

Sex and Psychedelics: A Wide-Lens Look at a Burgeoning Field

Abstract:

In this article we initiate a conversation between scientific and humanities-oriented studies of sexuality and psychedelics. Drawing on three recent studies which indicate a positive connection between the use of psychedelics and sexual well-being, the article argues that taking account of sexuality as culturally produced, historically contingent and geographically specific would improve the reliability and efficacy of future studies. The need for socially and culturally-attuned research grounded in contemporary sexual politics in this area is urgent, as in recent years – despite little reporting of sexuality in clinical research – the psychedelics field has had to grapple with the ethics of the relationship between psychedelic states and sexual interactions in therapeutic spaces and the ‘underground’. There is also scant attention to date paid to the gendered dynamics of sex and sexuality, and how this may impact perceptions of the relationship between psychedelic therapeutic repair vs enhancement. We unpack some of these dilemmas and outline some key concerns and potential priorities for future research into sexuality and psychedelics in a post-#MeToo era.

Introduction

The emerging field of studies on the impact of psychedelics on human sexuality in Western contexts is growing rapidly, yet to date very little attention has been paid to the social, economic or political context in which research on psychedelics and sexuality is taking place. In this article we argue that the cultural set and setting (Hartogsohn 2020) for the rapid shift in cultures of psychedelics must be accounted for in any study that attempts to understand their interaction with the dynamics of contemporary sexuality. We begin by addressing three recent studies on sexuality and psychedelics to demonstrate the importance of addressing social context, and future-proofing research. Next, we try to account for the deficit of the presence of sexuality in other studies to date, including clinical trials, and argue that there is an urgent need to address the question of suggestibility and its relation with sexuality in psychedelic therapy. Finally, we make a case that future studies must attend to the gendered dimensions of sexuality and how it may impact study findings. This is not discussed in any depth in studies to date, despite some gendered disparities being noted.

Individualising Sexuality and its Deficits.

In three recent studies, a positive connection between the use of psychedelic substances and facets of sexual wellbeing has been consistently observed. Although each study approaches sexual wellbeing slightly differently (and as we argue below, it is at best a contested and culturally contingent term), there are clear commonalities in the facets of sexuality that are observed to be improved by psychedelics use between the studies: pleasure, arousal, satisfaction, connection, positive body image, and importance of sex. Barba et al's study (2024) is a landmark in the field, and particularly notable for being the only research to date that draws on a large data set accrued from two studies: study 1 comprised a survey of n=261 participants who took psychedelics (psilocybin/magic mushrooms/truffles, ayahuasca, DMT, San Pedro, LSD/1P-LSD) in 'naturalistic' settings. Researchers in study 2 also asked the same questions of n=59 participants in a clinical trial. Results between the studies were convergent, and using Friedman rank tests demonstrated statistically significant positive differences in both surveys across time in participants' self-perceptions of sexual function and wellbeing. Sexual function was defined 'according to the domains of experienced pleasure, sexual satisfaction, arousal, communication of sexual desires, importance of sex, and body image' (Barba et al 2024, 2), while researchers used an 8-point Flourishing Scale (Diener et al, 2009) to measure sexual wellbeing, in which participants scored self-reported success in areas such as relationships and self-esteem.

In another study, Holka-Pokorska (2023) conducted a wide-ranging systematic review of existing research on the impact of entactogens – namely MDMA – on 'sexual function'. She reviewed a combination of 96 clinical trials that encompassed both 'healthy' patients (17 studies) and the remainder those with pre-existing symptoms of mental illness, alongside studies of self-reported MDMA use amongst recreational users. Overall, she discovered a similar positive connection, although the term 'sexual function' is left open and slightly ambiguous. Various, sexual function in the study appears to include improved sexual responsiveness, intensity and arousal, performance, and emotional closeness. In a third recent article, Jacobs, Banbury and Lusher (2022) took an in-depth qualitative approach via interviews with 4 participants undertaking sex and relationship therapy who simultaneously microdosed psychedelics (variously, LSD, psilocybin, MDMA) in 'naturalistic' contexts to investigate their use as an adjunct. Like Holka-Pokorska, Jacobs et al left definitions of improved sexual wellbeing open, but found that taking micro-doses of psychedelics aligned with improved 'confidence, openness, sexuality, inhibitions and overall judgment of relationship experience, and satisfaction' (Jacobs et al. 2022, 9).

Despite a multitude of other variables that might have led to perceptions of improved sexual ‘self-efficacy’ (Jacobs et al. 2022, 3), all three studies tend towards a view of sexual wellbeing and function that divorce sexuality from structural considerations and context. While this is a necessary facet in part of trying to isolate drug effects, it would be beneficial in future studies if researchers contextualized their findings, perhaps particularly in how they record and analyse demographics. Where we do glean information about the broader situatedness of participants, it is revealing. For example, in Jacobs et al’s (2022) study there are only two moments in the article where consideration of social context rather than individual concern can be observed:

“Jack said that after a full day at his manual job, he still has the energy to have sex with his partner when micro-dosing, he describes not having the same energy and ability on days he has not micro-dosed.”

“In many ways, it communicated stress release from daily living such as family and work” (2022, 6)

These references to an outside world that may well have consequences for sexual well-being seem extraordinarily revealing, yet the impact of working conditions and stress of everyday life on sexual satisfaction, performance and confidence goes unmentioned. Taking psychedelics is seemingly understood here as enabling individuals to obtain a kind of ‘miracle cure’, on a purely individualised basis. The more recent study by Barba et al (2024) does not consider external factors that may impact sexuality at all. By not addressing myriad social factors associated with the sexual problems encountered by their participants, sexuality and desire are depicted in these studies as though they were a matter only for individuals disconnected from the social world rather than a question of wider social interest and concern.

We suggest that beyond an approach to sexuality as individualised, at stake in psychedelic studies interested in the impact of substances on sexuality is a suggestion that achieving sexual well-being is a question of self-management alone. Putting the responsibility for sexual well-being on the individual or on the intake of a substance denies all the work that has been done to understand the interactions underpinning sexuality between self, body and society. It conceives of achieving a healthy, functioning sexuality as an ‘entrepreneurial’ (Harvey and Gill 2011) project, in which sexuality is endlessly customisable, augmentable, and where all onus is on the self to improve it. A failure to improve may ultimately contribute to creating a sense of guilt and shame in individuals who are unable to solve their sexual problems, which could ultimately lead to relationship issues.

Barba et al (2024) additionally situate sexual well-being, for the purposes of their study, primarily in the remit of sexual pleasure. Questions connecting psychedelics use with sexual function in their work concern sexual satisfaction, trying new practices, and intimacy with a partner (and all appear improved after taking psychedelics). This is despite the fact that, in a recent well-publicised Op-Ed in *The Lancet*, Mitchell et al (2021) propose that sexual wellbeing and sexual pleasure are intertwined but potentially separate spheres. Further, it must be acknowledged that what constitutes ‘good’ sexual function is entirely historically and culturally contingent and subjective. As Katherine Angel (2021) has argued, the diagnostic category of ‘female sexual dysfunction’ has shifted dramatically over the past twenty years across multiple iterations of the DSM, and remains distinct from its male counterpart because it refers to a deficit of desire and arousal rather than pure bodily mechanics. If the meaning and definition of dysfunction is capacious and malleable, the same must surely be said for what ‘function’ would mean, and there is little consideration to date of how this gender differential might play out in relation to psychedelics use.

Not only are there question marks over the meaningfulness of terms like ‘sexual function’ across time, in non-Western contexts and in indigenous practices involving psychedelics, markedly different understandings of sexuality and desire are at play. For instance, Epinoza (2013) has discussed the ways in which in some South American *vegetalismo* practices, the erotic intelligence of plants for ayahuasca drinkers is an essential part of the practice. An exploration of indigenous traditions that incorporate psychedelics around sex are beyond the scope of this piece, but their very existence demonstrates the problems with definitive attempts to ‘measure’ the impact of psychedelics on sexuality without due attention to context.

While research studies to date suggest that taking psychedelics seems to improve communication between partners, understanding and the sexual well-being of participants, we can only encourage scientists to question and account for the patriarchal structures, economic inequalities, cultural specificity and potential cultural stereotyping that go unremarked upon in their studies, and suggest that a failure to consider the impact of these factors on their subject the research potentially contributes to an unhelpful culture of ‘hype’ around psychedelics that is not entirely borne out by the results. For example, to draw on the example in Jacobs’ (2022) study, if someone has an exhausting job, the solution to achieving a fulfilling sexuality and better relationship cannot simply be to forever consume micro-doses of psychedelics. Further questions arise. If a given individual testifies to an improvement in his or her sexuality following the intake of psychedelics, will this improvement always be effective with another partner? What negotiations will a person have to put in place to convince a partner already disinclined to care about his or her sexual pleasure to take psychedelics to improve their sexual relationship? How can psychedelics reduce the "orgasm gap" in heterosexual couples, now well described in the scientific literature (Mahar, Mintz, and Akers 2020)? By way of historical comparison, many clinical case studies on psychedelics in the 1950s-1970s attempted to cure female patients' "frigidity", a category of dysfunction now widely dismissed, without seeking to understand the social and cultural factors that might explain this absence of sexual desire and pleasure (Martin 1957; Ling and Buckman 1965). It seems conceptual framings of sexuality have altered little in the years intervening, and this is a significant deficit in understanding how contemporary dynamics of power, changing definitions of ‘sexual function’ and ‘sexual wellbeing’ might operate within the psychedelics space.

Sexual Ethics and Pharmacosuggestibility in the Psychedelic Therapy Space

We next address a growing area of concern in contemporary psychedelic studies: sexual reaction and interaction in the therapeutic space. During the first wave of psychedelic experimentation in the West during the 1950s-1970s, sexual reaction to psychedelics was common amongst patients. Some masturbated (Cutner 1959), others had orgasms (Van Rhijn 1967), or were disturbed by the intense arousal provoked by Wagner's music, for example (Ling 1967). As early as 1959, Ditman's list of LSD effects included the following: ‘matters of sex keep coming to mind’ (Sandison 1960). Although these reactions were often over-interpreted, especially in the case of female patients (Dubus 2023), sexual reactions to psychedelics were commonplace and, in the case of some doctors, even provoked in patients to achieve a therapeutic effect (Martin 1967). Doctors openly discussed them, and these reactions were considered normal enough that it was an eventuality for which clinicians were prepared.

The absence of any mention of sexual reactions, gestures or (self-)touch in contemporary clinical studies is therefore striking. This may be in part because the setting for new research is

different: doctors no longer seek to provoke intense reactions by stimulating their patients by any means necessary. On the contrary, today's subjects lie in bed, with masks over their eyes and headphones on, to encourage introspection. But perhaps we might also detect here a new taboo around this type of reaction. Existing contemporary manuals describing the method of psychedelic-assisted psychotherapy are reluctant to mention potential sexual effects, which are dealt with only under rules to be observed by the therapist. We have consulted three of the most important: one published by a team from the Department of Psychiatry at Yale University (2020), the other by MAPS, which has been regularly updated since 2005 (Mithoefer 2017), and the recent guidelines published by a Swiss team using psychedelics since 2014 (Aicher et al. 2024). Only the Yale manual briefly mentions the fact that participants may have reactions of a sexual nature, referring to the fact that they may try to remove their clothes (Guss, Krause, and Slosower 2020).

Is there a desire to minimize these reactions (or the reporting of them) in the ongoing process of legitimizing this research? Are sexual reactions really less frequent, and what is the potential impact of ignoring the possibility of the presence of sex in the therapeutic space on both on patients, and on therapists? The absence of discussion on this subject may indicate a lack of knowledge of mid-20th century studies, which is problematic: it is important for scientists to be aware of the protocol of previous trials so as not to repeat the same mistakes.

Holka-Pokorska (2023) highlights the risks posed by the lack of research into the impact of MDMA on intimate relationships and human sexual functions in the context of MDMA-assisted therapy, proposing the concept of “pharmacotransference” (Holka-Pokorska 2023, 1392). Indeed, given the place of erotic sensations in substance-induced experience, further questions hang over their effects on the therapist-patient relationship. The author stresses that it seems particularly important therapeutic protocols for MDMA-assisted psychotherapy include “psychoeducational” elements to prepare participants for the possibility of sensory experiences that they might interpret sensually or sexually. She also calls for therapists to be trained in how to behave during sessions and reaffirms that: “The risks of the development of sexual, eroticized transference during the application of MDMA in clinical settings were not sufficiently addressed at the current stage of work on these protocols. Little is known about methods of facilitating the resolution of the possible sexual 'pharmacotransference' during MDMA-AT sessions”.

There is an urgent need for more exploration of this aspect of the psychedelic therapeutic relationship in future research. While transference is always a possibility in every psychotherapeutic field, and well-documented, the added potential of pharmacosuggestibility somewhat heightens this danger. We deploy this concept (borrowing from Holka-Pokorska’s ‘pharmacotransference’) to refer to the tendency for a person’s response to a substance to be shaped by their own expectations or those of their therapist, independently of the drug’s actual biological effects. This seems to be true in both clinical and broader therapeutic settings. Carhartt-Harris et al (2015) found that in healthy volunteers LSD had distinct suggestibility-enhancing effect, while Dupuis (2021) located a similar state of ‘hypersuggestibility’ in the context of a shamanic centre in the Peruvian Amazon. As Dupuis notes, suggestibility is not inevitably problematic, either in the therapeutic setting or elsewhere, but it is certain that the relationship between psychedelics and suggestibility raises ethical questions about how relationships of power should be negotiated in psychedelic spaces. The position of advocates for policy change on psychedelics is not aided by a series of allegations of sexual misconduct on the part of authority figures in both therapeutic settings and ceremonial and ritual contexts (Maybin and Casserly 2020; Macbride 2021; Rosin 2022) such as the recent failed FDA petition for approval of MDMA-assisted psychotherapy by MAPS-affiliated company, Lykos. The

potential for abuse within psychedelic-assisted therapy, particularly due to the power differentials between therapist and patient, is a serious concern that warrants thorough examination, beyond the scope of this article. These dilemmas beg the question of whether positive connection between sexual well-being and psychedelic experience can be *induced* via psychedelic suggestibility, and this may offer one potential explanation as to why Barba's (2024) study noted a steep drop-off of enhancements to well-being over the ensuing months after the psychedelic experience took place.

A further risk around suggestibility is that the use of psychedelic therapy with trauma survivors, particularly those with histories of sexual abuse, presents unique challenges and therapeutic considerations. Psychedelics can facilitate 'lost' memory recall and reshape personal narratives, potentially offering deep therapeutic benefits; however, these same effects risk reactivating trauma and may inadvertently heighten psychological distress, as the 'truth' of memory can become destabilised when uncovered in a psychedelic state (Goldpaugh, 2020; McGovern et al. 2024). Integration therapists potentially bear an enormous responsibility in sensitively handling such memories, and helping clients tolerate potential ambiguity.

It is evident that there is also a growing interest in the potential of psychedelics as an adjunct to psychosexual therapy (Wizła, Kraus, and Lewczuk 2022) and therefore a simple denial and prohibition of sexual behaviour may not be either a practical or sustainable means to manage the issue longer term. As Torsten Passie has stated: 'The therapy environment may be full of projections, fantasies, longing for love or frantic despair. All these are held as welcome phenomena by the therapists and caregivers in the room. Training in being the recipient of erotic or paranoid transferences is vital for therapists in this work' (Passie, Guss, and Krähenmann 2022). There is nothing in current guidelines that provides transparent guidance as to what a therapist should do if the patient exhibits a sexual response while under the influence of psychedelics in the therapeutic space. If the supposition is that withholding nurturing touch may be counter-therapeutic, it seems possible that the same may be true of, for example, preventing a female patient from touching herself in a sexualised way. There is much that could be learnt about the relation between touch, consent, and ethical use of psychedelics from commercial sex workers. Writers/sex workers such as Britta Love testify to their use of psychedelics with their clients, blurring more and more the boundary between so-called 'recreational' and therapeutic use (Love 2020). Indeed, Love says she uses psychedelics to help her clients let go during sex, to feel legitimate about being desirable, or to help them reconnect to their bodies, sensations and emotions following trauma. Further research that engages with the use of psychedelics in sex work could be enormously beneficial for the whole field.

Women, Sex and Psychedelics: Repair vs Enhancement

A further difficulty researchers face when exploring the relationship between sexuality and psychedelics is how to distinguish reparation from enhancement. In Barba's study it is unclear whether psychedelics served an incidental role in improving sexual function, or whether (particularly in Study 1) sexual concerns or difficulties formed a basis for taking them in a ceremonial or ritualistic context.

There are also some interesting observations to make in this study about gender differentials. Female-identified participants reported considerably less pronounced positive effects on perceived pleasure and the importance of sex than males. Many factors may explain the disparity. A frequent observation in the growing sexuality and psychedelics field is the difficulty for women to talk about this type of experience without justifying it in some way by a therapeutic intention (Kostick and Schensul 2018). For a woman, approaching psychedelic sexuality with the sole aim of pleasure and experience therefore remains a powerful taboo. US

National report in 2010 showed that 18.3% of American women and 1.4% of men have been raped at some time in their lives (Black et al. 2011). There is no denying the more radical need for women to address and heal from this reality. But there is also an important issue of not making female sexuality the subject of psychedelics only when it is in need of repair.

While the hedonic aspects of psychedelic sex for women have tended to be underplayed, the occasions on which it has been discussed, such as Timothy Leary's comments that, 'in a carefully prepared, loving LSD session, a woman will inevitably have several hundred orgasms' (Leary 1965), were unlikely to be specifically interested purely in women's access to pleasure; rather, it was part of a broader inducement to 'turn on and tune in'. Today we might read into Leary's comments a mixture of entirely unreconstructed sexism and macho bluster, but he was far from alone. Oral history testimonies from countercultural women (Drower and Spires 2022) confirms this, suggesting women in the 60s were often pressured into having sex they didn't want while on LSD, sometimes with multiple partners, because to say no was to commit the worst of all feminine countercultural sins: being 'frigid'. The refusal seemed to condemn women additionally to appearing uninterested in self-transformation, revolution and political growth.

Nonetheless, testimony from writers like Annie Sprinkle (2002) appears to confirm Leary's contention that psychedelics can potentially have a purely hedonic relationship with sex; they can act as aphrodisiacs. In a previous study, Moyle, Dymock et al (2020) conducted in-depth semi-structured interviews with (n=30) participants to examine the use of a range of drugs, including LSD, in sexual contexts. All women who had used LSD described it as positively enhancing their sexual experiences, with one participant (31, White British, heterosexual) describing LSD as making sex 'become not 3D not 4D but 5D, you know, it goes into whole other dimensions'. It is crucial this exploratory, hedonic aspect of psychedelic sex, that is perhaps far more difficult to measure and quantify, does not get lost.

Conclusion

In this short intervention we hope to have shown that the social and cultural dynamics of sexuality must be accounted for in how participants understand improvements to sexual function. Barba's study does examine at top level gender differentials, but there is little attempt to account yet for these differentials, which feels like a missed opportunity. Some examination of the gendered categories of sexual 'function', as we discuss above, is necessary here too. A more diverse and representative sample which includes a much bigger black, indigenous and people of colour (BIPOC) population and greater sexual diversity (Hanshaw et al. 2024) is also likely to yield different results. It is also important that, to understand the true impact of psychedelics on sexuality, there is some recognition of the gendered dynamics in which people might seek to 'improve' their sexuality, and whether participants understand improvement in terms of repair or enhancement. That participants report improvement at all is itself of course significant. But capturing the 'baseline' would give us far more insight into the ways in which participants perceived their sexual function/wellbeing before they took psychedelics.

To grapple with some of these concerns requires an engagement with the history of psychiatric research into psychedelics and sex, and the presence of sex and desire in psychedelic spaces, including ceremonial settings. In depth qualitative research into psychedelics use in naturalistic settings is also necessary, so that the meanings people attach to sexual function and psychedelics might be more closely understood. As we recount earlier, scientists studying the use of psychedelics in the context of sexuality could also look at their use in the context of commercial sex to understand the ways in which how sex workers have already been navigating difficult questions of ethical touch, suggestibility, consent and sexuality when working with

psychedelics with their clients. Although first-person discussion of sexual healing with psychedelics is increasingly abundant amongst sex workers, it seemingly remains taboo in the scientific and medical community. Integrating such practices, which bring together two of the practices most stigmatised by our societies: sex work and drug-taking, is likely to be seen as risky for a field that must constantly reiterate its own legitimacy and respectability in order to exist. There is no doubt, however, that psychedelic therapists could learn a lot from exchanges with sex workers, not only in terms of the effects of psychedelics on sexuality, but also in terms but also in terms of how they understand and negotiate consent and power.

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