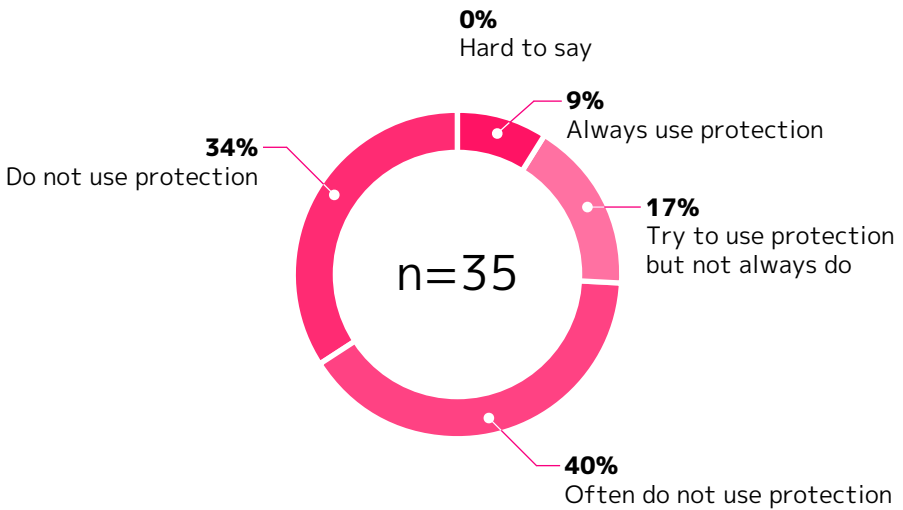
8. When "Chems" Meet Sex: A Rising Phenomenon Called "ChemSex". www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/phenomenon_called_chemsex.pdf

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NOT EVERY SEX THAT I HAVE LEADS
TO ORGASM, SO CHEMSEX
IS EVERYTHING FOR ME...

//

Division of responses about how often the respondents used protection during chemsex in the last six months

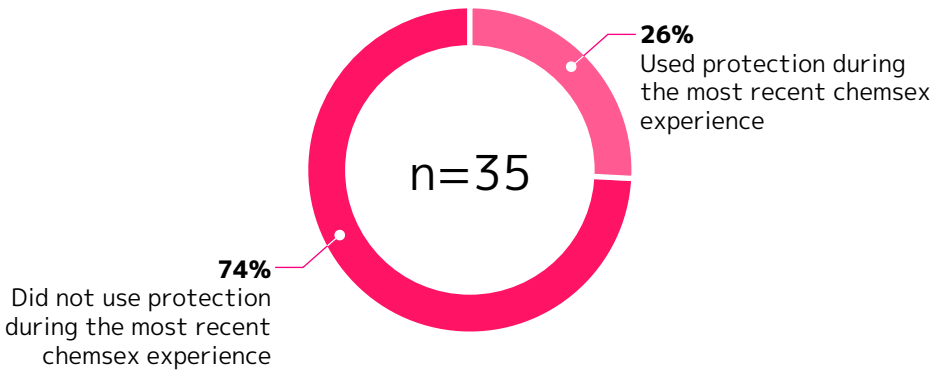


”

EVERY TIME I TAKE 'SPEED'
(AMPHETAMINE - EDITOR'S NOTE)
BEFORE SEX, AND I JUST DON'T
WANT TO THINK ABOUT YOUR BORING
CONDOMS AT SUCH MOMENTS

”

Division of responses about whether the respondents used protection during their most recent chemsex experience



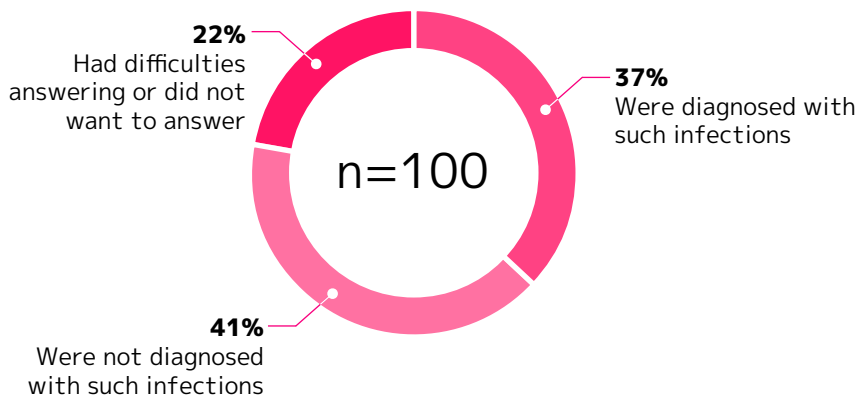
”

I KNOW THAT THERE ARE ORGANIZATIONS WHICH DISTRIBUTE FREE CONDOMS AND LUBRICANTS. ONCE I WAS GIVEN CONDOMS THERE AND I DID NOT LIKE THEIR COLOR AND THEY WERE ALL SO... MONOTONOUS

”

The respondents who practice chemsex are aware of some of its potential health-related risks. The situation with awareness of health-related risks is also confirmed by a recent study,⁹ which was published in December 2019 and described the use of crystal methamphetamine among MSM in Germany.

Division of the responses about whether in the last six months the respondents were diagnosed with socially dangerous diseases, such as HIV, other STIs (syphilis, gonorrhea, herpes), hepatitis (B, C, D) or tuberculosis, etc.

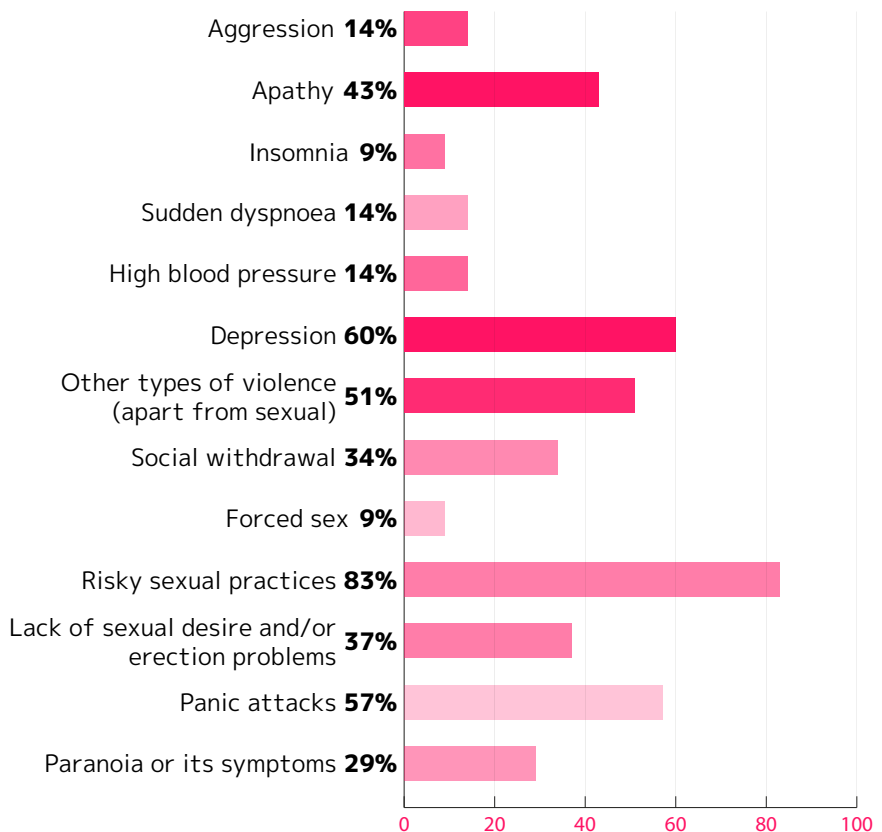


9. Crystal Methamphetamine Use in Sexual Settings Among German Men Who Have Sex With Men.

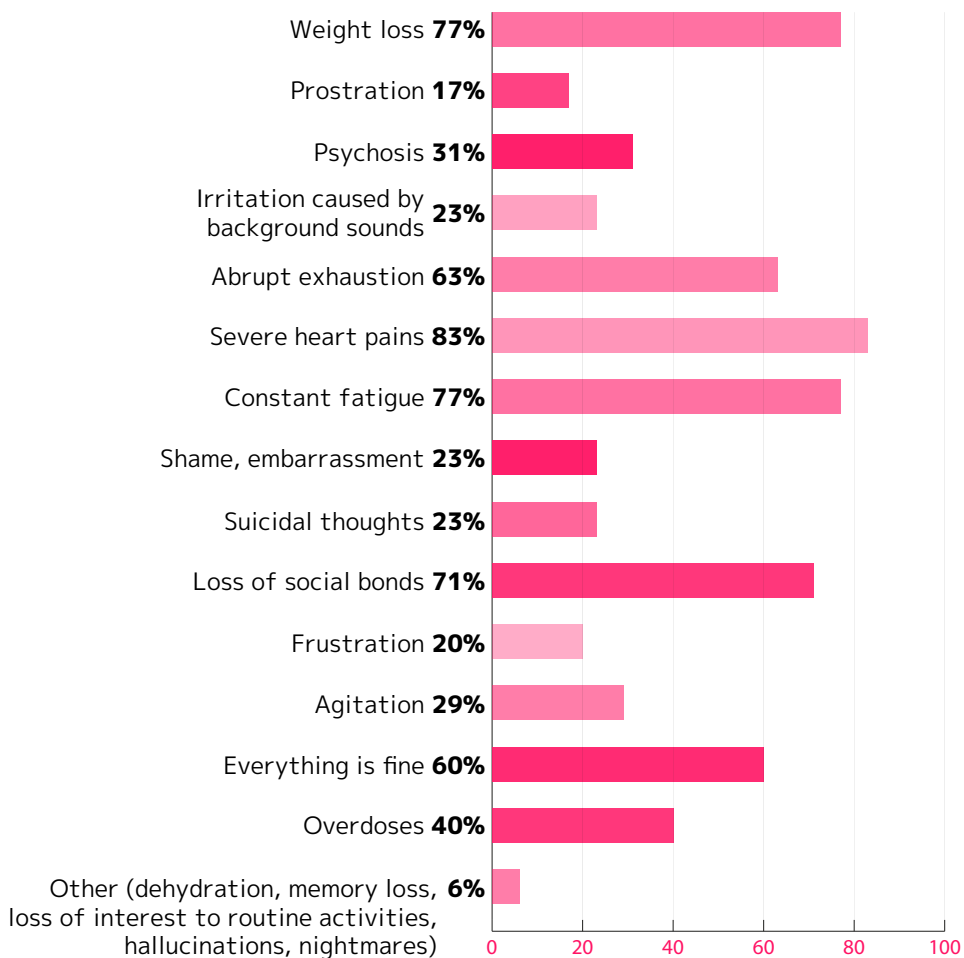
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/crystal_methamphetamine_german_msm.pdf

Some types of PAS/NPS, irrespective of the way of administration, cause strong dependence and thus significantly damage CNS and health in general. Certain negative consequences are retained even after people go through the withdrawal syndrome, causing enough difficulties by itself, and sometimes lead to the development of new symptoms or conditions, which people did not experience before. The research team does not exclude the possibility that after long-term abstinence symptoms the respondents could experience the consequences at the psychosomatic level. The consequences of chemsex, developing under the influence of psychogenic factors, can be caused by the excessive anxiety of respondents about their physical health.

Division of the responses about the negative consequences observed by the respondents after chemsex (n=35) Part 1



Division of the responses about the negative consequences observed by the respondents after chemsex (n=35) Part 2



The respondents were not given any pre-determined options to choose from, so they could mention anything they deemed relevant. Besides, the respondents were not limited in the number of their responses about the consequences of chemsex. Some respondents mentioned rather negative consequences, but later said that they were fine with everything. Despite the negative consequences, such respondents said that they were ready to pay the costs and take the risks to continue enjoying chemsex.

CONCLUSIONS

CONCLUSIONS:

It is considered that chemsex is widespread only among MSM/gay community but it is a false assumption. However, this survey confirms that transgender, non-binary, queer and intersex people also use PAS/NPS before and/or during sex to get extra emotional pleasure, improve the quality of sex and its duration when providing sex services and to achieve intimacy with their sexual partners. Transgender respondents who use PAS/NPS consider that it is important that chemsex practices allow them to feel that they are being admired, which helps them to relax more easily with new sexual partners and accept their gender identity.

The survey showed that, apart from self-stigma, the fear of respondents to recognize that they use PAS/NPS is related to their understanding that PAS/NPS use is stigmatized in the general population, especially in LGBTI+ communities. Illegal status of PAS/NPS as well as SOGI-related stigma are among the key reasons leading to the negative consequences of PAS/NPS use. Survey respondents do not seek timely assistance, e.g. in case of overdoses, as opposed to heterosexual and/or cisgender PUD, and in this case multiple stigma aggravates the negative consequences of PAS/NPS use.

The survey confirmed that amphetamine-type stimulants are especially popular among transgender sex workers. For the first time, we see a triple stigma: related to occupation (sex work), drug use and transgender status.

The approach aimed at protecting the health of every human being should be focused not on prohibiting the behaviors harmful for health, but on mitigating the negative consequences and promoting safer behaviors.

Often the respondents do not view their own experience of PAS/NPS use as drug dependence, even when they need to constantly elevate their dose of PAS/NPS to achieve the same sexual effects. In some cases, the respondents say that they are able to control their use of PAS/NPS and are not going to quit their usual lifestyle as they think everything is fine for them because they have the

lifestyle that they like and do not lose their social bonds. That is why service providers have to realize that the attempts to force people to change their behavior models have a negative effect on the coverage and retention of clients in prevention programs.

Cross- and subgroups of TNQI are still left behind the delivery of preventive medical and social services. That is why not very effective allocation of the funds of global donors and the existing bureaucratic barriers lead to a situation when HIV organizations, which are not community-based, do not strive for a variety of service packages for cross- and subgroups, giving preference to more convenient financial management. Professional NGOs, which are not community-based, are used to viewing KPs in the light of unified indicators. However, the "traditional" services are not effective in case of intersectional KPs. Such situation makes it harder to create a favorable environment and does not allow effectively conceptualizing new challenges and finding new approaches in the response to HIV epidemic among TNQI cross- and subgroups in Ukraine.

The International Network of People Who Use Drugs (INPUD) points out¹⁰ that hatred and fear of people who practice chemsex are widespread all over the world. Such situation is observed in almost all countries of the world and is associated with criminalization of people who use drugs, negative messages in mass media and low awareness of the general public about the problems of people who use drugs. That is why consolidation of people who use PAS/NPS in all their variety and empowerment of such people are critical to ensure sustainability of the necessary services, in particular those related to HIV. Self-acceptance and mobilization of people who use PAS/NPS can facilitate the movement to protect their rights.

10. Chemsex: A Case Study of Drug-Userphobia.
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/INPUD_Chemsex.pdf

Confirmation/disproof of the study hypotheses:

1. The hypothesis was fully confirmed.

The use of PAS/NPS really increases the probability of having unprotected sex in all the target groups. As they are relaxed and easily overcome psychological barriers, the respondents are less likely to practice safe sex, even if they have been planning to use protection before. Even when the protection means are available, under the influence of PAS/NPS people not only have sex with many different partners, but often totally forget about protection, which increases their vulnerability to HIV, hepatitis and other STIs. The respondents point out that when they use PAS/NPS, they practice more traumatic sex than usually, not only because PAS/NPS have a stimulating effect, but also because some of them have an anesthetic effect. PAS/NPS excessive use/dependence leads to more cases when people lose consciousness and thus become more vulnerable to sexual violence and risk to get infected with STIs.

2. The hypothesis was fully confirmed.

Excessive use of PAS/NPS, especially in case of multiple use of various substances, combined with the lack of sleep, caused a number of negative consequences, including conditions when the respondents felt paranoid, were scared or thought that they were being followed. The respondents described such episodes very convincingly, but were not always able to answer any clarifying questions. Some respondents said that they were hospitalized due to their mental conditions after long-term use of PAS/NPS.

3. The hypothesis was partly confirmed.

People with chronic dependence can not only live without sex for many years, they can even face difficulties in satisfying their material, spiritual and social needs. Those respondents, who are in remission, have problems in finding the sense of life or their pursuit of happiness, which may lead to relapses. When people abruptly go back to substance use after a period of abstinence, it can lead to overdoses. However, despite all the risks of chemsex, the respondents who use PAS/NPS say that they are happy with their lifestyles. This hypothesis is closely linked to the previous one because negative consequences of

the abstinence syndrome are often associated with insomnia, vomiting, fever, headache, sore throat, joint pains as well as problems with blood vessels, teeth and loss of appetite. After rehabilitation and re-socialization, the respondents sometimes still failed to change certain behaviors related to their sexual practices.

RECOMMENDATIONS

RECOMMENDATIONS FOR THE STAKEHOLDERS:

Stakeholders:

- Activists and other parties interested in the issues of drug policy.
- State advisory and consultative bodies working in the area of HIV/AIDS and tuberculosis response (including country coordinating mechanisms).
- Initiative groups.
- Research groups/institutions and their divisions at all levels.
- Key players developing and/or implementing social programs to counter HIV/AIDS/TB at the national level.
- Government decision-makers.
- International non-governmental organizations.
- International governmental organizations (including intergovernmental organizations).
- International networks (including subregional/interregional).
- Ukrainian Ministry of Health (including working groups/ interagency task forces)
- National non-governmental organizations.
- Organizations and institutions who focus on HIV response among KPs (including organizations and institutions with meaningful involvement of KPs).
- Recipients of the Global Fund to Fight AIDS, Tuberculosis and Malaria.
- Self-organizations.
- Service organizations.
- Structural units of the international organization created to support and strengthen international peace and security and develop cooperation between states (the United Nations).
- Institutions and officials who are responsible for the protection of the interests of citizens, justice, human rights and freedoms.

Recommendations:

- In the era of lack of understanding and inability to work with community-based organizations and considering the situation when communities are not in the spotlight, international and regional organizations should have simplified policies and procedures, which are sensitive to the potential of self-organizations, which is sometimes insufficient.
- Develop and implement advocacy activities to facilitate elimination of the repressive drug policy and its change in order for it to be health, human-rights and evidence-based.
- Develop and implement advocacy activities aimed at the regulatory framework, i.e. to revise the nomenclature and allowed thresholds of the substances, which are regulated in Ukraine, taking into account best international practices and recommendations of the relevant international organizations.
- Facilitate the variety of services (especially considering lack of choice in the assortment of condoms and lubricants) for the clients based on their needs.
- Develop various programs to deliver HIV prevention services taking into account the specifics described in this report and implement harm reduction activities for chemsex users.
- Facilitate the creation and development of a network of safe spaces for PAS/NPS users.
- Implement measures in response to overdoses among the TNQI community members.
- Develop and implement programs to deliver medical and social services taking into account ways of administering PAS/NPS and polydrug use among the TNQI community members.
- Develop awareness-raising materials on the effects of PAS/ NPS, the related risks, including chemsex risks, on their interaction with other drugs, on the services available etc. both for the professionals and for the TNQI community members.

- Develop and implement programs, taking into the account the specifics of non-injecting PAS/NPS users in the TNQI communities, who cannot be enrolled into harm reduction programs as they do not use syringes.
- Recommend HIV-negative members of the TNQI communities who practice chemsex to enroll into pre-exposure prophylaxis (PrEP) programs.
- Adapt the existing psychosocial, medical and social interventions to ensure effective work with the members of the TNQI communities who use PAS/NPS, including non-injecting PAS/NPS users.
- Denial of access to OST (e.g. in places of confinement) as well as forced detention in rehabilitation centers against the will of the person who uses PAS/NPS, should be considered as torture and inhuman treatment at the legislative level.
- Strengthen and support community-based organizations with a special focus on the meaningful involvement of community members in the management of organizations.
- Strive for decriminalization of sex work and drug use, depathologization of transgender people and decriminalization of HIV status.
- Carry out the required community monitoring, in particular to make sure that people who use PAS/NPS are kept in adequate conditions in the places of confinement.
- Carry out a detailed analysis of the slamming practices in the TNQI communities, in particular in the context of risks and consequences of slamming.

REFERENCES

REFERENCES:

- 01 Human Rights Watch**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/Maps%20of%20anti-LGBT%20Laws%20Country%20by%20Country%20_%20Human%20Rights%20Watch.html
- 02 Ukraine Situation Report**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/UNOCHA-Report_Ukraine_November-2019.pdf
- 03 Behavioral study and assessment of the needs of transgender people in HIV prevention services in Ukraine**
www.HPLGBT.org/publish/Research_TG_HIV-AIDS_UKR/RESEARCH_TG_HIV-AIDS_UKR_ru.pdf
- 04 Alternative report on implementation of the International Convention on the Elimination of All Forms of Discrimination against Women**
www.HPLGBT.org/publish/TG-Monitoring_2019/report_ua.pdf
- 05 WHOQOL: Measuring Quality of Life**
<https://www.who.int/healthinfo/survey/whoqol-qualityoflife/en/>
- 06 Criminal Code of Ukraine (Section XIII)**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/Criminal_Code_of_Ukraine-Section_XIII.pdf
- 07 Behavioral study and assessment of the needs of transgender people in HIV prevention services in Ukraine**
www.HPLGBT.org/publish/Research_TG_HIV-AIDS_UKR/RESEARCH_TG_HIV-AIDS_UKR_ru.pdf
- 08 When "Chems" Meet Sex: A Rising Phenomenon Called "ChemSex"**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/phenomenon_called_chemsex.pdf
- 09 Crystal Methamphetamine Use in Sexual Settings Among German Men Who Have Sex With Men**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/crystal_methamphetamine_german_msm.pdf
- 10 Chemsex: A Case Study of Drug-Userphobia**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/INPUD_Chemsex.pdf

ADDITIONALLY:

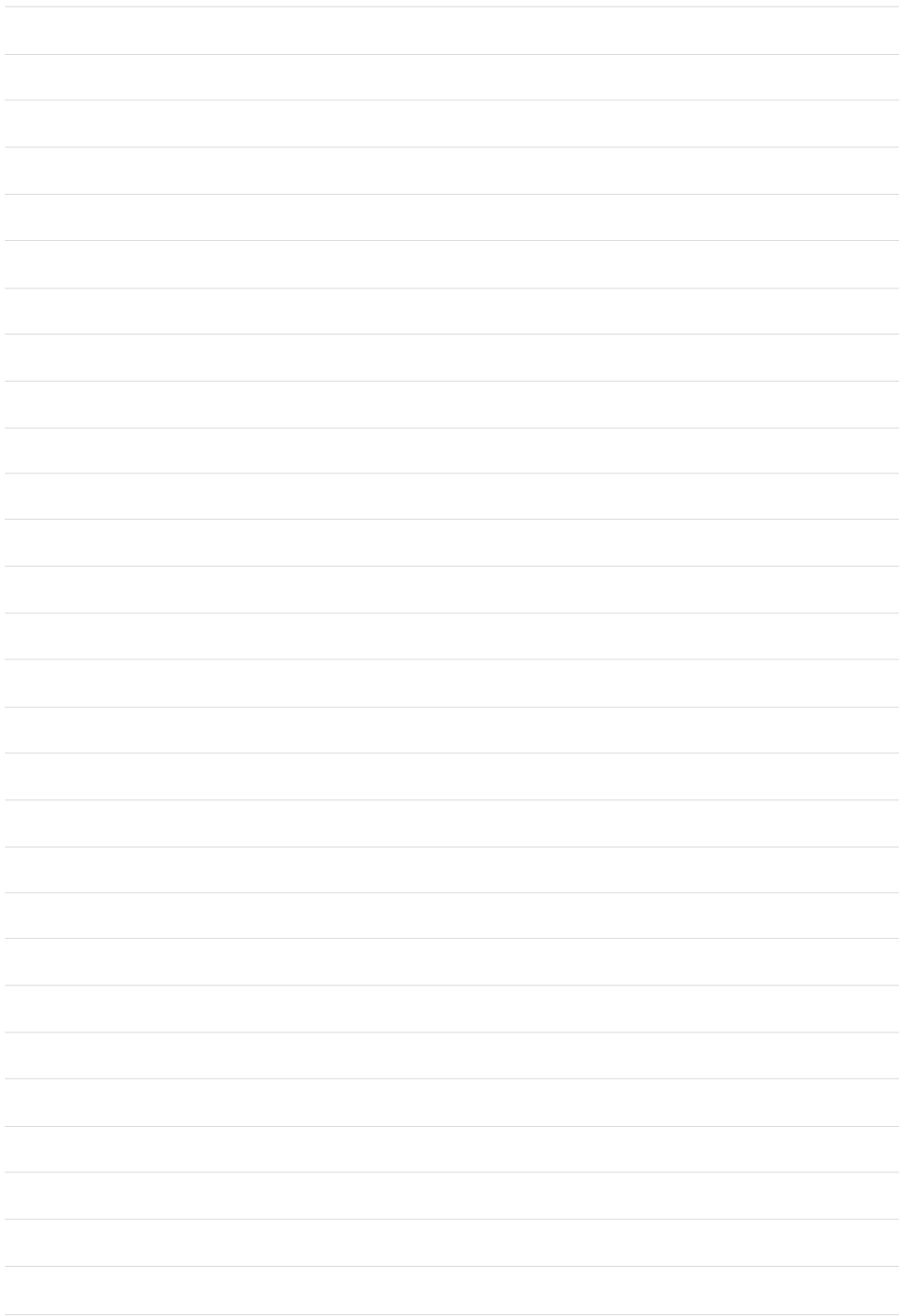
- 11 **Avert: Chemsex & HIV**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/Avert-chemsex_and_hiv.pdf
- 12 **NIHR: Evidence for public health on novel psychoactive substance use (a mixed-methods study)**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/NIHR-evidence_for_public_health_on_novel_psychoactive_substance_use.pdf
- 13 **Injecting drug use during sex (known as "slamming") among men who have sex with men: Results from a time-location sampling survey conducted in five cities, France**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/MSM_slamming.pdf
- 14 **Chemsex Drugs on the Rise: A Longitudinal Analysis of the Swiss HIV Cohort Study From 2007 to 2017**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/chemsex_drugs_on_the_rise.pdf
- 15 **Sexual, addiction and mental health care needs among men who have sex with men practicing chemsex – a cross-sectional study in the Netherlands**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/a_cross-sectional_study_in_the_Netherlands.pdf
- 16 **Exposure to HIV risks among young people who use drugs (YPUD) in three cities in Vietnam: time to develop targeted interventions**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/HIV_risks_among_YPUD.pdf
- 17 **Prevalence of HCV among people who inject drugs in Brussels: a respondent-driven sampling survey**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/HCV_among_PWID_in_Brussels.pdf
- 18 **Mephedrone and Alcohol Interactions in Humans**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/mephedrone_and_alcohol.pdf
- 19 **Chemsex is not a barrier to self-reported daily PrEP adherence among PROUD study participants**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/chemsex_and_PrEP.pdf

- 20 **Prevalence and correlates of depressive symptoms among gay, bisexual and other men who have sex with men in the PROUD randomised clinical trial of HIV pre-exposure prophylaxis**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/prevalence_and_correlates_of_depressive_symptoms.pdf
- 21 **Drug-related and psychopathological symptoms in HIV-positive men who have sex with men who inject drugs during sex (slamsex): Data from the U-SEX GESIDA 9416 Study**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/slamsex_and_HIV-positive_MSM.pdf
- 22 **Implications for a policy of initiating antiretroviral therapy in people diagnosed with human immunodeficiency virus: the CAPRA research programme**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/CAPRA-ART_and_immunodeficiency_virus.pdf
- 23 **Poly drug use, chemsex drug use, and associations with sexual risk behaviour in HIV-negative men who have sex with men attending sexual health clinics**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/poly_drug_use_and_chemsex.pdf
- 24 **Guidelines for the Care and Treatment of Persons Diagnosed with Chronic Hepatitis C Virus Infection**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/WHO-hepatitis_C.pdf
- 25 **Sexual risk reduction interventions for patients attending sexual health clinics: a mixed-methods feasibility study**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/NIHR-sexual_risk_reduction_interventions.pdf
- 26 **Evidence for public health on novel psychoactive substance use: a mixed-methods study**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/NIHR-evidence_for_public_health_on_NPS_use.pdf
- 27 **The Novel Psychoactive Substances in the UK Project: empirical and conceptual review work to produce research recommendations**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/NIHR-NPS_in_UK.pdf

- 28 Double Jeopardy: Methamphetamine Use and HIV as Risk Factors for COVID-19**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/methamphetamine_HIV_COVID-19.pdf
- 29 Substance Use and Adherence to HIV Preexposure Prophylaxis for Men Who Have Sex with Men**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/substance_use_and_adherence_to_HIV_preexposure_prophylaxis_for_MSM.pdf
- 30 New Psychoactive Substances: Challenges for Drug Surveillance, Control, and Public Health Responses (Review)**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/PMID31668410_Review.pdf
- 31 Predicting STI Diagnoses Amongst MSM and Young People Attending Sexual Health Clinics in England: Triage Algorithm Development and Validation Using Routine Clinical Data**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/EClinicalMedicine-STI_amongst_MSM.pdf
- 32 Trans women deprived of liberty: Invisible stories behind bars**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/Trans_Women_Deprived_of_Liberty.pdf
- 33 World Drug Report 2019: Executive Summary**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/WDR-19_Executive_Summary.pdf
- 34 World Drug Report 2019: Drug Demand And Supply**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/WDR-19_Drug_Demand_And_Supply.pdf
- 35 World Drug Report 2019: Depressants**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/WDR-19_Depressants.pdf
- 36 World Drug Report 2019: Stimulants**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/WDR-19_Stimulants.pdf
- 37 World Drug Report 2019: Cannabis And Hallucinogens**
www.HPLGBT.org/publish/HIV-CHEMSEX_survey/library/WDR-19_Cannabis_And_Hallucinogens.pdf

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