

# Understanding multi-stakeholder perspectives on comprehensive chemsex services for young men who have sex with men in Thailand: Qualitative findings from the CLYMAX study

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Asia-Pacific **Chemsex** Symposium

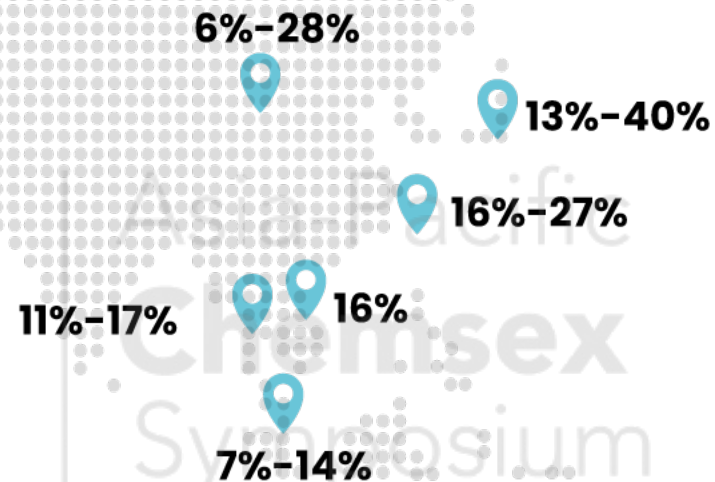
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# THE PATH THAT ENDS AIDS

## The growing phenomenon of chemsex

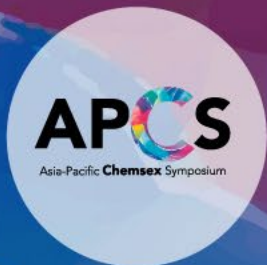
### Prevalence of chemsex among MSM in Asia



There have been increasing reports of chemsex, including among gay men and other men who have sex with men and transgender women in Asia.

## Need for comprehensive harm reduction services...but how?

- The increasing visibility of chemsex among MSM in Thailand underscores the urgent need for well-established and comprehensive chemsex services.
- The lack of knowledge regarding the essential components of comprehensive chemsex services for MSM in Thailand poses a substantial obstacle to the development such services.



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# CLYMAX study

Comprehensive assessment in a Longitudinal study on **Young Men** who have sex with men **Attracting to chemsex**

Exploration	Preparation	Implementation	Sustainment
<ul style="list-style-type: none"><li>• Patterns of chemsex use among YMSM</li><li>• Perspectives on factors influencing chemsex use, effects on health, and the necessary services for a comprehensive chemsex clinic</li><li>• The acceptability and feasibility of establishing such services</li></ul>	<ul style="list-style-type: none"><li>• Summarize the key findings from IDIs</li><li>• Refine and adjust the service plan</li><li>• Plan support for healthcare providers (e.g., trainings)</li><li>• Leverage facilitators</li><li>• Address barriers</li></ul>	<ul style="list-style-type: none"><li>• Start implementing it.</li><li>• Measure the implementation, service, and client outcomes</li></ul>	<ul style="list-style-type: none"><li>• Confirm the benefits and public health impact of the service.</li><li>• Refine and adjust the initially implemented service based on participants' feedback to enhance improvement.</li></ul>
PHASE 1 Pre-implementation		PHASE 2 Implementation	

# Objective of this analysis

- To explore the perspectives from various stakeholders on the essential elements of comprehensive harm reduction services for YMSM.

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# Study design and eligibility

- Semi-structured, in-depth interviews were conducted in-person with 60 key informants in March 2023
- Participants included
  - 40 MSM aged 16-35 years who engaged in chemsex
  - 10 of peers/family members of YMSM who engaged in chemsex
  - 10 healthcare providers.



MSM (N=40)



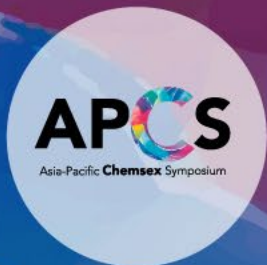
Family members/peers (N=10)



Healthcare providers (N=10)

# Data analysis

- Interviews were recorded and transcribed verbatim.
- A codebook was developed based on a priori themes of the interview guide and emergent themes from transcripts.
- Analyses were conducted using Dedoose software.



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# RESULTS

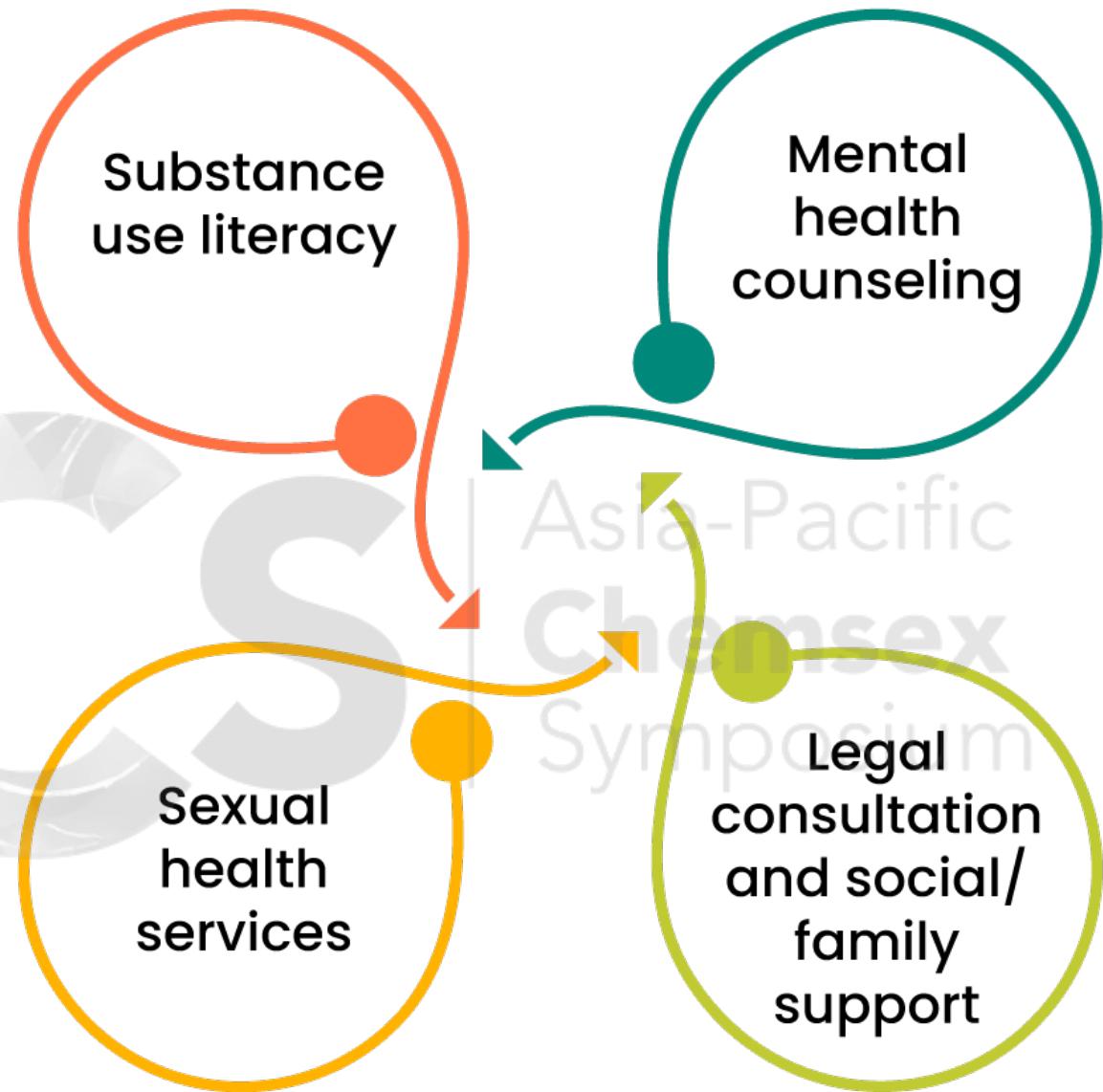
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# 4 key elements were identified



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# 4 key elements were identified

- Top priority
- A reliable source of information on chemsex-related harms and mitigating strategies

Substance  
use literacy

Sexual  
health  
services

***“The most important thing for us clients is to receive comprehensive knowledge about chemsex, including detailed information on each substance and its various types.”***

-- User, 30 years old

***“Understanding what it is and how it can be used, while also recognizing one's own limits regarding the amount to use, is essential. This includes education on the potential harmful effects on the body. It's not about strict prohibition, but rather about providing information.”***

-- Former user, 22 years old

# 4 key elements were identified

Substance  
use literacy

Mental  
health  
counseling

- From specialists such as psychologists or psychiatrists

***“Mental health services are very important, and seeing a doctor is essential. If it were up to me, I would definitely want to see one [..]. We can’t assess ourselves accurately; we need the help of people around us or our friends to evaluate us.”***

-- User, 33 years old

***“Often, clients ask me if they can meet with a psychologist to discuss their concern [such as why they continue to engage in chemsex, the potential consequences of stopping, and what alternatives they have]. It's crucial.”***

-- Counselor, 43 years old

# 4 key elements were identified

- Routine sexually transmitted infections screening
- Provision of preventive measures such as PrEP and condoms

Substance  
use literacy

Sexual  
health  
services

***“Testing for various STIs should be available [...]. Having this knowledge [of having STIs] allows us to monitor our health, seek prompt treatment, and undergo testing when necessary.”***

-- User, 31 years old

***“These should be screenings for different STIs [as part of the service package].”***

-- User, 29 years old

# 4 key elements were identified

***“If there is to really be a service, there must be laws in place to protect those who come to receive services.”***

-- User, 25 years old

***“There are concerns [regarding laws and protections of rights] among those who use chemsex. [...] These people frequently faces extortion for financial gain. [...] There's no one to support them.”***

-- Director of a community-based organization, 54 years old

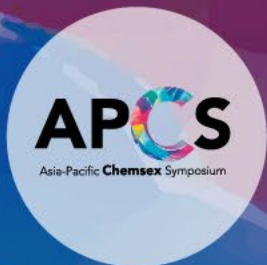
Mental health counseling

Legal consultation and social/family support

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- Concern over country's punitive laws and common abusive practices towards people who use substances.

# Other suggestions

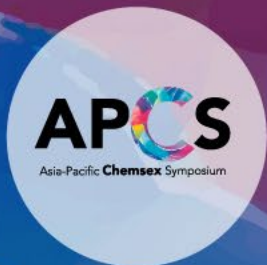
- Options for onsite and online services
  - Onsite:
    - More professional feel and effective communication.
  - Online:
    - Reduced the risk of experiencing stigma and discrimination.
    - Avoid fears of street-side urine drug tests by the police
- Emergency hotline
- Mailing service for tools for safe chemsex use
- Chemsex merchandise available
- Counseling involving former users



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# Conclusions

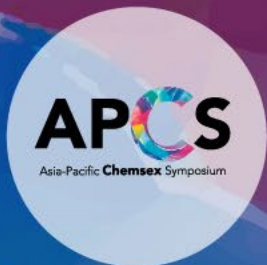
- Chemsex-specific literacy, mental health services, sexual health services, legal consultation, and social/family support were identified as key chemsex service components, and their inclusion in comprehensive chemsex services for MSM in Thailand should be further explored.
- The implementation phase of the CLYMAX study, which integrates these aspects into the service, is ongoing.



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- The content and views expressed are those of the authors and does not necessarily represent the official views of any of the governments or institutions mentioned above.



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