

## **Substance use at sex on premises venues among GBMSM (gay, bisexual and other men who have sex with men)**

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### **Introduction and Aims:**

Sex on premises venues (SOPV) for GBMSM (gay, bisexual and other men who have sex with men) provide novel contexts for more sexually adventurous practices, including recreational substance use. This sub-group provides unique insight into experiences, sexual activity and substance use patterns of GBMSM and peer health workers.

### **Design and Methods:**

Participants were recruited as part of a larger HIV peer-testing project providing innovative HIV and STI asymptomatic screening. Health promotion was provided late on Friday and Saturday nights during themed sex parties to engage GBMSM in rarely studied after-hours context. Participants included venue patrons (n = 4) and peer testers (n = 5). Trained researchers (clinicians) conducted interviews with verbal consent provided. Thematic analysis was used to identify themes regarding substance use and harm reduction within these settings. Ethics approval was obtained.

### **Results:**

Four main themes (with sub-themes) were identified. 1) Substance use in the venues (e.g. amyl, alcohol, crystal, use in combination, desire to avoid); 2) How substances transform experiences (e.g. disinhibition, social enhancement); 3) How substances transform sexual experiences (e.g. enhances sexual performance, more adventurous); and 4) Harm reduction strategies (e.g., current practices, recommendations).

### **Discussions and Conclusions:**

Group sex parties at private clubs provide an opportunity for GBMSM to explore aspects of their personal/sexual identity. Recurrent themes suggest a culture that values health promotion despite engaging in activities associated with a higher risk for acquiring HIV or an STI. Innovative models of care require new health promotion hours and settings.

### **Implications for Practice or Policy (optional):**

The findings demonstrate how peer-testers can support increasing awareness and promotion of harm reduction strategies among this subgroup within SOPV having implications for the development of policy and health promotion interventions.

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