

‘Chemnection’

An Interpretative Phenomenological
Analysis,
of Intimate Relationships in the Context
of Chemsex.

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Declaration

Dearbhaím leis seo gurb é mo shaothar féin amháin an t-ábhar seo atá á leagan isteach agam i gcomhair measúnaithe ar an gclár staidéir le haghaidh na dámhachtana DPsy, agus go bhfuil gach cúram réasúnach glactha agam a dheimhniú, ar feadh m' eolais, gur saothar bunaidh é seo nach síraíonn aon dlí cóipchirt, agus nár baineadh as saothar aon duine eile é ach amháin agus a mhéid go luaitear agus go n-aithnítear an saothar sin laistigh de théacs mo shaothairse

Name; Aoife Drury Signed; ID no; 20213375 Date: 11th of August 2025

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List of Terms

MSM: Men who have Sex with Men

GBMSM: Gay, Bisexual and Men who have Sex with Men. This study uses the term GBMSM. However, both MSM and GBMSM are used in this paper. This is depending on the participants of some research and the acronym used.

Cis: Describes a person whose gender identity corresponds to their sex assigned at birth.

Chems: Refers to describing the drugs in isolation.

Psychotherapist: A person who uses talk therapy as a method to provide mental health support and is interchangeable with counsellor and psychosexual therapist in this study.

Couple/s: In this study the phrase includes those who are in non-monogamous relationships and throuples.

Abstract

'Chemnection' An Interpretative Phenomenological Analysis of Intimate Relationships in the Context of Chemsex.

The term 'chemsex' describes the use of psychoactive drugs between gay and bisexual men who have sex with men (GBMSM) lasting several hours or days with multiple sexual partners. Chemsex is seen as enhancing sexual pleasure and fostering relationship growth, with shared experiences within social networks influencing participation and identity. The use of drugs facilitates emotional bonding and connection, offering affirming and sometimes transformative experiences. For many, chemsex fills a void of intimacy. This research builds on these insights, further exploring the relationship between chemsex and intimate relationships in ways that have yet to be fully examined.

Using Interpretive Phenomenological Analysis (IPA), the study investigates how participants define and navigate intimacy within the unique subcultural context of chemsex. Through in-depth qualitative analysis, eight participants' subjective experiences were explored, uncovering patterns that illuminate the relational and interpersonal dimensions of chemsex. Three core themes appeared: (1) *The Pressure of Intimate Relationships*; where relationships, typically seen as sources of emotional support, were often described as overwhelming, enigmatic, and at times, suffocating; (2) *Between Being and Nothingness*; where chemsex is perceived by some as a space for temporary liberation, self-expression, and pleasure, while others experience it as destabilising, leading to loss of control and negative consequences, and (3) *Seeking Acceptance*; highlighting chemsex as a means of addressing deep-seated loneliness through a unique form of intimacy, albeit with ambivalent outcomes.

This research contributes to the growing literature on chemsex by offering a nuanced understanding of the complex emotional and relational dynamics within these encounters. The findings highlight the dual nature of chemsex as both a source of connection and disconnection, intimacy and isolation, self-realisation and depersonalisation. These insights provide valuable recommendations for psychotherapeutic interventions aimed at supporting GBMSM engaged in chemsex, enhancing therapeutic approaches to address the specific relational and emotional needs of this population.

Chapter 1. Introduction

1.1. Thesis Overview

This chapter presents the rationale for the research, it gives an outline of the aim and objectives of this study, and a short synopsis of the methodology used. Finally, the researcher's reflexivity gives an insight into the journey involved in developing this study.

Chapter Two provides a comprehensive review of chemsex, including its definition and the underlying motivations identified through existing research. Attention is given to the prevalence of chemsex in Ireland. It investigates the literature on intimate relationships, with a particular focus on the dynamics within the context of chemsex. A review of literature exploring the interface between chemsex, and psychotherapy is carried out; the chapter concludes with a reflexive commentary by the researcher.

Chapter Three gives a rationale for employing Interpretative Phenomenological Analysis (IPA) as the most suitable methodology for addressing the research question. It outlines the philosophical pillars of IPA: phenomenology, hermeneutics, and idiography. It details the research design, describing the steps taken for sampling, participant recruitment, and the methods of data collection and analysis. It then discusses ethical considerations alongside an examination of the validity of the study. Finally, the researcher's reflexive comments explore the rationale for this study.

Chapter Four presents the study's findings presenting the participants' perspectives while also providing the researcher's interpretation of the data. The Group Experiential Themes (GET) and sub-themes are thoroughly examined. The chapter

emphasises areas of alignment and of divergence within the participants' experiences, offering deeper insights into the study's key themes. Finally, a reflexive commentary is made by the researcher to capture the journey of data analysis.

The concluding chapter interprets the study's findings, contextualizing them within the body of existing literature. It offers fresh perspectives and insights on the experience of intimate relationships in the context of chemsex, highlighting the implications for both clinical practice, training and future research. Finally, the researcher's reflexive comment is incorporated at the end of the chapter, giving insight into the experience of writing the discussion chapter.

1.2. Rationale

Chemsex is a phenomenon that has been deeply rooted in epidemiological studies, and quantitative analysis with little attention given to the field of psychotherapy. Alongside a dearth of research into the dynamic between chemsex and intimate relationships. The pursuit of intimacy plays a pivotal role in understanding chemsex, with various studies underscoring the significance of connection and bonding during these experiences. Research suggests that chemsex participants often report heightened feelings of connection and the creation of intense bonds during encounters (Van Hout et al., 2019; Bryant et al., 2018). These interactions are not solely physical but are perceived as ways to build intimacy, enhance sexual experiences, and even support the growth of relationships (Stanton et al., 2022). The shared nature of these drug-fuelled sexual experiences often becomes a cornerstone of participants' social identity, as evidenced in studies conducted in Ireland where individuals reported that their social groups and chemsex activities were deeply interwoven (Joyce et al., 2017). The drugs may facilitate relationship bonding and connection, be affirming, transformational (Bryant et al 2018, Florêncio,

2021, Dowsett et al 2005), and used to overcome the void of intimacy (Van Hout et al., 2019). This research will endeavour to follow through on these findings that have yet to be studied further by exploring the experiences of romantic/sexual partnerships for those engaging in chemsex.

Chemsex is often defined as the intentional use of psychoactive substances to enhance and elongate sexual encounters among GBMSM (Bourne et al., 2015).

While definitions vary across studies (Tomkins et al., 2019; Maxwell, 2019), chemsex is commonly associated with drugs such as mephedrone, gamma-hydroxybutyrate (GHB)/gamma-butyrolactone (GBL), and crystal methamphetamine (Hibbert et al., 2021). Research acknowledges that additional substances, including alkyl nitrites, cocaine, and MDMA, feature within broader configurations of chemsex use (Yu & Lasco, 2023; Glynn et al., 2018; Berg et al., 2020; Tomkins et al., 2018). For this study, the researcher has drawn upon the definition of chemsex by Irish research; Glynn et al. (2018), which includes ketamine, GHB/GBL, crystal meth, mephedrone, cocaine, NPS and other stimulants (including peed/amphetamine/ecstasy/eros/nexus/smiles). Amyl nitrites, known as Poppers, was also included in the definition (Yu & Lasco, 2023; APCOM, 2021; Giogetti et al, 2017). While this study adopts a focused definitional scope, the researcher acknowledges the flexible conceptual framework that reflects the multiplicity of meanings ascribed to chemsex by those who engage in and study it.

The concept of intimate relationships is multifaceted and context dependent. In this study, intimate relationships are defined as romantic and/or sexual partnerships characterised by four interrelated dimensions found in LGBTQ+ research: emotional closeness, mutual trust, identity affirmation, and community context (Doyle & Molix,

2015; Joyner et al., 2019; Formby, 2020; Petrocchi et al 2020; Siegel et al., 2020).

Although intimacy is frequently associated with enduring romantic partnerships, empirical research demonstrates that intimate bonds can be transient or situational, influenced by varying degrees of emotional and physical closeness (Miller & Perlman, 2013). This definition deliberately moves beyond duration-based or heteronormative models, and when examined through IPA, allows for nuanced exploration of the intersection of chemsex practices and intimate relationships.

This study seeks to capture the diversity of experiences and meanings attached to intimate relationships in the context of chemsex, acknowledging that these experiences may vary depending on individual, social, and cultural factors. The intention is that the findings enhance the understanding of chemsex in Ireland, identify gaps in current research, provide insights for psychotherapists, supervisors, and training programmes alongside paving the way for future studies that explore this phenomenon further in Ireland.

1.3. Research Question, Aims and Objectives

The question this research poses is: 'What are the experiences of intimate relationships for men who have sex with men engaging with chemsex?'

The researcher established four objectives:

1. To explore the meaning and experiences of intimate relationships for MSM engaging with chemsex
2. Give a voice and platform to those who are engaging with chemsex and their experiences of intimate relationships.
3. Elucidate understandings to better inform the psychotherapy sphere.

4. To explore any idiographic subcultural definitions and understandings of intimacy within the chemsex scene.

1.4. Methodology

The methodology used is Interpretative Phenomenological Analysis (IPA). IPA as a methodology is informed by the principles of idiography, hermeneutics and phenomenology; these allow an in-depth analysis of the participant's experience by delving into and illuminating the experience of the phenomenon in question. Eight men were interviewed in relation to their experience of chemsex and intimate relationships using semi-structured interviews, conducted either face to face or on the platform, Zoom. In accordance with IPA procedure (Smith et al., 2022) interviews were recorded and transcribed verbatim and then analysed. The research followed a rigorous analysis process that elucidates the findings of the study.

1.5. Researcher's Reflexive Comment

My interest in this area was shaped by my training as a Psychosexual and Relationship Therapist at 56 Dean Street, London. I had the privilege of working with David Stuart (2013), who coined the term 'chemsex' and carried out groundbreaking work in the field. David was a consistent source of support and played an instrumental role in encouraging me to pursue this study. My therapeutic work gave me valuable insight into the lived experiences of those engaging in chemsex, but it also brought a set of assumptions that required ongoing reflection. My training helped me navigate sensitive topics, build trust, and facilitate richer conversations with participants. However, it also led me to make initial assumptions about their motivations and vulnerabilities, assumptions I had to consciously set aside to remain open to alternative perspectives.

When I first approached this research, I had a strong belief that chemsex engagement was primarily trauma driven. This was largely influenced by my training, which focused exclusively on the harms associated with chemsex. Nevertheless, I felt a strong ethical pull to honour participants' diverse experiences, including those that were ambivalent or positive. At times, this created tension with my teaching, which emphasised risk and intervention. Holding both positions required a delicate balance: remaining attuned to harm while resisting the impulse to pathologize. To address these presuppositions, I engaged in ongoing critical reflection throughout the research process. Through peer debriefing, supervision, and extensive reading, I worked to remain vigilant about over-emphasising psychological explanations for behaviour and relying too heavily on my therapeutic lens. This process reinforced the importance of continuously interrogating my own positionality, a practice that I consider essential in both my academic and professional work. In this research, it served as a tool for accountability and openness, supporting my efforts to privilege participants' voices over professional preconceptions and to produce an analysis that remained grounded in their lived realities.

Chapter 2. Literature Review

2.1. Overview of the Chapter

This chapter reviews literature on two key areas: chemsex and intimate relationships among GBMSM. It includes both qualitative and quantitative studies. The first section defines chemsex, justifies the definition used in this study, and distinguishes between problematic and non-problematic use, drawing on Irish research and examining mental health impacts. The second section focuses on definitions of intimacy and relationships in the context of GBMSM. The third reviews relevant therapeutic models, including Attachment Theory, Trauma Therapy, and CBT. The chapter concludes by identifying a gap in the literature, outlining the study's rationale, and offering a reflexive commentary.

2.1.1. Literature Search Strategy

The literature review examined research on qualitative and quantitative data to include a wide range of methodologies. Peer-reviewed articles in journals including but not limited to; the International Journal of Drug Policy, the British Medical Journal, Journal of Counselling Psychology, and the journal 'Sexualities'. The following databases were searched: Pubmed, ScienceDirect and ResearchGate. Example keywords: GHB/GBL; mephedrone, methamphetamine; crystal meth, Chemsex, Sexualised Drug Use, Party and Play and Club Drugs. Alongside, Addiction Therapy, Cognitive Behavioural Therapy, Psychotherapy, Psychosexual Therapy. There was a focus on intimate relationships, keywords such as intimate relationships, intimacy, partnerships, casual sex, marriage. Finally, terminology correlated with sexuality; homosexuality, gay, bi-men, men who have sex with men (MSM).

The researcher focused on four main areas:

1. Research to date on chemsex.

2. Research on intimacy, with the focus on GBMSM.
3. Psychotherapy and working with GBMSM
4. Intimate relationships and sexualised drug use.

2.2. Definition and Prevalence of Chemsex.

Sexualized drug use (SDU) encompasses various substances used in sexual contexts across diverse populations (Platteau et al., 2019), whereas chemsex appears almost exclusively within GBMSM populations (Maxwell et al., 2019; Hibbert et al, 2019; Moyle et al., 2020). Studies have identified that definitions of chemsex and SDU vary within research (Hibbert et al., 2019). In research by Poulios et al. (2024) GBMSM reporting polydrug use were four times more likely to be involved in chemsex compared to other forms of SDU. Chemsex is deeply embedded in GBMSM sexual subcultures, shaping identity and social dynamics, often involving prolonged group encounters, polydrug use, and a complex interplay of pleasure, intimacy, and risk (Moyle et al., 2020; Poulios et al., 2024; Race, 2018). Furthermore, chemsex assists in the exploration of sexual identity, gender expression, and a broader range of sexual practices (Bohn et al., 2020; Evans, 2019).

Chemsex has historically been defined as the use of mephedrone, methamphetamine and gammahydroxybutyrate (G/GHB/GBL) among GBMSM to enable, increase, and extend sexual interactions (Weatherburn et al., 2017; Giorgetti et al., 2017; Stuart 2013). Cocaine, ketamine and alkyl nitrites are also utilised (Yu & Lasco, 2023; Berg et al., 2020) alongside performance enhancing drugs such as Viagra and Cialis (Weatherburn et al., 2017; Giorgetti et al., 2017).

As the definition of chemsex varies by country the ability to quantify becomes difficult and its prevalence hard to standardise and report (Maxwell, 2019; Hibbert et al.,

2021). This is further complicated by variation in the terminology and definitions used. Chemsex and Sexualised Drug Use are often used interchangeably as are party and play and/or club drugs, these create difficulties in measurement, evaluating impact and reporting (Souleymanov et al., 2021, O'Halloran, 2019). Recently, Asian scholars (Yu & Lasco, 2023) have advocated broadening the conceptualisation of chemsex to incorporate definitions that more accurately reflect local drug use patterns. Scholz-Hehn (2022) surveyed 597 MSM using Latent Class Analysis to categorise participants into four distinct subgroups based on the types of drugs consumed. They discovered that the most robust correlation between substance use, and sexual motives were among those engaging in polyvalent drug use, a recurring argument is that excluding poppers from policy perpetuates stigma and neglects community needs. Acknowledging poppers enables tailored interventions, ultimately improving health equity for users who might otherwise be invisible to drug programmes (Chu et al., 2018; Schwartz et al., 2023)

In 2005, the three drugs that were linked to chemsex (mephedrone, methamphetamine and GHB/GBL), were associated with 3% of all presentations among men who had sex with men (MSM) in a London clinic. By 2012, the equivalent figure had risen to 85% at the same clinic while between 75% and 85% of mephedrone and GHB/GBL MSM users reported using those drugs to enable sexual encounters (Stuart, 2013). A survey by Blomquist et al. (2020) found that one in ten MSM in England had engaged in chemsex in the past year. Participants recruited from sexual health clinics may be more likely to be experiencing challenges related to chemsex. The cohort of those that engage with chemsex in the UK tends to be consistent and recognisable. For example, a report into the profile of 2,300 MSM who accessed a specialist service, Antidote, supporting LGBTQ individuals in London with drug and/or alcohol issues between 2012 and

2018, indicated that the majority identified as gay (95%), 66% were British and 84% white, 68% were employed and the median age was 35 years (Stevens et al., 2019). Other reports reflect this (Lovett et al., 2015; UK Drug Policy Commission, 2010).

Epidemiological research suggests that GBMSM have higher rates of drug use compared to other LGBTQ+ groups, including lesbians and bisexual women. This is influenced by factors such as chemsex culture, historical trauma stemming from the AIDS crisis, and the use of social-sexual networking platforms (Hibbert et al., 2021; Bourne et al., 2015). There appears to be a unique pattern to LGB populations in that alcohol use is more prevalent among lesbian/bisexual women and drug use is more dominant among gay/bisexual men (Green & Feinstein, 2012). Hibbert et al. (2019) found that SDU was common among women who have sex with women (WSW), however the most common drug used was cannabis and no women reported taking methamphetamine. Dymock et al. (2020) move beyond the traditional focus on chemsex among MSM to include women, non-binary, and other marginalised groups, they coined the term 'pharmacosex'. They found that women's engagement with pharmacosex is more likely to be framed as therapeutic, introspective, or tied to overcoming trauma and self-consciousness. The research demonstrates that the boundaries of chemsex are not fixed; the term is variably employed across cultural, clinical, and community contexts (Maxwell, 2019; Yu & Lasco, 2023; Tomkins et al., 2018). Moreover, chemsex is not solely constituted through substance use but also through its cultural, social, and affective dimensions, encompassing practices such as extended group sex, polydrug use, and complex negotiations of pleasure, intimacy, and risk (Race, 2018; Poulios et al., 2024; Souleymanov et al., 2021).

2.2.1. Chemsex and Risk

Chemsex in the UK has been deemed a public health issue as the risk it imposes to individuals (Keogh et al., 2009; Holt; 2014). Involvement in chemsex increases the likelihood of riskier sex; engaging in condomless sex (Weatherburn et al., 2017) increasing risk of sexually transmitted infections (STI). Furthermore, 46.6% report non-consensual sexual acts occurred while using chems, and 16.8% experienced violence during sex (Bohn et al., 2020). These substances carry risks of paranoia, psychosis, dependency, overdose, unconsciousness, and even death (Winstock, 2015). One study (Hockenhull et al., 2017) reported that GHB-associated deaths were on the rise in London, in part owing to the increased use of GHB for chemsex. Batisse et al., (2021) estimated that chemsex has been directly linked to multiple deaths in France. Parry et al. (2008) and Dew (2010) highlight that those engaging in injection drug use or unprotected sex during chemsex sessions face heightened risks of HIV and other STIs.

‘Slamsex’ or ‘slamming’, a specific form of drug use and sex involving intravenous drug injection for sexual activities, (Guerra et al., 2020; Coronado-Muñoz et., 2024) is less prevalent (17%) of those engaging (Lagojda et al., 2025) yet it is linked to higher HIV risk, more partners, unprotected sex, rougher practices, poor mental health, and the sharing of injection or inhalation equipment (Batisse et al., 2021; Schreck et al., 2020; Lagojda et al., 2025). Hibbert et al. (2021) found that chemsex and SDU are generally linked with higher sexual risk. Pufall et al. (2018) conducted the first study focusing on GBMSM living with HIV in London who engage in chemsex. The study identified a strong association between chemsex and behaviours that increase the risk of HIV transmission, including high numbers of sexual partners and condomless sex with individuals of unknown or HIV-negative status while having a detectable viral load. Notably, injecting was more prevalent

among those on Antiretroviral Therapy (ART), though no other distinguishing factors were observed. Daly et al. (2023) found that the likelihood GBMSM living with HIV who reported severe adverse mental health were nearly five times more likely to have engaged in SDU within the past year. Friedman, Mateu-Gelabert and Sandoval (2011) critically examined existing literature on group sex events (GSEs) with non-gay drug users. They found that group sex participation among people that use non-injectable drugs is widespread and presents risks for HIV and STI transmission, these environments can facilitate "third-party transmission" (p. 8) through shared condoms, sex toys, and contact with mucosal surfaces. This is due to peer pressure, group norms, and how the effect of drugs can override initial intentions around safe sex.

Stigma, discrimination, and internalized homophobia may exacerbate psychological distress (Maxwell et al., 2019). Additionally, some GBMSM report engaging in chemsex as a form of escapism or self-medication, using substances to cope with loneliness, trauma, or low self-esteem (Hibbert et al., 2022). In a cross-sectional, online survey by Lagojda et al. (2025), nearly half of participants experienced clinically significant anxiety, and over a quarter had elevated depression scores, with the highest scores among weekly chemsex users (44.4%).

A systematic review by Íncera-Fernández et al (2021) examined the existing scientific evidence on mental health symptoms for MSM engaging in chemsex. Chemsex was associated with depression, anxiety, and substance dependence, especially with frequent, high-dose, or combined use. It suggests that frequent substance use, escalating dosages, the mode of administration, and the combination of different drugs may be linked to the emergence of mental health symptoms, particularly anxiety and depression. The Íncera-Fernández et al. (2021) results cannot conclude that practising chemsex is indicative of deficient mental

wellbeing, partly due to the difficulty in untangling whether decreased mental health is linked to minority stressors, or chemsex practices. Íñcerá-Fernández et al. (2021) challenged the importance of not amalgamating or simplifying all chemsex drugs when studying the impact of mental ill-health. Furthermore, they highlighted that terminology varied across studies, contributing to conceptual ambiguity. The lack of a standardised definition across studies might lead to conceptual ambiguity. This highlights the topic's complexity and the need to consider subjective and individual experiences in chemsex research.

2.2.2. Problematic and Non-problematic Chemsex use

The existing literature often creates the impression that individuals involved in the chemsex scene fall into one of two groups: those engaging in problematic use and those engaging in non-problematic use (Hibbert et al., 2019). Problematic use of chemsex would be defined by individuals as a sense of their engagement in the scene as “spiralling” out of control (Smith & Tasker, 2018, p.3), whereas non-problematic chemsex participants are often referred to as “recreational” (Platteau et al., 2019 p.50) users, or as feeling in control of their engagement (Bourne et al., 2015). Non-problematic chemsex is typically pursued for gratification, pleasure, sexual exploration, and connection (Wright & Carnes, 2018; Isaiah & Halkitis, 2006). Florêncio, (2021) further supports this perspective, describing how chemsex “can creatively and positively affect bodies and subjectivities by deploying affirmative effects” (p.3).

Platteau et al. (2019) states that to engage in a non-problematic manner, individuals would have developed skills to minimise harm. They propose a six-stage model of escalating problematic use:

1. Loneliness and emptiness

2. Search for connection

3. Sexual connection

4. Chemsex connection

5. Problematic chemsex

6. Severe health impact

Pleatteau et al. (2019) highlight how these stages may be set in motion by adverse experiences and escalate over time. This framework by Platteau et al. (2019) was developed following a discussion at the second European Chemsex Forum following conversations with both professionals and users of chemsex. As a result, there's a lack of empirical validation. While this diversity is valuable, it may lead to conflicting perspectives or a lack of consensus, which could complicate the development of an appropriate and widely applicable framework. Graf et al. (2018) conducted 89 interviews with MSM in Germany. They found users who felt in control reported higher wellbeing; those with problematic use reported many harms.

Research has found that individuals who engage in chemsex display characteristics commonly associated with addictive disorders, including diminished control over substance use, the development of physiological tolerance, and the progressive prioritization of chemsex-related activities over other areas of life functioning (Heinz et al., 2020). Approximately 30% of chemsex users develop a substance use disorder linked to the addictive properties of cathinones (Batisse et al., 2021). Certain substances have high dependency potential due to their effects on the brain's reward and reinforcement systems (Volkow et al., 2016). Despite successful acute withdrawal management of GHB, relapse rates remain high, and pharmacological interventions for longer-term maintenance and relapse prevention are currently under investigation (Tay et al., 2020). Chronic GHB use has been associated with a range of adverse outcomes, including poorer mental, physical,

and sexual health, social dysfunction (Hockenhull et al., 2017; Glynn et al., 2018; Bohn et al., 2018). Over time, addiction can lead to social withdrawal, affecting work, relationships, and daily responsibilities (Batisse et al., 2021).

Some scholars criticise epidemiological studies for exaggerating risks and reinforcing binary views, pathologizing an already marginalised group (Bryant et al., 2018; Drysdale et al., 2020; Møller & Hakim, 2023; Lovelock, 2018). Clay's (2025) qualitative research found how the prevailing binary, chemsex as either pathology or empowerment, erases the fluid ways individuals negotiate desire, community, and safety. Clay follows scholars who see it Chemsex as a synecdoche shaped by digital hookup cultures, nightclubs, and private-public spaces (Hakim & Race, 2023; Hibbert et al., 2021). The diversity of these experiences challenges simplistic narratives that frame all chemsex engagements as inherently risky or problematic (Drysdale et al., 2020). Møller states (2020); "chemsex research mostly approaches the phenomenon from the perspective of health, focusing on "problematic" aspects that tend to overstate risks and obscure the complicated role that drugs play in people's lives" (p.14).

Florêncio (2020) states that chemsex should not be understood solely as a life-threatening or harmful activity. Rather, it can also be seen as a life-affirming cultural practice. By supporting the endurance and reproduction of queer bodies, identities, and ways of living, chemsex cultures and their imaginaries contribute to sustaining the subcultural subjectivities of the queer individuals who engage in them. That this would allow "both researchers and clinicians to develop more capacious protocols to deal with any potential negative consequences of drug use and addiction without overlooking the life-affirming value—sometimes very much life-saving value—that chemsex can have in the lives of those who partake in it" (p.6).

The research on chemsex therefore highlights a complex spectrum of engagement, ranging from controlled, recreational use to problematic patterns associated with significant harm. While frameworks such as Platteau et al.'s (2019) six-stage model attempt to categorise these experiences, their limited empirical foundation underscores the need for caution. Moving forward, a more nuanced and evidence-based approach is required, one that acknowledges both the risks and the diverse motivations underpinning chemsex, without resorting to pathologisation.

2.2.3. Motivations for Chemsex.

Throughout history, drugs and alcohol have been consumed by the Gay community to combat oppressive norms surrounding sexual identity and heteronormativity (Keogh et al., 2009). Years of persistent and widespread societal invalidation instil a deep-rooted sense of shame for gay men (Downs, 2005). Hakim (2019) argued that the growth of chemsex is due to recent material conditions which have led to a "desire for an intimate mode of collectivity" (p.249). Factors such as loneliness and a low self-esteem, sexual shame and social anxiety are features of the gay community (Tan et al., 2021; Martin & Knox, 1997) and the use of drugs facilitate a connection with individuals in a community they can identify with (Muñoz, 2019). Oliver Davies (2018) describes a "queer pharmatopia" (p.176) as a form of heterotopia shaped through drug use, in which substances facilitate intensified bodily sensations and enable erotic experiences that transcend participants' typical understandings of their sexual identity or orientation. Mundy et al. (2025) found GBMSM hold various beliefs about chemsex prevalence; some viewed it as a rite of passage or normalised practice within MSM networks. Some participants used chemsex to enhance intimacy with a single partner, while others engage in group settings where drug use fosters a collective sense of belonging. They also found

that curiosity and life stressors (e.g. relationship break-ups, relocation) spurred first experiences.

Graf et al. (2018) found multiple motivations for chemsex use; individuals feeling they can give full expression to their sexuality, feel more intensely during sex, have greater stamina and improve sexual performance. Flores-Aranda et al. (2019) carried out a thematic analysis of 17 methamphetamine users in Quebec analysing patterns of participants' experiences of drug use, alongside their engagements with chemsex services. Participants outlined the pleasure that these drugs facilitate, allowing them to feel more confident with their partners, feeling sexually attractive and finally, subjugating barriers to their sexuality. Some participants also described the sexual intensity and eroticisation that slamming facilitated.

Chemsex offers a paradoxical space where hegemonic masculinity is both enacted and destabilised, allowing GBMSM to simultaneously conform to and challenge dominant gender norms. Longstaff (2019) explored jouissance in chemsex, highlighting how chemsex pornography reflects a pursuit of transgression and self-affirmation. Engaging with these explicit genre's challenges normative moral narratives, pushing bodily and experiential boundaries while subverting legal, moral, and ethical discourses. In the realm of sexualized drug use in porn, research indicates that the pleasurable effects of injecting drugs can be internalized to shape and convey one's identity, including gender (Scheibein et al., 2023). Drawing on Butler's (1990) theory of gender performativity, chemsex becomes a site where masculinity is not merely expressed but actively constructed and contested through stylised, repeated acts, from drug use to sexual positioning, revealing the instability of gender norms. Mowlabocus (2021) argues that chemsex offers a space where the politics of homonormativity are both subverted and reinforced, allowing

individuals to adhere to and challenge dominant expectations of maleness. This dynamic disrupts conventional performances of stoicism and restraint associated with hegemonic masculinity. Hegemonic masculinity (Connell & James, 2005) offers a framework for understanding the dominant cultural ideals that shape perceptions of maleness and influence social hierarchies. In chemsex settings, hegemonic masculinity often manifests through domination, control, and emotional detachment, while men who are victimised may be positioned in feminised or subordinate roles (Javaid, 2018). This reflects how hegemonic masculinity operates through heteronormative logics. Thus, chemsex reveals the complexities of gendered power, where hegemonic masculinity persists even as it is destabilised. Research accentuates the various motivations for chemsex and how it functions as a complex site of both resistance and conformity, where GBMSM navigate pleasure, identity, and belonging amid intersecting pressures of stigma and hegemonic masculinity. These dynamics reveal the importance for nuanced, inclusive approaches and understandings in therapeutic care.

2.2.4. The Chemsex Scene

Chemsex is a complex and multifaceted phenomenon. The diversity of chemsex experiences, from intimate encounters to large group sessions, challenges oversimplified risk narratives and underscores the need for nuanced harm reduction strategies (Nagington and King., 2022; Race., 2018; Clay., 2025). These varied modes of engagement reflect not only different risk environments, but also diverse meanings, pleasures, and relational dynamics attached to drug-enhanced sexual experiences.

Technology is a central component to chemsex engagement (Tan et al., 2018; Juyal et al., 2021). Souleymanov (2021) reported a particular social language to engage

with others in chemsex on apps. Donnadieu-Rigole et al. (2020) discuss how these apps have facilitated and normalised the evolution of chemsex. A range of dating applications facilitate the meeting of others who engage in similar sexual practices, generally with the opportunity to meet locally and quickly due to the transactional aspects of technology (Renninger, 2018). However, the ease of connectedness can have the effect of perpetuating the difficulty for problematic users (Whitfield et al., 2017).

Santoro et al. (2020) categorize different chemsex sessions, ranging from intimate encounters between two partners to large group sex parties where drug use facilitates extended sexual engagement. Santoro et al. (2020) highlight the heterogeneity of chemsex sessions, identifying variations in drug combinations and their effects on social and sexual interactions. Methamphetamine, for instance, is linked to heightened arousal and prolonged sexual encounters, whereas GHB/GBL facilitates disinhibition and relaxation. Research emphasises the significance of different modes of drug administration. Dew (2010) examines methamphetamine use among MSM in Atlanta, illustrating that the method of intake, whether snorting, smoking, or injecting, has implications for both risk and subjective experience. This finding aligns with Parry et al. (2008), who assess HIV risk among MSM in South Africa and underscore the intersections of drug use, sexual behaviour, and structural vulnerabilities. Although injecting remains less common than other routes of administration, it is associated with higher levels of sexual risk-taking, physical harm, and social stigma within chemsex networks (Evers et al., 2020). While only 4% of the Evers et al. (2020) of the 368 participants reported injecting and 1.8% in the Ahmed et al. (2016) in the last 12 months, those who did were often perceived as engaging in more extreme risk behaviours than non-injectors.

Nagington and King (2022) discuss the role of peer support in chemsex-related care, arguing that effective interventions must be grounded in an understanding of the diverse motivations and experiences of MSM. Their work supports the broader findings of studies such as those by Flores-Aranda et al. (2019) and Herrijgers et al. (2021), which call for nuanced approaches that respect the complexities of chemsex participation. These variations significantly impact harm reduction needs, intimacy levels, and group dynamics. In an article studying how rapid transmission is often associated with high rates of partner change, Des Jarlais and Friedman (1998) found that moralistic approaches alongside law enforcement, or the elicitation of fear have only served to stigma and imprisonment, leading support services difficult to integrate. Herrijgers et al. (2021) further explored harm reduction strategies, noting the effectiveness of peer support, PrEP (pre-exposure prophylaxis) uptake, and safer injection practices in mitigating these risks. These findings reinforce the need for tailored HIV and harm reduction interventions that account for the unique dynamics of slamming versus non-injecting chemsex, ensuring that interventions are appropriate to different sexualized drug use environments (Hibbert et al., 2021). Bakker and Knoops (2018) advocate for integrating harm reduction within a broader continuum of care, emphasizing that interventions should account for the varying risk levels associated with different chemsex practices.

The importance of ascertaining how each scene impacts individuals could help to understand how to support the cohort in a multifaceted way. These different cohorts and multilayered aspects to chemsex seem to be inconsistently understood in the research and in practice. A deeper understanding might create a more valuable framework for therapeutic training and practice.

2.3. Chemsex in Ireland

The prevalence and evolution of chemsex in Ireland must be understood within the broader context of shifting societal attitudes toward LGBTQ+ communities, shaped by historical stigma, legal advancements, and ongoing cultural and religious influences. While empirical research directly linking changes in legal or religious frameworks to chemsex practices in Ireland remains limited, historical stigma and the legacy of moral regulation continue to shape LGBTQ+ experiences more generally. As Ireland continues to navigate LGBTQI+ inclusion, the ways in which past and present sociocultural factors intersect with drug use and sexual health warrant further investigation. This section outlines the historical and current landscape in Ireland related to the LGBTI+ community and further explores research connected to chemsex in this country.

2.3.1. LGBTQI+ and Legislative Evolution in Ireland

The entanglement of Catholicism and the Irish state is evident in the 1937 Constitution, drafted under the leadership of Éamon de Valera, who incorporated sections influenced by Archbishop John Charles McQuaid (O'Dowd, 2020). It was not until 1973 that the constitutional special position of the Catholic Church was removed (O'Dowd, 2020). The influence of the church extends beyond religious practice, informing legislative decisions, educational policies, and societal attitudes toward sexuality and identity (Ryan, 2003). Despite increasing secularization (CSO, 2022), the institutional presence of Catholicism remains substantial, particularly in education; 88% of primary schools and 47.2% of secondary schools in the Republic of Ireland are still under Catholic patronage (DOE., 2023). Until 2015, these schools were legally permitted to discriminate against employees who contradicted their religious ethos, contributing to an educational environment where homophobic attitudes were normalized (McShane & Farren., 2023).

Homosexuality was not decriminalised in Ireland until June 1993, following a protracted and arduous campaign (Ferriter, 2009). Senator David Norris led a fourteen-year legal battle against the Irish state, culminating in October 1988 when the European Court of Human Rights found Ireland to be in violation of the European Convention on Human Rights (European Court of Human Rights, 1988). Despite this landmark ruling, it took a further seventeen years for the Civil Partnership and Certain Rights and Obligations of Cohabitants Act (Government of Ireland, 2010) to be enacted, granting same-sex couples limited rights comparable to those of married couples. Further advances in family law were achieved with the Children and Family Relationships Act (Government of Ireland, 2020), which modernised legal frameworks concerning custody, guardianship, access, adoption, and assisted reproduction. Crucially, this legislation enabled same-sex couples to be recognised as co-parents from birth. However, surrogacy remains an area still needing to be comprehensively addressed within Irish legislation.

Later, in the Marriage Equality Referendum (Government of Ireland, 2015a) the Irish electorate voted to amend the Constitution to allow for same-sex marriage (Doyle, 2020). Ireland was the first country to legalise same sex marriage through the popular vote (Doyle, 2020). This was soon followed by the enactment of the Gender Recognition Act (Government of Ireland, 2015b), which allowed transgender individuals to obtain full legal recognition of the gender they identify as. As of 2025, there is no specific legislation banning conversion therapy in Ireland, though efforts to prohibit the practice have been underway for several years (Keogh et al 2023).

A government bill to ban conversion therapy was first proposed in 2018 (Government of Ireland, 2018) but has faced delays, and campaigners continue to call for comprehensive legal protections. Currently, while professional bodies such as the Psychological Society of Ireland condemn conversion therapy, the lack of formal legal prohibition leaves gaps in safeguarding LGBTQ+ individuals (PSI, 2019). Non-heterosexual lives are not always fully recognized or protected by laws, institutions, or public attitudes. Society often assumes heterosexuality as the norm, this assumption marginalises non-heterosexual people (Weeks, Heaphy, & Donovan, 2001).

2.3.2. LGBTQI+ Wellbeing in Ireland

Recent large-scale surveys reveal alarmingly poor mental health among LGBTQ+ people in Ireland. The most significant research; Supporting LGBT Lives (Mayock et al., 2009), found that there was cause for concern. This research was followed by the LGBT Ireland study (Higgins et al., 2016) and a subsequent and consequential study 'An exploration of happiness within the LGBTI Community' in 2019 (deVries et al., 2019). The online survey (n=2,264) explored mental health, distress and happiness. Findings showed a mean happiness rating lower than the general population. They found high levels of psychological distress, depression, anxiety, self-harm, suicidality and perceptions of society as hostile.

A 2024 national study of 2,800 LGBTQI+ adults and youth (Higgins et al., 2024) found significant increases in mental health distress since 2016: 27% of LGBTI+ respondents reported severe depression (up 17%) and 34% severe anxiety (up 30%). 64% of all LGBTI+ participants reported suicidal thoughts, and 33% of LGBTQI+ youth (14–18) had attempted suicide. de Vries et al. (2022) found trans people had significantly higher combined depression/anxiety/stress, self-harm and

suicidal ideation than cisgender LGB. This body of research shows that psychological distress among Ireland's LGBTI+ population is very high and, in many measures, has worsened since earlier studies (2016). Kelleher (2009) reports that it cannot be underestimated how LGBTQ+ people still experience social alienation, community fragmentation, and unhealed trauma from years of institutional discrimination in this country.

2.3.3. Irish Chemsex Engagement

To combat the oppressive norms around sexual identity, drugs and alcohol have often been utilised for escapism (Keogh et al., 2009). The use of drugs can also be employed to facilitate the connection of individuals to a community they can identify with (Muñoz.,2009). Daly et al. (2021) found the prevalence of Alcohol Use Disorder (AUD) appears to be higher in the GBMSM population; 31% screened positive for AUD whilst the figure is 9% in the general male population in Ireland. GBMSM who had a positive screening result for depression/anxiety, or who recently experienced homophobic abuse, were also found to have a greater likelihood of AUD. Furthermore, those who indicated potential AUD were more likely to have used illicit drugs in the previous 12 months.

Barrett et al. (2018) conducted a national online survey exploring drug use among MSM in Ireland, revealing a notable prevalence of substances associated with chemsex, particularly poppers. Drawing on data from the MSM Internet Survey Ireland (MISI), the study found that 33% of participants reported using poppers in the previous year, a higher prevalence than for other chemsex-associated substances such as crystal methamphetamine, mephedrone, GHB/GBL, or ketamine, which were reported by 7% of respondents. The research suggests that poppers remain a central component of sexualised drug use among Irish GBMSM

and may function as a key marker of participation in chemsex-related practices. Glynn et al. (2018) provides a detailed examination of chemsex practices among GBMSM in Dublin, conducted at a sexual health clinic, the research surveyed 510 attendees over a six-week period. One in four participants reported that chemsex was impacting negatively on their lives and a third indicated that they would like assistance in dealing with the outcome of chemsex. Three out of thirty reported themselves as victims of non-consensual sex during chemsex experiences, 23% reported that they or their partners lost consciousness. A quarter reported that their lives were diminished by drug use, with 31% wanting support for their chemsex use (Glynn et al 2018).

An IPA study carried out by Joyce et al. (2018) in Ireland on problematic use of G. Participants had attended a community drug team for support for problematic G use. They discovered three themes: (1) early use (2) daily use (3) early recovery. However, this research was not isolated to GBMSM as it included two heterosexual women out of eight participants. Only two of the participants stated that they valued G for sex. A second IPA Irish study by Van Hout et al. (2019), which created space for a nuanced understanding of chemsex in Ireland. The research sought to understand the experiences of chemsex, motivation for participating, alongside the pleasure and ramifications of sustained chemsex engagement. Four principal themes were determined out of the analysis:

1. “Social and cyber arrangements within the Dublin Chemsex scene.
2. Polydrug use and experiences of drug dependence.
3. Drug and sexual harm reduction within the Chemsex circle of novices and experts.
4. Sexualised drug use, escapism and compulsive participation.” (p.1076).

Van Hout et al. (2019) also outlined two findings: first, the mutual brace of drug use and sexual pleasure, and second, the interchange between the surfeit of drugs and sex, alongside the dependence. It is the first study of its kind in Ireland to focus on pleasure and chemsex. The research carried the collocation of both plurality of sexual pleasure and the complexities of the negative ramifications that chemsex facilitates. Much like the study by Flores-Aranda et al. (2019), the research calls for an interconnected multidimensional and culturally attuned strategy of chemsex. It's important to note that participants were recruited through their attendance at the GMHS for support for chemsex use in the Van Hout et al. (2019) study. Therefore, there might be a bias within the data if participants were experiencing problematic chemsex use.

The evolution of LGBTQ+ rights in Ireland reflects significant legal progress, yet social attitudes and institutional influences continue to shape experiences of stigma, mental health struggles, and engagement with chemsex. While harm reduction strategies address some immediate risks, a deeper understanding of cultural and historical oppression is necessary to create meaningful, long-term change.

2.3. Definitions of Intimate Relationships in Research

This review identified earlier research which suggested that the use of drugs by the gay community can allow them to achieve positive emotional moods and feelings of connection and intimacy (Tan et al., 2021). Others reported that the use of drugs facilitated a connection with a community, therefore potentially positively impacting self-esteem and self-acceptance (Gaissad & Velter, 2019; Muñoz, 2019). These research pathways have led to this study to investigate research in the field of intimate relationships as a probable area which can provide an understanding and

potential research framework for a therapeutic response to problematic chemsex use.

2.3.1. Intimate Relationships and GBMSM

Intimate relationships can be defined as dyadic bonds characterized by emotional closeness, mutual self-disclosure, trust, and, where applicable, physical affection (Moss & Schwebel, 1993; Floyd et al., 2009). Intimate relationships are integral to our lives and influence our emotional wellbeing, health, and sense of self (Czyżowska et al., 2020; Bucher et al., 2019). Schroeder et al (2017) emphasise that intimacy comprises cognitive, emotional, physical, and communicative dimensions. Furthermore, it is socially constructed and experienced differently across cultural and relational contexts (Cavanagh, 2007; Schroeder et al., 2017). Intimacy is often linked with various components, incorporating; commitment, feeling, cognitive, and physical intimacy, and sharing (Moss & Schwebel, 1993). Frequently in the definitions, it is a term applied to describe a sexual relationship (Marston et al., 1998) alongside affectionate behaviours (Floyd et al., 2009; Floyd et al., 2005), and physical touch (Guerrero & Anderson, 1991). While these definitions capture the core features of intimate relationships, researchers have shown its layered complexity: Moss and Schwebel's (1993) review of 61 academic definitions revealed seven recurring themes, among them commitment, self-revelation, and shared meaning, appearing in over half of the definitions.

Historically, the scientific study of intimate relationships has been primarily focused upon demographic markers. In the systemic review by Williamson et al. (2022) they found that only 10% of relationship-focused papers were carried out on underrepresented groups. Heteronormative gendered views on intimacy cannot encompass the diversity of LGBTQIA+ relationship dynamics. Research has

routinely endeavoured to compare the relationship dynamics between heterosexual individuals with gay and lesbian relationships (Chonody et al., 2020; Kurdek, 1996; Mackey et al., 2000). Joyner et al. (2018) compares the levels of relationship quality between same-sex and different-sex couples. It found that subjective relationship qualities (commitment, satisfaction, emotional intimacy) are similar between the two groups. The Doyle and Molix (2015) meta-analysis, focuses within the sexual minority population to understand the internal and external factors that impact how their relationship function. They report that while same-sex relationships may be comparable to different-sex relationships in overall quality levels they are not immune to the detrimental effects of societal prejudice and internalised negative attitudes. For GBMSM, research suggests that intimacy is often constructed within a broader socio-political context, shaped by experiences of minority stress, internalised homophobia, and alternative relationship structures such as consensual non-monogamy (Siegel et al., 2020; Joyner et al 2018; Lehmiller, 2018).

While intimate relationships are often associated with long-term romantic partnerships, research highlights that intimate bonds can also be transient, situational, and shaped by varying levels of emotional and physical closeness (Miller & Perlman, 2013). An intimate relationship, therefore, is not solely defined by commitment or duration but by the presence of relational depth, trust, vulnerability, or physical affection (Laurenceau, Barrett, & Pietromonaco, 1998). Unlike heteronormative relationships, which are often framed around monogamy, marriage, and nuclear family structures, the relational experiences of GBMSM tend to reflect greater diversity in partnership structures, emotional bonds, and expressions of commitment (Weeks, Heaphy, & Donovan, 2001).

Research suggests that non-monogamous relationships among GBMSM are not necessarily less intimate or committed than monogamous ones (Hoff et al., 2010). Therefore, some relationships may be defined by deep emotional connection and long-term commitment, while others involve brief but meaningful encounters characterized by mutual vulnerability, desire, or shared experience (Baumeister & Bratslavsky, 1999). As intimacy exists along a spectrum, it can be expressed in both enduring relationships and more transient encounters, where emotional or physical bonds shape relational meaning (Gabb & Fink, 2015). Although traditional models tie intimacy to monogamous, long-term pairings, empirical evidence among GBMSM reveals fluid relationship structures, where commitment and trust rather than exclusivity define intimacy (Hoff et al., 2010; Philpot et al., 2017). The role of sexual connection within intimacy remains significant, yet it is often mediated by trust and open communication about extradyadic encounters (Mitchell et al, 2012).

It has been found that men in same-sex relationships are more likely to have consensual non-monogamous sexual relationships outside of their committed relationship (Peplau & Fingerhut, 2007). Philpot et al. (2017) found that gay men often take a more intentional and flexible approach to relationship structures than heterosexual couples. Rather than rigidly defining relationships as monogamous or non-monogamous, they view them as fluid, adapting to changing needs and desires (Philpot et al., 2017). This intentionality underscores that commitment and trust take precedence over fixed ideologies. Parsons et al. (2018) found that men in a monogamous relationships were less likely to take illicit substances. They also found that those in monogamish (defined as both members of the couple being present when sexual activity occurs) relationships showed better psychological and

sexual health than single or openly non-monogamous men, aligning more closely with monogamous men.

Longitudinal and cross-cultural surveys (Umberson et al., 2015; Liang & Huang, 2022) converge on the idea that consensual non-monogamy does not erode relational satisfaction, indeed, high relationship quality can buffer against minority-stress effects. Umberson et al. (2015) sought to merge gender-as-relational viewpoint through interviews with 15 lesbian, 15 gay, and 20 heterosexual couples, gathering theoretical perspectives on emotion and intimacy. They discovered that in long-term partnerships, the management of emotional boundaries is critical with many GBMSM reporting that sexual encounters outside their primary relationship posed minimal threat so long as emotional intimacy was maintained separately. Men in relationships with other men were more likely to report sexual encounters outside their primary relationship and “that such sexual encounters posed minimal threat to their long-term relationship as long as emotional intimacy was absent” (Umberson et al., 2015, p.552). Half of the men in gay relationships described emotional intimacy and sex as separable (Umberson et al., 2015).

Frost et al (2017) investigated the influence of minority stressors, including stigma, prejudice, and discrimination, on the health and relational well-being of same-sex couples. The findings indicated that these stressors adversely affect both personal health and the quality of relationships. Liang and Huang (2022) studied the impact of relationship satisfaction on minority stress, internalised homophobia, and depressive symptoms amongst gay men in Taiwan. This research was carried out through a survey of 557 GBMSM who were currently in relationships. In this study it was discovered that distal minority stress and internalised homophobia were

emphatically correlated with depressive symptoms, however relationship satisfaction had an abating effect. The effect of distal minority stress was lower among those who reported high satisfaction in their current romantic relationship. This study suggested that a satisfying relationship provides protection for gay men's mental health. It is important to note, however, that this study only captured one partner's perspective, thereby not offering a holistic view of the couple's experience. Maxwell et al. (2025) carried out research on GBMSM experiences of intimate partner violence (IPV) in four Celtic nations, including Ireland. The research interprets IPV through the lens of hegemonic masculinities and heteronormative expectations, suggesting these pervasive norms shape both the occurrence and recognition of IPV in GBMSM contexts. While the study aggregates data across the four nations, the Irish cohort clearly aligns with the broader pattern: about one in three Irish GBMSM likely experienced IPV in the past year, with emotional, psychological, and coercive control abuse alarmingly prevalent and often remain under-recognized.

Bowling et al. (2019) carried out interviews and focus groups with members of the LGBT community in urban India and analysed the results thematically. The study reveals diverse definitions of sex and intimacy within the community, with many valuing intimacies over sexual activity. However, stigma and fear of exposure often complicate achieving intimacy. This further underscores the fluid and context-dependent nature of sex and intimacy, emphasizing the need for inclusive definitions in both sexual health research and public health efforts. Participants reported constructing their own meanings of sex and intimacy, often in response to more restrictive societal norms. The study highlights the distinction made by participants involved in transactional sex, who tended to dissociate intimacy from their sexual

activities, viewing these as separate experiences. The research underscores the fluid and context-dependent nature of how sex and intimacy are understood and experienced within the LGBT community in urban India.

These findings underscore that intimacy cannot be shoe-horned into a single definition or structure; it emerges dynamically through mutual vulnerability, communication, and cultural context. Gay culture and relationships have developed unique ways of expressing intimacy, creating value systems that differ from traditional heteronormative models (Dean, 2009). It is important to note that the dynamics of intimacy among GBMSM, particularly within chemsex settings, intersect with these non-traditional expressions of relational connection (Weeks, Heaphy, & Donovan, 2001). Despite growing attention to GBMSM relational diversity, few studies have directly compared if chemsex contexts impact intimate relationships, pointing to a clear avenue for future research.

2.3.2. Intimate Relationships in the Context of Chemsex

While the previous discussion framed intimacy in terms of emotional, physical, and social dimensions among GBMSM, here the focus is on enabling a deeper understanding of how the unique experiences of chemsex intersect with, and sometimes transform, established patterns of intimate relationships. Research has described intimacy in the context of chemsex in relation to both collective experiences and gay identity, the “queer kinship” (Møller & Hakim, 2023, p. 3). As highlighted by Evans (2023), it allows for “relational ways in which people have navigated homophobia and persecution” (p. 214). Florêncio, (2021) describes how chemsex “can creatively and positively affect bodies and subjectivities” (p. 3), including transhistorical aspects of the gay scene, the impact of neoliberalism, and the survival of a subculture (Hakim, 2019; Florêncio, 2021). For some GBMSM the experience of trauma of homophobia, results in a struggle to develop or

maintain intimate relationships, resulting in a turn to chemsex to form intimacy and connection (Cash, 2015). Hulme (2024) explored working-class Irish men's lives and intimate experiences uncovering the complex, relational, and emotional lives of Irish men whose queer identities existed well before the Gay Liberation era. By 'queering' family trees, Hulme (2024) recovers the emotional, kinship, and domestic aspects of queer men's lives and highlights how these identities emerged in multiple social spaces, not just clandestine encounters. Hulme (2024) situates queer men's lives in rural towns and urban centres, showing how familial pressures, clerical authority, and local culture shaped their subtle ways of existing queerly within family and community. Hulme's (2024) article utilises criminal archives and court records, often the only surviving queer references, reveal fleeting sexual encounters, but rarely holistic life stories. Furthermore, research by Daly et al. (2019) on coming-out experiences of Irish gay fathers who were heterosexually married, found that participants noted that becoming aware of Ireland's evolving cultural landscape encouraged them to explore the growing visibility and accessibility of the gay scene. Ireland's shift from conservative Catholicism to a more pro-gay environment over one generation supported their accommodation of gay identity and belonging to gay communities. However, they discovered that despite increased acceptance, heteronormative scripts remain influential, underscoring that cultural transformation is ongoing and uneven.

Having established chemsex collective dimensions, there are also more ambivalent effects, paradoxically fostering both connection and isolation. Hakim (2019) takes a conjunctural analysis perspective, offering a balanced view of chemsex engagement at both individual and collective levels. The research included 15 interviews with MSM in London alongside document analysis, identifying two themes: (1) the

coexistence of contradictory chemsex experiences, and (2) the fluctuation between highly collective and highly individual social connections. Hakim (2019) argues that discussions on intimacy must acknowledge both individual and collective experiences, as the gathering of bodies through chemsex fosters a unique form of mutual connection. “Practices of intimacy have been transformed during a particular moment in neoliberalism’s struggle for hegemony” (p. 256). Contrary to Hakim (2019), Milhet (2019) reported the social isolation experienced at chemsex parties, describing moments of seclusion when others were distracted by their phones (p. 16). This finding illustrates that chemsex can simultaneously foster intimacy and induce isolation, thereby adding complexity to the discussion.

Stanton et al. (2022), through a thematic analysis of MSM living with HIV who engage in sexualised substance use, found that drugs can significantly shape sexual expression and relationships. Participants described how substances enhanced intimacy and sexual pleasure, facilitated access to partners and community, and fostered a sense of empowerment that enabled emotional vulnerability. However, the study also revealed how drug use can exacerbate power imbalances, potentially undermining relationship dynamics. Similarly, Formby’s (2020) research into the everyday experiences of LGBT+ individuals highlights how intimacy, social interaction, and the navigation of public space are deeply interconnected. For GBMSM, supportive community networks can nurture trust and closeness, while experiences of discrimination and marginalisation may erode intimate bonds.

Chemsex has been described as a means of forming alternative types of relationships and boosting confidence in sexual encounters, which may help

individuals build intimacy or establish connections they might struggle to obtain otherwise (Dowsett et al., 2005; Bourne and Weatherburn, 2017; Graf et al., 2018). McCall and Adams (2015) used a combination of literature review and case studies, they found that chemsex allowed participants to maintain emotional distance while still enjoying a sense of closeness. Their work underlines that the transient intimacy offered through chemsex can be sought as a form of connection but equally reinforce isolation. These interactions, however, are often fleeting and fraught with physical risks such as drug overdose and psychological harm, including addiction and mental health challenges.

Barebacking, anal intercourse without a condom, has long been classified as a high-risk sexual behaviour among GBMSM. Early epidemiological work, for example, characterised those who bareback as individuals who “intentionally engage in potentially harmful sexual behaviours” (Houston et al., 2012, p. 2214), positioning condomless sex squarely within a risk-avoidance framework. Yet this focus obscures the affective and relational dimensions that drive sexual decision-making. Intimacy-centred studies reveal a richer picture. Frost et al. (2008) and Golub et al. (2011) demonstrate that among GBMSM, condomless intercourse often emerges from desires for emotional closeness and trust. Florêncio (2021a) identifies barebacking as a central practice within GMSM masculinities, where condomless sex is not merely a pursuit of pleasure but a deliberate transgression that challenges and redefines traditional gay male sexual ethics in the post-AIDS era. Marcus and Gillis (2017) add that community members themselves use barebacking less as a clinical term and more as shorthand for intensified intimacy, across both monogamous and casual encounters, suggesting that the language of risk can sometimes obscure motivations rooted in connection and desire. Building on these

insights, Dean (2009) theorises barebacking not merely as a behaviour but as a cultural-affective orientation in which vulnerability and mutual responsibility are reconfigured. In Dean's (2009) account, risk becomes a negotiated component of pleasure rather than a discrete pathology, a reframing that challenges heteronormative paradigms of sexual responsibility. Serosorting, the practice of selecting partners based on shared HIV status, adds another layer to these dynamics (Eaton et al., 2007). While serosorting can mitigate viral transmission, qualitative work (Pufall et al., 2018; Herrijgers et al., 2020) emphasizes how it also shapes social networks and intimacies, reinforcing the idea that HIV-prevention strategies are embedded in broader community norms.

Morris et al. (2019a) highlight that injecting drug use within chemsex necessitates a significant level of trust between partners, particularly within GBMSM networks where slamming is highly stigmatised. The physical vulnerability of injection, including reliance on others to correctly administer the drug, creates a distinct form of group intimacy: Injecting together can solidify bonds and reinforce power dynamics, particularly when one partner assumes a caregiving role. However, these dynamics can also exacerbate coercion, power imbalances, and dependency (Hibbert et al., 2021).

Amaro (2016) conducted an ethnographic study with 25 in-depth interviews, uncovering three key intersections between slamming and intimate relationships: (1) Breakups can trigger increased drug use; (2) Drug use between slammers can intensify risk-taking; and (3) Intimate relationships can serve as harm reduction support systems. Amaro (2016) found that chemsex is deeply enmeshed with the pursuit of love and connection, as well as the pressures of monogamous relationships and the emotional impact of breakups. Milhet et al. (2019), carried out

qualitative content analysis with 33 GBMSM (ages 22–61), revealing themes of interconnection, heightened erotic pleasure, and sexual dissonance. Participants expressed a desire for lasting or fleeting romantic connections within chemsex settings and described substance use as a means of strengthening sexual bonds. Some used drugs to align with their partner's needs, as in the case of one participant whose partner only had sex while on drugs. De Wit and Stroebe (2006) found that poor relationship satisfaction and commitment predicted greater sexual risk-taking, including a reduced use of negotiated safety as a harm reduction strategy. Additionally, research suggests that GBMSM's adherence to sexual agreements correlates with lower rates of sexual risk-taking (Mitchell et al., 2012). However, these increased confidence levels and risk-taking tendencies appear to be confined to the chemsex encounter itself. The sociological dimensions of chemsex extend beyond individual drug use to encompass collective intimacy and subcultural identity. Hakim (2019) explores how chemsex functions as a queering of intimacy within neoliberal contexts, positioning group sex and drug use as counter-cultural acts. Ultimately, the research highlights that chemsex can facilitate bonding, affirm identity, provide pleasure, and help individuals escape rejection and judgment within the gay scene (Van Hout et al., 2019; Florêncio, 2021; Hakim, 2019; Milhet, 2019). Yet, engaging in sex under the influence of substances such as GHB, mephedrone, or methamphetamine often induces altered states that can facilitate disinhibition and perceived emotional closeness (Bourne et al., 2015; Race, 2009). For some GBMSM, this enables the expression of vulnerability and the formation of transient but intense emotional bonds that might be difficult to access in sober contexts (Morris, 2019a; Ahmed, 2022). The interaction between altered states of consciousness and dissociation significantly impacts intimacy formation and retention, with some participants describing chemsex as a gateway to deeper

emotional connections, while others report that dissociation and fragmented memory hinder the development of lasting bonds (Bourne et al., 2015; Morris., 2019a). However, these chemically mediated encounters can also be marked by dissociation and memory fragmentation, which disrupt the continuity of emotional experience and hinder the formation of sustained intimacy (Hibbert et al., 2021; Weatherby, 2020).

At the time of this literature review, no distinct studies had explored the impact of chemsex on intimate relationships in Ireland. However, in Glynn et al.'s (2018) study, 40 out of 131 men (30.5%) engaging in chemsex reported being in an intimate relationship and Capodieci et al., (2025), found that those engaging in SDU or chemsex were more likely to be in non-steady relationships that frequently change. However, the literature review revealed that intimacy within chemsex is complex, fluid, and deeply shaped by social, psychological, and pharmacological factors. Existing research highlights how chemsex can foster intensified emotional bonds, temporary trust, and a sense of belonging (Bryant et al., 2018; Van Hout et al., 2019). However, literature remains divided on whether this intimacy is authentic or merely drug-enhanced, and few studies explore how participants themselves negotiate this distinction (Morris, 2019a). In sum, chemsex under neoliberal queer kinship, both amplifies intimacy, through drug-mediated vulnerability, and subcultural belonging, and complicates it, by introducing risk, dissociation, and power imbalances. While studies have examined the short-term interpersonal dynamics of chemsex, there's a lack of research on its long-term impact on intimacy and intimate relationships. This gap underscores the need for further investigation as whether engagement with chemsex may shape or impact relational dynamics over time.

2.4. Psychotherapeutic Research on Chemsex

Literature on chemsex has been considerably fixated on physical health considerations; it has largely ignored the psychotherapeutic understandings. This lack of literature on appropriate therapeutic modalities, means little consideration has been given to the exploration of the therapeutic support systems needed for those concerned about their use of chemsex. Therapists are therefore working without clear guidelines.

The literature review shows those studies that have examined have largely been carried out in addiction clinics with abstinence being used as the marker of a successful recovery (Tomkins et al., 2019). This makes it difficult to examine the support needed in private practice and, consequently, those struggling with problematic chemsex use, may fail to get adequate support. This is outlined in a study by de Weert-van Oene (2013) on GHB dependent inpatients. It was discovered that after 3 months of follow-up, 65% of the patients of the GHB monitor reported a relapse in GHB abuse due to the lack of peer support, the highly addictive nature of the drug and limited services available at that time.

In this section, research by services offering therapeutic support for MSM engaging with chemsex drugs will be reviewed. These studies highlight the type of support deployed globally, and the different modalities that have been drawn upon. In this literature review, the focus will be on Attachment Theory, Cognitive Behavioural Therapy, and Trauma Therapy as these are the three main areas where psychotherapeutic research on chemsex has been carried out.

2.4.1. Cognitive Behavioural Therapy (CBT)

Cognitive behavioural therapy (CBT) has demonstrated strong efficacy in treating alcohol and drug use disorders across multiple populations (Dutra et al., 2006; Magill et al., 2019). CBT for substance disorders tends to include various interventions, either combined or in isolation, such as contingency management (CM), relapse prevention therapy, or motivational interviewing (MI). Furthermore, these tend to be drawn upon in both individual and group settings (McHugh et al., 2010). Research utilising a CBT informed framework in relation to MSM and substance dependency has been carried out in the United States and Australia. Shoptaw et al. (2005) carried out a randomised control trial of 162 methamphetamine dependent GBMSM in Los Angeles. Participants were randomly assigned to one of four 16-week treatments: standard CBT, CM, CBT+CM, or gay-specific CBT (GCBT). Sexual risk behaviours were monitored monthly during treatment and at 6- and 12-month follow-ups. The tailored GCBT targeted both drug use and sexual risk behaviours. The key components of GCBT were to draw out discussion of scenarios facilitating methamphetamine use and HIV risk that were relatable to the gay community. The GCBT intervention integrates the theoretical principles and techniques of CBT alongside relapse prevention therapy (RPT). GCBT aimed to help participants understand triggers for substance use and develop coping tools. Shoptaw et al. (2005) found that CM with CBT significantly reduced methamphetamine use and improved attendance at therapy sessions over standard CBT. They discovered sustained reductions in both the use of methamphetamine and sexual risk behaviours, the GCBT group showed improved sexual behavioural outcomes. This suggests that regular support, drug use monitoring, and culturally informed therapy may help sustain long-term behaviour change. However, the study's emphasis on abstinence offers limited insight into the underlying motivations for drug use or the potential psychological challenges associated with sexual

intimacy without substances. Furthermore, CM, while effective in encouraging engagement, lacks depth in addressing emotional or relational factors and is often resource intensive.

Following the research by Shoptaw et al (2005), Reback and Shoptaw (2014) further investigated and developed a GCBT programme for methamphetamine-using GBMSM in a community-based setting drawing upon 24 sessions over 8 weeks. Their findings supported those of previous studies utilising GCBT demonstrating that most of the positive outcomes for reducing methamphetamine use and HIV-related sexual risk behaviours were through the utilisation of the GCBT intervention. Like the work of Shoptaw et al (2005) and Reback and Shoptaw (2014); Lea et al (2017) carried out research on treatment outcomes among 101 GBMSM receiving counselling at a LGBTI specific, harm reduction treatment service in Australia for their methamphetamine use. The therapy carried out in the clinic was tailored to the LGBTQI community and was an integrative model of acceptance and commitment therapy, as well as CBT and motivational interviewing. The findings indicate significant improvements in psychosocial wellbeing and quality of life after eight sessions, and 35.3% of participants reported abstinence from methamphetamine use after 4-week follow-ups. It should be noted that data on sexual practices was not collected, so drug use in a sexual context was not examined. However, this research still captures the importance of the therapeutic framework for those using chemsex drugs, alongside the cohort of GBMSM. Although there was no control group, this study reiterates the importance of LGBT tailored therapeutic support within CBT as previously outlined (Shoptaw et al., 2005, Reback et al., 2014). This research shifts from abstinence to understanding psychosocial factors and quality of life. In contrast to (Shoptaw et al., 2005; Reback and Shoptaw., 2014) the clinic

in this study focuses on harm reduction, recognising the complexity of substance use and setting realistic, sustainable goals.

It acknowledges diverse client treatment goals; abstinence, reduction, or management of use, emphasising client agency. CBT research largely focuses on removing clients from chemsex and promoting abstinence and reduced 'risky' sexual behaviours (e.g., condomless sex). However, this perspective overlooks the complexities of sexual pleasure, intimacy, and agency. Notably absent from the literature is exploration of challenges with sober sex and interventions that support GBMSM in rediscovering pleasure without drug facilitation. This represents a critical gap in existing therapeutic approaches, where a more sex-positive, trauma-informed, and pleasure-inclusive lens may enhance long-term outcomes.

2.4.2. Attachment Theory

Attachment theory (Bowlby, 1969) proposed that early caregiving relationships and bonds shape internal working models that influence how individuals relate to others. It explains that as children develop and grow, they internalise their experiences with their caregivers and generate frameworks for adult relationships (Bowlby, 1969). There have been studies that examined the correlation between attachment styles, GBMSM and sexual behaviour. Cook and Caleb (2016) stressed the importance of an attachment framework and the sexual minority stress model by Meyer (2003), which offers unique yet complementary perspectives for examining and understanding the health and well-being of sexual minority men. Meyer's minority stress theory (Meyer, 2003) explains how the connection between sexual orientation and mental health is facilitated by minority stressors that encompass aspects such as prejudice events, rejection sensitivity, internalised homophobia and sexual identity concealment. Cook and Caleb (2016) offer unique yet complementary perspectives for examining and understanding the health and well-

being of sexual minority men. They carry out this analysis through describing the components of the Integrated Attachment and Sexual Minority Stress framework. They challenge the idea that isolating either attachment styles or minority stress are insufficient in holistically supporting the complex interactions for GBMSM and their mental health. Landolt et al. (2004) also drew upon rejection as an influencing factor on attachment styles. This was carried out through looking at gender nonconformity, childhood rejection, and adult attachment. They proposed that peer relationships can impact adult relationships and attachment due to rejection, resulting in anxious attachment relationships with others. Cook et al. (2016) carried out mixed-methods research on GBMSM sexual behaviours. They reported that the quantitative studies indicated that attachment insecurity was not correlated with sexual risk-taking behaviour, whereas qualitative research (where an eight-week journal was kept) indicated that anxious participants utilised sex to create an emotional bond, whereas avoidant participants who utilised sex to feel good without wanting to establish an emotional bond. Self-administered questionnaires might result in the subjective experiences and give further exploration and depth to the findings. It is important to note that Cook et al. (2016) research is focused on Black men, thus there may be a double stressor due to further marginalisation.

Elizur and Mintzer (2003) carried out research on contextual variables on self and relationships through surveys and in-depth interviews. They found that insecure attachment style has been correlated to a higher number of recent partners (Elizur & Mintzer, 2003). Both avoidant and ambivalent attachment are associated with diminished sexual communication. Avoidant attachment is associated with an increased number of casual, condomless, anal sex partners and having an avoidant attached partner is also related to an increase in the number of condomless sex partners reported (Elizur & Mintzer, 2003). Their research was affirmative on their

hypothesis; attachment security assisted the correlation of perceived friends' support and self-acceptance with relationship quality.

Research by Fumaz et al. (2020) carried out a cross-sectional study of 400 MSM in Spain; examining the correlation between attachment styles, condomless sex, and drugs. It evaluated attachment styles through the Relationship Questionnaire (RQ) outlining a prototypical attachment pattern as it would apply in close adult peer relationships (Bartholomew & Horowitz, 1991; Bartholomew & Shaver, 1998). The results found 40% of men reported having a secure attachment style and of the majority 60% an insecure attachment style (37% had a dismissive style, 33% preoccupied style, and 30% a fearful style). Furthermore, the study found that the taking of illicit substances had a larger association with the 60% that had an insecure attachment style. This research only captured those who are HIV positive, which might have influenced the results; nor did the research capture a deeper understanding of the motivations of antiviral medication, condomless sex, or chemsex. Finally, its cross-sectional design limits its ability to discover causality, as it only captures a moment in time rather than tracing changes.

Finally, Cartner (2022) explores chemsex through attachment theory and mentalization-based treatment (MBT), suggesting it may serve as a coping mechanism for attachment anxieties. By improving mentalizing abilities, MBT can enhance emotional regulation and reduce reliance on chemsex. Neurobiological research highlights overlap between brain regions involved in attachment and drug use, suggesting some men use drugs and hypersexuality to manage attachment-related anxiety. MBT is proposed as a tool to help chemsex users regulate emotions and build healthier connections, emphasizing the need to consider attachment styles in treatment and harm reduction strategies.

These pieces of research have outlined the importance of attachment style in the treatment planning and harm reduction strategy for those engaging with chemsex. Endeavouring to find beliefs and behaviours that impact sexual and relationship issues for those with insecure attachment styles and as a result, allow for more nuanced and effective therapy for MSM.

2.4.3. Trauma-informed Therapy

Research has elucidated the role of trauma in sexualized drug use (Tan et al., 2021; Morris, 2019b) and spotlights the gap needing to be filled regarding therapeutic support that is inclusive and culturally informed. This section endeavours to highlight some of the literature that speaks to Acceptance and Commitment Therapy, Art Therapy, and Trauma-Informed Therapy (TIT) and how they relate to chemsex and intimate relationships.

Trauma therapy encompasses various therapeutic approaches designed to address the psychological, emotional, and physiological effects of trauma. Research has shown that trauma can result in gravitation towards drug use to provide interim avoidance of traumatic memories and the distress associated with them (Najavits, 2002; Perkonigg et al., 2020). This may result in the use of substances as a means of reclaiming the capacity to feel pleasure or connection to others (Ford & Russo, 2006).

Tan et al. (2021) utilised art therapy to explore the role of trauma correlated to chemsex. This research, conducted through thematic analysis of semi-structured in-depth interviews with 33 gay men seeking treatment for chemsex in Singapore. Participants in the study conceptualised their involvement in chemsex, as well as their associated HIV-related risks, within a psycho-social framework that

foregrounded the profound impact of psycho-socio-cultural challenges, particularly those arising from experiences of homophobic marginalisation and the dynamics of the gay scene. Trauma was shown to be sustained and exacerbated by a set of preconditions, including the ready availability of drugs, the cultural valorisation of sexual capital, and limited access to mainstream support systems, further compounded by sociolegal barriers to care. Tan et al. (2021) thus demonstrates how chemsex practices are shaped by intersecting forces of stigma, minority stress, and maladaptive coping mechanisms. Art Therapy offered participants a non-verbal, creative medium through which to process complex and often unspeakable trauma narratives. It enabled participants to access, externalise, and reframe traumatic memories and emotions in a supportive therapeutic environment, which is crucial given the shame, stigma, and dissociation often associated with both trauma and chemsex behaviours. The study provides compelling evidence to evaluate childhood trauma alongside the broader contextual and environmental factors that may contribute to the adoption of chemsex as a maladaptive coping mechanism.

Cohen, Shamri-Zeevi, and Honig (2022) examined expressions and representations of memories among 14 gay Israeli men who engaged in chemsex through thematic analysis. The study was carried out in two phases: first, participants engaged in painting, using an artistic experience to recall associative and sensory links to past sexual experiences that included drug use. Following this, semi-structured interviews were conducted to explore motivations for engaging in chemsex and its impact on daily life. Four central themes were identified:

1. From longing to belonging and visibility: Drug use and engagement in sexual experiences.
2. Lack of excitement during sex, leading to escalating sexual experiences.

3. Elicitation of the original feelings and sensations when under the influence of drugs.
4. Recalling sexual experiences as reflected in the artwork.

The research gives insights into the value of creating somatic and embodied work with chemsex engagement. It explains that therapeutic work does not have to be isolated to cognitive components, and that deepening emotional engagement can facilitate a depth of learning for therapists and clients alike. However, the study recruited participants who were no longer using substances, which may have diluted insights from those still actively engaging in chemsex. These studies are notable for examining chemsex outside of Western European and North American settings, demonstrating how cultural, legal, and social factors influence engagement with chemsex and therapeutic interventions, furthermore they introduce variables such as conservative views on sexuality and drug use.

The role of trauma in chemsex cannot be fully understood without acknowledging the collective trauma experienced by GBMSM, particularly the historical legacy of the AIDS crisis and its ongoing impact on intimacy, sexual behaviour, and community belonging (Poulios, 2022a). The use of substances in sexual settings is seen not merely as recreational but to navigate the complexities of desire, intimacy, and trauma. This behaviour is framed within a broader narrative of seeking connection and escape from the residual impacts of the AIDS crisis. Poulios (2022a) acknowledges the role of ART in transforming the landscape of HIV prevention and treatment. The availability of effective ART has altered perceptions of HIV risk, potentially influencing sexual behaviours and attitudes toward condom use within the chemsex context. However, Poulios emphasises that the psychological and emotional dimensions of HIV-related trauma continue to affect decision-making and risk assessment among individuals engaging in chemsex. Poulios (2022a) argues

that the lingering fear and stigma associated with HIV/AIDS have contributed to a context where chemsex becomes a coping mechanism for some gay men. Wright and Coyle's (1996) qualitative interviews with sixteen London and Surrey gay men who had lost friends or partners to AIDS found that stigma surrounding both AIDS and gay sexuality profoundly complicated their grief, often leaving bereaved men unsupported and carrying "deficits in social support" that exacerbated feelings of isolation and shame. The framework by Parker and Aggleton (2003) situates HIV-related stigma within broader systems of social and moral judgment, showing how it reproduces inequalities and engenders both internalized shame and vigilant risk-avoidance strategies among GBMSM. The research shows how GBMSM internalise broader moral judgments about their sexuality, leading to pervasive feelings of shame and a constant anticipation of negative evaluation in both public and private spheres. They argue that this structural stigma drives hypervigilant risk-avoidance strategies: to pre-empt both social censure and health threats, men may engage in secretive or overly cautious sexual behaviours, which paradoxically can undermine healthy intimacy and access to support networks.

Curley et al. (2023) highlights that advancements in HIV treatment and PrEP have paradoxically contributed to a shift toward increased sexual liberation for a community once disparaged for sexual expression. Poulis (2022a) emphasises that chemsex should not be framed solely as a pathological behaviour but as a means of re-engaging with pleasure and reclaiming intimacy in a post-crisis era. Participants in the research by Cohen, Shamri-Zeevi and Honig (2022) disclosed their feelings of discomfort discussing their chemsex experiences with professionals out of fear of being judged negatively or not understood. This demonstrates the benefits of a therapist understanding that individual struggles are compounded by discrimination and stressors due to marginalised identities.

The need for being trauma-informed and working as a therapist with those engaging in chemsex is demonstrated through three key pieces of work using case studies. Evans (2019) draws upon a case study to highlight the importance of a holistic understanding of chemsex. He emphasizes the impact of community trauma within GBMSM populations, the disconnection it fosters, and how chemsex may serve as an escape from a life marked by trauma and shame. Evans (2019) further explores how chemsex allows individuals to compartmentalize aspects of their identity, where certain parts of themselves exist only within the time and space of chemsex.

Similarly, Poulios (2022b) describes the importance of understanding queer trauma but approaches the topic through a psychoanalytic lens, incorporating theories from Lacan, Aulagnier, Laplanche, Saketopoulou, and Olivienstein. He explores the dichotomy of rupture and connection in chemsex, particularly how the experience of dissociation and surrender within chemsex can be linked to the subject's negotiation of selfhood and societal acceptance. Poulios (2022b) stresses that therapy should not merely focus on detoxification but instead explore trauma, allowing clients to create new meaning within their experiences. Poulios (2022b) posits that therapeutic work should focus not on moralizing behaviours but on allowing clients to process their relationship with pleasure, intimacy, and risk-taking within a therapeutic setting. Morris (2019b) details, through case studies, the impact of unresolved historical trauma alongside experiences of trauma within chemsex. He highlights the illusion of connection fostered by chemsex, emphasising that while individuals may seek intimacy and belonging, these experiences often reinforce cycles of detachment and fragmentation. He advocates for tailored, client-centred approaches that recognize the unique relational and emotional needs of chemsex participants.

Neves (2021) offers a structured framework for treating compulsive sexual behaviour (CSB), including chemsex, emphasizing a sex-positive, non-pathologizing approach. His three-phase model presents a therapeutic roadmap that addresses both trauma and relational difficulties:

1. Regulating: Helping clients develop emotional regulation skills and impulse control, allowing them to navigate chemsex triggers without moral judgment.
2. Reprocessing: Exploring the underlying compulsion and trauma-related behaviours that contribute to chemsex participation, including attachment wounds and self-worth issues.
3. Reconstruction: Assisting clients in redefining their sexual and relational identities, focusing on their own needs, desires, and boundaries outside of chemsex contexts.

Neves (2021) advocates for queer-affirmative and kink-affirmative therapy, aligning with Evans (2019) and Poulios (2022b) in emphasizing the need for therapists to understand the role of community, identity, and historical trauma in GBMSM sexual behaviours.

Much of the chemsex literature to date has been conducted in addiction treatment settings, applying predominantly cognitive-behavioural frameworks to understand and reduce substance-driven sexual risk. Studies such as Shopaw et al. (2005) and Lea et al. (2017) have demonstrated the efficacy of CBT protocols for chemsex dependence as well as the utility outpatient addiction services in reducing both substances use and associated sexual harms. However, Poulios (2022a) and Neves (2021) critique of the focus on detoxification, shifts the clinical focus from "symptom removal" to the co-construction of new subjectivities around sexuality and desire. In doing so, provides an exploration of embedded trauma and relational patterns. Acknowledging the solid evidence base for addiction-model interventions, an

exclusive detoxification paradigm might risk overlooking the deeper meanings, shame dynamics, and cultural scripts that drive chemsex practices and that these might only be brought into therapeutic view by attending to narrative, attachment, and trauma processes.

Ultimately, Neves (2021), Evans (2019), and Poulios (2022a) all call for an approach that de-pathologizes chemsex while addressing the underlying emotional and psychological struggles that drive engagement. Their work underscores that therapeutic success is not about eliminating chemsex behaviours entirely but about helping individuals regain agency, meaning, and healthier pathways to intimacy.

Recommendations for therapeutic work are currently neither explicit nor consistent. Significant gaps remain in the research regarding how to define problematic chemsex use, identify the most effective therapeutic approaches, and establish clear ethical guidelines. What is clear is that it's important that therapists are culturally informed, aware of the multifaceted traumatic experiences of being a sexual minority, recognize the importance of understanding the unique cultural contexts and histories that shape their clients' lives.

These papers call for chemsex to be acknowledged for the relational and affective dimensions it holds, rather than a pathologisation, to ensure that clients are met with understanding rather than judgment. By integrating creative, trauma-informed, and sex-positive therapeutic models, therapists can help clients explore their experiences, process trauma, and redefine intimacy outside of chemsex settings. Research seems to demonstrate the importance of attending to each person's unique motivations, relational dynamics, and emotional landscape rather than treating chemsex use solely as a set of risk behaviours.

2.5. Conclusion

This literature review has examined the growing body of research on chemsex, revealing it as a phenomenon deeply intertwined with issues of sexuality, identity, pleasure, risk, and marginalisation. Synthesizing these diverse perspectives-illustrates the heterogeneity of chemsex practices, the pharmacological and sociocultural specificities of different substances, and the ways in which intimacy and collective experience shape the phenomenon. While chemsex is often framed through lenses of pathology and public health risk, the literature also reflects the nuanced motivations behind participation, including desires for intimacy, connection, escapism, and affirmation in contexts shaped by stigma, trauma, and socio-political exclusion. At the same time, studies consistently highlight the complex harms associated with chemsex, including increased vulnerability to sexual health risks, psychological distress, and social isolation.

This review demonstrated that there is currently a shortage of research that addresses intimate relationships and those engaging within the chemsex scene; it fails to address the impetus and/or outcome of MSMs' search for intimacy. It neglects the impact of those in a relationship and the support their partners may need alongside a lack of clear direction on how best to integrate training for individual or relationship therapy.

Finally, the discourse surrounding chemsex remains contested within psychosexual research, particularly regarding its classification as an addiction, a compulsive sexual behaviour, or an intimate-relational practice. This can make it difficult for both therapists and clients to establish a clear framework for understanding and support. As Hickson (2018) stated; "to understand chemsex we need multiple lenses and multiple levels of enquiry" (p.3). The author expects that ongoing discussions and

research in the field, including this study, will contribute to refining knowledge and developing more effective approaches that enhance client outcomes over time.

2.6. Researchers Reflexive Comment

As a psychosexual and relationship therapist I had a preconception and bias surrounding the literature in advance of beginning the review. I was conscious that with these beliefs that I held I would need to be mindful of not allowing them to encroach into my review. These could blur and blinker my ability to capture and explore a balanced and fair overview of the literature.

There were moments of immersion, where I felt completely absorbed in the act of reading and synthesis, where concepts interwove seamlessly, generating insights that felt almost intuitive. In these moments, I experienced a sense of flow, an attunement to the work but there were also moments of rupture when texts seemed contradictory, when my understanding felt fractured, when I doubted whether I was seeing the connections that existed or merely projecting them out of necessity.

However, I delved into academic pieces and listened to researchers who were challenging my learnings. This allowed me to expand my mindset and deepen my thinking toward a more multifaceted depth of reflecting on the definition of chemsex. Instead, questioning if someone is engaging in chemsex with one other person, should this be defined as chemsex? Is it chemsex if an individual is masturbating in a room where other people are engaging in sex and drugs, but they are not? Is watching porn whilst taking psychoactive substances and masturbating chemsex? My engagement with the literature was not simply an intellectual endeavour but a series of encounters that shaped and reshaped my understanding and assisted me to critically think. It prompted me to question where traditional models of relationality and desire fall short in accounting for the specific ways GBMSM enact and

experience intimacy within chemsex circuits and motivated my drive to foreground these dimensions more explicitly in my own analysis. In reflecting on this, I realised how my own understanding of intimacy had to expand to include the embodied, affective dimensions of risk-taking and collective care that arise when pleasure and peril intertwine.

Chapter 3: Methodology and Methods

3.1. Overview of the Chapter

This chapter it gives an outline of the aim and objectives of the question, followed by outlining the methodology of choice, IPA. It sets out the epistemological, ontological assumptions and their correlation with the research question. It provides a detailed account of the chosen methodology and determines how it fits within the confines of the research, including the rationale behind its choice and critical analysis it has received. Issues surrounding ethical considerations and research design are explored in advance of outlining the participant selection process and data analysis. Finally, the role of the researcher in IPA is reflected upon.

3.2. Research Question, Aims and Objectives

The question this research poses is: 'What are the experiences of intimate relationships for men who have sex with men engaging with chemsex?'

The researcher established four objectives:

1. To explore the meaning and experiences of intimate relationships for MSM engaging with chemsex
2. Give a voice and platform to those who are engaging with chemsex and their experiences of intimate relationships.
3. Elucidate understandings to better inform the psychotherapy sphere.
4. To explore any idiographic subcultural definitions and understandings of intimacy within the chemsex scene.

3.2.1. Qualitative Research

‘Methodology’ describes the process, principles, and procedures a researcher utilises to understand and study to better comprehend issues and discover solutions (Bogdan and Taylor, 1975). Qualitative research is valuable for exploring new phenomena, generating hypotheses, understanding context, and gaining deeper insights into human behaviour and social phenomena (Bogdan and Taylor, 1975). This research attempts to understand the human experience of those engaging within the chemsex scene, to curiously and cautiously inquire into the unique experiences of the individual and their relationship dynamics. As this research will be an exploration within gay culture and the chemsex subculture a qualitative research approach can allow participants to attribute their meaning to the experience.

Phenomenological research endeavours to capture a multi-dimensional experience of cultural, societal, and psychological aspects of the data (Smith., 2022). Utilising qualitative research to better understand chemsex and intimate relationships, should allow an in-depth understanding of the social phenomena by exploring underlying motivations, beliefs, and cultural norms. Furthermore, it can serve to open the discourse to appreciate the depth and breadth needed to provide wrap-around therapeutic support.

IPA proposes nuanced, thorough analyses of lived experience. It holds an idiographic receptivity (Smith et al., 2009) and endeavours to analyse a single case in detail, understand the specific meanings and interpretations that participants attribute to their experiences and uncover the similarities and differences to capture connections. Attempting to recognise and comprehend the lived experience and how participants make sense of their experiences is the principal duty of IPA (Smith, 1996). IPA carries the belief that individuals “interpret and understand their world by

formulating their own biographical stories" (Brocki & Wearden, 2006, p.88) and endeavours to encapsulate those stories to better assist researchers with their endeavours.

Milton (2007) outlines in his reflections that existential-phenomenological research allows the "experience of the individual in mind so that wider discussions and policies are considered in relation to those who are so often silenced but crucial to this debate—the lesbian, gay and bisexual clients who seek psychotherapeutic services" (p 56). After considering the most appropriate research paradigm, it was determined that IPA was the most fitting.

The research question examining how GBMSM engaging in chemsex experience intimate relationships, demands a methodology that is sensitive to secrecy, stigma, and identity negotiation. IPA enables a deep engagement with these tensions, allowing for an analysis that moves beyond surface-level descriptions to uncover the layered meanings participants attach to their experiences (Smith et al., 2022). IPA is grounded in phenomenology, prioritising participants lived experiences and how they make sense of their world (Smith et al., 2022). IPA was chosen for this study because of its ability to explore the multifaceted, often contradictory experiences of hidden populations (Lim, 2024).

3.3. Research Paradigm

A research paradigm is defined as "a basic set of beliefs that guide action, dealing with first principles, ultimates, or the researcher's worldviews" (Groenewald, 2004, p. 44). These beliefs shape the researcher's methodological positioning, influencing how they engage with knowledge and reality. Ontology concerns beliefs about the nature of existence, while epistemology refers to the theory of knowledge. Bateson (1972) argued that ontology and epistemology are inseparable and fundamentally

intertwined with human existence, stating that we are "bound within a net of epistemological and ontological premises which—regardless of ultimate truth or falsity—become partially self-validating" (Bateson, 1972, p. 314).

IPA has been described as epistemologically open and characterised by "eclecticism" (Larkin, Watts & Clifton, 2006, p.116). This research, aligning with IPA and the researcher's role as a psychosexual therapist, is primarily informed by a constructivist approach. Lincoln, Guba, and Lynham (2011) describe constructivists as anti-foundationalists, rejecting the notion of an absolute or universal truth. Instead, constructivism posits that knowledge is not objective but is constructed through individuals' cognitive frameworks, shaping their perceptions, relationships, and experiences. As Confrey (1990) states, "we construct our understanding through our experiences, and the character of our experience is influenced profoundly by our cognitive lens" (p. 108).

Ontology, which addresses what exists and what can be known, is explored in this research through the lens of critical realism. Critical realism acknowledges the existence of an external world independent of human consciousness while also recognizing that knowledge about reality is socially constructed (Danermark et al., 2002). This philosophical approach is particularly apt for examining chemsex, a phenomenon situated at the nexus of structural influences, such as societal stigma and cultural norms, and individual experiences encompassing relationships, intimacy, and identity (Møller & Hakim, 2023; Brunsen et al., 2023). While heteronormativity and minority stress shape participants' lives and take a toll on mental health (Grigoreva & Szaszkó, 2024), by acknowledging both the objective structures and the subjective meanings individuals ascribe to their experiences, critical realism facilitates a comprehensive exploration of how personal agency, and

meaning making, operates within, and in response to, broader social constraints. Critical realism shares commonalities with constructivism, particularly in its recognition of subjectivity in knowledge production (Madill et al., 2000). Archer (2000) asserts that cultural systems influence social structures and vice versa. This stance aligns with both IPA and the research undertaken, which seeks to explore the lived experiences of a marginalised group. A critical realist perspective enables a deeper comprehension of participants' realities, acknowledging their experiences as situated within broader sociocultural contexts while maintaining the importance of individual meaning-making.

3.3.1. Other Methodological Approaches Considered

Other methodological approaches were considered by the researcher. Firstly, Grounded Theory was appraised as it might allow a structure by which the researcher could create an appropriate theory. Grounded theory is an approach that attempts to develop a theoretical account of a particular phenomenon (Smith et al, 2009). It originated in sociological research to increase the understanding of and explain different social processes (Willig, 2013). In Grounded Theory, data is rooted in distinct contexts and theories are produced from the materialising details (Willig & Stainton-Rogers, 2008). However, it was rejected as the researcher desired a deeper interpretative approach on subjective experiences, rather than the social processes (Willig, 2001) Grounded Theory facilitates.

Secondly, Hermeneutic Phenomenology was strongly considered. Hermeneutic phenomenology accepts that preliminary assumptions about the examined phenomena are made by researchers (Sloan & Bowe, 2014). However, the researcher decided that hermeneutic phenomenology might not be appropriate as this research seeks to capture the diversity and richness of participants' subjective

experiences of chemsex and intimate relationships in detail which the ideographic analysis of IPA may allow. Furthermore, IPA is more fitting as it originated within psychology and would allow the deepening of the psychological knowledge base and assist in maintaining a focus on psychotherapy.

3.4. Research Design and Methodology

The first comprehensive book on IPA, *Interpretative Phenomenological Analysis: Theory, Method and Research*, was published in 2009. Originally, primarily a method in psychology, as its value and understanding have been recognised, it has been increasingly adopted and applied in a variety of other disciplines (Smith & Osborn, 2015). It is a qualitative analytic method to research, developed to better assist researchers in acquiring comprehensive and rich knowledge about individual experiences of a phenomenon (Smith et al., 2009; 2022). Furthermore, it “transforms participants' everyday expressions into interpretations appropriate to the scientific discourse supporting the research” (Sadala & Adorno, 2001, p. 289). Its foundations are drawn through phenomenology where phenomenological philosophers have given disparate interpretations of phenomenology as a method and a philosophy (Moran, 2000).

3.4.1. Pillars of IPA.

IPA is underpinned by three key theoretical components; phenomenology, hermeneutics, and ideography (Smith et al., 2022). These pillars are not limited to the IPA approach; however, it is how they have been privileged with attention and approaches to data analysis utilised within the specific data collection method. This facilitates a uniqueness of what IPA offers and is why IPA is recognised as an optimal structured approach to the collection and determination of information relevant to research studies. It is why the researcher chose it for this study; its components are set out and explained as follows.

3.3.1.1. Phenomenology.

Phenomenology rejects the notion of objective truth, it necessitates collating data from those who have lived through an experience (Welman & Kruger, 1999). Phenomenology is the philosophical inquiry of the structures of experience and consciousness as it recognises that individuals desire to make meaning of their experiences and events (Racher et al., 2003). Phenomenological data draws upon the participant's descriptions and perspectives related to the phenomenon that is being researched (Groenewald, 2004). Groenewald (2004) posits that "realities are thus treated as pure phenomena and the only absolute date from where to begin" (p.43). Phenomenological inquiry is divided into two areas: descriptive also known as transcendental phenomenology (Husserl, 1983) and interpretative, also known as hermeneutic phenomenology (Heidegger, 1962), yet there is overlap between each (Langridge 2007; Moustakas, 1994).

Phenomenology was initially defined by Husserl an Austrian German philosopher in the early 20th century. He is acknowledged as the founder of modern phenomenology correlating phenomenology with the study of conscious experience (Finlay, 2011). Husserl conceived the argument that human consciousness orders the ways that we understand the physical nature of the world and promoted a pure descriptive stance to phenomenology (Moustakas, 1994). Van Manen (1990) outlines how it draws upon three mechanisms in central thought to comprehend an experience:

1. An understanding of intentionality, outlined as the assembly of a person to their world and the concept that in the moment we are not consciously aware rather this awareness comes with reflection.

2. Essences are defined as the ‘whatness’ of things (Van Manen, 1990, p. 23).

Here the objective of the researcher is to attempt to distinguish and describe the essence of a phenomenon (Smith et al., 2022).

3. The practice of bracketing (Smith et al., 2022) is defined as the required suspension of one’s own beliefs about the world to remain open to the beliefs of others; their descriptions remain close to what the participant provides to them.

The descriptive phenomenological approach commences with bracketing (Van Manen, 1990), it is often referred to as the epoché. This is an endeavour to abstain from judgement and to sit in a place of neutrality (van Manen, 1990). Giorgi (1992) clarifies; “descriptive language is drawn upon to describe events or actions when they arise devoid of any influence from the researcher and that it undertakes an ‘attitude of phenomenological reduction” (Giorgi, 1992, p. 121).

Heidegger, a student of Husserl, modified Husserlian phenomenology. Heidegger (1962) stresses the importance of interpretation when researching social beings and draws upon the meaning of being through the concept of Dasein. Dasein is described as “an entity which in its very being comports its understanding toward that being” (Heidegger, 1962, p.48). Heidegger believed in a ‘person-in-context,’ alongside the phenomenological notion of ‘intersubjectivity’ which describes the relational and shared nature of how we coincide within the world (Larkin, Watts, & Clifton, 2006). Heidegger disagreed with Husserl that bracketing was possible, arguing that researchers could not remove themselves from the process. Hermeneutic phenomenology recommends that the researcher interprets the meanings uncovered regarding the phenomena. Heidegger (1998) suggests that we are always shackled to our assumptions, and that individuals are “always already in

an environing world" (p. 164). Heidegger, as distinct from and in lieu of bracketing, suggests the research concentrates on interpretation and meaning of being and rejects transcendental reduction (Giorgi, 2012).

The IPA methodology contrasts with the traditional phenomenological approaches in that it can pinpoint and utilise both convergent and divergent themes (Connelly, 2010). As such IPA often outlines the importance of those differences, rather than fixating on the similarities, it states that people can correlate alternative meanings to the identical phenomenon (Giorgi, 1992). IPA seeks to abstain from the predetermined expectations of the researcher and instead endeavours to draw upon the encompassing experiences of the participants, rather than being dictated by pre-existing theoretical preconceptions (Littlejohn & Foss, 2009; Willig, 2008). IPA recognises that our being-in-the-world is always perspectival, always progressive, and consequential.

3.3.1.2. Hermeneutics

Hermeneutics was established outside its origins as a technique for the analysis of biblical texts into a broader use at the turn of the nineteenth century (Smith et al., 2009; 2022). The word originated from the Greek mythological character, Hermes, who delivered messages of Greek Gods to citizens (Gadamer, 2006). Hermeneutics is the "practice or art of interpretation" (Dallmayr, 2009, p. 23) that attempts to involve "the restoration of meaning" (Ricoeur, 1970, p 8). IPA utilises hermeneutics to progress concepts for the meanings individuals connect with to their subjective lived experiences (Smith & Osborn, 2007). IPA identifies and recognises the researcher's impact on the analytic process, which is influenced by Heidegger's hermeneutic phenomenology. Smith et al. (2009) clearly defined the connection between interpretation and phenomenology and the vitality of the incorporation:

“Without the phenomenology, there would be nothing to interpret, without the hermeneutics, the phenomenon would not be seen” (p.37).

Hans-Georg Gadamer saw hermeneutics as the ability to further clarify circumstances by which understanding itself takes place, “Hermeneutics must start from the position that a person seeking to understand something has a bond to the subject matter that comes into language through the traditionary text and has, or acquires, a connection with the tradition from which it speaks” (1960/1998, p. 295).

3.3.1.3. Double Hermeneutic.

IPA attempts to delve further than unveiling the meaning participants make, it utilises a double hermeneutic approach. The premise of the double hermeneutic outlines the reckoning that the researcher must endeavour to walk alongside the participant (Smith et al., 2022). The procedure draws upon both an exploration and an interpretation of the meaning of an individual experience whilst simultaneously fixating on the participant and the experience (Pringle et al., 2011). It encourages the researcher to hold curiosity and questioning, in a non-judgemental manner yet similarly to create sufficient distance to allow an alternative perspective. Thus, holding both empathy and care, whilst also providing firm questioning (Smith et al., 2022). This allows, “the use of an external framework to uncover further layers of meaning” (Langdridge, 2014, p.163).

3.3.1.4. The Hermeneutic Circle.

The term hermeneutic circle formulates a holistic understanding of the unique experience of a participant and assists in clarifying the understanding of the participant's experience by attempting to analyse the data from various angles. The researcher begins with a pre-understanding and “moves on to being open to discovering something” (Finlay, 2011, p. 53). As Smith et al. (2009) defines it; “the meaning of the word only becomes clear when seen in the context of the whole

sentence" (p.12). It encourages a dynamic, non-linear style of interpretation. Kvale (1996) regarded the end of the hermeneutic cycle as occurring when the researcher has achieved reasonable meaning, and is devoid of inner contradictions, to the best of their ability at the time in question.

3.3.1.5. Idiographic

The most significant aspect of the IPA approach in relation to this research is its idiographic focus. This emphasis on detailed analysis of participants' accounts provides valuable insight into their perspectives and experiences. Exploring how individuals navigate intimacy, sexuality, and their engagement with a specific phenomenon offers a deeper understanding of their lived realities. Smith et al. (2022) reported that IPA was determinedly idiographic. They stated that it is oppositional to the universal principles employed in empirical work revealing instead, the participants' experiences and concentrating on the specific rather than the general (Smith, 2011). IPA endeavours to move away from a nomothetic approach which omits the unique, individual experiences and instead attempts to gain an understanding of particular people, in a particular context. The idiographic approach endeavours to explore the particular of everyone's unique experience and any universal meanings or general statements they make arising from it (Smith, Harré, & Van Langenhove, 1995). It involves the analysis and examination of individual case studies, meaning ideography makes it possible to make specific statements about individuals. There is a two-step analysis at two levels (Smith et al., 2022). At the central level, it is essential that the researcher carries out an intensive, thorough study of each respondent's experience. At the ensuing level, the researcher explores how experiences, relationships, and methods are understood by the participants. It allows the researcher to highlight the unique, subjective

experiences of an individual yet equally to be clear enough that they can draw on any systemic similarities between those individually unique experiences.

3.4.2. Researcher Reflexivity

Reflexivity is the cornerstone to IPA research. It refers to reflecting, or thinking critically, sensitively, sincerely and candidly, about the research experience and process (Willig, 2001) “phenomenological (that is, it aims to represent the participant’s view of the world) and interpretative (that is, it is dependent upon the researcher’s own conception and standpoint)” (Willig, 2001, p.67). By being reflexive, researchers can better understand their interpretative role and how their interactions with the data shape the analysis. This self-awareness can lead to richer, more insightful interpretations that go beyond surface-level understanding. IPA facilitates space for both the participants’ accounts alongside the researcher’s subjectivity within the study (Smith et al., 2022). Smith (1996) stresses the significance of the researcher endeavouring to comprehend their own biases and assumptions which may impact on how they relate and perceive both the data and their role in the research.

In this study, reflexivity was operationalised through practices such as maintaining a reflexive research diary, a reflexive interview with a supervisor, documenting emotional and cognitive responses after each interview and during data analysis. Regular supervisory discussions served as a critical external perspective to explore assumptions, identify blind spots, and consider alternative interpretations. These reflexive strategies facilitated the tracing of how values, experiences, and potential biases could subtly or overtly, influence the formulation of questions, the prioritisation of emerging themes, and the interpretative process. Moments of

discomfort, emotional resonance, or surprise were treated as important for deeper reflexive inquiry rather than being over-looked.

Reflexivity enhances the credibility, ethical rigour, and depth of the research, while also demonstrating the researcher's critical engagement with the research process. By being reflexive, researchers ensure that their interpretations are transparent, ethically sound, and deeply insightful, thereby contributing to a thesis that meets the highest academic standards. Engaging with reflexivity in this study allowed for a more nuanced understanding of how individuals navigate intimacy, sexuality, and their involvement in this phenomenon while ensuring their voices remained central to the analysis and findings.

3.5. Criticisms of IPA

IPA has been criticised over the years. Willig (2001) interrogates the communicative capability of participants to articulate the deep complexity of the experience. Willig (2001) argues that IPA fixates on the "representational validity" (p.63) of language itself. She perceives that language is a utilised construct rather than definite reality, one that it is dependent on the meaning the speaker gives to the words they choose to use. Alongside this, Willig (2001) claims that to hold the attention solely on the experience is to disregard the contextual concerns. Willig (2009) has identified certain limitations of IPA that include how discussing an experience may not involve describing the experience. She also highlights that the language availability of a participant can result in the language being more significant than the experience. The point of this criticism of IPA is that it could exclude participants who do not have suitable language ability and therefore dismiss many dimensions.

Van Manen (2017) criticised IPA stating that it was not a phenomenological approach, rather a “therapy orientated” (p.7) piece of research. It has been argued that the reflexive imperative of IPA is challenging and time-consuming (Engward & Goldspink, 2020). As Finlay (2002) stated, the researcher “treads a cliff edge where it is all too easy to fall into an infinite regress of excessive self-analysis at the expense of focusing on the research participants” (p. 532). Smith (2022) has attempted to acknowledge these criticisms and explore further reflections and adjustments to IPA to appease the disparagement received. In 2022 Smith released a book with adjustments to further clarify and allow for modifications to fine tune aspects of IPA which have drawn criticism.

3.6 Application of the Method

3.6.1. Data Collection

As outlined in the methodological detail (Smith et al., 2022), consistent with the researcher’s focus on capturing a detailed data analysis, eight participants were deemed to be judged an appropriate sample size - allowing for a focus on capturing in-depth analysis. Smith et al. (2009) argued that while nomothetic approaches, which analyse large samples to identify generalisable truths, can provide broad insights, they often overlook the richness of individual experience. In contrast, idiographic approaches allow for a deeper exploration of phenomena at the individual level, offering new insights and highlighting potential flaws in existing theories. It is critical to the establishment of a better understanding of the chemsex and intimacy phenomenon - the researcher’s overriding objective - that the study captures deep and powerful material in detail, than simply outlining the experiences of many (Reid et al., 2005).

A call for participants was distributed to targeted groups using cascading methods in February 2023. Social media platforms were drawn upon to disseminate recruitment leaflets (Appendix A) as was Gay Community News (GCN) a magazine for the gay community. Flyers were distributed to charities; Mpower and the Gay Men's Network. Psychosexual therapists were approached through the accreditation body; The College of Sex and Relationship Therapy (COSRT) alongside Sex Therapists Ireland (www.sextherapists.ie) to see if they had clients who were willing to be participants. People in positions of power such as health workers and therapists can be effective gatekeepers, preventing research participation because of the ostensibly good motive of protecting someone from harm (Welie & Berghmans 2006, Liamputong, 2007). Therefore, social media and leaflet dissemination became the main recruitment method. Two participants were referred by their friends who had seen the advertisements online and encouraged them to attend.

To assist with the possibility of participants' ability to describe their experiences, the following inclusion criteria were initially applied to recruitment:

1. Clients will be cis-gendered men, as the current studies with trans and gender non-conforming individuals demonstrate differing definitions of chemsex (Moyle et al., 2020).
2. Participants must be living in Ireland and, for various reasons, over the age of 21; due to the sensitive nature of the research and the use of illicit substances it endeavours to minimise the risk of child protection issues. There might be a greater risk of causing harm or distress to younger people. Interviewing those over 21 can help mitigate these ethical risks.
3. Participants can be both currently engaging or previously engaged in chemsex practices.

4. Participants need not be currently nor previously in intimate relationships.

Participants may not have had previous intimate relationships, but that is data to explore and understand. Views of participants are also valued alongside their experiences.

Following an initial interview carried out with a participant who spoke English as an additional language, a discussion was had with the supervisors, and it was decided, moving forward that the criteria was altered to include those who were fluent in English. Following an initial interview with a participant who spoke English as an additional language, it became apparent during supervision discussions that the depth and nuance required for the study's qualitative interviews might be compromised without a high level of language fluency. Consequently, the inclusion criteria were amended to require participants to be fluent in English. This amendment was communicated via email to individuals who expressed interest in the study. Potential participants were asked the following question: *"As this study involves a detailed interview, are you comfortable communicating fluently in English?"* This was designed to ensure participants were fully informed about the depth and complexity of the interview process and could make an autonomous decision to participate or withdraw. This amendment was further supported by a concern for the confidence of shared meaning of references, particularly where cultural or experiential concepts might be misinterpreted without sufficient linguistic fluency.

Participants made contact through the researcher's DCU email account asking to participate. They were offered Zoom or face to face meetings and dates that these were being conducted. It was decided by the researcher that both online and face-

to-face interviews would be offered to participants. This was due to the private and sensitive nature of the topic and to reach a broader geographical area. Seven of the eight interviews were carried out through Zoom, and one face-to-face at HIV Ireland Offices.

Prior to the interviews participants were sent a Plain Language Statement (PLS) (Appendix B) with the outline of the research, what will be required from participants, how their data will be stored, and further necessary information. As per The Department of Health Guidance on Information Principles for Informed Consent, they were given a three day cool off period, to reflect on whether they would like to partake. They were then sent the Informed Consent Form (Appendix C) which outlines the importance of confidentiality and limitations of anonymity. Upon meeting, the participants were advised about potential risks associated with participating in the study and told that they could withdraw four weeks from the interview date, that counselling support was available should they require, and relevant support phone numbers were given, all of which were outlined in PLS and the consent form.

The researcher recognises how the trauma experienced by individuals, particularly those still navigating issues of identity or HIV status, could undoubtedly affect their willingness to come forward and share their experiences. The intersections of shame, internalised homophobia, and fear of judgment can create significant barriers, limiting access to certain voices or perspectives within the community.

3.6.2. Strengths and Limitations

The use of social media allows for greater anonymity, enabling participants who might otherwise avoid in-person recruitment to engage without fear of exposure. Recruitment was not limited to specific urban areas, allowing participation from a

more geographically diverse range of GBMSM. However, individuals who do not use social media alongside those who did not attend LGBTQ+ venues in Dublin, where leaflets were placed, or engaged with outreach work were more difficult to connect with. As a result, older GBMSM or those more isolated may have been underrepresented. Despite the limitations of social media recruitment and in-person outreach groups, they were ultimately an effective and necessary tool for reaching a population that is often difficult to engage through traditional means. Furthermore, expanding recruitment to include multilingual interviewers, translated materials, or community partnerships could provide a more comprehensive and inclusive engagement.

While the study did not restrict participation to native English speakers, inclusion required a level of fluency and communicative ease in English sufficient to engage in in-depth, semi-structured interviews without the need for interpreter support. This decision was grounded in practical and ethical considerations. While this approach aimed to ensure the richness and clarity of the data collected, it may have inadvertently limited the inclusion of voices from more linguistically diverse populations, particularly those for whom English fluency posed a barrier to participation. This is acknowledged as a limitation of the study, as the perspectives of individuals from such communities may have offered additional depth and nuance. Nevertheless, given the constraints of a self-funded doctoral project, the decision to prioritise communicative fluency was necessary to maintain the integrity and feasibility of the research process.

3.6.3. Ethical Considerations

Specific cultures and subcultures have different expectations about privacy and what is considered sacred. With a small population or limited pool of participants, the risk of compromising participant confidentiality increases, especially when

sensitive content is involved. This heightened risk underscores the importance of carefully handling and anonymizing any sensitive information to protect the participants' identities and maintain the ethical standards of the research. When reflecting on quotes and the possibility of disclosing sensitive or confidential aspects, the researcher questioned; *is it ethical to present this quote and recollection of personal experiences as research data?* The researcher had established clear research intentions and integrity when deciding on quotes after considerable thought on the important ethical considerations involved. This was one of the issues given most care throughout the research period at the research supervision meetings.

Secondly, the discussion of chemsex and intimate relationships could have been sensitive and emotive for some participants. Planning ways to respond to distress is important in preparing to conduct research with people who use drugs (Aldridge et al., 2008). The researcher reflected that it would be likely that some participants may be struggling with their chemsex engagement. Conscious that participants could become concerned and need therapeutic support, the researcher included in the PLS a signpost system directing them to support services and therapists. The researcher agreed with a colleague that should a participant need assistance; she would have capacity to take them on as a client. As far as the researcher is aware, none of the participants chose to do so.

The researcher decided that vouchers of €20 One-for-All for each participant would be given following each interview. This was outlined on the PLS and discussed with participants in advance. It stated that should a participant feel the need to end the interview early, or withdraw from the research, the voucher would still be given. This voucher was an important component of the researcher's integrity and ethical

stance, as she believes that those who make time available should be remunerated for it.

The researcher is aware that most REC in Ireland does not generally endorse compensation (Roche et al., 2012) and the researcher reflected on two components that may create an ethical obstacle:

1. Coercion

The researcher examined documents and literature to ascertain how harm and what harm might occur. The literature outlines that, in fact, reimbursing is likely to benefit that person, not to harm them (Wertheimer & Miller 2008).

2. Undue Influence.

Undue influence is described as; compromising or distorting a person's judgement or decision-making so that they make a choice contrary to their best interests or values (Resnik 2015). The researcher decided that a voucher would be most fitting because it would be less likely to cause undue influence than a cash payment and it would help to keep the amount reasonable (Gelinas et al., 2018), in the hope it would not impact on government benefits. Six participants accepted the vouchers, and two asked for donations to charities of their choice.

3. Researcher Independence

Finally, harm can occur when the researcher prioritises their own needs over that of protecting participants (Edwards & Ribbens 1998; Mauthner et al., 2002). The researcher's position in relation to those who are represented needs to be thoroughly explored, in terms of their own social, political, and personal interests, and the assumptions brought. Hence this researcher has had and continues to have input from GBMSM who academics are or working in the field so that the researcher is mindful of her biases, recognises difference, and the power relations that may impact research and participants. The researcher has been engaging with

journaling, personal therapy, and supervision to ensure that they are minimising the potential of harm.

Due to the sensitive nature of this project, approval for this research needed to be sought from the Data Protection Unit. A provisional approval was given by the ethics committee in a letter format (Appendix D). The Ethics Committee reported this letter is to be used alongside the email of confirmation from the DPU in the Appendix.

3.6.4. Interview Structure

IPA endeavours to create an account which allows participants to “discuss their own experiences in their own words” (Smith et al., 2009 p. 51). The researcher should be an active listener in the participants' experience of the phenomenon. IPA suggests an interview schedule to encourage data collection that is thorough and clear and should be considered in advance. The study should be able to explore convergence and divergences of the individual cases yet allow the researcher to draw upon overarching themes (Smith et al., 2022).

At the outset, participants were informed of the potential risks associated with taking part in the study and advised that they could withdraw at any point up to four weeks after their interview. They were also made aware that counselling support was available if needed and were provided with relevant support contact numbers. All information was detailed in the Participant Information Sheet (PLS) (Appendix B) and the consent form. The aims of this study were explained to the participants and, following completion of a written consent form, individual in-depth, semi-structured digitally recorded interviews lasting between 40 minutes and an hour were conducted during March and September 2023.

Qualitative materials for this study were gathered using semi-structured interviews. The Semi-Structured Interview Schedule (Appendix E) is a framework to assist in directing the interview in case answers divert from the primary interests of the research. The semi-structured approach is intended to create a reflective response from participants and is not intended to be inflexible or restrict the participants (Smith et al 2009).

Following the interviews, the data was pseudo-anonymised and once transcribed, were destroyed, with transcripts stored on the DCU Google drive, and on a secure password-protected laptop. To further protect the participants identity, no personal or sensitive data was collated. Locations of chemsex parties, identifiable traits of intimate partners or others, and specific contexts of disclosures were removed. As a result, there is no data captured for this thesis on the exact location or age of participants other than to state the age range is between 25 and 42, and that they are living in cities across Ireland.

3.7. Data Analysis

Smith et al. (2022) suggests utilising guidelines for appropriate analysis; they recommend a 6-step process to assist rigorous and thorough understanding of the data. The researcher carried out data analysis through utilising Google Sheets. Having a spreadsheet to help conceptualise helped robust note taking. Drawing upon columns, that signified the stages and colours to help code and maintain comprehension.

Step 1: Encourages *reading and rereading material*, this is to encourage the researcher to immerse themselves in the data. Yet simultaneously, the repetitive standpoint enhances patience and a delicate incisive dedication to the analysis, stops the researcher becoming overwhelmed, and endeavours to avoid aspects of

interviews being missed or overlooked (Smith et al., 2022). Immediately following each interview being carried out, bullet points of the experience were written of the researchers' experience, ensuring to capture the holistic experience (Smith et al., 2022) and not allowing these insights to pass over time. During this time analysis was carried out in detail, ensuring that identifiable features, names and details were changed. The researcher began the analysis through immersion into the transcript, to submerge in the idiographic experience. Listening to the recordings allowed the researcher to recall aspects missing from the written data. The reading was carried out through a phenomenological, reflexive lens and an open attitude (Finlay, 2011).

Step 2: Encourages *exploratory noting*, it 'examines semantic content and language use on a very exploratory level' (Smith et al., 2022, p. 79). Initial noting is outlined through three components: Descriptive comments; this describes the content of what has been stated by the participants focused on. Linguistic comments are fixated on traversing through the explicit and specific use of language. Finally, Conceptual annotating; are used to examine at a more probing and theoretical level. Initially some line-by-line noting had commenced as the researcher had initiated some documentation during the reading and re-reading, this ensured the researcher wasn't missing out on important data (Smith et al., 2022). Statements made by the participants that the researcher felt were powerful were highlighted. The researcher endeavoured to explore and open the hermeneutic circle and systematically consider the whole experience whenever an illuminating statement arose. Finally, the researcher inserted personal reflection, Smith et al. (2022) encouraged to 'draw upon experiential and/or professional knowledge' (p.84)

Step 3: Highlights the importance of *constructing experiential statements*. Smith et al. (2009) discusses how, as the analysis progresses, the challenge can be how best to manage the data that emerges while trying to reduce the volume of the

interviews but still protecting their depth and richness. This stage is to assist in the building of an initial insider's perspective (Reid et al., 2005). The Experiential Statements gives sense to a "pattern of meaning" of a theme (Motta and Larkin 2022, p. 56). Endeavouring to capture such statements that are both rich and concise. The analysis tends to move away from the transcript and into the exploratory notes (Smith et al., 2022). The researcher carried out a narrative of each interview and disseminated it to supervisors and discussed it further within meetings (Appendix F). Furthermore, the researcher carried out analysis through placing these statements in a spreadsheet to assist with compartmentalisation (Appendix G).

Step 4: Discusses the *searching for connections across Experiential Statements*, the researcher is to utilise or develop how the experiential statements fit together. With this step, the researcher is to utilise or develop how the experiential statements fit together. Smith et al. (2022) encourage the treatment of each statement as being of equal importance (p.91). The researcher is encouraged to reflect and utilise novice ways to capture and engage with themes (Smith et al., 2009; 2022). They encourage cutting the statements and placing them onto a solid surface, randomly dispersing them to break up the line of ordering before seeing if patterns are formed and create clusters (Appendix H).

Step 5: Is described as *naming the Personal Experiential Themes (PETs) and consolidating them*. In keeping with IPA's idiographic stance, this phase is to ensure that each interview is treated as unique (Smith et al., 2009). Once each cluster was captured a name was given to characterise and identify it so that supporting evidence was used to assist in accurately navigating the journey towards reaching the PET. This was undertaken on a spreadsheet by the researcher (Appendix I).

Step 6: Is outlined as the *continuing the individual analysis of other cases*. Cross-case analysis requires drawing upon what's already been learned through examination from individual cases on their own terms and then brought together and further analysed (Smith et al., 2022). Time was given between each additional participant to decompress and detach, endeavouring to ensure that cases could not be contaminated in any way by the accounts already registered. This also entailed writing a journal of reflections and struggles that the researcher might have experienced during the analysis. Examining each individual case and bringing together collective messaging that are then illuminated through an understanding of a shared perspective, this is a scaling-up of the individual analytic process (Smith et al., 2022).

Step 7: The final step is *working with PETs to develop Group Experiential Themes (GETs)*. The researcher looks for patterns, drawing upon the unique interviews to see parallels or diverging themes (Smith et al., 2009). Following this, each cluster was investigated in more detail moving from the broader themes into subthemes and experiential statements that resulted in each PET. At this point, the spreadsheet became too cumbersome, so instead extracts were printed out, subthemes and PETs, and placed onto a large table (Appendix H). As the researcher continued to draw upon this method, case-level subthemes that either lacked strength or were incompatible in contrast to the meaningful sets of group PETs, and as analysing across cases "requires the analyst to be selective" (Smith et al., 1999, p.226). Once clusters began developing a label was allocated. When clear and definitive clusters were made, a GET was labelled (Smith et al., 2022).

3.8. Research Validity

Assessing the quality of a good IPA study is of utmost importance. The validity of this research was assessed using Yardley's (2000) four principals. Yardley (2000) presents four broad principles for assessing the quality of qualitative research.

Firstly, Yardley (2000) claims that a good qualitative research study will validate *sensitivity to context*. This sensitivity might be in the selection and sampling process and the intricacy of a homogenous group. It discusses a need to have "extensive grounding" (Yardley, 2000. p.220) to the philosophy of approach. Alongside this, Yardley (2000) also discusses the importance of the awareness of the literature and previous research carried out historically on the specific topic. Finally, the researcher should be mindful of the participants and their interviews through the care and empathy demonstrated to them (Smith et al., 2009). This can initially be demonstrated through the attentiveness to the delicate nature of confidentiality due to the sensitive aspects of the topic.

Yardley's (2000) second principle is *commitment and rigour*. Commitment means a complete dedication; a resolve to hone-in on the skills that are needed and the depth in understanding of the approach, so immersing oneself in the data, and engagement in the supervisory process. Yardley discusses how this in turn can allow for depth and breadth of outcomes as it allows the researcher to engage with their imagination, contemplation, and empathy, resulting in "a rounded, multi-layered understanding of the research topic" (Yardley 2000. p, 223). The researcher stretched her understanding of IPA by connecting with others on an IPA forum and carrying out training courses on IPA.

Yardley's (2000) third principle is *transparency and coherence*. Yardley describes this principle in relation to the “fit” between the research question and the philosophical perspective adopted, and the method of choice” (p.223). This can be demonstrated by the clarity and precision by which the interviews are carried out, which results in a clear account of the reasoning behind the approach, alongside how it was engaged (Smith et al., 2009). Yarley (2000) discusses the importance of capturing the details and maintaining openness and precision throughout data collection. This can be seen through the thought process and time dedicated to ensuring rigour. Secondly, the reflexivity in each chapter facilitates an understanding of the commitment and consideration given.

Yardley's (2000) final principle is *impact and importance*. The outcome of the research should allow information that is illuminating and useful in contributing towards the field and enhancing knowledge (Smith et al., 2009). It is not always important for research to deliver an accurate depiction of a topic, rather “draw on empirical material to present a novel, challenging perspective, which opens up new ways of understanding a topic” (Yardley., 2000. p.223). The researcher's in-depth interrogation of the literature demonstrates the importance of this study. Finally, this research cultivates an opening for improving the training of therapists in relationship therapy and working with GBMSM.

The researcher believes that this research has aligned with tenets of IPA and has clearly demonstrated the valid contribution to the psychotherapy field.

3.8. Conclusion

This chapter has outlined the intricate process and philosophical underpinnings of IPA as applied to this study. This methodological alignment with phenomenology

underscores the commitment to capturing the depth and complexity of subjective experiences, while also acknowledging the interpretative role of the researcher. Furthermore, the idiographic commitment of IPA, ensures that the uniqueness of each participant's experience is honoured. This approach contrasts with the vast quantitative research found on chemsex, as outlined in the literature review. This makes IPA particularly well-suited for research questions that seek to understand the complexity of personal, lived experience and give voice to a community often unheard. This chapter has laid the groundwork for the subsequent data analysis, where these methodological principles will be applied to explore the research question in depth, yielding insights that are both richly descriptive and theoretically informed.

In conclusion, IPA offers a robust methodological framework for examining the intricate and deeply personal experiences of chemsex and intimate relationships. Its emphasis on interpretive rigour, alongside commitment to exploring the uniqueness of individual lived experiences within a coherent philosophical paradigm, which is particularly pertinent with a marginalised group.

3.9. Researcher's Reflexive Comment

One important consideration in choosing IPA was that it helped manage the potentially overwhelming nature of the data. As a methodology that values depth over breadth, IPA allowed me to focus closely on the lived experiences of a smaller number of participants, enabling a more meaningful engagement with the complexity of the topic. IPA allowed for the kind of depth and flexibility required to explore experiences of shame, intimacy, and community without collapsing them into pre-existing narratives. At times, I questioned whether the method's emphasis on idiographic detail risked decontextualising broader structural realities (such as

stigma, criminalisation, or systemic neglect). However, I was reminded of the core principals of meaning-making as part to foreground the participants experiences and allows a holding of both the particular and political. Guided by a constructivist epistemology and a critical realist ontology, I approached this research with an understanding that knowledge is co-constructed and that my interpretations were inevitably shaped by my professional and personal positioning.

Support from my supervisor was invaluable, especially a reflexive interview she conducted with me using my own interview schedule. This exercise encouraged critical reflection on the purpose behind my questions, my motivations, and how my personal experiences might shape or limit the inquiry. It also encouraged critical reflection on my motivations for undertaking the research in the first place. It surfaced anxieties I had not fully articulated, about wanting to get it right," about being perceived as credible within the field, and about the tension between academic detachment and emotional closeness to the topic. Through this process, I came to see reflexivity as a continuous discipline, an essential part of maintaining methodological integrity in IPA. It reminded me that while interpretation is inevitable, it must be grounded in a disciplined attentiveness to participants' voices, not in my desire for a particular narrative.

Chapter 4. Findings

4.1 Chapter Overview

This chapter will now present each Group Experiential Theme (GET) along with its associated subthemes. These themes reflect the shared lived experiences of the participants, while also highlighting individual variations in meaning-making. Direct quotes from the participants' accounts will be provided to ground the analysis in their personal narratives, offering insight into the experiential realities behind each theme.

The three GETs outlined are: *The Pressure of Intimate Relationships*. This section highlights how, despite being associated with comfort, relationship dynamics are experienced as overwhelming and difficult by participants. *Between Being and Nothingness*. demonstrates the stark divide between opposing experiences and portrays the careful balance participants navigate to avoid dependency and self-destruction. *Seeking Acceptance*. Participants describe the positive aspects of having their identity affirmed through their chemsex experiences.

Participants were a group of eight cisgendered men aged between twenty-three and forty-two, one of whom was bisexual; the other seven were gay. At the time of the interviews two were in relationships. Three men were non-Irish but living in Ireland at the time of the interview. Due to DCU Data Protection agreements and to safeguard participants, no further outline can be given.



Table 1: Group Experiential Themes and Subthemes.

4.2. GET 1. The Pressure of Intimate Relationships.

In this theme the experience of intimate relationships in the context of chemsex are illuminated. When encouraged to delve into their subjective experiences of intimacy within chemsex participants would become fraught. This was seen by the researcher when asking participants to define intimate relationships. Participants seemed to view them as enigmatic, leaving them bewildered and conflicted upon answering the question. This section highlights how these dynamics, while participants often viewed them as sources of connection and comfort, frequently led to emotional conflict. As a result, participants felt more disconnected both in their relationships and in their overall sense of self.

This is first carried out by delving into *The Labyrinth of Relationships*, whereby participants are traversing through a challenging pathway of understanding and endeavouring to make sense of their own experiences regarding relationships. The second subtheme is *The Suffocating Nature of Relationships*; a sense of an overwhelming and smothering nature of intimate relationships noted by the participants. Finally, *Fleeing Vulnerability*; participants illuminate their internal tug-of-war between both seeking and avoiding vulnerability. Ultimately, chemsex seems to contribute to a convoluted experience of relationships, which results in participants seeming to feel disjointed and impacting their sense of self.

4.2.1. Sub theme 1. The Labyrinth of Relationships; '*They are so much effort and such a struggle to be able to kind of navigate*' (Tom, L. 235).

This theme derived from narratives where many of the participants made specific references to a relationship as being inexplicable; an embodied way of being that seemed intangible to them. They also elucidate instances of intimate relationships

being imposed on them as a form of social constructivism, rather than a conscious choice. This is highlighted through various means: First, a perception that relationships were elusive and not attainable for them. Second, participants expressed how chemsex had distorted their perception of intimate relationships and created a challenge in relatedness. Finally, when asked to describe what an intimate relationship meant to them, it seemed to result in a sense of being stuck in verbalising. It was noteworthy that when participants were asked to define relationships all participants struggled to do so. Often, the question was met with a big sigh or laughter, as though they were grappling to comprehend the enormity of the question. However, participants reflected at length and appeared to answer in a manner that was authentic, demonstrated through considered pauses and conscientious choice in their use of language.

Rob's description of relationships is enveloped in a sense of self-doubt. As he discussed his experiences there was an air of detachment from the process, like he was delivering a soliloquy. This is an insight into the internal monologue of his own understanding; his attempt to untangle his perception in real time, often laughing, to seemingly minimise his discomfort.

'That's a good question. I don't know, I don't know, I suppose.... I, you know I suppose, people who have more of a deeper connection. So, this, I think there has to be friendship, but then, like a kind of loving bond.' (Rob, L.106-107).

When Rob discussed relationships, he would trip over his words and be stagnant in his tone. Rob seemed to struggle to ascertain his own sense of self during the interview surrounding intimate relationships and he was very open about his internal sense of inadequacy with regards to intimate relationships.

'Like the obligation to that person and the kind of I don't know their expectations and stuff that are put on to you' (Rob, L. 228).

Rob's phrasing here draws into the sense of expectations and narratives that are not of his choosing as such, rather expectations of others.

Dan voiced a similar experience, explaining how he tries to navigate the dilemmas he faces when opening to others. He discussed how he struggles to understand how to be vulnerable.

'I'm trying to work out where it is, it's not, it's not drip feeds. But like as you're getting to know someone you are like...you're always. You're always working out what, how? You can't like trauma dump with someone' (Dan, L. 109)

This gives insight into the internal battle Dan appears to have with communicating how he feels and endeavouring to make judgements regarding others. Dan discussed his frustration with needs being unmet; his repetition of the word 'certain' highlights a sense of exhausting repetition.

'There are certain people, certain things that people respond to, and that there are certain things that we do. You reach a limit to what someone can respond to, I suppose' (Dan, L. 111).

Joe appeared to connect chemsex and intimacy in a way that they are inseparable. He discussed how chemsex had distorted his views of intimacy and led him struggling to establish a new understanding since leaving the scene.

'I get very angry at the danger that I feel that intimacy poses to me now due to the way chemsex skewed intimacy for me.' (Joe, L.196).

Joe was perceptive and perspicacious when he discussed foreseeing the danger that intimacy still poses for him, fearing intimacy may result in him falling back into

patterns that he's trying to escape. Joe seemed to carry greater levels of distress than Dan in the experiences of his intimate relationships; he was very clear in his interview that chemsex skewed his understanding of intimate relationships.

'There is definitely the danger that it impacts the ability to see the perceptions as to what an intimate relationship really is, and I think that can be very long lasting,' (Joe, L. 224).

Joe highlighted the depth of the wound left by chemsex for him. He seemed fearful of possible future relationships and avoided them as a result; part of chemsex power is that it resulted in him feeling fearful of engaging in a relationship. Chemsex seemed to have tarnished Joe's life, and he seemed to be mourning the residue left. Tom echoed Joe's experience; that chemsex has tarnished his experiences of intimate relationships. While both carry deep scars from their experiences, they share a crucial commonality: the ability to recognise and acknowledge their engagement as a problematic chapter in their lives. Tom was clear that he felt constrained by informing and maintaining intimate relationships because of the impact of his engagement with chemsex.

'Like chemsex, it sort of just distorts or messes up how you view intimate relationships. Trying to understand or like reach what they are' (Tom, L.185).

It seemed as if the definition of intimate relationships were in sight, but difficult to grasp, just slightly out of reach. In the interview it seemed that Tom was trying to unravel and unknot, through deconstructing and reconstructing, the complexity of his experiences of intimate relationships.

'Yeah, it's all mashed up in your head, what is real I suppose, what is fake. What is intimacy? What is chems?' (Tom, L. 188).

Furthermore, this convolution seemed to be highlighted in the gay community itself. Tom described the struggle with forming intimate relationships within the gay community, that there is an expectation of conforming and fitting in.

‘They are so much effort and such a struggle to be able to kind of navigate, gay men are just like, I mean, it’s hard to explain like, they, we are tricky to pin down. Like I just feel like there are a lot of expectations and pressures to fit in, to tick boxes.’ (Tom, L. 235).

Tom seemed exhausted as he described the experiences of trying to fit in and conform to these multitude of pressures.

Steve was struggling at the time of the interview having just been unfaithful to his boyfriend for the second time while using chems. There was a sense of confusion and distress, a particular challenge in understanding himself and his behaviour in the context of intimacy. He questioned his decisions and couldn’t understand why he would rupture the relationship he enjoyed.

He couldn’t look at me, and I couldn’t blame him. Like I couldn’t either. I don’t know what possessed me. And that was really tough (Steve, L.203)

Steve seemed distressed at this dichotomy and battled to make sense of how he could hurt someone he cared about so much. It seemed that chemsex had muddied his sense of identity and his experiences of his moral code.

Ben, on the other hand, has been married for over 20 years and they engage in chemsex monogamously. His connection with his husband seems effortless, and his experience of mutual veneration alludes to a safe and holding space. Yet, Ben can understand the challenges of intimate relationships and demonstrated this in the anxiety surrounding the inability to mind read.

‘I’m always thinking like. Are you happy? Yeah, like I don’t know, because you never know what’s going on in somebody else’s head.’ (Ben, L.202)

This unknowing may leave other participants in a place of distress. However, Ben highlighted that this is a normal part of intimate relationships, this curiosity can be a common experience in relationships, and in fact be healthy.

'I think it's normal if you are invested in a relationship. I think if I didn't care I'd be more worried' (Ben, L.212)

This sub theme gives insight to the intricate and dynamic nature of intimate relationships and the impact of chemsex on these. Participants seemed to battle with the meaning of intimate relationships for them, they struggled to differentiate between what they are seeking and what they perceive others are seeking in them. Just as a labyrinth presents obstacles and challenges along the way, relationships can be fraught with difficulties.

The participants seemed to struggle with the conflicts, differing expectations, external and internal pressures, and there is a sense of relationships being convoluted. Chemsex seems to have perpetuated a distorted experience of relationships and a challenge in defining what it means to them. Yet most participants instead choose to turn towards the seeming simplicity of intimate connection of chemsex, rather than the dense maze of intimate relationships.

4.2.2. Sub theme 2. Suffocating Nature of Relationships '*It was so smothering*' (Tom, L124).

This sub theme outlines the feelings of being trapped in intimate relationships. The participants described a sense of struggling with intimate relationships, that there is a difficulty with being in an atmosphere that feels safe, an impending apprehension. Participants described the moments of intimacy that felt overwhelming. There is a sense of air being gradually drained out of the room, tightening anxiety and grasping on for as long as they can. Furthermore, they outlined a pressure to conform and assimilate to wider societal expectations.

Rob, Sean and Tom held similar experiences of intimate relationships, a feeling of loss of autonomy and individualisation. Rob outlined this sense of being trapped and contained within relationships, lacking the freedom that he desires.

'It kind of feels like you're like, you're being restricted a bit. But then also, just like that kind of idea of intimacy is just a bit intimidating, and there's a lot of kind of pressure and weight on that.' (Rob, L. 212)

Rob hesitated over this statement, as if he lacked confidence in what he is saying; 'a bit' 'kind of' and 'bit like' but his tone was one of self-assurance, as if he is trying to minimise his experience. He further described this sense of discomfort in the comfort; the calm and intimate moments creating distress, leaving him unable to be present. His mind wandered in moments that were supposed to be intimate and present.

'I constantly felt like my mind was kind of running as if I didn't have that kind of comfort'. (Rob, L.136)

Rob's avoidance of connection with his previous boyfriends resulted in him experiencing feelings of guilt. However, chemsex offers a seemingly protective measure.

'You're like not feeling guilty or feeling bad, because you don't feel the same emotion towards them.' (Rob, L.194- 196).

'With chemsex you can get the good feeling that you're supposed to get after intimacy, but without that pressure.' (Rob, L.226-227).

It can be further noted in Rob's use of the second person in the interview, perhaps trying to make sense of his experience while staying psychologically distant from disclosing his own emotions.

Sean similarly discussed how in his past relationship he felt closed off from people, that there wasn't an opportunity for him to be open to new possibilities.

'I won't say claustrophobic, but I can't think of the word. Closed, I suppose'
(Sean, L.175).

This left him feeling like there was something missing, that his world felt closed, a sense of falling into a relationship and feeling trapped. That it was seemingly an unintentional experience and being immersed in the relationship was not a conscious decision.

'I fell into a box, and it wasn't something I was looking for'
(Sean, L.201).

For Sean, a monogamous relationship didn't feel fitting for what he wanted. He instead felt trapped and confined. Chemsex seemed bracing and invigorating, bringing in an alternative world experience that he'd shut out by being trapped in his past relationship.

Joe similarly spoke about the challenge he had to connect with partners on an intimate level, that when he reflected on relationships he wasn't fully invested, instead he felt stuck in it. Stating that some of the drug use would have commenced because of his relationship.

'Would have stemmed from how I would have felt in that relationship, feeling locked into it' (Joe, L.127).

As a result, turning towards chemsex to escape from the feelings of being trapped. Like Sean and Joe, Tom described a relationship where he felt 'smothered' by his boyfriend. There was care and attentiveness, but the intensity felt stifling. Instead, he would ignore and avoid the relationship, turning towards chemsex rather than his boyfriend.

'When I started getting into chems I had a really thoughtful boyfriend. He was my rock through Uni, but when I started to get into chems I just ignored him completely. Like he would be asking me where I was and texting me all weekends then I would just ignore the calls and texts. It was so smothering.'

(Tom. L124)

Chemsex may have been fleeing from the stifling relationship which Tom further describes in one previous relationship. Chemsex was used as a form of escapism; it gave them an opening into enthusiasm and dispelled the challenges. Chemsex seems to lift the brakes and presses the accelerator of intimacy.

'Like an escape from things being boring, it gave us the ability to have deeper chats I suppose that were just so flipping stunted, but mainly we could get straight to the sex the act like we couldn't, connect.' (Tom, L. 138-140)

The discrepancy between the reality of what Tom experienced and how he perceived chemsex is confusing for him, resulting in finding that intimate relationships feel overwhelming for him.

'Chemsex feels like it's an easy way to just have sex and be close to people, like it's just like a lot to have to do that sober now. Relationships feel like a lot.' (Tom, L.228)

The 'a lot' emphasised twice seems to give an indication of the intensity and extent of the pressure, in contrast to the 'easy way' of chemsex. This may be resulting in Tom avoiding relationships and choosing to use chemsex as a way of realising intimacy, without the complexity of a relationship.

Steve's experience of an intimate relationship was one of openness and mutuality, there was an authenticity, and care of one another.

'It was just very easy going, and no sense of judgement, or, like I truly was myself around him,' (Steve. L124-125)

They had an agreed boundary surrounding monogamy, yet Steve still was repeatedly unfaithful, engaging in chemsex without his partner's consent. This behaviour seemed to disgust Steve and left him questioning his identity. It appeared that chemsex transformed him into someone whose values he doesn't align with.

"I am 'horrified by like me now, like the kind like by by what I've become'. (Steve, L. 243)

It seems that Steve was content in his relationship and disclosed as such in the interview. However, this continuous infidelity might shine a light on the internal challenges that he was facing. This impulsively cheating on his boyfriend may be a result of unhappiness within himself, the relationship, or perhaps his desire to have uncomplicated intimacy.

Jamie, like Ben is the other participant that is married, he is bisexual and married to a woman. However, his chemsex use is hidden from his wife and he engages in both chemsex parties but also uses these drugs when having sex with her without her knowledge. Jamie described the pressure he carried to be sexually present for his wife and as a result resorts to using substances.

'It would be in a really dull mood and then and I think chemsex, and you know my wife is demanding and everything you know', (Jamie. L,119).

'It is not only demanding but it is a lot for me'. (Jamie. L130)

Jamie's prose was unsentimental and detached when speaking about his wife in relation to chemsex. He seemed exasperated and frustrated by her, leading him to

plicate her rather than open and discuss his feelings. The repeated use of the word 'demanding' seemed to highlight the pressure felt by Jamie and the jarring experience of the expectations held by his relationship.

In this subtheme, participants described a sense of constriction with little to no personal space or autonomy, a sense of feeling suffocated and unable to breathe freely in intimate relationships. There was a sense of burden that was explored by participants, one of how constantly meeting the other person's needs can be draining and make the relationship feel oppressive. This results in a sense of being trapped and a desire to break free from relationships. These dynamics often led to feelings of emotional exhaustion and disillusionment with intimacy, further complicating participants' ability to form meaningful, lasting connections. As a result, chemsex seems to be a tool to burst from the shackles of the relationship and experience intimacy.

4.2.3 Sub theme 3. Fleeing Vulnerability; '*There's a vulnerability to not being that alone, I find myself avoiding*' (Dan. L104)

In this theme of *Fleeing Vulnerability*, participants outlined avoidance of exposure yet simultaneously craving connection. Vulnerability, a key component of intimacy, was experienced by many participants as a double-edged sword. Some participants described a push-pull of intense desire to be in an intimate relationship, while also loathing the experience. Participants illuminated the deep desire or longing for connection, intimacy, and fulfilment, yet simultaneously an antipathy towards these features. Participants described an unease of still, intimate moments in relationships.

Dan, Joe and Rob discussed a sense of yearning for intimate relationships despite simultaneously describing their aversion to forming one. They outlined their

resistance to intimacy, however described the longing to fill a void of connection. This also shone a light on a sense of loneliness experienced.

Dan appeared to have an internal battle with his views and beliefs regarding relationships. Dan seemed to find the lack of mutuality as frustrating due to the inequitable nature of it. Dan initially disclosed the importance of self-expression. He outlined how a relationship should be one of equal disclosure and support, something he has not received.

'You're able to see the person's emotions and respond to them. And also have your emotions clearly seen and responded to' (Dan, L.87).

Simultaneously, he struggled to open emotionally to partners and avoided disclosing his feelings. He gave this in an example of a past relationship and his unhappiness during this time; he explained that there was a lack of mutuality in the connection between himself and his boyfriend.

'I can read some people, but some people can't necessarily read me, cause, I bury. I bury quite a lot like if I'm sad or angry' (Dan, L.89).

There was a sense of anxiety and unease with being vulnerable and connecting for Dan, something he resists and feels more comfortable in refraining from.

'There's a certain sort of vulnerability to not being alone, that I kind of find myself avoidingin order to date someone and be with someone and share your life with someone you have to share that vulnerability, (Dan, L.104-108)

Dan's internal contention was palpable through the interview, where he appeared to be struggling through conflicting views, often slow to understand the questions before answering in a generally halting manner. It seemed that there was a desire for Dan to be clear in his intention of what he was saying, demonstrating the depth of his reflection.

Rob, Tom and Joe spoke in various ways about their avoidance of intimate relationships, while simultaneously experiencing a sense of loneliness and aching for connection. Joe discussed the impact of turning towards men who weren't available to him, those who weren't willing or able to be in secure relationships or be their authentic selves. That he was seeking partners that he knew couldn't be present for him either emotionally or sexually, as a result creating unfulfilling voids. He would commence relationships he knew wouldn't last.

'He presented as a straight man he had a masculinity about him, and that became the goal'. (Joe, L.165)

As previously outlined, chemsex has an alluring grasp that has convoluted his experiences of intimacy, one which Joe has been trying to untangle and reconcile within his recovery and distance from chemsex. There seemed to be an intense desire for intimate relationships, but fear has kept them at bay. Intimate relationships can be a portal to chemsex due to how he historically sought intimacy through the chemsex experience.

'I don't seek them, because I find it dangerous for myself being in recovery'
(Joe, L.19)

Tom voiced an unease regarding his relationships. He discussed his antipathy towards others and dismissal of forming relationships. However, equally he seemed to hold remorse and guilt for letting others down.

'Well, when I say it fizzled out, I just ghosted him. Like completely, not good I know but I did it. But I was a dick. Like a real asshole. I wish I was able, able to have been better' (Tom, L125-126).

Tom outlined a craving and desire to be in relationships and forming intimacy. He explained a sense of loneliness and emptiness, with this urge to find a way to formulate bonds with others. He has caused issues and pushed people away;

chemsex had often led him to avoid intimacy. There was sadness and despair when reflecting on these past experiences and the rupture he has caused.

'Yeah, I have had lovely relationships, but I have fucked them up. I have been so lucky again, really lucky. But I have pushed them away' (Tom, L120).

Rob described a sense of confusion with himself throughout the interview process and lacked confidence in his conviction in most of what he is saying. His inner monologue was critical and harsh. This was particularly evident when discussing relationships. He classified himself as being 'weird', doesn't finish sentences when discussing aspects that seem anxiety provoking, and seemed to seek reassurance by stating 'does this make sense?' Here he described a relationship where he became emotionally distant from his boyfriend.

'I do feel like whenever we were together there was a bit of a disconnect on my side, but not on his like. I'm kind of absent from the relationship if that makes sense. I wasn't fully in it. (Rob, L. 130-131)

His own confusion regarding his ambivalence in relationships was evident when describing an intimate relationship whereby he felt disconnected from his partner, it seemed overwhelming to him as he endeavoured to unpick the rationale behind his experience.

Jamie discussed his wife's previous frustration with his chemsex use. This was originally highlighted through his initial email following the advertisement, explaining that his wife is 'annoyed' with his chemsex use. In the interview he described how he no longer tells her he is engaging but utilises the drugs to help with their sex life.

'With intimate relationships. It helps me last longer, it helps me, you know, change my mood. My wife, it can help with her and sex. And give me this "I am in control"' (Jamie, L.115).

Despite knowing that she is upset with his use, and is uncomfortable with the scene, he continues to pedestal his engagement. He is determined to continue to utilise these drugs without his wife's awareness during sexual experiences. Jamie described his reliance on chemsex, which seemed to be mushrooming to assist his relationship with his wife.

'Having my wife. I have emotional intimacy, emotional connection with her, physical connection' (Jamie.L.68).

Ben's experience of chemsex seemed to diverge from the other participants. His contentment in his relationship was clear and evident in his disclosures of his relationship with his husband. He holds great sentimental value and treasuring of the relationship that almost feels sacred.

'I have the shirt that I wore on our first date. I haven't worn it again, and I have it only because I feel like I don't know, it's as close to a wedding dress' (Ben. L.157).

Unlike other participants chemsex isn't used to distance or detach from the relationship, but to bring closeness and a newness to its dynamic. His relationship with his husband is vulnerable and mutual. There was a sense of romance and joy when describing their marriage that Ben seemingly thrives from.

Participants often raised both internal and external messages that felt conflicting at times. There was a yearning for closeness, understanding, and emotional support that drives individuals to seek out relationships and invest in them emotionally. Yet participants seemed rooted in wearing armour to shield themselves from the possibility of being hurt or hurting others, a distancing of closeness. There was often a loneliness highlighted within their discourse surrounding relationships, leaving participants running towards chemsex in an apparent disruption of monotony and vulnerability.

4.3. GET 2. Between Being and Nothingness

This GET describes the polarisation of sharply contrasting experiences. This theme weaved in and out of the interviews, homing in at times to highlight the light and darkness, a polarisation of contrasting experiences. This theme was evocative in that it assisted to better understand the inner workings of what was happening for participants. Much of the discourse was not immediately clear, with the use of language, hesitations and silences indicated a sense of the internal struggle for control. This theme has three subthemes, firstly *Oscillating Between Pleasure and Pain* this highlighted the battle participants had in both the enjoyable nature and painful experiences of chemsex. Secondly, *Walking a Tightrope* which gives insight into the delicate nature of walking the line participants are doing to avoid dependency and destruction. Finally, *Othering; a Tug of War*, outlines the distancing done by participants to abdicate from their chemsex use and displace chemsex challenges onto others.

4.3.1. Sub theme 1. Oscillating Between Pleasure and Pain '*It's just like an intensity...but then, it is a little bit kind of scary*' (Rob, L.68)

This theme illustrates the participants' struggle between two counter points. There was a sense of their being stuck on a pendulum, swinging between the intense desire and sexual liberation that chemsex facilitated, while also ricocheting to a place of shame and regret. Participants discussed a sense struggling to break the cycle and stepping out of the repeated pattern. The sense of euphoria that chemsex allowed numbed any remorse they felt. Accounts of fracturing of relationships by chemsex use is rife within the participants' interviews.

Rob and Jamie showed a discrepancy between their positive and negative experiences of chemsex and the impact it has on them. Initially there was an ambivalence when Rob is talking about how he felt regarding his chemsex use. Rob described the duality of the two experiences, the power of engaging in chemsex alongside the fear that it brings.

'It's not even a euphoria. It's just like an intensity, that you don't really get I suppose otherwise....but then, it is a little bit kind of scary'(Rob, L.68)

Rob seemed to view himself objectively as a diligent person attempting to live a life doing the 'right thing', but battling with this subjective guilt and shame over his use of chemsex that's at odds with the healthy lifestyle, open mindset, and his career path. Rob's description seemed to be one that has a societal construction to it, a societal narration surrounding chemsex.

'Because it's probably not an antiquated view. It's probably like a pretty valid view, but like that kind of just like a traditional view of like a 'oh, no, there's no way that's good' ...But I suppose maybe that's that kind of guilt coming in again (Rob, L. 276)

Rob emphasised the struggle he feels around a sense of sexual obligation to someone. As he delves deeper, his tone shifts, revealing hesitation and uncertainty. He seemed torn, implying that once drugs come into play this feeling of obligation becomes clouded. His choice of words and tone suggests that he's grappling with guilt or confusion, unsure of how to reconcile these feelings.

'You just feel like, not obligatedbut you know, and it's kind of like what you want to do as well. (Rob, L.384)

Joe elicited a greater understanding of the variance of chemsex experiences. His initial definition alluded to chemsex being reckless, a sense of bold adventure. He stated this through a light laughter, and dismissive gesticulation.

'It is like throwing caution to the wind, it's kind of that real, slight from reality, it's a fun situation to be in initially and even at times where I kind of realised 'oh god' this isn't right'. (Joe, L.97-99)

This seemed to show a feeling of excitement and freedom. Joe acknowledged that this sense of liberation is enjoyable at first, possibly offering a temporary escape from reality. It's as if Joe was caught between enjoying the thrill of taking risks and realisation that those risks may have negative consequences.

'I see it as empty now. Very empty now, but it fulfils a purpose, it fulfils a purpose, and it does its job in the short term, but it has long term consequences.' (Joe, L.89).

This statement by Joe reflects a sense of disillusionment with something that once may have seemed fulfilling but is now seen as hollow or devoid of deeper meaning. The phrase 'job' and 'long-term consequences' highlights the internal conflict: he recognised that while it offers instant gratification, it ultimately leads to negative emotional, psychological, or physical repercussions

Jamie discussed the reliance that he has on chemsex. This seemed to impact his relationship with his ability to be free in his own sexuality, that his sexual self-worth is placed upon it.

'Because I try to put it on my sexual, sexual esteem' (Jamie, L.30).

His growth in his understanding seemed to evolve as he continued on in the interview and reflected upon his desperation correlated with what chemsex holds. There was a sense of fear surrounding chemsex, as he describes it in a heavy tone. Yet, he also recognised how chemsex draws him in, by withdrawing of control, leaving him dancing on a knife's edge.

'I almost passed out. I surprise myself, "I am going to mess up". That's the intrigue of chemsex' (Jamie.L 100-101).

Jamie seemed to hold conflicting emotions; both a fascination with chemsex and yet equally an anxiety. He seemed shocked that he almost 'passed out', yet this danger is alluring. He seemed aware that chemsex can be both thrilling and dangerous. The mix of risk and reward, danger and desire, is central to his experience.

Steve discussed how chemsex pulsating desire drives him to lose his ability to rationalise in those moments. These patterns have left him quite exasperated with himself and at times struck by surprise and astonishment with his own decisions. Furthermore, as echoed by Jamie, it seemed that his self-esteem is being impacted by chemsex. He spoke about the repeated patterns of engaging with these cycles leaving him in states of remorse and unhappiness.

'It kind of takes my mind off things. And but like yeah, like feelings of shame, the feelings of kind of disgust and feelings of just being like you're worth kind of just like nothing' (Steve, L.248).

It seemed to demonstrate the struggle to cope effectively with these rapid transitions. There was a sense of a paradoxical enjoyment that is intertwined with pain or discomfort as he gets further into the interview.

'You're kind of satisfying the feeling you are having when you're in that moment', (Steve, L.32)

'Horrified by like me now, like the kind like by what I've become' (Steve, L.273).

The inability to make judgements meant that he had moments where he frightened himself. The painful experiences can evoke emotional turmoil and challenge internal dichotomy. This sense of not knowing himself with decisions he makes when engaging in chemsex. This is interestingly picked up separately by Dan who discussed the importance of being true to yourself during chemsex.

'If you create the separation, it's like, "Oh, I'm good when I'm sober. But I'm bad when I'm not" and that that just doesn't. It doesn't work. If you separate your identity, it all has to be the one identity' (Dan, L.209).

The tension between desire and its fulfilment, as well as the contradictions inherent in human subjectivity seem evident in this experience. This unquenchable indulgence that these drugs allow leave participants on a dangerous path with their own values. There seemed to be this rupture between the drive and anticipation of desires with the expectation of virtuous behaviours and values.

There was a sense of vacillation for some participants, a struggle to hold the courage of their convictions and as a result they battled with conflicting desires. This incongruence seemed to excavate a shame among participants. The interweaving of alternating and conflicting emotions was at times fraught, with participants struggling to make sense of the deep pain that they and others experienced due to their drug use, while simultaneously grappling with the glee and freedom felt also. This can lead to both the enthrall and distress of the chemsex experience.

4.3.2. Sub theme 2. Walking a Tightrope '*I definitely put my trust in it*'. (Jamie, L.153)

This sub theme delves into the lived experience of addiction as a constant negotiation between the fear of losing control and the urge to maintain it. Walking a tightrope captures the embodied tension; each step is felt as a careful, deliberate act, where balance is fragile and easily lost. The sensation of being on the edge mirrors the vulnerability within relationships, where self-sabotage, through chemsex, feels both inevitable and perilous. Engaging in chemsex evokes an acute awareness of risk. Participants illuminated how the precariousness of chemsex is a visceral experience, where control teeters, and there is the potential rupture of relationships.

The fine line between risk and control is not just theoretical, but something intimately lived, where decisions feel as though it could unravel balance completely.

Rob and Jamie are two participants whose confidence seems to falter during the interview. At the beginning they were clear and defiant in their position of self-assurance regarding their chemsex use. However, upon deeper questioning and consideration, doubts seem to arise. Jamie demonstrated a wavering confidence in his chemsex use throughout the interview. There was an exaltation of chemsex that Jamie articulates in great depths during the interview, however an undercurrent of darkness begins to emerge when he moves into a more reflective place, leaving him dancing on a tightrope of control between choice and dependence. Initially Jamie seemed to revere chemsex. This seemed to leave him struggling to see clearly the harms it might cause him.

‘One of the challenges with chemsex is me wanting to run to it most times. Like I won’t say I am dependent on it. But it looks as if I definitely put my trust in it. I don’t trust my own personal sex drive again’ (Jamie L.150-153).

There was an air of desperation that Jamie was communicating when he was given more time to consider his experiences. Though Jamie initially sounded frivolous at the beginning of the interview, this changes towards the end when he is describing his chemsex use.

‘I don’t know how to put it like that but maybe I am reliant on it, something that I am looking at. I don’t trust my own past and my own drive again’. (Jamie, L 156-157).

Rob, however, was hypothetical in his approach and instead highlighted potential harms rather than his own lived experience. He seemed to externalise his

experience through speaking in the second person, perhaps distancing himself from the experiences.

'You're going to become addicted to that experience, and then it's going to become ingrained into your daily life... It's kind of always a bit of a fact that, like once you do so much, you're gonna want more. And then it's going to spread to more, and then maybe you'll like to go for another drug'. (Rob. L. 301-303)

When Rob talked about the possibility of escalation he laughed, which gave a sense of minimisation or distancing. Gradually Rob seemed to become more anxious and self-aware, he disclosed in the interview that his hands have become clammy, and he started moving side-to-side in an agitated manner. Yet, as he continued, he laughed as he discussed frightening moments. Yet, these frightening moments are quickly dismissed.

"Oh, how did I end up in this situation?" Just like for a split second. It's like that real kind of quick thing, you know. And then you just like, "oh feck it I gotta get on with that" you know?' (Rob, L 89)

There was a sense that some participants needed to normalise the experience of what they were engaging with, and part of this seemed to be downplaying the impact of the substances as they struggled to admit the path that they were on. Sean and Rob highlighted this through their lack of desire to understand the drugs that they are surrounded by. Sean reflected on one occasion he became nervous.

'But I was a bit like, "Oh, God, maybe. Just think here"'. (Sean L.123).

Sean's responses were often brief and stunted during the interview. He seemed to lack confidence in his clarity regarding how assured he was in the scene. He initially was aplomb as the conversation began, confident over his control of his use.

However, this changed as he dove deeper. He described a moment of self-awareness in a chemsex party, where he panicked as he noticed his surroundings.

“Oh, fuck! Actually. maybe I shouldn't be here.” (Sean, L.117)

Conversely, Joe, who has been in recovery for the past two years and has an overt understanding of his historical dependence on chems, was able to articulate clearly the experience for himself. He recognised this stark moment of ability to see his dependence.

‘I kind of had this full realisation that I had no control over my drug abuse anymore. It was gone and I was baffled by that.’ (Joe, L.92)

Joe’s depth of personal work and time away from the experience resulted in a sense of foreboding of the chemsex experience.

““What is chemsex?” and I think it’s a dangerous line to walk.’ (Joe, L.84).

This journey being a treacherous one and one that has enduring impact. Despite Joe being in recovery there was still a sense of delicacy and perilousness in engaging sexually with someone.

‘Because I find myself seeking out similar sexual experiences to that I would have had in chemsex minus the substance...which leads me down a very dangerous path, you know?’ (Joe, L.19-21).

Interestingly, Joe's definition of chemsex was a clear, subjective one, recognising the harm that chemsex has not only caused him, but also the residue of unease that it has left. There is still the essence of Joe being trapped and stuck on this journey that chemsex has led him on, despite having not engaged in the last two years. Joe was still digging out of the trenches of the impact that chemsex had on him when interviewed.

Similarly, Tom spoke openly regarding his struggle with dependency. He spoke in a manner that would highlight an insatiable weekend of expeditions hunting for the drugs, one that was relentless, and painful.

'I got pretty, pretty hardcore into it, I was using every weekend chasing my tail constantly, like looking for it' (Tom, L.22).

This addictive cycle was detrimental to his well-being and as a result began impacting his livelihood. It was this repetitive journey by which he was seeking chemsex, which is now represented by a monster to him.

'I just got deeper involved. Craved for it, I think they call it chasing the dragon?' I dunno, like I am chasing this monster, like I will get burnt, I suppose.... Also chasing anything is bloody exhausting.' (Tom, L.71-72).

The repetition and consumption isolated him from others leading him deeper into the depths of addiction, cutting people off as he prioritised his drug use. This lonely experience was the antithesis to the extroverted and joyful person Tom was. This resulted in a struggle to date others and to be available, letting people down and isolating himself from the dating scene.

'I just would be so bad, like so bad. Not answering calls or nothing. So, it would be hard to like, actually get a date when I was involved.' (Tom, L.124).

Chemsex seemed to distract him from the ability to have intimate relationships as he would be so immersed in the experience. Tom seems very critical of himself, as he emphasises being 'so bad' for being absent from relationships.

Steve appeared to embody how Tom and Joe profiled their relationship with chemsex. Steve was feeling raw and vulnerable in the interview, and it appeared struggling on an emotional level, and how this infidelity had impacted how he viewed himself.

'I felt like the lowest of the low. I saw myself like, just disappear because you're like 'What did I do?"', (Steve. L.73)

Steve was battling with this sense of a repeated pattern of hurting others due to his chemsex use. The deep sense of shame he references gives a sense that he is left with a conscious and determined effort to self-regulate and make change.

'I remember I always feel that's gonna be the last time. But like here I am...but it's never really it, I never want to do it like when I'm sober. I never want chemsex. So I was just like after, like, when I'm like drunk. (Steve L.77-79)

Balancing on this tightrope seemed to leave participants feeling overwrought. Many of the participants described moments of realisations; pivotal occasions when their internal dialogues drew attention to a fear. These moments called into question the choice they were making while using these drugs. In this experience of stuckness, participants described a sense of being unsure of themselves, finding it difficult to find the middle ground. The strive to grasp onto control of their chemsex use seems insurmountable at times. Their efforts to maintain healthy relationships requires navigating complex dynamics and communication challenges, treading between connection and conflict

4.3.3 Sub theme 3. Othering. '*I've seen people in the depths like, and I wouldn't go that far*'. (Sean. L.247)

There was a sense of othering from the participants' interviews; that there was a power held by them that gave rise to a perception of control over their chemsex use. Cognitive dissonance is apparent through some of the participants experiences; they seem to struggle to see their own behaviour as a reflection in others. Many of them create a distance and space between their use and others. Labelling other people as dependent and reliant while they hold power over their use. This seems

to create distance and barriers between participants and others, labelling others seems to assist in keeping participants safe from their own struggles.

Sean and Jamie, both seemed to hold views of their power over chemsex, they both seemed to see others as fallible to chems. Sean described how he keeps an aspect of control when engaging in chemsex and endeavours to maintain command over his chemsex use, ignoring the addictive nature of substances.

'In small doses like there's nothing wrong with having like a couple of cigarettes, but I don't want to be a smoker' (Sean, L.216).

Sean explained how he felt that there were others that were unable to manage their chemsex use, but this was not something that was concerning for him. He recounts feelings of horror when reading Jamie Wharton's book 'Something for the Weekend'.

'Oh, God, it's not something you really want to fall into, you know, cause it. It seems more habitual than more enjoyment'. (Sean, L.217)

However, Sean didn't seem to see his experience of chemsex as anything more than a liberating experience, that instead those who engage in harder drugs are involved in a sinister, almost grimy world. This splitting seemed to create distance from the experience of others who he sees as in the depths of chemsex.

'I've seen people in the depths like, and I wouldn't go that far. (Sean. L.247)

Despite describing very different experiences, there was a striking parallel in Jamie's control over chemsex. There is a cognitive dissonance when Jamie spoke about the importance of chemsex on appeasing his wife sexually, his internalising of his use and not disclosing this to her. Yet, he explained that he also calls into question when others are keeping chemsex as a secret.

'But not too much of it. Some people take too much of it. I think you know, taking secret, you know, taking it and a warning that it is secret' (Jamie, L.215)

Dan described in the interview his battle with alcohol that has resulted in his abstaining from it. His alcohol use had become a contentious issue within the family dynamic; therefore, he has had to take measures to mitigate the harm it was causing both him and others. Yet, there was a sense of splitting when Dan sees others struggle with their dependence on chems. At one point in the interview, he questioned the safety of others due to their substance use, unable to see his own engagement in the same way.

' I'm always aware of whether someone or I always ask the question to myself whether people are danger to themselves because they are enjoying taking the drugs or because they are addicted to taking whatever the substance is'.
(Dan, L. 127)

Dan further explained an experience with an ex-boyfriend who was dependent on marijuana and endeavours to draw parallels with alcohol to highlight his point.

'I was sick of it, like imagine if I woke up and went to work after having a shot of vodka...He was like, "no, that'd be weird". Then why would you smoke a joint before work?' (Dan, L. 130).

There appeared to be a lack of consistency with his ability to see the equivalent with his own relationship with substances and the contradiction these experiences bring. Contradictions are also held by Tom who was previously in a relationship with a man who was unable to engage fully due to his addiction with chems which Tom found very difficult to cope with.

'I felt like I was watching him die. Just crumble, weekly, it was exhausting and heartbreaking, it was too much for me'. (Tom L.221)

Despite being someone who engaged in chemsex historically, Tom contradicted himself when he reflected on the desire to be in a relationship with someone who engages in chemsex.

'If I was with someone who was doing chems, I'd probably not. Actually, I just wouldn't be with them. I just couldn't do it' (Tom, L.120)

'I saw people using as probably lesser, lesser than me.' (Tom, L.171)

This statement by Tom contradicts others he has made in the interview regarding his views of chemsex being a non-judgemental space. Perhaps this was a defence mechanism to protect and distance himself from the reality of his dependency at the time.

Ben undulated into the world of chemsex compared to the more capricious manner of other participants. His religious upbringing ingrained in him a deeply polarised view that vilified substance use. This rigid, moralistic framework shaped his perception of what was "virtuous" and "sinful," creating a strong aversion to substances. In the interview, Ben explained that these strict teachings from his childhood were so deeply ingrained that they even influenced his attitude toward something as innocuous as drinking coffee. This early indoctrination set the stage for his cautious and conflicted relationship with substance use later in life.

'I didn't drink coffee because it has caffeine and that's a drug, and that's bad'
(Ben, L.39).

He described how these viewpoints have been gradually deconstructed and challenged as he aged. Ben seemed to see this newfound reconfiguration as didactic, teaching him a lesson of othering. Ben spoke about the consistent, and gradual unlearning of these narratives throughout his life.

‘I’m like how I can’t be judging people anymore. I can’t be a judge of people anymore’ (Ben, L.282)

Othering seemed apparent in the experiences that are shared amongst participants. This idea of others having less control, knowledge and awareness was present in interviews. This alienation seemed to give a degree of reassurance to participants that they were “not like them” giving a sense of safety and distance; a comfort of having more control compared with the perceived powerlessness of others. However, this also could have been a measure of denial that participants were utilising to exert some self-reassurance.

These were often found in moments of trepidation, where participants would highlight their anxiety surrounding the propensity of becoming reliant. This protective layer perhaps gave them the ease in engaging in chemsex with less shame, or to deflect the unease of reflecting inwards.

4.4.GET 3. Seeking Acceptance

Seeking Acceptance highlights the ways participants describe the positive experiences of their identity being validated through chemsex experiences. Firstly, through *Finding a Tribe* chemsex is described as a space where it's safe to be themselves, free of judgement and an environment of vulnerability. They described a sense of safety from the pressures of forming an authentic, intimate relationship focusing instead on this time-limited, ease of access, substance dependent one. Secondly, *Expanding Sexual Self* is the notion that chemsex gives a sense of internal sexual legitimacy; allowing participants to engage in a manner that gives them sexual worthiness.

4.4.1 Sub theme 1. Finding a Tribe ‘*You get into the world of chemsex and it’s like, totally unconditional*’ (Joe, L 267).

Finding a Tribe elucidates the experience of seeking connection and finding a clan. Participants described the struggle to feel accepted and embraced in the world and how chemsex provided a sanctuary of sorts; gave them a sense of safety and security with like-minded people. Participants described an innate desire to connect with others and most described distressing or difficult experiences that predated their use of chemsex. They outlined that during their time engaging with chemsex they felt connected and accepted by the scene. Participants felt a deep loneliness predating their engagement with chemsex. The great discrepancy was the perception the chemsex world gave them a sense of safety that the outside world could not offer.

Joe had been in recovery from chemsex for two years when he arrived for the interview. He had identified a sense of being significantly wounded by chemsex and was steadfast in highlighting this. As a result, it was a struggle for Joe to name aspects of chemsex that he found beneficial, however, despite the damage he felt, Joe emphasised how it had been a holding place for him and sheltered him from the outside world. It provided him with a gateway into intimacy that he would have previously avoided because of the fear intimacy engendered in him when sober.

‘It very much gave me a crutch and a safety blanket. Yeah, it was very much like a safety blanket in that scary world. It seemed like intimacy terrified me. But if I had substance, I was alright.’ (Joe, L. 29).

Joe described how connected he felt with the LGBT community, this sense that he was fitting in and adapting to what he believed others were engaging in.

'I felt even more part of the LGBT community than I did at any other time of my life, I felt that I was doing what all the other people in the community were doing.' (Joe, L.230-231).

Joe explained that part of the motivation to seek connection was a lack of thorough acceptance from his family. Joe highlighted this loaded discrepancy between rejection from his family, and adoption into the chemsex group.

'I'd come out to the family and everyone kind of accepts it to a point but then they say, "well we won't tell granny, cause granny won't accept it". I thought "god yes, that makes sense", which resonated with me as, on a level, that I wasn't really accepted' (Joe, L. 264-265).

Joe described this and many of his painful experiences with a lightness as though to minimise the experiences or establish some distance from the hurt. This obscuring of his sexuality within the wider family amplified a sense of being different and perpetuated a sense of rejection. With a realisation that he wasn't fully embraced for who he was, love became conditional but chemsex seemed to counteract this, offering a welcoming environment. Joe reflected on moments of conversation and normalisation he sought and how, overtime, he began to disengage from the sexual experiences of chemsex, drawing into customary conversations.

'I was just looking to talk to people and connect. I was sitting talking to someone for like a full day, talking to someone at the kitchen table'. (Joe, L. 51).

This allegory paints a picture of a young man craving a sense of normalisation and everyday conversation. Joe could clearly define his need for connection and longing for it as a motivator for his chemsex use.

'Maybe what I was seeking in chemsex was intimacy.' (Joe, L. 26).

Joe questioned rhetorically; how obvious it would be to gravitate towards this embrace. This highlights his ability to see past himself and into the collective experience of marginalised stress, and how this may play into the need for belonging for GBMSM.

'And then you get into the world of chemsex and it's like totally unconditional and it's like 'why wouldn't ya? Like why wouldn't ya latch to that'? Like, wouldn't ya?' (Joe, L 267).

Two other participants highlight this sense of alignment. Steve questions whether trauma and collective distress being a motivator and provides a questioning and reflective moment as he endeavours to make sense of people's motivation.

'I think I don't know there's it must be like this, some shared trauma between everyone like, why are we doing this to us? (Steve, L.297)

It seemed slightly out of his reach at the time of the interview to grasp what it is that is causing such an allegiance and questions the possibility of shared trauma. He seemed determined that there is something more detrimental under the motivational reasons.

Rob also discussed the commonality when engaging in chemsex, this shared experience and purpose; that irrespective of being strangers, there is a congruence.

'It's like, takes away all of the fact that, like you don't know each other. You don't know what each other likes and stuff and just replace it with this common thing I suppose'. (Rob, L. 235).

Finding a safe space when participants have described ostracization, homophobia, and microaggressions is of deep value. Participants described this welcoming experience at chemsex parties, a sense of being received into open arms to a community where there is no judgement.

Tom, who was also in recovery from his dependence on chemsex when he came for the interview, described how chemsex was a liberating experience originally for him, allowing him to meet others and how it facilitated a freedom. Tom described the affinity he felt to be with others engaging in chemsex and being validated.

‘As strange as this might sound, it’s like having something in common, a place without judgement, especially if it helps with a kink.... But like there is like people looking, well I think people look out for each other.’ (Tom, L.153).

Sean, Jamie and Dan shared similar sentiments of these normalised, attentive encounters. Dan and Jamie described a similarity in their description, in that there is a form of intimate relationship. Sean further outlines this through the connecting experiences of like-minded people, there is an air of being immersed in a community that gives rise to a nurture and care.

‘I suppose some people I’ve had hookups where there’s been that sort of intimacy and that intensity of being able to nurture one another’ (Dan, L.96).

‘People tend to say relate to it before I share...similar like-minds.’. (Jamie, L.82)

‘So, that’s a good benefit you really do get to meet and connect with people’ (Sean, L.294).

There was a sense of being relaxed and comfortable in the chemsex scene, one where participants feel a release of tension and shared seeking of solace. These experiences help to that there’s importance to a form of intimacy and care that chemsex uniquely provides. It facilitates an environment where safety and acceptance are prioritised, when the outside world may not be welcoming.

Dan discussed how chemsex enables connection, giving pause to the distraction and ambivalence he feels is so rife. In contrast, chemsex allows him a sense of meaning and affinity that helps to fill the void.

'Because I was either ok with being me and being on my own with drugs, or at a party where I did feel like I belonged and then that took away loneliness.'

(Dan, L. 164).

Steve spoke about a sense of inadequacy, a struggle with being able to be his authentic self. He discussed his fears of being judged, his desire to be accepted and ability to just be himself. This led, as he explained, to a forced adaptation, to moulding himself to fit the expectation he believed was required by others. He talked about how he would be seen as being eccentric and has often been encouraged to change.

'Like just trying to be like kind, of like subdued, or just a bit more like relaxed, which I probably wouldn't be if I can be myself.' (Steve, L.166)

Furthermore, this conveyed a sense of desire for acceptance resulting in skewing and masking his true self, adapting to influence the validation of others. Subjugating rather than allowing himself to be authentic.

'I think they would have had an idea of who I was, and I tried to turn more of myself into that idea instead of like, whoever I am' (Steve, L.169).

Steve's experience of chemsex and its impact was different to others. it did not provide an intimate connection but was, in fact, an isolating experience. In contrast to the other participants' accounts of a sense of community, for Steve there was a sense of detachment from others engaging alongside him and singular focus on his own pathway.

'There's also been times when I suppose we're being intimate. But I didn't feel a connection as such, but I still wanted to have the sex. (Steve, L.114)

There was a sense of isolation and alienation that he seemed to feel, particularly as his articulation of anxiety surrounding his dependence grew, and the guilt he felt regarding his infidelity.

In his interview, Tom described a life of trauma and rejection. He grew up in fear in a household that was intolerant of difference; his mother evicted him due to his sexual identity.

‘I told her it was a phase and pretended I'd gotten over it’. (Tom, L.50)

He then sought solace in drugs. Tom described how empty life was before he commenced chemsex and how it made things easier and allowed him to form bonds with others.

‘I was really lonely and empty for a long time. It gave me the ability to have a sense of comfort. Feel less alone. So, then all those worries stopped. I was no longer alone.’ (Tom, L.159-160)

Tom's experience of seeking connection is complex. The wisdom he's gained has allowed him to retrospectively analyse his approach. In hindsight his distancing from the scene was his desire to no-longer feel disconnected. He described this particularly clearly in the evolution of discrepancy between the sexual experiences and the sobriety of daylight.

‘Like you can be with someone at the weekend, like having sex, high and telling them how they are the best person in the world, and they are saying the same to you. You're like making plans to go on dates, hang out, fucking hell you could be telling each other you love each other. Then you're in Tesco during the week, you see each other and like turn around. Like, like you pretend you don't know each other. Bloody crazy. Like you're literally telling each other you love each other, then nothing.’ (Tom, L. 190-193)

Reflecting on this experience he seemed to question it as the slow dawning of the strangeness of it, as if in disbelief of his own involvement in the scene. The transient intimacy of chemsex, seems to mean people and emotions are disposable.

Rob highlighted a different experience, he explained that chemsex kept him separate from others and gave him a sense of distance. Rob described in his interview his anxiety surrounding attaching himself to others, how he struggles with and routinely intentionally disconnects as intimacy seems overwhelming, instead he uses chemsex to keep relationships at bay.

‘And I suppose it’s kind of like a combination of where because of my emotional attachment, I don’t want to connect because I’m afraid it’ll happen again, and I’ll kind of end up in a relationship with somebody....I’ll just go through the same thing again’ (Rob, L. 203)

This sense of contrariety feels comfortable within chemsex as the bond with the other person is superficial and it fills the vacuum of emotional components so crucial to intimate relationships.

Unlike others, chemsex allows Rob to be disconnected from others, to maintain distance, as he desires.

‘It let me kind of feel more in it, not from a loving standpoint or more of a sexual physical standpoint. It kind of, because it gives you that intensity as well. It kind of blocks that absence or something.’ (Rob, L.189)

Ben is the participant who doesn’t profile any sense of collective connection through chemsex which may be on account of him engaging exclusively with his husband; in which case the collective experience of acceptance and community isn’t in alignment with this GET. However, Ben illuminated the support chemsex gives him and his husband in heightening their intimate connection.

‘Those two things recently have been, for me, really positive, because it’s like “oh”, it’s like a whole new, a whole new experience, but in a shared, happy way’ (Ben, L.59).

Ben's account is of how his and his husband's devotion has been strengthened by chemsex and that it's an experience that's improved their intimate relationship and solidified their connection with each other.

Filling a Void highlight the desperation and craving for a sense of belonging of the interviewees. Life experiences, aspects of self-worth, trauma and rejection all seem to be components of escapism that as a result seem to have left participants longing to be seen. This prompts a question about desperation and the lengths people may go to to feel connected and accepted. This clan-like experience of solidarity and unity, alongside acceptance and affinity, demonstrates a distinct importance of validation by others. The sense of embracement gives a vital insight into the broadness by which intimacy and intimate relationships can and should be defined. Participants have given a rich understanding of community care and the affirmative aspects of understating that might not be acknowledged by the wider world.

4.4.2 Sub theme 2. Expanding Sexual Self; '*It's like a whole new, a whole new experience, but in a shared, happy way*' (Ben, L. 13)

Expanding Sexual Self refers to participants' experiences of growth and evolution through their chemsex experience, how chemsex gave them an ability to foster a deeper understanding of their sexual Being. All participants were open and candid about the heightened sexual experiences during chemsex and how what it cultivated was gratifying and exhilarating. Participants outlined their subjective experiences of it facilitating an opening-up of their sexual selves. Equally they recounted objective experiences where they heard accounts of others who expressed their sexual growth.

Ben and his husband used chemsex to better explore and deepen their sexual relationship. Ben explained that sex became monotonous, the laborious nature

coupled with the struggle to be spontaneous resulted in the waning of sexual intimacy.

'It's complicated in the sense that, like there's well to the lots of layers like one layer is....you know you have to be more thoughtful and pre-emptive about hygiene' (Ben, L.13).

Ben said chemsex gave him a sense of liberation and non-confinement by decreasing his inhibitions. The drugs would stimulate and flourish the sexual relationship giving a sense of opening their world.

'Really positive, because it's like oh, it's like a whole new, a whole new experience, but in a shared, happy way' (Ben, L.13).

Ben had lived in a conservative manner, opposing substance use until he met his husband and began to reevaluate his beliefs. Chemsex was a transformational, freeing experience, as his increasing engagements with substances challenged his illiberal views. Furthermore, his engagement with chemsex meant that he experienced an expanding sense of self and others.

'So, I think it's easier for me to understand when people use other drugs'
(Ben, L.282).

Ben further described his high propensity to be caught up in his intrusive thoughts. The psychoactive substances rebuff intrusive thoughts and allow him to let go of self-consciousness, be more present in the moment and braver in sharing desires.

'I would say it helps with any self-made problems that I make up in my head, we are less hesitant to say, 'hey, you want to do this?'(Ben, L.86-87).

Tom shared a similar experience to Ben in that these drugs diminish the intrusive, automatic thoughts that perpetuate anxiety and create a distraction from the ability to be present. For Tom chemsex seemed to be disinhibitory.

'You're pretty, like open with each other in discussing I dunno whatever you want, so you can, like, forget your worries and just be more present yeah. Everything goes on pause really. (Tom, L.157-158)

Tom also outlined how chemsex helped him to explore and bring curiosity to the desires he was craving, this lack of judgement resulted in a destigmatising, shame free experience.

'But the intimate relationships part, I mean it's like a good way to explore kinks and stuff, like if you're wanting to connect with each other' 'Like the whole, euphoric, elated, raw sex. Never, like I'd never had anything like it. I dunno, I feel it was freeing and kind of liberating, everyone was on par' (Tom, L.66).

This sub theme gives greater insight into the experience of those engaging in chemsex to suspend self-judgement and to focus on the sexual experience at hand. Participants discussed how chemsex facilitates an assisting with kinks and heightens the ability to be present somatically. The negative automatic thoughts that might appear during sober sexual experiences, are instead bracketed during chemsex. The uninhibited intimacy allows them to be in an immersed state of bliss; there's a strong sense of being unbound and liberated in these chemsex moments. Like Tom, Rob also reflected this ability to be present in his description. Chemsex gives him the ability to destroy obstacles that normally obstruct him from a deeper physical connection. Rob elaborated on this by describing how his critical thoughts tend to monopolise his ability to be present. He explained how intrusive thoughts detach him from the moment and his enjoyment. However, chemsex gives him the ability to break free from this experience of self-consciousness.

'The kind of anxiety and kind of like worry about, like "oh what I'm doing is not good for him" or "oh he's looking at me in a certain way", like "I don't look as attractive" that kind of that loaded kind of stuff fizzes away' (Rob, L.336)

Dan outlined a sense of freedom and liberation, his ability to express himself during chemsex, that disclosure is ever present and allows for open communication. He expressed this with enthusiasm.

'I always take it that I'm not gonna see the person again. And if I do, then that's great, and that's wonderful. But you kind of lay everything on the floor (Dan, L.121).

Sean also expressed this sentiment, highlighting the mutuality of disclosure and honesty that chemsex gives. Furthermore, Sean described a sense of wanting to be accepted and desired, rather than thinking of his own wishes. And Sean outlined the lack of goal-based sex, rather one of presence and embodiment. Sean said this in a manner that is grounded and assured, confident in his viewpoint.

'It's nice to have like sex. That isn't goal based, you know. That's they're not just looking for the orgasms. And they're just looking to experience you, or something so really nice. And you like just, be there in the moment and can communicate what you want. (Sean L.294-296)

Jamie's memories of chemsex were evocative. He described his brash behaviour when engaging in chemsex, this animalistic embodiment that appeared to allow him to manifest sexuality that gives vigour. There is an animalistic, stealth-like authority that chems gives him, a sense of embodied control.

'I felt like a lion, yeah so I feel out of control'. (Jamie, L.200)

This immersion in lascivious; carnal self-actualisation seems to formulate a sense of conviction in his sexual self.

'Using all the stimulants and everything it helps to give me strength, you know to try to stay longer, last longer (Jamie, L.17).

Masculinity is vital to Jamie, chemsex allows him to engage in a way that validates virility and gives him a sense of power that seems to expand his sexual self.

'It gives me this masculine effect. Masculine effect. Like OK I am in control' (Jamie, L.114).

There is a rapture that Jamie described both within himself; a sense of embodied, free, ravenous experience allowing him to capture this sense of raw sexuality that he doesn't have without chems.

'Always in control and at same time I feel free' (Jamie, L.206).

Steve also elucidated this embodied experience, a sense of ecstasy and passion. However, when describing it, there is a detachment and disinterest. How he described it, within the second person gives an impression of generalisation, rather than a felt sense.

'Everyone wants each other in that moment definitely. And I suppose you are high, anyway. So, you're going to be so much happier, so that feeling of wanting to is certainly there'. (Steve, L.139-140)

This experience did not seem to be shared by Joe who struggles to see any benefit to chemsex with regards to sexual experiences; he highlighted how chemsex tainted sexual experiences for him and explained that he conflates sex and intimacy. Alongside this he explained that his struggle with his sexual relationships chemsex and he searched for these sexual experiences in toxic ways.

'I suppose even when I looked back. Prior to me doing drugs in sexual situations, I would have sought sex in unhealthy ways anyway.' (Joe, L. 78-80).

Participants described how the drugs have facilitated a way of communicating freely and openly allowing them to express their desires in a manner they would not have done previously. They described feeling able to be their true sexual self, disclosing their inner desires and being met without judgement. In the altered state of chemsex individuals may feel an intensified connection to parts of themselves that are usually subdued, leading to what might be perceived as profound self-discovery or an affirmation of an aspect of their sexual identity.

There appears to be substantial self-serving reasons behind these intentions getting what they want from the sexual experience. Furthermore, these drugs seem to suspend self-conscious thoughts, giving a sense of alleviation from body image woes, or self-critical thoughts surrounding their inadequacy and desirability. The commonality described in the sub theme of '*Finding a Tribe*' seems to fortify the rationale and motivations, a shared sense of divulgence and enlightenment.

4.5. Conclusion.

The findings have illuminated the multifaceted and complex lens of relationships for those engaging in chemsex. They demonstrate the distorting of intimate relationships as a result and the challenge of navigating through the understanding of meanings this has for participants. Through *Seeking Acceptance*, chemsex seems to demonstrate the ease by which connection and intimacy can be transiently required. Participants described how it provided a sense of safety, vulnerability and authenticity, of duality and interconnectedness. In *The Pressure of Intimate Relationships*, participants illuminated how they believed relationships should ideally be a source of comfort and support, but in some cases, they can become a source of stress and pressure. The participants described chemsex as giving a

sense of safety from the pressures of forming an authentic, intimate relationship and instead could focus on this time-limited, ease of access, substance dependent one; a form of intimate relationship, where they felt free to be themselves and that could be managed without pressure. In the theme *Between Being and Nothingness*, the findings illustrate the dichotomy between light and darkness that participants highlight in their experiences of chemsex and intimate relationships. This swinging between two opposing points gives insight into the binary viewpoint by which chemsex and intimacy are often engaged and seen.

Through in-depth, interpretative analysis, this research illustrates how participants navigate the suffocating pressures of relationships, the existential instability of chemsex, and the search for belonging. These themes reveal chemsex as a precarious balancing act, offering escape from the constraints of intimate relationships while simultaneously exposing a deep longing for connection. Taken together, the findings portray chemsex as a complex relational and existential practice, shaped by both personal and socio-cultural forces.

4.6. Researcher's Reflexive comment.

Initially, I struggled with this chapter; ensuring I was capturing the *felt sense* of participants lived experiences. Over time, I began to let go of the need to categorise each moment and instead allowed myself to become immersed in the textures of meaning that emerged. While some themes appeared relatively clear from the outset, others overlapped, shifted, or became more nuanced during the analytic process, reflecting the iterative and interpretative nature of IPA. Remaining attuned to participants' voices was not simply a methodological choice, but an ethical imperative. I viewed each encounter and each act of interpretation as carrying the

weight of responsibility, to represent, honour, and do justice while also being transparent about the interpretative lens through which I approached them.

As a queer woman, I bring to this research a lived understanding of the complexities of sexuality. This positionality offered both insight and tension. I was confronted with a key ethical and epistemological question: *Can - or should - a woman research and represent, in writing, a subcultural male group to which she does not belong?* And more importantly, *can researchers ever be justified in excluding such groups based solely on identity difference?* These questions shaped my approach. Rather than attempting to resolve them neatly, I chose to acknowledge and sit with the discomfort they produced, recognising it as a necessary component of reflexive and ethical research. I remained acutely aware of how my positionality and assumptions, including those embedded in the research questions themselves, could shape the inquiry. I returned frequently to these tensions in the design, analysis, and write-up stages. I sought to remain open to multiple perspectives and avoid foreclosing meaning-making based on personal or disciplinary bias.

Discovering the work of Vanner (2015) was pivotal. The assertion that power is present at each stage of the research process resonated deeply. Reflexivity, intersectionality, and awareness of power dynamics are not optional in such research, they are essential. As Lyons and Chipperfield (2000, p.6) stated, the questions "*Who am I?*" and "*How will I 'speak' her?*" are as important as "*Who is she?*" pointing to the relational and ethical dimensions of knowledge production.

Chapter 5. Discussion Chapter

5.1. Chapter Overview

This study aimed to deepen the understanding of intimate relationship experiences among GBMSM engaged in chemsex. Eight participants, who were either currently or had previously engaged in chemsex, were interviewed to explore their perspectives on intimate relationships. The interviews were transcribed and analysed using IPA to identify recurrent and experientially significant themes. GETs appeared, reflecting participants lived experiences of intimate relationships within the context of chemsex:

1. The Pressure of Intimate Relationships
2. Between Being and Nothingness
3. Seeking Acceptance.

The findings of this study offer three key insights. First, participants indicated that chemsex fostered a sense of intimacy, providing safety and connection as a means of alleviating the pervasive loneliness experienced in their broader social contexts. Findings indicate that the interplay between psychosocial factors, such as isolation and the quest for belonging, plays a pivotal role in the engagement with chemsex among Irish individuals. Second, the study uncovers previously unexplored aspects of chemsex, revealing an internal and relational disconnect among participants that results in a sense of incongruence. Findings indicate that the interplay between psychosocial factors, such as isolation and the quest for belonging, plays a pivotal role in the engagement with chemsex among Irish individuals. Finally, the research provides critical insights into the search for meaning within the context of chemsex, with self-discovery identified as a central component of this experience.

These findings are discussed in relation to existing research, theories, and frameworks on chemsex. The study's strengths and limitations are critically examined, followed by a discussion of the implications and recommendations for practitioners, supervisors, training, and future research. The chapter concludes with a reflexive account from the researcher.

5.2. Chemsex as an Intimate Relationship

Vangelisti and Beck (2007) states how intimacy "affects physical and mental well-being and shapes the way people communicate and relate to each other" (p. 409). Chemsex emerged as a deeply intimate experience particularly in the GET *Seeking Affirmation* with two subthemes. Participants illuminated the significance of chemsex as a shared, collective experience that fostered a sense of non-judgmental connection, to feel an affinity and unity, where they could embrace their authentic selves without fear. Furthermore, this shared experience offered refuge and belonging often absent from the broader social world. Thus, chemsex both reflects and reshapes intimacy among GBMSM, forming collective bonds and challenging relational norms.

5.2.1. Filling the Void of Loneliness

This study contributes novel insight into how loneliness shapes intimate relationships in the context of chemsex. All participants in this research demonstrated an experience of loneliness, which is interwoven through all the GETs. It was particularly palpable in the subthemes *Finding a Tribe* through connection fostered, the avoidance of disclosure in *Fleeing Vulnerability*, alongside their accounts of the complexity of relationships in the theme, *The Labyrinth of Relationships*.

Loneliness manifests socially and emotionally. Social loneliness is characterised by a lack of a subjectively satisfactory network that gives a sense of belonging (Hawkley et al., 2005) whereas emotional loneliness is perceived absence of close relationships (Weis, 1973); Loneliness is an experience that is well-founded within the gay community both in its emotional and social components (Fredriksen-Goldsen, 2012; Kromholz and Barak, 2023). One study in Vancouver through a multivariable generalised linear-mixed model surveyed 770 individuals, found that 61% of GBMSM experience loneliness (Marziali et al., 2020).

Kromholz and Barak (2023) interviewed 14 cis gay men (aged 30–50), half in relationships, about their experiences of loneliness. They discovered three main findings.

1. Childhood loneliness as an initial experience of gay identity.
2. Loneliness in the context of other gay men, via sexual encounters, friendships, and the use of dating apps.
3. Loneliness in the context of heterosexual society.

The findings of the Kromholz and Barak (2023) study echo the lived experiences of loneliness, under the sub-theme *Finding a Tribe*. Participants in this theme recounted acute experiences of ostracization and dismissal by family members due to their sexual orientation. This lack of acceptance from those whose love is expected to be unconditional left a lingering sense of aloneness. Furthermore, participants' experiences of being different and having to adapt to the expectations of not only peers but also societal standards, is seen in the Subthemes; *The Suffocating Nature of Relationships* and *Oscillating between Pleasure and Pain*, where participants described social pressures and norms. This sense of being different is also demonstrated through a sense of being on the margins of society.

Participants struggled with inadequacy and fear of rejection, drawing them to the chemsex microcosm.

Reid et al. (2002) found that heterosexual paragons of masculinity often hold power over the phenomenon of intimate relationships between gay and bisexual men, and that these men are influenced by the hetero-dominant world. They found that many of the men struggled to reconcile emotional security, derived from sexual exclusivity, with a desire for casual sex. According to Pachankis et al. (2020), Intra-minority Stress Theory, posits that social and sexual interactions among GBMSM are often shaped by hierarchical structures that emphasise physical appearance, masculinity, social capital, and desirability. This within-group marginalisation can lead to feelings of inadequacy, rejection, or exclusion, which in turn contribute to mental health disparities, such as anxiety, depression, body dissatisfaction, and disordered eating.

Kromholz and Barak (2023) found that in comparison to their heterosexual counterparts who experience “the norm” (p. 2797) of societal expectations, GBMSM experience amplified feelings of isolation. Gorczynski and Fasoli (2021) conducted a systematic literature review, with their meta-analysis revealing that sexual minorities frequently experience feelings of loneliness across their lifespan more intensely than heterosexual individuals. This is echoed in this current study where most participants stated a sense of isolation in both overt and subtle manners that traversed through the landscape of their relationships. This research highlights a previously underexplored dimension of chemsex: its function as a source of solace from loneliness.

Jackson et al. (2019) longitudinal quantitative research discovered stress correlated with homophobia and discrimination, alongside an absence of gay social networks predicted higher feelings of loneliness. Although chemsex seemed to fill the void of

loneliness in this study, there was a sense of being stuck within a cycle of isolation. An original discovery in the current study was that the eagerness for belonging and thus compensating through chemsex, resulted in a compounding of loneliness in come-downs, fracturing relationships, or a recognition of the transient nature of chemsex intimacy. Participants regularly illustrated the isolation they experienced in relational dynamics, this can be seen through the theme *Dancing with Disclosure*, whereby participants described the challenge of being prepared to disclose their innermost feelings. They revealed a relational tension: the deep longing to connect clashing with a reluctance to embrace vulnerability.

The findings highlight interpersonal, relational, and societal loneliness, driven by escaping heteronormative pressures, relationship dynamics, and internalised shame. Participants expressed a need for spaces fostering intimacy, care, and validation to ease their isolation. This study underscores the importance of culturally informed therapists who understand the unique traumas and histories faced by GBMSM. Kim and Fredriksen-Goldsen (2016) found that loneliness was closely linked to internalised shame, minority stress, and the need to hide one's identity. These are not just stories of loss but also of resilience, of people who, despite everything, have found ways to forge new forms of love, belonging, and survival. It is important for therapists to note the impact of loneliness on GBMSM and how this influences their emotional well-being. The findings in this study offer valuable insights into the motivation of chemsex use as an antidote to the loneliness experienced as a sexual minority.

5.2.2. Collective Experience

The literature reveals that intimacy is a multifaceted phenomenon intricately woven into the fabric of love and friendships (Fisher & Narus, 1981). Moss and Schwebel

(1993) deepen this understanding by emphasising elements of openness, sharing, and vulnerability. Jankowiak and Fischer (1992) describe intimacy as “any intense attraction that involves the idealisation of the other, within an erotic context, with the expectation of enduring for some time into the future” (p. 50). These varied interpretations illustrate the expansive and nuanced nature of intimacy. Within the lived experiences of the participants in the GET *Seeking Acceptance* convey a profound sense of validation through their engagement in chemsex.

For some participants, chemsex functioned as a form of emotional refuge, a temporary escape from pervasive feelings of isolation. It offered a fleeting but potent experience of connection, filling gaps left by the absence of sustained, affirming relationships. In these spaces, participants found a reprieve from social invisibility, creating fleeting networks of care and affirmation. Participants describe moments of intense sharing and vulnerability, fostering deep trust and emotional connections that enhance their sense of kinship. These accounts illuminate how chemsex serves as a conduit for a unique form of intimacy.

Collective identity is an important component of gay subcultures whereby nightclubs and bars have been a centralised hub in gay political identity (Southgate & Hopwood 1999; Green, 2003). Often alcohol and drugs are used to alleviate some of the internalised homophobia, and stigma related to homosexuality (Hequembourg, & Dearing, 2013). Community cohesion is rooted historically in the Queer community.

The origin of the phrase ‘Chosen Family’ is from Kath Weston’s *Families We Choose: Lesbians, Gays, Kinship* (Weston., 1997). Weston describes the impact of friendships of sexual minorities who have often experienced rejection from their families of origin. The literal isolation caused by the COVID-19 pandemic exacerbated loneliness among GBMSM, with reductions in community interaction linked to changes in sexual behaviour and increased distress, even among those in

relationships (Skakoon-Sparling, 2023), this demonstrates the importance of cohesion and connection. Hakim (2019) discovered that migrant MSM participate in chemsex to develop a community, a sense of collective relationship, and subculture in cities that the Gay spaces are changing and closing due to neoliberalism.

Charmaraman et al. (2024) found that young LGBTQ+ youth experience significantly higher rates of loneliness compared to their heterosexual peers linked to minority stress theory. However, they discovered those who have strong affinity with the LGBTQ+ community experience lower levels of loneliness than those with low sexual identity pride. As described by participants in the theme *Expanding Sexual Self*, drugs used in chemsex often amplify emotions and sensations, leading to intensified feeling of closeness and intimacy among participants. Therefore, chemsex may serve as a protective measure, facilitating a sense of acceptance, and contentment.

Participants recounted rejection from the wider world, including ostracization by family members due to their sexual orientation. This led them to seek solace in the chemsex community where acceptance felt unconditional. The experience of marginalisation is prevalent through research. One American national survey (Ivey et al., 2023) discovered that 30% of MSM who reported using drugs during chemsex said they experienced verbal harassment because someone knew or assumed they were attracted to men. Additionally, 12.1% reported discrimination at school or work for the same reason (Ivey et al., 2023). The findings reveal that for those in Ireland, where cultural conservatism and traditional views on sexuality remain prevalent, engaging in chemsex can exacerbate the emotional and relational complexities faced by participants. Through the lens of their chemsex experiences, participants articulate a connection that transcends mere interaction, encompassing shared struggles and backgrounds that and foster a supportive community.

This study advances our understanding of the duality of the complex nature of chemsex as a form of intimacy, where the intermingling of pleasure and pain reveals the intricate and often troubling dynamics of trauma and connection. This connection manifests as trauma bonding, a collective escape from reality, fraught with peril, and encapsulated in the subtheme *Oscillating Between Pleasure and Pain*. To comprehend chemsex as a form of intimacy, it must be seen as a subjective, multifaceted experience, an intimate relationship that may not always be nurturing. Participants lived experiences reveal how trauma bonding, a phenomenon often present from an imbalance of power and intermittency of abuse, creates cycles of tension, violence, and remorse (Dutton & Paper, 1993). These cycles foster emotional attachment, despite the evident harm. The shared narratives of individual traumas, such as childhood abuse, familial rejection, or previous abusive relationships, forge potent emotional connections between partners who have endured similar adversities (Dutton & Paper, 1993; Effiong et al., 2022). The shared trauma of chemsex intensifies bonds, even in unhealthy relationships. Seven participants expressed inner conflict; though chemsex provides social, sexual, and emotional benefits, it carries complexities, including addiction and unhealthy relationship dynamics.

These findings reveal a critical advancement in the phenomenological essence of chemsex as an integral part of an intimate subcultural identity, offering a refuge in the face of adversity, providing a kinship built on shared experiences, mutual support, and a collective identity. It reveals that the experience of chemsex is uniquely layered and multifarious. It encapsulates the intricate dynamics of finding belonging and connection in a world that has often rejected them, while also navigating the precarious equilibrium between the community's benefits and its

potential for harm. This can transform how we engage in therapeutic support for individuals and couples alike.

5.2.3. The Safety of Transient Intimacy

This research discovered the importance of transient intimacy as voiced by participants. For many, chemsex creates a temporary sense of closeness and safety, allowing them to engage in intimate encounters without the pressure or emotional entanglement of long-term relationships. A key finding of this study is that chemsex enables individuals to circumvent the emotional effort usually needed to form deep, lasting relationships. The intense experiences during chemsex are often hard to replicate in sober, everyday interactions. Consequently, this can lead to increased emotional detachment, not just from partners but also from oneself. Participants described the impermeable nature of chemsex as facilitating a sense of connectedness without having to expose themselves to the risks of emotional openness. Seven of the eight participants appeared to use chemsex as a controlled and temporary experience of intimacy, one that feels more manageable than the demands of traditional, sober relationships.

Casual sexual intimacy often manifests through momentary trust, shared physical vulnerability, and embodied connection. It may not involve sustained emotional investment, but it can still produce feelings of closeness, validation, and shared pleasure (Giddens, 1992). Chemsex shows how technology in facilities casual sexual intimacy, reshaping how GBMSM navigate ephemeral yet meaningful connections (Race, 2015). These encounters often emphasize immediacy and physical gratification while still allowing for brief but intense relational experiences that challenge rigid distinctions between intimate and non-intimate relationships (Anderson, 2012). While some scholars argue that casual sex lacks emotional depth

and poor communication (Fraley & Shaver. 2000, Dailey et al. 2016), emerging research challenges this binary distinction, suggesting that intimacy can still be experienced in short-term encounters (Koch & Miles, 2021).

Similarly, the environment in which chemsex happens, permits a sense of normalisation that many of the participants yearn for, this is particularly shown in the GET *The Pressure of Intimate Relationships*. This finding suggests an experience of chemsex not yet defined within current therapeutic literature; it highlights the use of chemsex to seek solace in a form of intimacy not afforded in sober life. Azbel (2023) carried out in-depth qualitative interviews in Berlin with 16 participants exploring sexualised drug use in a shifting queer landscape. They discovered that chemsex experiences in a home, generated an overwhelmingly powerful experience of affection, conviviality and intimacy. This environment allows for an “intimate infrastructure” (Azbel 2023, p.881). Azbel (2023) explained how the simplicity of inanimate objects, such as toothbrushes, gives a sense of affinity; a normalisation of the personal, within the rapture of the chemsex experience. In the subtheme *Finding a Tribe* the participants are craving for an environment that is warm and welcoming, one that feels enriching. This is also highlighted in the subthemes *Fleeing Vulnerability* and *The Pressure of Intimate Relationships* where, chemsex, for some, becomes an escape from the pressures of maintaining intimate relationships. This provides a transient form of intimacy that fulfils immediate emotional needs without lasting obligations.

It is important to underline that chemsex might be a paradoxical pursuit of safe intimacy because, while the intimacy is sought after in a chemically enhanced, transient state, it is also intentionally fleeting. Participants often know that the closeness they experience won’t last, but that may be part of the appeal. In the sub theme, *The Suffocating Nature of Intimate Relationships*, participants demonstrate

the experiences of chemsex intimacy as ones where they can be open and honest. The temporary nature of the experience provides both the intensity of connection and the safety of knowing it won't persist, thus avoiding the emotional fallout that can come from long-term vulnerability. The ephemeral quality of chemsex provides a form of intimacy that feels safer because it lacks the risks associated with a deeper emotional investment. Yet, simultaneously, it may compound isolation. A cross-sectional survey carried out in a STI/HIV Unit in Italy, highlights a significant association between chemsex and emotional vulnerability among GBMSM (Capodieci et al., 2025). They found that chemsex may serve both as a coping mechanism for underlying emotional distress and as a contributor to further psychological and physical health risks.

A recent Dutch study by (Field et al., 2024) found that chemsex was associated with lower odds of depression among GBMSM living with HIV. Interestingly, their findings showed that men engaging in chemsex and living with HIV were less likely to experience clinical depression. This suggests that for some, chemsex might alleviate feelings of isolation or depression, that it may provide a temporary form of relief or escape from feelings of isolation, anxiety, or depression, and can be a search for transient intimacy that addresses deeper psychological or emotional needs. Participants in this study demonstrated that chemsex seemed to provide a place where they can be themselves, that it can offer space for individuals to experience closeness without the emotional complexities of deeper relationships, using chemsex to access physical intimacy without emotional entanglement. In contrast to the research by Field et al. (2024), no data in the current study was captured on whether participants were living with HIV.

This study shows the cycle of transience versus stability; participants experience a cycle where the quest for fleeting connections through chemsex leads to a neglect

of more profound relationships, which might be crucial for their long-term fulfilment. This dynamic adds a layer to the existing discourse, showcasing how the immediate satisfaction from chemsex can inhibit the development of lasting emotional bonds. This nuanced perspective shifts the focus from purely negative outcomes to the complexities of human connection, where the very act intended to foster intimacy ends up compromising it. The findings suggest that chemsex significantly influences the dynamics of intimate relationships, often leading to heightened emotional and physical vulnerability among participants in Ireland. This study encourages a more comprehensive exploration of how chemsex affects not just physical health, but also mental and emotional well-being, particularly in terms of relationship dynamics. This unique finding enriches the understanding of chemsex by illustrating how the pursuit of transient experiences can paradoxically lead to deeper isolation and a decline in meaningful intimacy, an aspect that has not been fully explored in previous research.

5.3. Incongruence

Baumeister et al. (1985) theory of identity conflict refers to “the problem of the multiple defined self whose definitions have become incompatible” (p. 408). When a person's values, behaviours, and beliefs are misaligned, they may undergo an experience of dissonance and psychological discomfort and ultimately strive for consistency (Festinger, 1957). The findings reveal previously unexplored aspects of incongruence in chemsex experiences, which can be both empowering and disempowering. Some participants felt liberated, using it to escape everyday stress, while others experienced loss of control and negative consequences. This duality, both life-affirming and destructive, highlights the internal and relational imbalance participants face, revealing previously unexplored complexities of chemsex. This

sense of incongruence within participants themselves and their interpersonal relationships demonstrates an imbalance between contrasting experiences and emotions.

5.3.1. Othering

In the subtheme *Othering*, all participants had more command over their chemsex engagement than others. Through the interviews participants illustrated the concept of others possessing less power and control over their chemsex use, this framing gave rise to a phenomenon of hierarchy within the chemsex scene. This elucidates how sociocultural factors, including stigma and community attitudes towards drug use, shape the experiences of individuals engaging in chemsex in Ireland. However, when integrated with the subtheme *Walking a Tightrope*, gave insight into the perceived denial that participants were experiencing, this psychological distancing seemed to provide a sense of safety and distance. Rather than viewing chemsex as simply an attempt at pleasure or escape, the findings reveal that participants are constantly negotiating their sense of autonomy and vulnerability. The complexity of control, vulnerability, denial, and shame introduces barriers to emotional closeness, trust, and authentic connection, making it difficult for participants to achieve the deeper intimacy they may desire in stable, long-term relationships.

Participants' accounts of hierarchy and power and control within the *Othering* subtheme correspond closely with the notion that chemsex environments serve as venues for hegemonic masculine social practices, notably domination, sexual promiscuity, and stoicism. In line with Connell's (2005) assertion that gay and bisexual men appropriate hegemonic masculinity when it is "desirable and doable" (p.12), respondents emphasized their own command over chemsex engagement in contrast to a subordinate "other," thereby reinforcing a dominance hierarchy within

the scene. The tension between control (of self, substance use, and sexual performance) and vulnerability (tightly regulated or suppressed) is ever-present: participants pursue the hypermasculine ideal of invulnerability and endurance yet must also navigate the attendant shame and an authenticity gap that impede the formation of genuine intimacy.

The experience of ‘othering’ was also discovered in qualitative research by Healy-Cullen et al. (2024) utilising Critical Discursive Psychology as a theoretical and methodological framework through interviews with 8 gay men engaging in chemsex in Dublin. They discovered how some participants engaging in chemsex view themselves as successful over their chemsex use, but that those struggling with its use are seen as unable to manage self-control. The research demonstrated the often-contradictory discourse of participants regarding their engagement with chemsex. The participants often distanced themselves from problematic use and located themselves instead in a “culturally acceptable” (Healy-Cullen et al., p.6) manner, referencing, their engagement as being one of power and responsibility and holding a “horror” (p.6) of the harms that can occur. This reinforces the narrative of Intra-minority Gay Community Stress Theory (Pachankis et al., 2020) discussed in the literature review. As highlighted in this study, *Othering* within chemsex, can further isolate those within the community itself as they endeavour to navigate both the broader societal prejudices and the internal pressures within their community.

Etherson (2023) introduced Shame Containment Theory (SCT), which suggests that shame, though distressing, serves an evolutionary role in promoting prosocial behaviour and maintaining social bonds. Disrupted attachment can lead to trait-shame, where individuals internalise feelings of defectiveness and develop shame containment strategies (SCS) that may begin as protective but later become

maladaptive. When shame is uncontained, often due to exposure or scrutiny, it can trigger distress and responses such as self-attack, avoidance, or rescuing. In chemsex contexts, participants' tendency to view others as having less control over their drug use can function as an SCS. By positioning themselves as more in control, they psychologically distance from their own vulnerabilities, containing shame. This reflects how *Othering* reinforces hierarchies in chemsex, offering emotional protection while maintaining disconnection. It is also important to note that GBMSM still enmeshed in paralyzing shame, who fear disclosure to even anonymous researchers, remain invisible, their experiences unvoiced and absent from the data and thus voices may not be captured in such context. Critically, those men who did come forward for interviews may well represent a subset who have begun to mitigate shame, perhaps through supportive peer networks, prior therapeutic work, or strong queer community ties. In IPA terms, they were able to 'bracket' enough internal discomfort to speak openly, giving voice to experiences of intimacy, risk, and connection.

The Velvet Rage (Downs., 2005) highlights the complexities of identity, self-perception, and societal expectations of gay men. It recognises that individual experiences of shame and resilience are shaped by broader cultural and structural forces. The book underscores how internalised shame, stemming from heteronormative expectations and early-life rejection, often leads to maladaptive coping mechanisms. The perception of others as less controlled or more reckless in their drug use could serve as a protective mechanism against confronting one's own unresolved shame. This self-distancing, in turn, reinforces the very cycles of avoidance, denial, and vulnerability that shape participants' experiences in chemsex. When paired with *Walking a Tightrope* theme, what appears to be an

assertion of control is, in fact, a precarious negotiation of shame, belonging, and perceived safety. Rather than merely exercising agency, participants are navigating a complex psychological landscape where maintaining autonomy requires constant effort to avoid confronting deeper vulnerabilities. Similarly, Joloy (2023) found in their qualitative study, through a queer and intersectional lens, that men engaging in chemsex are describing the ostracization and stigma is not isolated to public health, but amongst their peers, including other gay men. Participants disclosed being met with judgemental attitudes, moral reprehension and a feeling of inferiority. Joloy (2023) reported that participants described experiences of intimate relationships being ended due to people discovering their chemsex use, thus creating a perpetuation of shame and isolation. Participants in the current study exhibit signs of cognitive dissonance; their internal conflict regarding chemsex use is projected onto the behaviour of others, thereby creating a psychological space between their own use and the labelling of others. Microaggressions, subtle and often unintentional forms of discrimination, negatively impact the mental health of LGBTQ+ individuals, reinforcing internalised stigma and increasing psychological distress (Nadal et al., 2011; Balsam et al., 2013). For GBMSM, this internalised stigma may manifest in queer spaces through racialised fetishisation, body shaming, or exclusion, compounding feelings of alienation (Han, 2007; González et al., 2021). Cognitive dissonance is a common occurrence in addiction patterns, particularly when people's behaviour strays from their ideal standards or norms. Furthermore, decisions may be shaped by commonly accepted certitudes instead of personal convictions or motivating beliefs (Mäkelä 1997; McCusker, 2001).

Participants' abilities to distance themselves from others' experiences gave way for them to feel more confident in their use. When questioned further, there is a

realisation that seemed to become apparent in their chemsex use. This is clear in the subtheme, *Walking a Tightrope*, where distancing seems to provide them with a sense of power and control but ultimately results in maladaptive coping mechanisms. This tension between control and powerlessness can extend to their intimate relationships. As outlined in this study; on one hand, the desire for control leads participants to keep emotional distance or avoid deeper connections, fearing vulnerability. On the other, participants seem to feel powerless in maintaining healthy, stable relationships, as the chemsex dynamic reinforces feelings of instability and insecurity.

The problematic nature of chemsex can be discerned through its impacts on relationships, work, mental health, and the ability to lead a healthier lifestyle (Lagoida et al., 2025; Capodieci et al., 2025). Individuals might perceive control over their chemsex behaviour while failing to recognise the broader difficulties it introduces into their lives (Platteau et al., 2019). This research looks at the significance this *Othering* gives to intimate relationships and breaks new ground in understanding. It highlights how *Othering* can reinforce power dynamics where one partner is viewed as superior or more "normal" than the other. It illuminates how the emotional distance, power struggles, and lack of mutual respect can make relationships unsustainable. Furthermore, it offers a fresh perspective into how feelings of alienation are internalised and manifested in participants' behaviours and emotions.

The sense of differentiation from others, the perceived control, and the protective layers of denial and displaced shame are all lived experiences that shaped participants' engagement with chemsex. This *Othering* becomes a key driver in development and maintenance of chemsex, revealing a more complex psychological and emotional landscape than is typically explored in existing

research. As a result, can undermine participants' ability to form and sustain fulfilling intimate relationships.

5.3.2. Jouissance

The theme of *Oscillating Between Pleasure and Pain* encapsulates participants' struggles between two opposing forces, resonating with the psychoanalytic concept of jouissance (Lacan, 1960). This theme reflects a perceived oscillation, akin to being caught on a pendulum, where individuals swing between the intense desire and sexual liberation facilitated by chemsex, and a state of shame and regret. Participants articulated a sense of entrapment, grappling with the cyclical nature of their experiences and the challenge of extricating themselves from these repeated patterns. At first, Lacan used the term *jouissance*, traditionally translated as the enjoyment of judicial rights, property, and sexual orgasm to describe feelings of intense satisfaction tied to the fulfilment of basic biological needs (Evans, 2006). Later he evolved a nuanced distinction between *jouissance* and pleasure, arguing that the pleasure principle serves as a mechanism that limits the subject's enjoyment, maintaining a balance to avoid excess (Lacan, 2013). In the context of chemsex, this dynamic takes on a particularly intense form. Individuals often seek to transgress the boundaries set by the pleasure principle, using drugs to push beyond the usual limits of sexual pleasure and experience heightened states of *jouissance*. However, this relentless pursuit often leads to a paradoxical outcome; while chemsex initially amplifies pleasure, it also erodes emotional intimacy in relationships. As demonstrated through the theme *Oscillating Between Pleasure and Pain* the transgression of the pleasure principle through chemsex not only brings physical and psychological pain but also inflicts deep wounds on intimate relationships. The excessive pursuit of *jouissance* leads to hurt, isolation, and the potential breakdown of intimate relationships, reflecting Lacan's notion that crossing

the limits of the pleasure principle inevitably results in suffering and even, metaphorically or literally, death (Lacan, 1960).

Chemsex holds a tension between desire and its fulfilment, alongside the inherent contradictions of human subjectivity, is prominently featured in participants' accounts. It appears that these states serve to numb the remorse participants feel regarding the consequences they attribute to drug use. Four of the participants utilised chemsex while in intimate relationships and described how they became more absorbed in the pursuit of jouissance by withdrawing from the relationship. While the experience of chemsex may involve shared physical intimacy, it seems to lack the deeper emotional bond that characterises healthy intimate relationships. This research shows how the pursuit of extreme sexual pleasure often comes with significant personal and relational costs. This pursuit of heightened sexual pleasure can overshadow and undermine the emotional intimacy that is essential for a healthy relationship, altered sexual expectations, and secrecy. All these issues were highlighted by participants. Cartner and Farrants (2024), in an IPA study with nine UK participants who had abstained from chemsex for a year, identified the theme "functional sex and interpersonal dehumanisation" (p.38). Participants described using sex to maintain emotional distance, viewing partners as tools rather than people to minimise perceived threat. Though this strategy aimed to avoid relational harm, it created a new conflict: a longing for intimacy they were too afraid to pursue. However, participants of this research have experienced abstinence and treatment, alongside this the advertisement was circulated through Controlling Chemsex, a service dedicated to those struggling with chemsex use. In which case there is a discrepancy between the participants of the current study; all but two had sought support for their use.

This study presents an important contribution to research by offering an understanding of the impact of jouissance in the context of chemsex and intimate relationships. The drive for extreme, insatiable pleasure can overshadow the emotional bonds that sustain healthy relationships, leading to a rupture of trust, altered sexual dynamics, and ultimately, isolation or the breakdown of the relationship. As illustrated by the subtheme *Expanding Sexual Self*, chemsex gives a sense of liberated boundaries, where the usual inhibitions and shame associated with sexual preferences are markedly reduced. Participants articulated an intense shift from cognitive entanglement to a state of being present in the corporeal moment. However, for some participants, it results in a battle with conflicting desires. The interwoven nature of these feelings is often fraught as they wrestle with the significant hurt inflicted upon themselves and others due to their drug use, while simultaneously contending with the elation and freedom it brings. This duality underscores the enthrallment and distress intrinsic to the chemsex experience, illustrating the concept of desire as a driving force, making it harder for individuals to build and maintain meaningful, emotionally connected relationships outside the chemsex environment.

5.4. Self-discovery

This study uncovers a significant insight into a missing piece of understanding surrounding chemsex; the search for meaning. Components of self-discovery were found in various sections of GETs. This section describes the broader exploration of how participants define themselves and relate to others in a world that increasingly values personal freedom, individualism, and the breaking down of traditional norms. Their awareness of the desire to live in alignment with their true self, values, and desires. Alongside awareness of societal expectations and norms

and how chemsex gives a possibility of embracing a more genuine way of living. Little research has explored this important element of the experience of those engaging with chemsex and how it is a valuable perspective to holistically understand them. This dynamic raise important questions about the authenticity of the self-exploration that chemsex seems to offer; is the identity or sexuality experienced during these sessions a true reflection of the individual, or is it a fleeting, drug-induced, projection?

5.4.1. Seeking Authenticity

Set and Altinok (2017) stated “accepting oneself also includes the acceptance of oneself’s sexual orientation as it is and avoiding self-alienation” (p.10). Participants highlighted a sense of struggle in their authentic selves, and solace in genuine relationships. Chemsex gave them opportunities to escape from the monotony and pressure of intimacy, it tackled narratives they held about their sexual selves, and facilitated a challenging of societal expectations. There is a sense of craving to live an authentic life, characterised by a sense of freedom, being true to oneself and desires. However, participants seem to struggle with the consequences of this. This was demonstrated in the theme *The Labyrinth of Relationships*, where participants seemed startled by the questions surrounding intimacy, despite the questions being sent in advance. Throughout the interviews inner turmoil regarding their chemsex use and its impact on relationships was evident. This turmoil was represented in the inner conflict and emotional upheaval that accompanied most answers.

Chemsex seemed to offer a temporary alternative sense of self, allowing participants to explore aspects of their identity that they might otherwise suppress. This exploration led to an evolution of thoughts and self-perception, characterised by ambivalence, hesitation, and conflicting emotions about relationships and the

moral implications of chemsex, as seen in the theme *Between Being and Nothingness*. However, this reliance on substances often blurred the line between genuine self-discovery and drug-induced behaviour, leading to confusion about one's true desires and identity, and challenging their sense of authenticity. One of the primary consequences is the erosion of emotional vulnerability. Participants in chemsex often engage in physical intimacy without the demands of emotional exposure, leading to a compartmentalisation of their intimate experiences. This compartmentalisation can make it difficult for individuals to transition back into emotionally grounded, sober relationships, where vulnerability, emotional investment, and long-term commitment are required. Research by Elizur and Ziv (2001) emphasised the importance of affirming a positive sense of self and sexual orientation as part of being authentic, despite societal pressures. Elizur and Ziv (2001) described how LGB identities emerge as individuals navigate and make sense of their lived experiences related to their sexual orientation. Through the process of confronting and integrating feelings of inner confusion, ambivalence, and fear of rejection, they come to embody an affirmative sense of self, allowing for the acceptance and authentic expression of their same-gender feelings.

Rodríguez-Expósito et al. (2024) surveyed 284 GBMSM in Spain utilising questionnaires in a cross-sectional study. Their study aimed to analyse the relationship between internalised homophobia, personality traits, anxiety, and depression on sexualized drug use patterns, specifically focusing on their potential to predict future problematic chemsex use. Additionally, it explored psychological differences among individuals based on their mode of chemsex participation. They discovered that higher levels of conscientiousness are negatively correlated with the likelihood of engaging in chemsex; often conscientiousness leads individuals to

avoid risky, impulsive behaviours, be less enamoured by peer-pressure, and place importance on self-control.

These interviews seemed to offer a structured avenue for self-reflection, with each theme guiding participants to contemplate and evaluate perspectives. Two of the eight participants had engaged in therapy for their chemsex use and were insightful and descriptive in their interviews. The fact that the interviews themselves acted as a catalyst for introspection implies that reflexivity may serve as a mitigating factor, potentially slowing down the intentionality behind their substance use. By prompting participants to critically examine their motivations, desires, and the impact of chemsex on their lives, the interviews may have inadvertently encouraged a deeper engagement with their own experiences. This may give appreciation into the usefulness of therapeutic space and interventions.

Yan et al. (2020) further explored the relationship between self-concept, social anxiety, and substance use, finding that lower self-perception predicted greater increases in substance use issues, mediated by social avoidance and distress. This suggests that enhancing positive self-perception and providing coping strategies for social anxiety could reduce substance use problems. For many in the current research, the struggle to be their authentic selves was pronounced. All participants demonstrated the contrast between their chemsex and sober selves. Feelings of guilt and shame often materialized in their sober state, as they questioned the morality of their actions during chemsex. *Fleeing Vulnerability* highlighted the difficulty they faced in opening to others and the impact of chemsex on their ability to form genuine, authentic connections or to evade aspects of themselves.

The essence of participants' experiences with chemsex lies in a disrupted sense of authenticity, where the boundaries between the genuine self and a chemsex-driven

identity blur. This study demonstrated how the identity fragmentation makes it difficult for participants to form authentic, emotionally grounded relationships, leading to more shallow or performative connections. Furthermore, as their sense of self becomes fragmented, they may struggle to present a true version of themselves to their partners, potentially leading to shallow or performative connections. This study brings novel insight into how the tension between exploration and confusion can reflect the deep impact of chemsex on self-understanding and sense of place in the world, leaving those engaging navigating a constantly shifting landscape of relationships and identity.

5.4.2. Sexual Freedom

This study finds that chemsex seems to allow an opening up of sexual experiences. It introduces a novel understanding of chemsex as a space where participants experience reduced sexual inhibitions, move from cognitive to bodily focus, and engage in expansive sexual exploration, offering a more nuanced perspective that goes beyond the negative narratives typically associated with chemsex. As Ireland becomes increasingly liberal in its views on sexuality (CSO,2022), the study reveals that some people use chemsex to enhance sexual compatibility and overcome previous limitations imposed by conservative cultural norms. In the subtheme *Expanding Sexual Self*, participants shared experiences of sexual expression facilitated by chemsex and their inner monologue being halted. Participants were monopolised by their inner critic and struggled during sexual experiences. This was particularly evident in the impact of body image; participants reported using chemsex to overcome insecurities related to body image and to feel more confident during sexual encounters.

Body image issues are prevalent within the GBMSM community, where there is a greater prevalence of body dissatisfaction among gay men, and a higher rate of gender non-conformity due to the impact of heterosexism regarding the male gaze (Wood, 2004). Mundy et al., (2025) found chemsex is often used to enhance sexual confidence, reduced body-image and performance anxieties. Gay men describe higher marks on experiences of self-sexual objectification, body surveillance and body shame (Engeln-Maddox et al.,2011). With the emphasis on body image and physical appearance ever present in gay men, bodily satisfaction is of high importance as part of self-worth (Wood 2004, Yelland & Tiggemann, 2003).

The impact of the media portrayal of gay male bodies, and the depictions of beauty, it plays a role in bodily dissatisfaction, pressure on conforming, and the ostracization of those who do not fit the narrative in both the gay/queer community and the heterosexual one (Wood, 2004). In this study participants recount a dissolution of personal boundaries, wherein chemsex becomes a channel for the release of deeply held shame surrounding their body image. Furthermore, participants in this study describe how chemsex allows a form of embodiment over cognition, ingratiating into a more all-encompassing sexual experience. Through chemsex, individuals can experience a departure from the incessant chatter of the mind which allows for a transformational connection with their bodily sensations and physical presence. By quieting the narrative voice, participants report a significant decrease in anxiety, fostering a more serene and pleasurable sexual experience. This gives way to the protective components chemsex may hold to emancipate participants from socially constructed rules, sexual shame, or critical bodily narratives. As Garza-Mercer (2007) states:

“When conceived as liberating and enjoyable, sexual pleasure could be experienced with great satisfaction and release; when perceived as sinful or

aberrant, sexual pleasure could be experienced with guilt and turmoil" (p.118).

Participants in this study displayed a need for substances to alleviate their sexual anxieties. This abandonment of boundaries engenders a sense of liberation where the usual inhibitions and shame associated with sexual preferences are markedly reduced. In the study by Di Feliciano (2023) which was formed by interviews with gay men living with HIV. Endeavouring to understand the role of place by illustrating how chemsex exemplifies a tangible, relational geographic interaction among various human and non-human actors, places (both physical and digital), imaginations, and desires. Di Feliciano (2023) echoes the results of this study, that chemsex is usually associated with enhanced sexual pleasure and allows an improvement to their sexual life and experimentation.

The current paper underscores the significance of sexual practices in the relational creation of place. This study demonstrates the importance of a sex-positive, pluralistic therapeutic approach (Morin 1995; Neves, 2021) that gives clients' permission to dive deeper into the well of their needs. This can assist in their sexual flourishing, instead of applying a rigid framework such as sober sex (Kunalaki., 2019). This liberation as experienced by all participants, allowed them to venture into dimensions of their sexual and emotional selves that might otherwise remain unexplored or suppressed in sober contexts. As illustrated by the subtheme *Expanding Sexual Self*, for the participants of this study chemsex gives a sense of liberated boundaries, inhibitions and shame associated with sexual preferences are markedly reduced. Participants shifted from cognitive entanglement to a state of being present in the corporeal moment. This environment fosters an openness

where desires can be disclosed without the usual constraints, allowing for an expansive exploration of their sexual repertoire. This study highlights the transformative aspect of chemsex, where individuals move beyond intellectual anxieties to a more embodied, anxiety-reducing state. This study sees chemsex as not just a hedonistic activity, but as a context for self-exploration and the reduction of shame tied to sexual identity.

5.4.3. Meaningful Attachments

Participants in this study yearned to engage with others in a way that reflected their identity, fostering deep emotional bonds without compromising their own sense of self. Yet for most, this seemed like a struggle. The sub-theme *Fleeing Vulnerability* demonstrates the experience of feeling confined within intimate relationships, highlighting the suffocating nature that these dynamics can sometimes entail for participants. Participants describe intimacy as overwhelming, not a source of comfort. Participants frequently illustrated defensive strategies through a cautious approach to interpersonal closeness and vulnerability. However, it's important to note that some of the participants prioritise personal freedom and independence, which may lead them to avoid deep emotional attachments. This could stem from a desire to maintain authenticity or to explore relationships and sexual freedom without the perceived constraints of traditional attachment and seek connections that align with their need for autonomy.

Blanc et al. (2023) uncovered the impact of childhood adversary, trauma and attachment styles on those engaging in chemsex. This research carried out a monocentric observational study endeavouring to assess the mental health history and attachment style of 71 GBMSM who were seeking support for their problematic

chemsex use. 87% had an insecure attachment style, 38% were preoccupied, 23% fearful and 24% dismissing. This highlighted the need for reaching beyond the cognitive and behavioural components and instead looking at the historical aspects of childhood development as influencing factors of chemsex engagement. Furthermore González-Baeza et al. (2023) presents a detailed examination of the relationship between adverse childhood experiences and the likelihood of engaging in chemsex. The study found that those engaged in chemsex had higher instances of avoidant-insecure attachment and poorer emotional regulation skills. This suggests that insecure attachment styles and emotional dysregulation are significant factors in chemsex engagement.

Participants in this current study illuminated a deep sense of longing for connection with others and the desire of an intimate relationship. This crucial sense of seeking meaning in their intimacy seemed to point them towards chemsex. The participants in the study by Cartner and Farrants (2024) described how dehumanising former partners through sexual encounters provided them with a sense of safety necessary to engage in sexual acts. However, this dehumanisation also hindered the formation of intimate interpersonal bonds. This behaviour led these men into a new interpersonal dynamic where their desire for emotional and relational depth was, paradoxically, fulfilled by separating sex from intimacy, resulting in a recurring cycle of interpersonal relationship disappointment. Research may suggest that individuals who engage in chemsex might experience insecure attachment styles, such as anxiety or avoidance in relationships. However, Cartner and Farrants (2024) highlight how the decision to engage in chemsex is influenced by multiple, deeply personal factors, reflecting an interplay between one's self-perception, perceptions of others, and the dynamic between self and other. The fleeting sense of relief and connection provided by chemsex could be understood as a maladaptive strategy to

manage the distress arising from attachment difficulties. As this current research did not investigate adverse childhood experiences, no definitive correlation between the experiences of participants' childhood experiences and their chemsex use can be made. However, it expands the boundaries of existing knowledge of avoiding relationships and vulnerability, and leaning towards substance induced intimacy, which could be markers of an insecure attachment style. In a study by Starks et al. (2014), securely attached gay men reported higher levels of sexual communication and more frequent sexual activity with their main partners. Conversely, those with avoidant attachment styles engaged in more casual unprotected sex, suggesting that attachment security is linked to healthier sexual behaviours and relationship satisfaction.

Participants described the desire for deep, authentic bonds, yet these intimate dynamics often felt confining rather than comforting, prompting individuals to employ defensive strategies and distance themselves emotionally. Some participants turned to chemsex as a means of seeking relief and connection in ways that seemed more manageable. This study provides fresh understanding on how there is a complex interplay between the search for meaningful relationships and the desire to avoid the perceived limitations of emotional intimacy, offering an original perspective on attachment and chemsex.

5.5. Implications for Practitioners, Supervisors and Trainers

This study aims to explore the meaning of intimate relationships for MSM involved in chemsex. This section outlines implications and recommendations for practitioners, supervisors, and trainers. The research highlights unique factors within the context of chemsex and intimate relationships, offering insights into challenges such as loneliness, incongruence, and the search for meaning that draw

participants into the chemsex scene. With this knowledge, a deeper understanding and better care can be provided.

5.5.1. Implications and Recommendations for Practitioners

The findings from this study offer critical insights into the multifaceted experiences of individuals engaging in chemsex and highlight the need for psychotherapists to adopt nuanced, culturally informed approaches to their therapeutic work. In a study by Evers et al., (2019) 23% from a sexual health clinic reported a need for professional counselling, with 56% preferring to be counselled by sexual health experts. The research underscores the unique challenges faced by couples and individuals in Ireland when seeking therapy, as resources for dealing with chemsex-related issues are often inadequate, with only a limited number of accredited therapists trained in chemsex (Sex Therapists Ireland N.D).

This study reveals the sense of intimate relationships as enigmatic, smothering, and emotionally exhausting. Therapists could assist clients with recognising this dynamic and explore how such feelings of being emotionally engulfed might contribute to their use of chemsex as an escape from the emotional labour involved in intimate relationships. Therapists could explore how chemsex might serve to avoid emotional vulnerability, and work to help clients reconnect with their authentic emotional selves and facilitate healthier ways to approach relationships. The study found that intimacy can be discovered through chemsex. Demonstrating the value of therapists understanding chemsex as more than an individual behaviour; but rather a coping mechanism for navigating the complexities of life and the quest for acceptance. Therapists having a fuller comprehension would assist clients in understanding how chemsex might help them navigate and negotiate their desires,

identities, and relationships, especially when mainstream norms around intimacy may not apply.

The research contributes a novel existential perspective, shifting the focus from behaviour and social context to the personal meanings and anxieties surrounding chemsex. This study suggests that Existential Therapy (Deurzen, 2012) could be beneficial in the clinical support of clients. It emphasises the importance of understanding clients as contextual beings, acknowledging their freedom of choice in the chemsex scene, and exploring the meanings they derive from their sexual lives. Koestenbaum, (1974) describes; “meaning refers to total life and to the fulfilment of its potential....Existential or meaningful sex is sex experienced as an integral part of a beautiful life” (1974, p. 8). Existentialism encourages therapists to challenge normative assumptions about chemsex practices and engage collaboratively with clients to understand their subjective experiences of interconnectedness (Berry & Barker, 2014).

Finally, intersectionality is the cornerstone of therapeutic work and drawing upon cultural humility is a key component of working with marginalised groups. Cultural humility is a lifelong process of self-reflection and learning that acknowledges the complexity of identities and the limits of one's perspective (Clark et al., 2011). Cultural humility prioritises ongoing engagement, power awareness, and respectful partnerships (Tervalon & Murray-García, 1998). In Ireland, this means recognising the historical marginalization of LGBTQ+ individuals and the enduring impact of Catholic conservatism. The lasting influence of Catholicism in education, legislation and society (Ryan, 2003) underscores the need for inclusive, affirming spaces. By

fostering cultural humility, Ireland can move beyond legal equality toward genuine social inclusion, well-being, and meaningful support for LGBTQ+ individuals.

Recommendations for Practitioners

1. **The Role of Chemsex in Queer Intimacy:** Chemsex may be a means of navigating internalised shame, societal rejection, or loneliness. Therapists can help explore whether this form of intimacy is truly fulfilling and sustainable, or whether it creates new barriers to authentic connection.
2. **Emotional Intimacy and Safety:** Therapists can explore whether chemsex is being used to avoid deeper emotional vulnerabilities or if it has become an unsustainable method of bonding without substances.
3. **Existential Therapy:** By using existentialism, couples can investigate how chemsex reflects struggles with personal responsibility, authenticity, and the search for meaning.
4. **Pluralistic, Sex-Positive Approaches in Therapy:** Therapist can validate diverse expressions of sexual desire while encouraging clients to explore how chemsex has influenced their sexual dynamics.
5. **Rebuilding Intimacy Post-Chemsex:** Therapists can help couples assess whether their previous forms of intimacy were genuine or substance-fuelled, guiding them to foster more sustainable emotional and sexual connections.
6. **Integrate Cultural Humility:** Ireland's evolving LGBTQ+ landscape, increasing migration (CSO, 2024), and the lingering influence of Catholicism (DOE., 2023) shape how chemsex and intimacy are experienced. Therapists should avoid assuming a singular cultural framework. For example, migrant MSM in Ireland may encounter cultural tensions, language barriers, and differing norms around intimacy, masculinity, and disclosure.

5.5.2. Implications and Recommendations for Supervision

Participants in this study demonstrated how multifaceted intimate relationships in the context of chemsex are. This study outlines the impact of sexual and relational scripts that are normative and socially constructed. The findings highlight the need to consider the emphasis given to embodied attitudes, assumptions, and beliefs given by the client and the supervisee and the revealing investigation of their interrelationally derived worldview. Instead of these preconceptions, they could, instead, be understood in consideration of the choices and inimitable meanings of their lived experience (Berry & Barker, 2014). The supervisor can also endeavour to create a safe environment, where a supervisee can be vulnerable and authentic, thus impacting their personal development (Stoltenberg & McNeill, 2012).

Recommendations for Supervisors

- 1. The Seven-Eyed Model as a Framework:** This model which has emphasis on context, helps therapists allow supervisors to address complex issues and helps give insight into how factors like marginalisation, stigma, and community norms impact clients (Hawkins & Neves, 2024)
- 2. Ongoing Training:** Undertake in-depth training to ensure that they are up to date with the growing research and work surrounding chemsex.
- 3. Assisting Meaning-Making:** Help the supervisee to unpick the meanings their clients make, assisting them to a greater depth in understanding of the phenomenological essence of their sexuality and fostering of authentic sexual experiences.
- 4. Cultivate Cultural Attunement in Queer Relationships:** Endeavour to cultivate cultural sensitivity through Queer Theory and other frameworks that

challenge traditional views of relationships, sexuality, and identity, enabling therapists to work with clients in a way that honours their unique experiences.

5.5.3. Implications and Recommendations for Training

Studies have highlighted the importance of unambiguous, up-to-date information, and culturally sensitive interventions to support men engaging with unsafe sexual practices. (Kelly et al., 1995). Based on the findings, this thesis advocates for the development of comprehensive psychotherapeutic training that specifically address the unique challenges posed by chemsex in Ireland. Such programs must move beyond surface-level prevention strategies to address the complex emotional, relational, and social dynamics that influence these practices. Training should be conducted through the lens of Queer Theory, to effectively support men engaging in chemsex, which challenges the traditional assumptions and norms surrounding gender, sexuality, and relationships. It is crucial that these interventions remain mindful of the implicit biases, by recognising and challenging these normative assumptions, training and intervention programs can be tailored to meet the specific needs of queer individuals, fostering a more inclusive and supportive environment

Recommendations for Trainers

- 1. Understanding Relationship Dynamics:** Training should include working with couples and ensuring that there is a nuanced understanding of the diversity of relationship dynamics, various relationship types, power dynamics, and impact of addiction.
- 2. Implementing Culturally Sensitive Approaches:** Cultural components are key for therapists to understand, this includes minority stress, history of the

LGBTQIA+ community, and Intra-minority Gay Community Stress Theory (Pachankis et al., 2020).

3. **Nuanced Understanding of chemsex:** Training should ensure that therapists are aware that chemsex engagement is not a monolith and that unique manner of chemsex engagements and motivations are present.
4. **Integrative Modalities:** Training should draw upon integrative modalities, providing a comprehensive rather than an abstinence only approach can help clients build a more satisfying and fulfilling life.

5.5.4. Implications and Recommendations for Health Care Workers

GBMSM have indicated a preference for receiving drug-related support within sexual health clinics rather than through standalone drug and alcohol services (Bourne et al., 2015; Evers et al., 2019; Tomkins et al., 2018). This highlights the pivotal role of sexual health clinicians in supporting individuals struggling with chemsex. The research reveals that chemsex is often used as a means of enhancing intimacy, sexual expression, and self-confidence. Adopting a trauma-informed, relational, and community-based approach can empower practitioners to offer holistic, non-judgmental, and effective care to MSM engaged in chemsex. Recognising that chemsex may be linked to experiences of loneliness and a desire for connection can also guide practitioners in directing individuals toward appropriate support groups or alternative ways to foster a sense of belonging

5.6. Recommendations for Future Research

This research calls for a more multifaceted and nuanced way of thinking about chemsex. Further research is needed to reflect the subjective and varied ways

GBMSM define and use the term. This is crucial to the therapeutic responsibility - any privileging of academic definitions over lived experience risks invalidating clients. More critical thinking around chemsex has been called for by many academics (Drysdale, 2021; Florêncio, 2021; Møller & Hakim, 2023; Moyle et al, 2020; Pienaar et al., 2020b, Hammerstein and Billieux, 2024). This is echoed by the current research, as its findings on intimacy and incongruence point to the need for a more holistic approach to client support. This researcher posits that a Queering Intimacy narrative needs to be considered. Queering Intimacy challenges the status quo of heteronormative gendered perspectives of intimacy normative, heterogendered ideas of intimacy (Umberson et al., 2015; Goldberg & Allen, 2013; Oswald et al., 2005), ultimately broadening the understanding of how people can connect with one another, emphasising diversity, inclusivity, and the breaking down of restrictive social norms. This study questions traditional contexts of intimate relationships, exploring intimacy beyond conventional heterosexual, cisgender, and monogamous frameworks.

While marriage equality marked a significant milestone in LGBTQ+ rights, legal recognition does not automatically translate into social acceptance or personal fulfilment. Kerrigan (2020) argues that while marriage equality has increased visibility, it has also led to a regulatory function that configures queer visibility through a homonormative lens, potentially marginalizing non-conforming identities. Furthermore, that it may also have inadvertently reinforced normative relationship structures, leaving non-conforming individuals further isolated (Kerrigan, 2020). Further research could explore chemsex, intimate relationships and the impact of the marriage equality act.

Further research is needed into how chemsex alleviates negative self-talk. Bonell et al. (2023) examined how societal stigma shapes unattainable appearance ideals for

queer men, leading to internalised pressures and negative body image. These ideals, driven by hegemonic masculinity, create significant distress. Deeper exploration could clarify how stigma influences chemsex use and queer male identity.

More research is needed on how GBMSM conceptualise consent in chemsex. It is also possible that the framing of the study focusing on intimate relationships led participants to prioritise narratives that emphasised consensual dynamics. Research suggests that within chemsex subcultures, norms around sex, consent, and bodily autonomy may differ from conventional understandings, potentially influencing how participants discuss or conceptualize non-consensual experiences (Drückler et al., 2021).

Further research, with an intersectional lens, is needed to help recognise diverse identities. In the context of Ireland's growing cultural and linguistic diversity, it's important that future research adopts more inclusive strategies, such as translation, multilingual researchers, or interpreters to ensure that there is a representation of voices from migrant communities. Furthermore, among the participants, two were Black men, though only one explicitly discussed racial marginalisation. Research by Mahawatte (2023) has illuminated the hierarchies within chemsex practices, particularly in chemsex porn and how the "white-raced body as the beneficiary of the chemsex party scene" (p.638). Research often focuses on GBMSM, excluding trans and non-binary individuals from chemsex studies and definitions.

5.7. Strengths and Limitations

Overall, this research serves as a crucial stepping stone toward a more comprehensive exploration of intimate relationships within the context of chemsex.

By shedding light on relational aspects of chemsex, this study paves the way for nuanced frameworks to address the complex challenges faced by individuals and couples. Moreover, it opens the possibility for integrating existential psychotherapy into therapeutic approaches. This may offer a more holistic approach to support and intervention. IPA provides a robust research design with innovative data collection and rigorous analysis, offering a deep, nuanced understanding of participants' experiences. This is especially valuable for exploring complex, sensitive topics like chemsex and intimate relationships. IPA captures rich personal narratives, centring marginalised voices.

One of the inherent limitations of IPA is its reliance on small sample sizes, which, while appropriate for the idiographic focus of the methodology, restricts the generalisability of the findings to wider populations. This study, which included only eight participants, reflects this limitation. Moreover, the sample was characterised by limited ethnic diversity and a narrow geographical spread, with all participants based in specific regions of Ireland. These demographic constraints may influence the transferability of the findings, as the experiences captured may not reflect the broader spectrum of perspectives within the wider GBMSM community. Another limitation is the exclusion of transgender and intersex individuals from the study. This highlights the need for future research to adopt a more inclusive approach to sampling to capture the complexity and diversity of experiences across gender and sexual minority populations.

The exclusion of couples, including those in polyamorous relationships, is a limitation in research on intimate relationships within the context of chemsex. Focusing solely on individuals overlooks how partner dynamics shape behaviours and emotions. Studying only one partner risks biased or incomplete data, not fully capturing relational perspectives.

5.8. Conclusion

The aim of this thesis was to explore the meaning of intimate relationships for GBMSM engaging with chemsex. IPA was the chosen research method to understand participants lived experiences. Through in-depth interviews, the study gave rich examples of how chemsex not only reshapes but often complicates intimate connections, presenting a paradox where heightened intimacy is juxtaposed with profound isolation. The findings contribute to a deeper understanding of the emotional, relational, and existential dimensions of chemsex. One of the primary revelations is the sense of overwhelm created by intimate relationships, as outlined in the GET *The Pressure of Intimate Relationships*. Relationships, typically associated with comfort and emotional support, were experienced by many participants as enigmatic, overwhelming, and smothering. This exacerbates internal conflict, as participants oscillate between the need for connection and the fear of being emotionally engulfed. In the GET *Between Being and Nothingness*, chemsex offers temporary liberation, an escape from everyday pressures, allowing pleasure, freedom, and moments of self-expression. However, others encounter a darker side, marked by loss of control and negative consequences that destabilise wellbeing. This presents a sense of incongruence: chemsex can be both empowering and disempowering. As the subtheme *Walking a Tightrope* notes, achieving balance in chemsex use is a real endeavour. Participants articulated the judgement they experienced, demonstrated in *Othering*. Protective denial and displaced shame emerged as coping mechanisms for emotional distress.

A significant contribution is the discovery of deep loneliness interwoven through the findings. This highlights the tension between self-realisation and estrangement, as chemsex creates space for identity exploration and disinhibition, at the cost of

emotional and relational authenticity. As highlighted in *Seeking Acceptance*, one of the most compelling findings is the role of chemsex in addressing pervasive loneliness through a unique form of intimacy.

This research illustrates how, in a rapidly changing Irish society still evolving in its embrace of sexual diversity, participants described chemsex as a route to deeper intimacy, free from traditional constraints. For many, chemsex is a socially embedded phenomenon that fosters a unique sense of non-judgmental connection and intimacy. It emerges as a coping mechanism for navigating the challenges of contemporary social life in Ireland, where participants struggle to find meaningful connections and acceptance.

From a therapeutic perspective, these findings highlight the critical need for culturally attuned, integrative approaches that address not only behavioural aspects but also the emotional and relational underpinnings of chemsex. Psychotherapy should move beyond traditional substance frameworks to address existential and identity issues. Existential therapy, may offer benefits by providing a space where individuals can explore the subjective meanings they ascribe to chemsex, facilitating greater self-understanding and emotional integration.

Finally, a vital finding is the importance of understanding chemsex through the lens of Queer Intimacy. For many, it functions as a collective experience where traditional boundaries of intimacy are expanded or distorted, enabling navigation of desires and relationships outside dominant norms.

In conclusion, this thesis contributes to the growing body of literature on chemsex in Ireland by offering a nuanced exploration of its emotional and relational dynamics. The findings underscore the dual nature of chemsex as both a space for connection and disconnection, intimacy and isolation, self-realisation and depersonalisation. These tensions highlight how chemsex creates a unique relational space where

traditional boundaries of intimacy are redefined. The study calls for a more comprehensive understanding of chemsex within the context of GBMSM experiences and for therapeutic approaches that recognise its emotional depth, relational impact, and existential complexity.

5.9. Researcher's Reflexive comment

Writing this thesis involved a journey marked by contrasting experiences; at times the process felt seamless and flowed easily, at other times, it was arduous. There were moments of self-doubt, around the significance of my findings or that my contributions might not add sufficient weight to the field of psychotherapy, as I questioned whether my work was valuable enough to draw meaningful connections. I also had to recognise that when I commenced my discussion chapter, I was 5 weeks postpartum. The sleepless nights, exhaustion of breastfeeding, married with the shift in my identity; becoming a mother, resulted in moments of overwhelm. My lived experience reminded me of the importance of intimacy; changes in identity highlight our inherent vulnerability and adaptability. This shifting landscape of becoming a mother brought moments of loneliness and I craved finding solace with others experiencing the same. This research has given me insight into what intimacy can be; 'into-me-see'. In many ways, the themes of my research mirrored my own lived experience. The individuals in my study spoke of seeking closeness, affirmation, and a space where they could reveal the contradictions of themselves without fear of rejection. Their voices resonated with my own journey at this time, reinforcing the fundamental truth that intimacy is not just about physical closeness but about being truly seen, whether in research, in therapy, or in the raw, unfiltered moments of life itself. Our need for connection, value, and understanding, especially as we navigate the most challenging and contradictory parts of ourselves. Most importantly, being seen and affirmed in times of struggles.

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Appendix

Appendix A: Advertisement Leaflet.



Seeking Research Participants

for a study on **chemsex and intimate relationships.**



This research aims to better understand if **intimacy and romantic relationships** are affected by **chemsex**. This researcher hopes to capture your views and experiences of romantic relationships and how they interact with chemsex.

CAN I TAKE PART?

- Are you a cisgender man who has sex with men?
- Aged 21 or over?
- Living on the island of Ireland?
- Do you engage with chemsex or have you previously?

If you answer 'yes' to all of these then you can take part.

DO I HAVE TO BE IN A RELATIONSHIP?

No. You don't have to be in a current romantic or intimate relationship to engage with the research.

WILL I BE COMPENSATED?

There will be a €20 voucher for those who participate to remunerate you for your time and energy engaging in the interview process.

WHAT WILL I BE ASKED TO DO?

You will be asked for a 45 minute to hour-long interview with me on Zoom or at the HIV Ireland offices in Dublin. Whichever you would prefer.

You will be asked questions regarding your perceptions and experiences of intimate relationships and how/if you feel your chemsex engagement has influenced these.

No data will be shared and interviews will be pseudonymised.

HOW DO I GET IN TOUCH?

You can contact me, Aoife Drury, the researcher on;
aoife.drury4@mail.dcu.ie
if you would like to take part.

ABOUT ME



My name is Aoife Drury. I am an accredited Psychosexual and Relationship therapist carrying out a Doctorate in Psychotherapy at Dublin City University.

DCU Ethical approval received.



Appendix B: Plain Language Statement.

Plain Language Statement

Doctorate Research Project; School of Nursing and Psychotherapy, DCU

Project: Understanding the views and experiences of intimate relationships in the context of Chemsex.

Researcher: Aoife Drury, Doctorate student.

Email: aoife.drury4@mail.dcu.ie.

Introduction

Thank you for your interest in participating in this research project. The following few pages will provide you with further information so that you can decide if you would like to take part in this research. Please take the time to read this information, you may contact me through email to ask questions about anything you don't understand or want to know more about.

What is this research about? This piece of research aims to better understand how intimacy and relationships are affected by chemsex. The researcher hopes to capture your views and experiences of chemsex and how it interacts with intimate relationships. The intention of the research is to add some clarity to current thinking and ultimately make recommendations on support strategies for psychotherapy practice.

Can I take part? You must be over the age of 21 and living in Ireland, be a cisman (a man who identifies with the gender assigned at birth) who has sex with men and has historically or currently engaged with chemsex. You don't have to be in a current partnered or intimate relationship.

What will I be asked to do? This study will take part in a one-on-one interview either on Zoom or at HIV Ireland offices Dublin (your choice). During this time, you will be asked some questions regarding your perceptions and experiences of intimate relationships and how chemsex influences or impacts these. The interviews will be audio recorded to aid the researcher's transcription and should last no longer than one hour.

What if I change my mind? Your participation is completely voluntary, if you wish to withdraw you are welcome to do so up to four weeks from the point of the interview, and the researcher will give you a clear date on the consent form. After that date, the researcher will have commenced analysing data and pseudo-anonymisation would have already occurred. If you change your mind during the interview, you are welcome to stop.

Will there be any risk to me? You are welcome to refuse to answer any questions you do not feel comfortable with, take breaks during the interview, and stop the interview if you wish. Should you need support, there are resources below to assist.

Will there be any benefits to me? It is expected that findings from this study will be used to create holistic and well-defined support and training for those who work with therapists engaging with chemsex. Chemsex support still needs substantial improvements in Ireland, and it is hoped that this research will facilitate this by educating therapists and healthcare providers. Finally, it hopes to provide therapists with recommendations on supporting chemsex clients and their partners to understand their connection with intimacy. There will

be a €20 One 4 All voucher for those who participate, this is funded by the researcher Aoife Drury. It is a small token to remunerate you for your time and energy engaging in the interview process.

What will happen to the information about me? The data in this study is pseudo-anonymised and confidential. Transcripts will be cleaned of all names and identifying information. You will be assigned an ID number and fake names, identifying features, and locations will be changed if quotes are taken from the transcripts. These will be held in a secure location within an encrypted DCU-protected database. Audio recordings will be destroyed once transcribing has occurred; by the close of the day. Finally, this research is being carried out under the support of DCU, who are the data controllers. In line with the DCU Data Retention and Deletion Policy, the research supervisors will ensure the data is safely destroyed once publication has occurred.

Limits to confidentiality. It's important to note that the confidentiality of information provided is subject to legal limitations if you disclose a risk to yourself, another person, or a child protection issue (Children First guidelines will be adhered to). Confidentiality of the information provided to the researcher(s) cannot always be guaranteed.

Will I hear about the results of this project? If you are interested in viewing the results of the research, you are welcome to reach out to me for a digital copy. It will be placed on the DCU website for general access. It is also hoped that the findings will be presented at a psychotherapy conference and that a paper will be submitted to a psychotherapy journal for publication. No identifiable features will be drawn upon and all personal data will remain pseudo-anonymised.

Who can I contact if I have any concerns about the project? If you have any concerns regarding how your data concerning this study has been handled, you can contact; DCU Data Protection Officer, Mr Martin Ward – (data.protection@dcu.ie Tel: 01-7005118/01-7008257) who will handle any data concerns arising from this research. An individual also has the right to report a complaint concerning the use of personal data to the Irish Data Protection Commission. If you have any questions relating to the research, you can contact the researcher Aoife Drury through email; aoife.drury4@dcu.ie or the supervisor Dr. Stephanie Finan at stephanie.finan@dcu.ie . If you have concerns about this study and wish to contact an independent person, please contact: The Secretary, Dublin City University Research Ethics Committee, c/o Research and Innovation Support, Dublin City University, Dublin 9. Tel 01-700800

Sample Questions:

- This research is on intimate relationships with regard to chemsex, what are intimate relationships to you?
- Could you explain to me any experience of being in an intimate relationship that stands out in your mind?
- In your experiences what are the risks of engaging with chemsex when it comes to relationships?
- In your experience, what are the benefits of engaging with chemsex when it comes to relationships?

Wellbeing Support

Below are resources and/or contact telephone numbers for help. You will also be issued with some information after your interview if you are affected by any of the issues discussed:

Therapists

www.cosrt.org.uk
www.pinktherapy.org.uk
www.sextherapists.ie

Organisations

www.lgbt.ie
www.amachlgbt.com
www.mindout.org.uk

Phone Numbers

Switchboard; Monday to Friday 6.30pm – 9.00pm, Saturday/Sunday/Bank Holidays 4.00pm-6.00pm Tel; (01)872 1055

Appendix C: Informed Consent Form.

Research title: The views and experiences of intimate relationships in the context of Chemsex.

Principal Investigator: Aoife Drury, Department of Nursing and Psychotherapy, Dublin City University, aoife.drury4@mail.dcu.ie

The study in which you are being requested to participate in is being conducted by Aoife Drury, a student on the Doctorate in Psychotherapy programme and supervised by Dr Stephanie Finian and Dr Gerry Moore at the School of Nursing and Human Sciences, Dublin City University.

The purpose of the research:

The purpose of this study is to illuminate and explore the impact of chemsex on intimate relationships. The aim is to help inform therapists as to how they can better support clients who may be engaging in chemsex, in their experience of intimate relationships. If you agree to participate in this study, you will be interviewed and asked a series of questions, either face to face or through Zoom, in relation to your experiences and views of intimacy and intimate relationships with regards to chemsex.

If you consent to being part of this research, please complete the following:

- ❖ I am aware that my interview will be audiotaped **Yes/No**
- ❖ I agree to be contacted after the interview should the researcher require any further information/clarity on a topic discussed in the interview **Yes/No**
- ❖ I understand that I may withdraw from the research study at any point until the date of (dd/mm/yyyy) four weeks from the interview. **Yes/No**
- ❖ I understand that my consent form will be stored in a locked cabinet in DCU with access only by the researcher. **Yes/No**
- ❖ I understand that arrangements to be made to protect the confidentiality of data, including the confidentiality of information provided is subject to legal limitations **Yes/No**
- ❖ I understand that all electronic data files will be stored on a secure DCU google drive **Yes/No**
- ❖ I understand that all stored digital and hard copies of the data will be securely destroyed by the principal investigator (Aoife Drury). Hard copies will be confidentially shredded and all digital copies of both audio and text files will be irrevocably erased **Yes/No**
- ❖ I understand that due to the nature of the research, I will be disclosing my sexual orientation **Yes/No**
- ❖ I consent to take part in an interview **Yes/No**
- ❖ I am aware that all information gathered during the research will be deleted and shredded after the completion of this Doctorate project in accordance with DCU guidelines. **Yes/No**

I have read and understood the information in this form. My questions and concerns have been answered by the researchers and I have a copy of this consent form. Therefore, I consent to take part in this research project.

Signature

Participants Signature _____ Date: _____

Appendix D: Ethics and DPU Confirmation of Research Approval

Ollscoil Chathair Bhaile Átha Cliath
Dublin City University



Ms Aoife Drury
DCU School of Psychotherapy and Nursing

30th November 2022

REC Reference: DCUREC/2022/180
Proposal Title: Understanding the views and experiences of intimate relationships in the context of Chemsex.
Applicant(s): Ms Aoife Drury, Dr Stephanie Finan, Dr Gerry Moore

Dear Colleagues, Thank you for your application to DCU Research Ethics Committee (REC). Further to full committee review, DCU REC is pleased to issue approval for this research proposal. This approval is conditional on the DCU Data Protection Unit (DPU) approving the project and any related documentation, such as a data protection impact assessment (DPIA). Research should not begin until this is in place.

DCU REC's consideration of all ethics applications is dependent upon the information supplied by the researcher. This information is expected to be truthful and accurate. Researchers are responsible for ensuring that their research is carried out in accordance with the information provided in their ethics application. Materials used to recruit participants should note that ethical approval for this project has been obtained from the Dublin City University Research Ethics Committee. As part of DCU REC's ongoing monitoring process, during your research you may be asked to provide DCU REC with a progress report. Should substantial modifications to the research protocol be required at a later stage, a further amendment submission should be made to the REC.

Yours sincerely,

A handwritten signature in black ink that appears to read 'Dr. Melrona Kirrane'.

Dr. Melrona Kirrane
Chairperson
DCU Research Ethics Committee



Note: Please retain this approval letter for future publication purposes (for research students, this includes incorporating the letter within their thesis appendices).



Geraldine Healy

to me ▾

11:14 (4 hours ago)



Hi Aoife,
many thanks for your email, apologies for the delay in responding, I was out of the office.
Yes, please feel free to proceed with your research.
Very best wishes
Geraldine

...

Appendix E: Interview Schedule

Introduction:

- Revisit information contained within the Participant Information Sheet.
- Give participants time to ask any questions and confirm consent form has been received.
- The aim of this interview is to gain an in-depth understanding of your experience and views of intimate relationships and how they coincide with chemsex. I am interested in exploring your thoughts, feelings, perceptions, and reflections. There are no right, or wrong answers and I would like you to be as open and honest as possible. I may say very little because I am interested in listening to your views. Some questions may seem obvious, but this is because I am interested in hearing your personal thoughts and feelings. Please take your time in thinking and talking and let me know if you need a break.

Questions:

- What brought you here today?
 - Clarity.
 - -how did you hear about this study?
 - -what led you to contact me?
- Could you tell me how you define Chemsex and your experience of it?
- This research is on intimate relationships. Could you describe what an intimate relationship means to you?
 - Clarity.
 - What is your definition or how would you describe it?
- Could you explain to me any experience of being in an intimate relationship that stands out in your mind?
- Can you describe whether chemsex has affected relationships for you?
 - Specific.
 - Have there been any challenges or opportunities?
- In your experiences what are the risks of engaging with chemsex when it comes to relationships?
 - Clarity
 - Why do you think that is?
 - Have you had any experiences with these concerns?
- In your experiences, what are the benefits of engaging with chemsex when it comes to relationships?
 - Clarity
 - Why do you think that is?
 - Have you had any experiences with these concerns?
- Maybe I have missed out on important factors, is there anything you feel I should ask?

Debrief: Thank the participant for taking the time to talk. Highlight again the information in the PLS about what will happen to the results. Ensure to remind them that there are therapists outlined that they could talk to if they need to. Do they have any additional questions?

Appendix F: Participant Narratives

Narrative Summary: Jamie.

Jamie's use of chems has given him a sustainable appetite for sex; 'I was searching for sex every day and then, and then, this is how it makes me feel, the drug make me feel. Increasing my sexual drive' and a craving for sexual finesse 'I won't say boastful but they tend to to have sexual prowess'. He discusses a yearning for sexual boldness with which chemsex gives. It facilitates an ability to be fearless in his sexual escapade, 'sex without chemsex, I don't know. It is just short lived. It doesn't give me the, like what I deserve, I want, want, what I anticipate.'

Chemsex seems to facilitate courage in his communication, something that he struggles with and he discusses how he sees this in other people too; 'discover themselves after, their spoken mind sex.' Jamie seems to revere chems, he worships the power it both seems to hold and bestows him. The control that he has is; 'using all the stimulants and everything it helps to give me strength, you know to try stay longer, last longer.'

Masculinity seems to be cherished by Jamie, chemsex allows him to engage in a way that validates masculinity, 'it gives me this masculine effect. Masculine effect. Like OK I am in control'. There is a rapture that Jamie describes both within himself and with those he engages in chemsex with. This sense of embodied, free, and ravenous experience allows him to capture this sense of raw sexuality that he doesn't have without chems 'always in control and at same time I feel free'. Yet this exaltation of chemsex, leaves him dancing on a tightrope of control between submission and dependence. Initially Jamie claimed that he did not have any difficulties with the substance use, however as the interview progressed and Jamie continued to reflect, his opinion changed 'It leaves me feeling like I need to get my chemsex, I need to use chemsex as soon as possible'

This sexual appetite is important for Jamie and is concerned about how he is without chems. Jamie begins to discuss the reliance that he has on chemsex 'I definitely put my trust in it'. that this impacts his relationship with his ability to be free in his own sexuality 'I don't trust my own personal sex drive again'. That his self-worth is placed upon it 'because I try to put it on my sexual, sexual esteem'. His growth in his understanding seems to grow as he continues in the conversation, as he realises his desperation correlated with chems, and the weight of which it holds; 'maintain on my life on it'.

Jamie seems to hold frustration and annoyance with his wife, his struggle to be able to engage with her in a manner that replicates her desire is evident through his use of chems. There's a sense of resentment or strain, as though the Jamie feels obligated to meet his wife's sexual expectations even when they don't feel up to it. Chemsex becomes a coping mechanism to deal with these demands. 'I think chemsex helps with the mood and brightens everything out and I am ready for her'. The use of stimulants becomes a way to meet perceived expectations in the relationship, particularly in terms of stamina and energy. 'I mean when she asks for sex yeah, maybe on times I am tired I am awake, you know you know. Using all the stimulants and everything it helps to give me strength, you know to try stay longer, last longer.' This implies a significant focus on sexual endurance, which seems to play a key role in how the Jamie evaluates his worth in the relationship. It suggests that he may feel pressure to live up to certain sexual standards, and chemsex helps meet those expectations. Jamie prioritises his use of these drugs over the dynamic of his wife 'It would be in a really dull mood and then and I think chemsex, and you know my wife is demanding and everything you know' suggesting it serves as a

tool to enhance his physical abilities and emotional experience in sexual interactions. Despite knowing that she is upset with his use, and is uncomfortable with the scene, he continues to pedestal his engagement 'Well I think you know, it is for my wife, it helps with my feelings of sexual, masculine energy'. This further underscores the imbalance in the relationship, where sex seems more like a task or duty rather than a shared, intimate experience.

Jamie utilises chems in order to engage with sexual experiences with her that leave him satisfied 'yeah, yeah she gets annoyed. It is not only demanding but it is a lot for me'. This is despite the conflict that this has within the relationship dynamic. Jamie seems to need chems to be able to be responsive to his wife's demands 'With intimate relationships. It helps me last longer, it helps me you know change my mood. My wife can, it can help with me with her and sex and give me this I am in control' Jamie may feel that in his natural state, that he lack the confidence, stamina, or emotional regulation needed to fully engage in intimacy. By using something to alter his mood or physical capabilities, he feels more empowered or capable, especially in relation to his wife and sexual experiences.

Narrative Summary: Steve

Upon reaching out to me Steve reported that he had recently been unfaithful to his partner at a chemsex party. Steve's tangible frustration with himself, his deep guilt and his disappointment resulted in open and frank conversations regarding the rupture of chemsex to his relationships. He spoke about this, not only regarding his intimate relationships but also the impact on friendships and parents. His continuous cycle of use has resulted in multiple fractures. He described the disappointment that people have experienced and that pain that this has caused him.

Chemsex seems to happen in moments of escalation and impulse, rather than any devout planning, 'I shouldn't be doing it, but because I know I'm going to regret it and putting myself in a dangerous situation. But in that moment, I suppose I hold it. There's a part of me that the rational thought is just gone' with alcohol as the gateway into engaging with chemsex. Chemsex then takes over rational thought and leaves him at the mercy of the drugs, encased in the moment, 'I was in a relationship and it's just logic was just out there, out the window, really' 'but ultimately the feeling of 'I I I want to do this now'. When I want to partake in the activity, it just takes over' resulting in despairing his actions 'I was just like what the fuck am I doing with myself? This indicates a deep sense of confusion, regret, and frustration, as if he is caught in a cycle he can't break. These patterns have left him quite exasperated with himself and at times struck by surprise and astonishment with his own decisions 'but like here I am, and like it if those happen again and again, and but it's never really it I never go out of, like I never want chemsex'. He spoke about the repeated patterns of engaging with these cycles leaving him in states of remorse and unhappiness 'It kind of takes my mind off things. And but like yeah, like feelings of shame, the feelings of kind of like disgust and feelings of just been like like your worth kind of just like nothing'. Lack of his ability to make judgements meant that he had moments where he frightened himself. He seems to feel his actions don't align with his values or self-perception 'I am 'horrified by like me now, like the kind like by by by what I've become'. Steve seems to acknowledge that he is aware of the potential dangers and regret involved in his actions but feel unable to stop in the moment. This suggests a divide between the part of him that understands the risks and the part that feels compelled to engage in the behaviour

Steve spoke about a sense of inadequacy, a struggle with being able to be his authentic self 'I was not acting like myself in those relationships like with these people, because I I, that they had an idea of'. He discussed his fears of being judged by others. His deep

desire to be accepted and ability to just 'be" I think they would have had an idea of who I was, and I tried to move of myself into that idea instead of like, whoever I am'. He talked about how he would be seen as being eccentric and has often been encouraged to change 'Oh, I I I don't even know, or like just trying to be like kind of like subdued, or and just a bit more like relax, which probably wouldn't be if I can. Like it's a bad thing'. Steve seems to struggle with conforming to societal expectations or others' opinions of how they should behave.

He opened up regarding his relationship with his recent boyfriend who he loved but ended up cheating on by using chemsex 'we had one more day to spend with each other, and, like we were back together, and, like he wasn't able to look at me,'. He explained how he finally found someone he connected with, how with his recent boyfriend he felt immersed in warmth and tenderness. Steve speaks about how chemsex damages intimate relationships and puts them at risk of rupture and harm 'like it's it's it's not good. So, this is a lot of risks to come, sex, and and then how they affect your relationships with people and your friends and your potential partners.' This indicates awareness that Steve has of how his actions are not just self-destructive but also damaging to his social connections. It appeared that Steve was struggling with denial of the impact on an emotional level, on how he felt about himself as a person. He explained the strain of shame and disgust and how the come downs impact his mental health. He is left with a conscious effort to self-regulate and de-escalate' I I think that's just consciously tell myself I'm going to be fine, because I know I will be fine like I will get out of it.' Despite the self-destructive behaviour, Steve seems to express a belief that he will be fine in the end. This could either indicate a genuine belief or a form of denial, where he downplays the seriousness of his situation to cope.

Appendix G: Sample of Analysis

Sample 1: Excerpt from Joe's Transcript

Transcript	Descriptive notes	Linguistic notes	Exploratory Notes	Personal Experiential Themes
AD; So you feel chemsex has changed the definition of intimate relationships for you?				
Joe; Yeah yeah it has definitely changed now if I would have looked at sex I would have put that down as, it wouldn't necessarily have to be sex as such but any kind of intimate touching that would have been an intimate relationship.	Saw sexual and intimate touching as an intimate relationship previously. Other than that, wouldn't be intimate	Very sure of himself in the shift of the definition for him.	There has clearly been a distinctive growth and shredding of previous understandings in order to better inform himself and build insight and awareness. I wonder what that journey was like for him?	
But in the past I wouldn't have even considered the past as an intimate relationship possible with a family member because I would be thinking ' well I don't have a sexual relationship with them '.	Saw intimacy as sex and unable to see this within the context of a family member.	Said in a nonchalant manner, laughing at himself in a sense of being ridiculous. A tone of sarcasm.		Chemsex made me see intimate relationships as distinctly polarised'
AD; OK. I hear you. Yes, like a friendship wouldn't have been part of that narrative?				

Joe; Yeah, friendship would be a strong friendship, it would have felt really odd!	It would be strange form him previously to see friendships as intimate	Laughs, almost rebuffs the idea.	Back then, intimacy was equated with sexual connection rather than emotional closeness.	Early misconceptions or innocence.
AD; Can you tell me about why that would have felt really odd.				
Joe: Yeah, we are talking back when we were about early 20s. It would have been ' I have really great connection to a friend or they are are really good friend to me ' kind of thing The word intimacy would not have come into it, it would have had a sexual tone to it. Definitely had that tone.	Intimate relationships were isolated to sex, and friendships would not have been perceived as intimate.	Said in a manner of practicality, almost as if the way that Joe would have been thinking would have been over simplistic.	Chemsex alters the way in which Joe sees intimacy and relationships. Historically intimacy would have been intertwined with sex and not something Joe would have recognised in relationships elsewhere. I wonder if there was something about closeness, and keeping people at bay, a sense of vulnerability and adaptation to being too close. What did it allow to separate these?	Chemsex made me see intimacy as sex'
AD; and since your early 20s do you have intimate relationships, romantic relationships that you can recall that are poignant to you?				
Joe: I was in a long-term relationship since I was let's say, just verging on 16 until I was verging, until 21.				
AD: So quite long?				

<p>Joe: Too long I know! I suppose that would have been as close to an intimate relationship as. I have had in terms of a partner and at the time, if somebody said like is that an intimate relationship, I would have responded with 'yes'</p>	<p>Previously I would have seen that relationship as intimate, but current definition has changed this.</p>		<p>He now sees that the long-term relationship wasn't as intimate as he once believed. This reflects a growing awareness of the difference between surface-level connection and deep emotional intimacy.</p>	<p>Reflection and Self-Realisation.</p>
<p>Looking back now, no, I don't think it was, at least not all the time, at least not all the time. Yeah, that was I had a very odd conception of what a relationship was ehhm...And yes, I have so many things to tie to that but I don't want to go off but I suppose,</p>		<p>Odd conception was said in a joking manner, quite insensitive towards himself.</p>	<p>It feels like he contradicts himself here, he says he is able to see the relationship as intimate on this occasion.</p>	
<p>Yeah, like when I look at my drug use, yeah, it will be. You know some of the drug use would have stemmed off of the amount of, my problematic drug use, as it was probably always problematic for me, would have stemmed from how I would have felt in that relationship, feeling locked into it.</p>	<p>That he always had problematic drugs use and that it was primarily due to how he felt in that relationship and feeling contained in it.</p>	<p>Locked in-shackled to the relationship. Really putting the emphasis on problematic drug use and subjectivity.</p>	<p>Destruction- relational, self, risk The image of a fairground mirror ride comes to mind. It's like he is trying to escape but there is a constant distortion of the image of his life and self.</p>	<p>Relationship Confusion and Entrapment</p>
<p>AD; Feeling locked into the relationship?</p>				

<p>Joe; Yeah feeling really afraid to leave it cause I didn't know what was outside this but didn't want to stay in it either. Cannabis was really big for me at the time. And I really would have stepped into kind of the kind of I suppose my my kind of seeking sexual escapism at the time. It began there.</p>	<p>Stuck between a rock and a hard place-left with a choice of two unpleasant decisions and appeared to be experiencing a lot of fear</p>	<p>Really big for me- Seeking sexual escapism-took a while to construct this sentence, reflecting in a way that seemed to indicate he was unsure.</p>	<p>A sense of being trapped and confined, so the only way he seemed to be able to escape was to do so by engaging in substances. I wonder about the impact it had in his thinking-how he felt in the moments, were the drugs an escape from his thoughts too? Common thread of Joe needing to break out from that experience and how it left him feeling. This need to escape, the drugs facilitated this break from reality. Unsure how to leave but didn't want to stay either.</p>	<p>Escapism</p>
<p>Actually, I was cheating on that guy quite some time prior to us splitting up but would have always been. At least like hand on heart 90% of the time would have been under the influence of drugs.</p>	<p>He was cheating on his partner and would have been using drugs during this period.</p>	<p>Wanting to show honesty 'hand on heart'</p>	<p>Drugs may have served to numb feelings of guilt, shame, and emotional turmoil. It provided a "haze" that allowed them to engage in behaviours he might not have otherwise pursued, such as cheating.</p>	
<p>They would have been high with cannabis while doing that cause it removed the guilt and the shame of doing that and kind of give you a haze. You can kind of go do it and its fine.</p>	<p>Used cannabis to remove shame and guilt from the experience of infidelity.</p>	<p>'Haze' is an emotional and mental fog. Casual tone here.</p>	<p>The drugs allowed him to remove the guilt and shame, creating a haze, a fog, like he lacks the clarity to see clearly, but equally numbing the emotions. So numbing both the feelings and the behaviours.</p>	

<p>Joe; 100%, transactional sex 100% it was very much. Empty yeah yeah I see it as empty now. Very empty now, but it fulfils a purpose, it fulfils a purpose and it does its job in the short term but it has long term consequences.</p>	<p>Through empty sexual experiences he found escaped and the lens by which he saw gay experiences with gay men. Drugs and sex gave him the ability not to feel like he was choosing, but instead the ability to disconnect.</p>	<p>Very clear in what he is saying here, able to see exactly what he was looking for. "yeah" frequently, which creates a sense of hesitation and uncertainty. Reiterating the word 'empty' gives an emphasis of hollowness.</p>	<p>There is a sense of growth, a desire to distance from past behaviours, and an awareness of the complexities of both relationships and substance use.</p>	<p>Emotional avoidance</p>
<p>AD: what do you think your purpose was?</p>				
<p>Joe: I think is. It gave me the escape from the relationship I was in. Yeah, for sure, And then it's all that lovely nice. Like validation and being wanted and there was a danger aspect to it as well. Particularly if it was cruising. you know, the whole kind of, you know, it was like this danger aspect to it especially if it was outside, there is excitement in it. Yeah, there's definitely it</p>	<p>Discusses how he used chemsex as an escape from his relationship into feeling validated and affirmed. Alongside a dangerous aspect to it, that gave him an excitement.</p>	<p>Rooted in-grounded in the escapism almost inherently present .</p>	<p>Danger seemed to evoke excitement and thus drive. He used this as part of escaping from the relationship which he felt trapped in. It ultimately seemed to allow him from a form of stuckness and instead to a place of validation and excitement.</p>	<p>Chemse helped escape. Time and distance.</p>

was definitely with **rooted in in**
an escapism for me.

Sample 1: Excerpt from Tom's Transcript

Transcript	Descriptive notes	Linguistic notes	Exploratory Notes	Personal Experiential Themes
AD; Do you have any examples Tom about the negative effects of Chemsex on intimate relationships?				
Tom; There was one guy I was seeing, we were in a relationship, and he just kept going off doing chems, we were just so, like we agreed that we were open. But his use of G was so fucking bad. He just couldn't manage. He had a lot of his own shit going on, it wasn't like he was having fun, it was more, it was dark man.	He was in a relationship with a guy who was battling with personal issues and using chems. There is a belief that they are non-monogamous. It was a dark time for him.	He sounds heavy and slow when he is discussing this, a sense of dragging his feet to this difficult part. The "man" shows a colloquial maybe a trust developed in the interview.	Bleak sense as he describes this experience. A sense of frustration. He seems like he is in the thick of a relationship with someone addicted.	Isolation and desperation. Helplessness rupture of dependency.
He would be gone for days, I couldn't get in touch with him. Then I'd hear from him and he'd be lying, I mean it was so obvious. But he needed help.	He describes how his BF would disappear for days, become unreachable, and lie about their actions, and this would be obvious for Tom.	There is an outrage with the "lying" in his tone, as if he can't believe he was lied to.	There is a sense of deceit and a frustration with this. A sense of helplessness. The lies seem to make the situation painful.	
Ugh it was so sad. I just couldn't be with him, it was far too difficult.		Far too showing the strain it was putting on him. There is a clear emphasis	Moves from a place of anger to heartbreak, Tom can	

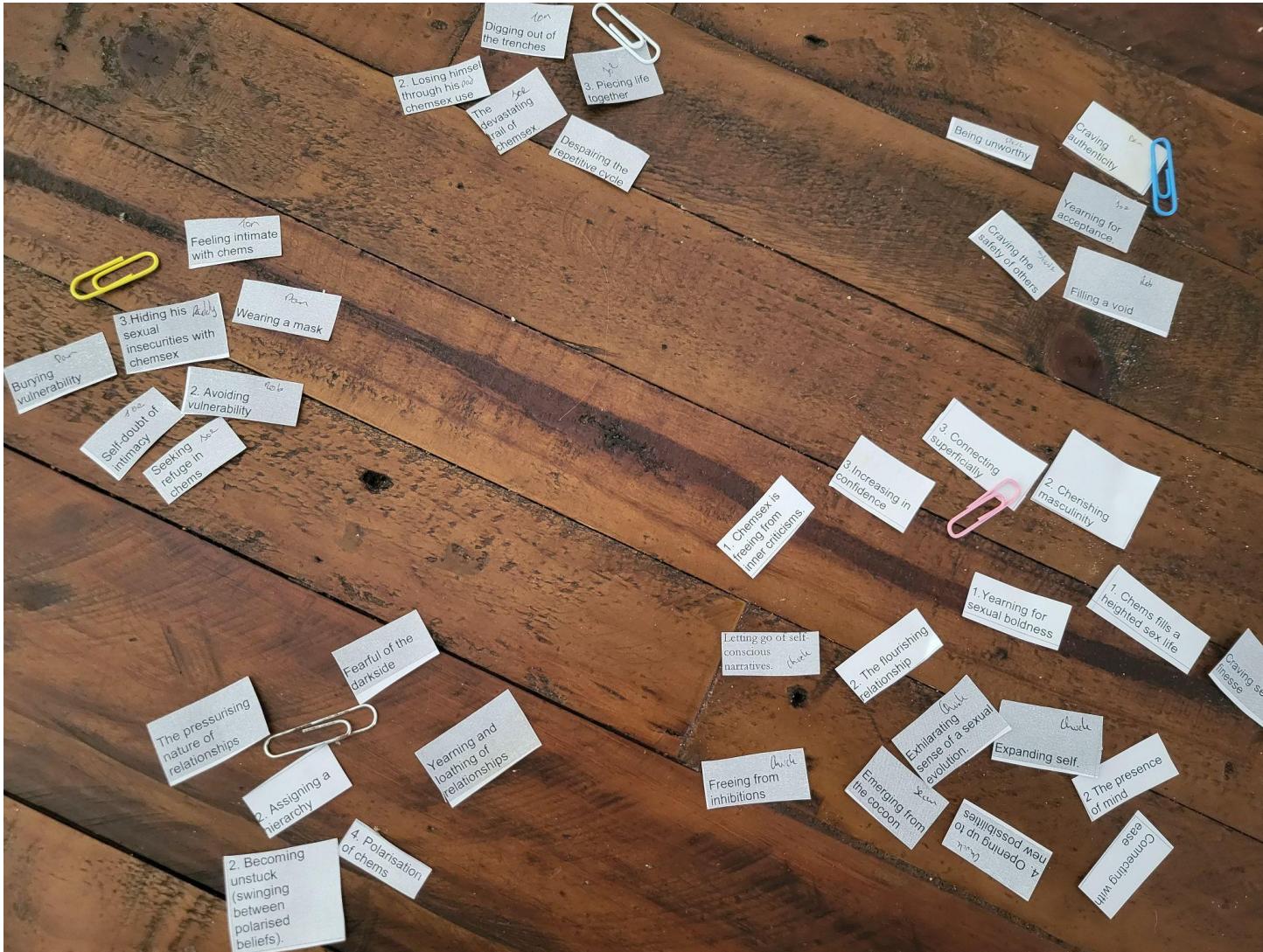
		on the SO as he states this.		
AD; What was the most difficult part about it? Being sad?				
Tom; I felt like I was watching him die. Just crumble, weekly , it was exhausting and heartbreaking, it was too much for me.	He struggled to cope with this guys battle with chems	There is a sense of pain when he is stating this. Crumbling-breaking slowly into smaller parts		
He just felt like a ticking time bomb , like he was going to go off, man and it was really irritating for me because I wanted him to get better you know like. I really did. I really liked him.	Tom wanted his BF to get better, but it seemed like a waiting game for the next catastrophe to occur.	Sighs and is heavy in his response. Anticipation and waiting-time bomb,	Ticking time bomb-a sense of an inevitability. I wonder about anticipation and trepidation. Exhausting, heartbreaking but also irritability. Despite knowing his partner needed help, Tom was powerless to intervene effectively. Despite the growing frustration and pain, there's an underlying care and desire for the person to "get better," which shows that Tom genuinely liked and wanted to help them.	
AD; How did it feel to be with a ticking time bomb?				
Tom; Ehh like exhausting, frustrating, maddening, saddening I suppose all of those things. I really hate relationships cause when shit hit the fan then you're stuck.	Tom experiences an overload of emotions that appear heavy and leave him feeling stuck when things go awry.	Listed these words off so fast-as if they were on the tip of his tongue. 'Shit hit the fan' sudden metaphor, all exploded.	Overwhelming emotional weight of being in a relationship with someone who is struggling in such a way. The emotional fatigue has led him to a point where relationships feel like traps, particularly when things go wrong.	Powerlessness, chaos and instability.

			Reflects a deep disillusionment and possibly trauma from being in a situation where love and care are overshadowed by pain, frustration, and powerlessness.	
ad; Stuck, how?				
Tom; Well, it's not like a mate when you can contact their family or get other people to rally around. You have to be the one to resolve it. Thats just so much to contend with, well for me anyway. You know I even gave him an ultimatum once, get clean or we can't continue. But he fucking begged and then he tried for a while, but he couldn't.	An ultimatum was given by Tom, but his partner was unable to work through his addiction. That it was difficult and there was a lot to figure out by himself without the support.	Animated here, speaking quickly and gesticulating broadly The "fucking" was said with venom until he said "he couldn't" which was said in a deflated manner.	Tom moves back into a place of irritation here. He seems to move between rage and despair, perhaps even despondency.	Resentful and frustrated. Line in the sand.
I think he managed it though; he is in a relationship now with two guys and like, he seems pretty ok, I have just seen him out and we said hello and all but not that deep. Can't be dredging up the past when we are out having a good time!	He seems to be in a new relationship now and Tom didn't want to bring it up when he saw him.	Making jokes at that moment, is that to protect? Build a rapport?	I wonder what it was like for him to see him move on. I didn't ask him to elaborate, I'm not sure why. Wonder if it protects partne?	

I couldn't it really shifted how I feel about getting with someone now. There is so much baggage I don't even even, like 'is it worth it?'	Not sure if a relationship is worth it.	Contemplates to self. Sense of weight in his tone.	Weight heaviness wondering the price	
Chemsex feels like it's an easy way to just have sex and be close to people, like it's just like a lot to have to do that sober now. Relationships feel like a lot of work	Relationships feel difficult, and chemsex feels like an easy way to be close.	A sigh	Chemsex seems to make life easier to connect. Relationships are easier to avoid.	Ease of connection, ease of intimacy. Escape from intimacy.
ad; A Lot how Tom?				
Tom; They are so much effort and such a struggle to be able to kind of navigate, gay men are just like, I mean, it's hard to explain like, they, we are tricky to pin down.		Navigate, tricky, pin down arduous, even hard to explain.	Me and them-like another species	Complicated
Like I just feel like there are a lot of expectations and pressures to fit in, to to to tick boxes. May be because I am Black as well like it's more tricky for me to feel like yeah like accepted.	Finds the relationships with gay men difficult to navigate and there are a lot of demands placed on him.	Struggles to articulate all of this. So much-emphasis on the importance Like accepted-feels like a deflection to be deeper.	He notes the difficulties in navigating relationships as a gay man, mentioning how there are high expectations and pressures to conform. Being Black adds another layer of complexity to the Tom's experience, as they acknowledge feeling a sense of otherness or struggle in gaining acceptance	Being different; alienation and frustration
I mean I don't know what that will be like being in Ireland now too, cause like there deffo isn't as much	Feels over dating and believes he might struggle here in Ireland	Laughs at the lack of diversity, like 'obviously'	Sense that there is a desire to change for Tom. recognizing that this scene no longer serves them and might be contributing to the emotional and relational difficulties they are experiencing	

diversity here! But I just feel like I want to stay away from chems, I am so done with that whole scene now.	and wants to keep a distance from the chemsex scene. Sees the lack of diversity in Ireland.	'So done'-completely and utterly		
AD; How do you feel dating will be for you here now?				
Tom; I have no idea. I don't plan on finding out for a while, I am just going to take a break, I just think like it's too much right now really. I will just get settled in the job. I hear the George is good banter though!	Going to take a break from dating and focus on his carer at this time.	Sounds exasperated and tired. Emphasis on the 'no' being dragged out. We both laugh at this joke.	Desire for a break-relationships seem tiring, he needs space from the labour. I wonder about a protective measure in his humour. Perhaps drawing me in-what might be the need for this?	The effort of relationships-seem laborious

Appendix H: Group Experiential Themes-clustering.



Appendix I: Naming Personal Experiential Themes

Example of PET Rob:

Experiential statements		Hermeneutic Notes		PETS
Not necessarily taking drugs for sex, but like, maybe like taking drugs and then having sexual experiences,		Sex is a consequence of chems		
But there's drugs, you know, and like it's like chemsex,				Filling a void
That's not like other sex I have had. because it's obviously like it was much more intense and long as well,		Chems give a sense of intensity		1. Chems fills a heightened sex life
I take drugs I'm going to be trying to find someone have sex with		Sex is a consequence of chems		2. Escaping intimacy
I want to take drugs necessarily. if that makes sense, but sometimes they coincide.	I am not responsible	Sex is a consequence of chems	Escaping intimacy by using chems	
'Oh', it's like that combination of like I want to stay on it. But then I also want to have sex	I am stuck between wanting chems and not wanting it	Sex is a consequence of chems		
Bad things about G and stuff. but I was still kind of I don't know. Yeah, like curious.		Not derailed by the harms of G		
I guess it's like your whole body, kind of feeling I don't know, like passionate isn't that the right way to begin to real like intense.		Chemsex gives him that intensity-unmatched		Struggling to connect with others

It's just like an intensity, that you don't really get I suppose otherwise		Chemsex gives you a type of sex not given before		1. Intimacy as elusive
Especially If you're not like particularly into somebody.		Helps you override how you may feel about someone	Plastering of intimacy fears	2. Avoiding vulnerability
If you're not the person who's in control of it necessarily	I am not always in control of these drugs	A sense of a power dynamic	Chemsex as a barrier to connection	3. Keeping people at bay
Oh, this is how much I'm giving you like oh, like, keep an eye on that like. Do another one for this one time.		Feeling of unease		4. Feeling pressure
It's just yeah, like disconcerting. And then you kind of like. 'Oh, how did I end up in this situation'	How did this happen to me	A sense of powerlessness	Despairing choices	
So this I think there has to be like friendship, but then, like a kind of loving bond.		Intimacy is loving		Powerlessness
People are comfortable in each Other's space	This happens to other people	People are comfortable with each other		1. Perturbing power dynamics in chemsex experiences.
This shorthand kind of thing.		People are attuned with each other	Intimacy as elusive	2. Relinquishing control