ACMD
Advisory Council on the Misuse of Drugs

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Rt Hon Sarah Jones MP (Minister for Policing and Crime)
2 Marsham Street
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17 November 2026

Dear Minister

RE: Drug use and chemsex in the LGBT+ community

We are pleased to enclose the Advisory Council on the Misuse of Drugs (ACMD) report, '*Drug use and chemsex in the LGBT+ community'*. This was self-commissioned by the ACMD as part of its programme of ongoing work examining drug use among vulnerable populations.

This report considers substance use among LGBT+ communities across the UK, with a particular focus on sexualised drug use and chemsex, and the substances commonly used in these settings. The available data demonstrates higher rates of substance use among LGBT+ individuals compared to their non-LGBT+ individuals. However, the available evidence is consistent across the whole LGBT+ community; the current evidence predominantly focuses on gay, bisexual and other men who have sex with men (GBMSM), and comparatively limited evidence available regarding drug use in women who have sex with women (WSW), transgender and non-binary individuals.

LGBT+ individuals often face significant barriers to accessing treatment services due to actual or perceived stigma and discrimination around their drug use. In addition, there is significant variability in the provision of LGBT+ focused treatment services, meaning some LGBT+ individuals may not have access to an appropriately culturally competent service. As a result, some LGBT+ individuals may have their care provided across a range of different non-coordinated services such as sexual health, drug treatment services and mental health services.

Chemsex is a term used to describe sex activity that takes place under the influence of drugs, often gamma hydroxybutyric acid (GHB), gamma-butyrolactone (GBL) and methamphetamine, but also other drugs such as mephedrone and volatile nitrites ("poppers"). The evidence suggests that chemsex-associated drug use is more prevalent in the UK than in many other European countries and is particularly prevalent within major urban centres, such as London, Manchester and Brighton.

Chemsex is associated with a disproportionate level of complex health and social harms in terms of the number of individuals who engage with chemsex. These harms include increased rates of sexually transmitted infections and blood-borne viruses, physical trauma, drug dependence, mental health harms, and increased risk of overdose. Polysubstance use is common, particularly in chemsex settings, compounding the associated risk.

Following its review of the available evidence, the ACMD has made three recommendations listed below; the rationale for the recommendations, proposed leads for implementation and expected outcomes are presented in full within the report.

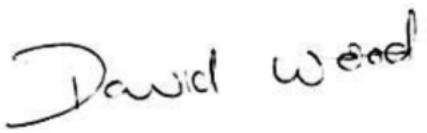
Recommendation 1: Data collection and reporting on sexual orientation and gender identity in relation to drug use and harms needs to be improved.

Recommendation 2: Service integration is required to address the physical and psychosocial harms related to substance use within LGBT+ communities, including sexualised drug use and chemsex.

Recommendation 3: Improved workforce education and training on LGBT+ related drug use, chemsex, and associated health needs.

I welcome the opportunity to discuss this report and its recommendations with you in due course.

Yours sincerely,



Professor David Wood
Chair of the ACMD
Chair of the ACMD Drug Use in LGBT+ Communities Working Group