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“Party N Play” on the Internet: Subcultural Formation, Craigslist, and Escaping from Stigma

This article describes how the war on drugs and the fight against AIDS battled in the gay community, particularly against those who use crystal methamphetamine and engage in risky sex practices (i.e., condomless sex), have resulted in unintended consequences. These wars have successfully defined these men (AKA “PnPers”) as “diseased” or “criminals” who should be demonized and ostracized. By posting ads on Craigslist anonymously soliciting or offering drugs and “risky” sex, they are able to engage in these behaviors without being further stigmatized and labeled, and they can “safely” circumvent the medicalization and criminalization of their behavior.

Law enforcement agencies in the United States have attempted to clamp down on the buying and selling of illicit drugs on Internet sites such as Craigslist (e.g., ABCLocal 2011; Bresswein 2012; News-Record 2012). Yet, Internet drug seeking has soared (e.g., Bumm 2011; Klein 2011). Over the past decade, the behavioral sciences have stressed the dangers of using illicit party drugs such as crystal methamphetamine, but seeking drugs on the Internet, particularly by gay men, has not subsided (e.g., Drug-addiction-help n.d.; Gee et al. 2012; Solomon et al. 2012:12). And, over the past 20 years, both public health agencies and AIDS service organizations (ASO) across the United States have funded safe sex ads and organized campaigns to encourage safe sex among gay men, but “bareback” sex (i.e., condomless sex) is on the rise (e.g., Carballo-Diéguez and Bauermeister 2011). All of these behaviors are associated with the “party ‘n’ play” (i.e., “PnP”) subculture: “‘Party’—meaning, smoke, inject, or snort meth, and then ‘play’—meaning engaging in sexual intercourse” (Cabangum 2006:25), typically without condoms.

Using 189 PnP personal ads from the “Men Seeking Men” section of Craigslist’s Los Angeles, California portal, this article shows how drug enforcement efforts of the criminal justice system and research in the fields of public health, psychology, and addiction science have helped to facilitate the creation of PnP. Rather than attempt to understand this gay drug subculture, its rituals, and the ways in which its members present themselves, these authoritative agencies often criminalize, medicalize, and pathologize these men, which sometimes pushes PnPers to the Internet as a means for them to maintain their anonymity (e.g., Davis et al. 2006; Grov 2010, 2012; Wakeford 2002). This allows them to evade detection from law enforcement and others who might stigmatize them and thus, their search for high-risk drug- and sex-related behaviors is largely “inaccessible from the general public” (Solomon et al. 2011:1064). In fact, they are hidden away from any outreach attempts, placing them at greater risk for exposure to the human immunodeficiency virus (HIV) as well as other harms (Solomon et al. 2011).

Edwin Lemert (1951) and Howard Becker (1963) warned that deviance is borne through a process by which authoritative institutions affix labels on “deviant” individuals. Notwithstanding, this labeling process also has the potential to strip individuals of their identity and culture, which not only creates harm by stigmatizing them, it makes it more difficult to develop effective policies that address their true needs. Given that many who use illicit drugs might have already experienced drug-related harms—directly or indirectly—labeling has the potential to exacerbate these harms. As a solution, this

article describes the PnP subculture, one of many drug-using subcultures that have been caught in the crossfire of the “war on drugs.” Like other drug-using subcultures, we will show that PnPers, in particular, are more than their penchant for the drugs they use or the types of sex they seek. In fact, PnPers, like other subcultures, have other similarities: the way they present themselves, the ideals they espouse, the preferences they convey, and the symbols and words they use (and how they construct them as a form of dialogue). This description provides the context and helps explain why these men use on-line spaces to find drugs and engage in sexual behaviors that could potentially harm them. First, we situate the PnP sub- culture within the literature on gay men’s drug use and their use of the Internet. We then position the development of the PnP subculture within the policies of the war on drugs and the “fight against AIDS.” Next, we describe the PnP subculture on Craigslist in Los Angeles from a virtual ethnography of 189 Craigslist PnP ads. The subcultural values, rituals, and characteristics of the PnP subculture are presented, and we illustrate some of the ways in which PnPers present them- selves on-line. Finally, we discuss the implications of these findings for policies on drugs and AIDS.

GAY MEN, DRUG USE, AND THE INTERNET

Documentation of widespread drug use within the gay community grew during the mid-1990s with the expansion of circuit party events—“large-scale social events targeted at gay men ... [where] participants congregate in settings such as nightclubs, warehouses, or outdoor open- air spaces, with loud dance music and light shows” (Lee et al. 2004:48). A 1995 study of these parties in Sydney, Australia concluded that a majority of patrons had used 3,4-methylenedioxy-N- methylamphetamine (MDMA, or “ecstasy”) while in attendance (73%), and that others had used amphetamine or “speed” (64% [Lewis and Ross 1995]). Years later at a circuit event in New York City, Lee et al. (2004) also found that a majority of the patrons were consuming MDMA (71%); however, the use of ketamine (“Special K”) was found to be the second most ingested drug (53%), followed by methamphetamine (31%), cocaine (19%), and gamma-Hydroxybutyric acid [GHB (12%)].

As a result of these trends, considerable attention has been given to drug-use patterns among gay men (cf., Green and Halkitis 2006). Currently, GHB usage [as well as gamma-Butyrolactone (GBL), 1,4-Butanediol (BDL), and other GABA analogs] has been increasing with alacrity among men who have sex with men (MSM [Halkitis and Palamar 2006]), but the most commonly used drug among gay men in the United States is crystal methamphetamine [AKA “crystal” (e.g., Green and Halkitis 2006)]. In fact, the rate of crystal use within the gay community is 20 times higher than that of the general population (Mimiaga et al. 2008), and for gay men living in gay enclaves (i.e., “gay ghettos”), as much as a “293 percent increase in the odds of use” (Carpiano et al. 2011:82) has been reported.

While these studies provide useful information on use patterns, these studies—typically con- ducted by clinical psychologists, medical researchers, and epidemiologists—tend to focus on individual-level predictors, often concluding that these men use drugs “to enhance mood and counteract depression, to boost confidence and concentration, cope with HIV/AIDS, and negotiate internalized homophobia” (Green and Halkitis 2006:318). Other studies have found that gay men who use crystal are *bored* (Chaney and Blalock 2006); *fatalistic* (Berg 2008); *less educated* (Kakietek et al. 2011); *panicked* (Davis et al. 2006); *stigmatized* (e.g., Adam et al. 2011; Courtenay-Quirk et al. 2006; Frost et al.

2007), *burned-out, fatigued, overwhelmed* (McKirnan et al. 2007), *lonely*, or, *suffering from age-related image-consciousness or sexual inhibition* (Kurtz 2005). The most common factor associated with drug use, however, is *low self-esteem* (e.g., Davis et al. 2006; Green and Halkitis 2006; Grov 2010; Kelly et al. 2009)—often shown to be associated with higher-than-normal levels of drug usage for gay men. Many studies also report that gay men who use crystal methamphetamine or other drugs are more likely to engage in risky sexual practices (i.e., bareback sex), which, in turn, could amplify the spread of HIV (Berg 2008; Davis et al. 2006; Grov 2010, 2012).

Gay drug usage also seems to be higher among those men who seek drugs and sex partners on the Internet compared with those who do not (e.g., McKirnan et al. 2007); in fact, the virtual space of gay on-line “communities” is an important source for gay men seeking illicit drugs (e.g., Berg 2008; Carpiano et al. 2011; Golub et al. 2005; Green and Halkitis 2006; Grov 2010, 2012). For example, one study of men at a gay pride festival in Atlanta, GA found that those men who met a sexual partner on the Internet reported higher levels of crystal usage (Benotsch et al. 2002). A Chicago study had similar findings; those MSM who used the Internet to find sexual partners tended to engage in risky sexual behaviors and were significantly more likely to use drugs in at least half of their on-line sexual encounters (McKirnan et al. 2007). Finally, a national random sample of MSM in the United States confirmed that this was not unique to those cities; 85.2% of those who sought unprotected sex on the Internet ($n = 332$) reported lifetime use of illicit drugs (Klein 2011).

Neglecting the Gay Subcultural Dimension

While studies in the areas of public health, psychology, and epidemiology (i.e., those discussed above) provide useful information about rates, trends, locations, and psychological factors leading to drug usage and condomless or “risky” sex, these studies sometimes have the unintended effect of depicting gay men who use drugs and search for sex on the Internet as *diseased, ill, weak, mentally unstable*, and even *criminal*, and, they often fail to explain additional factors, such as The social context in which these drugs are used or the macro-social factors that affect the use of drugs among these men. In such cases, the researchers are unable to say much about the actual *nature* of behavior—especially where cultural or subcultural influences are concerned—or the purpose or meaning that a behavior (or set of behaviors) has for individuals and their groups. Consequently, these studies tend to strip these men, and others studied, of their culture. A good example of this is the term “men-who-have-sex-with-men,” or “MSM”—a label to which no culture is attached (as opposed to “gay”), and that separates gay men from gay culture and its traditions, meanings, norms, and values. Indeed, even distinguished researchers in the field of gay men’s behavioral health have observed that data-laden studies of crystal meth use among gay men have a tendency:

to leave the symbolic and interactional spheres under-analyzed, including the meanings sexual actors attach to these event as special instances of sexual sociality, the interactional norms and pressures that circulate in these milieu, and how these may work in tandem to shape drug-taking motivation and behaviour. (Green and Halkitis 2006:319)

By stripping these men of their culture, it is much harder to create effective policies to address their true needs. Rather, the policies and laws that are influenced by these studies tend to criminalize, medicalize, and pathologize gay men who use drugs and engage in bareback sex. Others are then led to believe that these men are diseased, sick, or criminal, and that they deserve to be demonized, ostracized, and

institutionalized.

THE “WAR ON DRUGS” AND THE “FIGHT AGAINST AIDS”

Throughout the U.S. “war on drugs” and the “fight against AIDS,” policies (with the help of many academic studies) have been implemented that stigmatize drug users and HIV-positive gay men by defining them as contaminated, dirty, and less worthy. According to Goffman (1963), being identified as sick, diseased, weak, and/or criminal has a tendency to stigmatize individuals and tag them as “tainted,” which could lead to a *spoiled identity* that is difficult, if not impossible, to change. Reforming such spoiled identities becomes more difficult when legislation—such as those spurred by the “war on drugs” and the “fight against AIDS”—deny access to institutions that grant “social, economic, and political power” (McPhee 2012:52).

Goffman (1963:4) explained that creating the spoiled identity could easily begin with those who possess certain “undesirable” attributes (e.g., moral “failings”), such as one with “a history of mental disorder, imprisonment, addiction, alcoholism, homosexuality.” As a result, the stigmatized person risks being reduced from a whole person to a “tainted, discounted one” (Goffman 1963:12). Goffman’s position is a sort of recontextualization of Edwin Lemert’s (1951) earlier thesis on *primary* and *secondary* deviance, in which the individual—no longer able to rationalize his “deviant” label (*primary deviance*)—commences to engage in further deviant behavior (*secondary deviance*) because he has been labeled as such. McIntosh (1968:182) furthered Goffman and Lemert’s positions and held that, for homosexuals specifically, a “clear-cut, publicized and recognizable threshold is immediately threatened with being labeled a full-fledged deviant: one of ‘them.’” Additionally, being HIV-seropositive can have an even more devastating impact (medically and psychologically) on one’s identity. And, using illicit drugs results in still more “character assassinating judgments such as being out of control, deviant, sick, and generally dys- functional” (Smith and Smith 2005:34). Even if others do not discover these stigmas immediately, the fear is that one *would be discreditable* in the event anyone were to ever discover that the person was, for example, gay, HIV-positive, or a drug user—and certainly if one possessed all three of these characteristics (e.g., Neale, Nettleton, and Pickering 2011).

Stigmatizing Institutional Discourses

Drug laws, drug treatment/prevention programs, and health promotion strategies are all structured around a discourse that perpetuates spoiled identities, making it extremely difficult for an individual to escape and/or change them. This is particularly troublesome when the labels associated with these discourses result in the denial of access to institutional support. As a result, many users do not seek treatment (e.g., Grund et al. 1992; Madru 2003; Singer 2006), many gay men do not get tested for HIV (e.g., Madru 2003), and most hide (which has considerable consequences) to avoid being stigmatized, arrested, and ostracized (e.g., Kane and Mason 2001; Singer 2006; Swendeman et al. 2006). In other words, U.S. drug-related laws and policies have actually created more harm than they have reduced. Here, we will discuss just six examples of such policies in the United States: drug-related laws, policies that deny institutional access, drug treatment programs, drug prevention policies, health promotion programs, and the criminalization of HIV transmission.

Drug-Related Laws in the United States

U.S. drug laws exacerbate the stigma of drug use by selectively criminalizing some drugs, some drug use, some drug manufacturers, or some drug dealers, while others remain free from prosecution. For example, U.S. drug laws separate alcohol drinkers and tobacco smokers from users of other intoxicating substances (Falk 2001), and they delineate between those who use prescription drugs as prescribed and those who do not. In fact, those who “misuse” prescription drugs, or who use drugs other than alcohol and tobacco, are often heavily stigmatized when they are defined as having a “problem.” Even among illicit drug users, a hierarchy is created (e.g., McPhee 2012; Perrone 2009) that grants drug users who do *not*, for instance, use heroin, meth, or crack the power to haughtily distinguish themselves from those who do.

Denial of Institutional Access

Being a drug user is arguably one of the most serious violations in the United States, especially if the user has a drug conviction. For example, using drugs or having a drug conviction in the United States could result in (1) an eviction from one’s rental property, (2) the loss of public assistance (i.e., “welfare”) benefits, (3) the loss of child custody and/or the revocation of visitation rights, (4) the loss of voting rights, (5) the loss of employment or the restriction of employability in certain jobs, (6) the denial of government housing, and (7) the denial of financial aid (e.g., grants and loans) for higher education. Across studies, drug users have also reported fear over being discriminated against at work, school, and, even in drug treatment (e.g., Falk 2001; McPhee 2012).

These collateral consequences serve as “extra punishments” for those who use drugs and/or have drug convictions and were originally outlined under President Clinton’s Personal Responsibility and Work Opportunity Act (PRWOA) of 1996 (McCarty et al. 2012). Under PRWOA, a person with a felony drug conviction is “permanently disqualified” from Temporary Assistance for Needy Families (TANF) and Supplemental Nutrition Assistance Program (SNAP; formerly “food stamps”). However, states are able to opt-out of this requirement or modify it in whichever form they deem necessary. Only 15 U.S. states (e.g., Texas, West Virginia, Alabama) and territories (e.g., Guam) have maintained the original act in its entirety, while 19 others, including Maryland, Minnesota, and Wisconsin, have modified the restrictions on SNAP such that convicted drug felons can only access SNAP benefits if they first consent to drug testing. Interestingly, though, drug testing results in one state can affect qualification for SNAP benefits in other states. For example, if a person is noncompliant with drug testing requirements in one state, he/she may be disqualified from SNAP benefits in another (McCarty et al. 2012).

Drug testing is a critical practice in the enforcement of U.S. drug laws and the imposition of PRWOA’s supplemental punishments—as of August 2011, 13 states had such policies. Federal Housing Assistance (FHA) programs and private property owners may drug test applicants or recipients of housing assistance. Some housing authorities, such as those found in Chicago and Indianapolis, test both applicants and residences in their public housing developments (McCarty et al. 2012). Others, such as the owners of Section 8—allowed housing, have also implemented drug-testing policies. Section 8 housing, also known as the Housing Choice Voucher Program, allows low-income individuals and families to live in homes other than government subsidized housing projects that meet Section 8 program requirement (Donovan 2013). Drug testing under

such programs is particularly odious, as many HIV-seropositive individuals must rely on Section 8 benefits in order to secure housing for themselves and their families.

Being convicted of a drug offense can also prevent an individual from obtaining public housing altogether. For example, under U.S. federal law, anyone convicted of manufacturing methamphetamine in a federally assisted housing project is forbidden from ever living in Public Housing Authority complexes (they may still be able to obtain housing through the Section 8 program). And, even drug-related criminal activity can be grounds for eviction; this holds even if a guest in the house is responsible for the activity (McCarty et al. 2012).

Drug Treatment in the United States

Many drug treatment programs in the U.S. operate with “overly simplistic binaries” that label drug users as “clean” or “dirty” (Neale et al. 2011:5). For example, the experiences of many who have attended 12-step programs such as Alcoholics Anonymous (AA), Narcotics Anonymous (NA), and Crystal Meth Anonymous (CMA)—programs that are often court-mandated for drinking and/or drug-related offenses—can attest to this. Indeed, the “once-an-addict-always-an-addict” philosophy of these programs claims that addicts are victims to drug cravings; that addicts have lost control of drugs; and that abstinence from all substances—alcohol and drugs—is required to be considered “clean” or “sober.” This includes prescribed medications used for mental disorders, the use of prescription pain medication (Smith 2007), and even medication that is used to mitigate the effects of alcohol detoxification (Nimmagadda and Chakradhar 2006) or heroin withdrawal (Gilman et al. 2001).

The stigma linked to problem substance use (e.g., alcohol use) and the push for abstinence are both highlighted in AA’s on-line questionnaire, which is intended to assess if one has a problem. For example, one AA prompt encourages the respondent to “Be honest!” about drinking-related problems and warns that “Eventually, you will die, or end up in an institution for the rest of your life. The only hope is to stop drinking” (Alcoholics Anonymous 2013).

Those who fail to make a positive initial adjustment to 12-step programs and/or adhere to the philosophy of such abstinence programs are often considered weak; many have even been subjected to ridicule (see Polcin and Zemore 2004). Some users fear that a relapse (e.g., not refraining from drugs or alcohol) will lead to judgments and disgust by treatment providers and other patients/participants (e.g., Lloyd 2013). Individuals must thus accept that they have a “disease of addiction” and engage in a “discourse of dysfunction and illness [that] require[s] abstinence to maintain a ‘clean’ identity” (McPhee 2012:73). For those who do not, their (spoiled) identities will never be “cleaned” and re-defined in recovery, and they will continue to feel shame and worthlessness.

Drug Prevention

U.S. drug prevention programs also engage in stigmatizing discourses. One example is the anti-methamphetamine campaign launched by The Meth Project (TMP; 2013), one of several U.S. non-profit organizations that comprise The Partnership at Drugfree.org, and which often employs scare tactics that play on anxieties and fears about being perceived as “white trash” (Linneman and Wall 2013:2). For example, on TMP’s website, visitors are asked to identify the physical “characteristics” of a meth-addict by playing a

“Mug Shot Match-Up” game.¹ The player is shown a “before” photo of a “meth user,” as well as a stack of “mug shots” from which to choose. The player can then view the “full progression” of that particular “user’s” facial disfiguration. Such images, or “mug shots,” as Linneman and Wall (2013:14) explain, are not “mere instrument[s] of identification,” rather, they are “social force[s] with the capacity to affix stigma, shame and criminality on the body of the accused methamphetamine user.”

Health Promotion Programs and HIV

Just as drug treatment divides users and non-users into hierarchies of clean and dirty, HIV tests and health promotion programs also divide those tested for HIV into two hierarchical statuses: “positive” or “negative.” Moreover, discriminatory language such as “clean,” “healthy,” and “safe” is often used by HIV-seronegative men to describe themselves to potential sex partners (Botnick 2000:62–63). Conversely, HIV-seropositive men are sometimes regarded as “dirty,” “infected,” or “unsafe.”

HIV risk-related policies have had stigmatizing effects as well—such as the push for condom usage that was initiated during the AIDS epidemic. According to Botnick (2000:52), condoms were only intended to be a “stopgap measure” until a better solution came along. Instead, U.S. ASOs—community organizations tasked with the goal of providing support and services to those diagnosed with HIV/AIDS and their families—resorted to “good fag/bad fag” (Botnick 2000:52) scare tactics, such as maintaining “high risk” warnings on sexual acts (e.g., oral sex without condoms) that other countries had only considered risks in theory. Additionally, some ASOs even resolved to “scare the shit out of gay men” (Botnick 2000:52) by increasing the rhetoric in safe sex advertising.

Safe sex ads that prey on gay men’s feelings of guilt or that try to frighten them into a more health-conscious way of living can often stigmatize them, regardless of their HIV serostatus. One ad, in particular, features the image of an HIV virus particle with a gift tag attached that reads, “To: Adam, From: Eric.” At the bottom of the ad is a simple message: “Nobody wants to get HIV” (Quebec Ministère de la Santé et des Services sociaux 2007). Many of these types of safe sex messages are ubiquitous, and many originated in the gay community—where they continue to be promulgated by public health agencies, ASOs, healthcare providers, community leaders, family, friends, and others.

Criminalization of HIV Transmission

The fight against AIDS took an insidious turn when dozens of state legislatures in the United States were invariably pressured to enact laws to “protect” the “partners of HIV-positive individuals—by punishing those who know their HIV-positive status but do not disclose it to potential partners” (Kaplan 2012:3). To date, at least 80 “HIV-positive people have been arrested and/or prosecuted for consensual sex, biting, and [even] spitting” (Center for HIV Law & Policy 2010:1; see also Galletly and Pinkerton 2004; Kaplan 2012). While some states use their current penal statutes to criminalize transmission (e.g., aggravated assault), “others have created a separate crime of intentional HIV

¹Whether the photos used on The Meth Project are the actual photos of meth users, or whether they are “models” made up to look like meth users is unknown; however, it should be noted that there are no distinguishing features in the photos used by The Meth Project that are otherwise common to police booking photographs (e.g., booking slates).

exposure, passed statutes that enhance criminal penalties when someone who is HIV-positive [*sic*] commits a crime, or applied general sexually transmitted infection statutes to HIV exposure” (Waldman 2010:553–554). Supporters of these laws argue that persons who are aware that they are HIV-seropositive and who expose others through “unprotected” sexual contact are participating in “indefensible conduct [that is] . . . negligent at best and homicidal at worst” (Burris et al. 2007:40).

Summary

Both the policies in the U.S. war on drugs and the fight against AIDS have successfully marginalized a population of people who use drugs and who are HIV-seropositive. These men have been labeled as “tweakers” or “dirty meth-heads,” and, if they have a drug conviction, they are denied access to resources that could actually help them address their drug use and reduce high-risk behaviors. In other words, they are devalued. Not only do they receive “negative appraisals” for their behavior, but also their overall worth as individuals is denigrated (Smith and Smith 2005:34). To circumvent the substantial harms of being revealed as an HIV-seropositive drug user, then, many of these individuals retreat into hiding (see Wiebel 1990), where they often become engrossed in a subculture comprised of others who are similar to them and who separate themselves from the non-drug using, HIV-seronegative “others.”

SUBCULTURE FORMATION IN THE DRUG WAR AND THE FIGHT AGAINST AIDS

The policies of the U.S. drug war and the fight against AIDS have particularly stigmatized and ostracized those who are both HIV-seropositive and who use illegal drugs—this stigma is subsequently aggravated because it is experienced by those (i.e., drug using gay men who are HIV-seropositive) whose sexuality already situates them outside the boundary of an otherwise heteronormative society (e.g., Bernstein 2003; Conrad and Schneider 1992). Such stigmatized and ostracized individuals can eventually form their own “sub-universes” (Berger and Luckmann 1966:104), complete with their own values and norms.

Although the ritual use of drugs and the engagement in “risky” sex practices is often interpreted as a blatant disregard for the norms and values of the larger mainstream, subcultures that engage in these types of behaviors often form in reaction to larger cultural norms (Hebdige 1979). Though perceived as “deviant,” their behaviors are, in fact, the meaningful expressions of those who have been stigmatized through a larger culture’s criminalizing and pathologizing ideologies. Through a subculture’s deviant actions and through its appropriation of cultural signs and its “distinctive rituals of consumption [. . . the subculture reveals its ‘secret’ identity and communicates its forbidden meanings” (Hebdige 1979:103). These “systems of meaning” (Spradley 1973:5) are typically communicated through the use of language such as signs, gestures, symbols, and style.

Subcultural Language and Rituals

Having been driven underground by the constant fear of being excluded or “cast out” (Biernacki 1986; White 2009; Zinberg 1980), many individuals often become involved in subcultures that offer “shelter from stigma” through the sharing of “distinct language and roles” (Lloyd 2013:91). Indeed, subcultural language and rituals (for instance, drug use and “risky” sex) allow those who have suffered from a stigmatizing experience to alleviate

any associated pain (see Geertz 1973). Their rituals thus empower them.

Consumption, and in particular, the consumption of *style*, is also used as a ritual, such as when signs and symbols (e.g., the pink triangle, the rainbow flag) are re-appropriated to embody new, often affirming meanings for the subculture (Hebdige 1979). According to Hebdige (1979:3): “the most mundane objects . . . take on a symbolic dimension, becoming a form of stigmata, tokens of a self-imposed exile. . . . These objects become signs of forbidden identity, sources of value.” Spradley (1973) stressed the importance of understanding the ways in which language was used to communicate cultural and subcultural knowledge. This is particularly useful for understanding subcultures that create and utilize language or argot [the language of deviant groups who are “legally proscribed” (Lerman 1967:211)] in deceptive ways. These “sophisticated techniques” are used to identify, create, and maintain boundaries of risk and acceptability” (McPhee 2012:170), which subcultures can then employ to remain hidden and safe from the judging, criminalizing, and stigmatizing gaze of the mainstream.

Subcultural Hiding and Harm

Living in social worlds where “pathological,” “criminal,” or “sick” behaviors (e.g., drug use and “risky” sex) are the “norm” is one of the most common (and arguably *effective*) methods for avoiding stigma related to one’s drug use or other behaviors. Indeed, for many drug users, being “around like-minded people (other drug users who [are] intentionally unseen) [is] a source of comfort and safety” (McPhee 2012:163; see also Zinberg 1980). The individual is thus effectively insulated from “others” who do not engage in these behaviors—others who might judge them.

Those who engage in behaviors that are not culturally sanctioned—such as drug usage or “risky” sex—must often resort to clandestine measures in order to ensure their safety while pursuing and/or engaging in these activities (e.g., Becker 1963; Bordua 1961; Empey and Lubeck 1968; Polsky 1969). As Becker (1963:169) explained, “They must devise other means to keep them hidden.” But, when in hiding, it is much more difficult to affect one’s behavior (Becker 1963; cf. Hebdige 1988); it is much more likely that an individual will experience harm as a result of his or her behavior (Zinberg 1980; see also Mateu-Gelabert et al. 2005); it is less likely that he or she will maintain connections to mainstream society; and, it is much more likely that his or her life will be centered on drug use and “risky” sex. Essentially, the individual becomes ensnared in their deviant/criminal lifestyle, and, as Weimer (2003:267) states, they ultimately “withdraw from mainstream culture into a world of solitary, inauthentic pleasures that are far removed from ‘reality.’”

The Exacerbation of Harm

Because subcultures form outside of mainstream society (and hence, outside of the purview of mainstream society), the members of subcultures often lose their connections to mainstream society (e.g., Becker 1963; Cohen and Short 1958; Sutherland 1975). Homosexuals comprise one such population (D’Emilio 1988). With respect to drug-using subcultures, one of the consequences of this estrangement is the inability to remain in contact with or meet, for instance, those who engage in safer drug-using (Zinberg 1980) and sex practices. Segregated and alone, the likelihood that they will experience some form of harm is, thus, exacerbated.

Zinberg (1980), Stryker (1989), and McPhee (2012) have all demonstrated that stigma actually fosters even more dangerous drug usage. Indeed, Zinberg notes that when stigmatized, drug users are disconnected from mainstream society (as well as non-drug using peers), they are less able to engage in patterns of use that limit or control their use of drugs, and hence, they are more likely to experience “problem” drug use. McPhee (2012:185) describes, specifically, the harms that intravenous drug users experience: “The impact of this stigma puts injecting drug users at greater health risks (including death) by having to stay out of sight as they use their drugs, leading to injecting drugs in inappropriate and unsafe environments, and the health risks associated with this.”

Furthermore, a significant amount of drug research shows that those who maintain connections to the conventional, mainstream, non-problem drug using world are more likely to *discontinue* using. Neale et al. (2011:3) state:

An individual's potential to recover was impeded by the extent to which they had been immersed in the world of addiction to the exclusion of other more ordinary, everyday activities and to the extent that they had ruined their conventional, non-drug social relationships. (See also Biernacki 1986)

Harms to Health

Hiding drug use can also prevent drugs users from receiving appropriate medical and/or psycho- logical care. For example, pregnant women—out of a fear that their physician might report their drug use to authorities (e.g., Child Protective Services; Women, Infants, and Children [WIC]; law enforcement)—may forego prenatal treatment or other related care (Roberts and Pies 2011); individuals with psychiatric or other health disorders may be prescribed medication that can have adverse—even fatal—effects when taken with other drugs (e.g., Lindsey et al. 2012); and, those who are HIV-seropositive may not seek or receive the proper care they need, or they may frustrate attempts to lower their viral load (amount of HIV virus) and/or increase their CD4 (white blood cells that fight infection) counts (e.g., Lindsey et al. 2012).

Studies also indicate that men who seek sex from Internet sources—such as those who PnP—report “more unprotected sex and sexually transmitted infections, controlling for demo- graphics and overall number of sex partners” (McKirnan et al. 2007:151). Craigslist users, compared to other on-line sources, tend to engage in the riskiest sexual practices. In fact, Grov (2012:815) found that men who sought sex via Craigslist had “the greatest proportion of their anal sex acts to be unprotected, and [that] nearly one in four of their anal sex acts was experienced under the influence of alcohol or drugs.”

THE PNP SUBCULTURE

PnPers seek condomless sexual experiences enhanced with drugs such as crystal (AKA “Tina”), “GHB” (AKA “Gina”) or one of the GHB “prodrugs” (i.e., GBL and BDL). On occasion, though, MDMA (AKA “ecstasy”), *ketamine* (AKA “Special K”), and marijuana are sought as well.

The expressions, rituals, and signs associated with the PnP subculture—as with other “deviant” gay sex- and/or drug-related behaviors—have been characterized as reactions to gay and/or HIV/AIDS-related stigma. Most of the evidence suggests that the PnP subculture, a primarily gay phenomenon, can be traced back to the early years of the AIDS epidemic (e.g., Green and Halkitis 2006; Kurtz 2005; Shernoff 2005; Westhaver

2005), when many gay men throughout Australia, Europe, South Africa, the United Kingdom, and the United States—as a result of having been affected or infected by HIV/AIDS—emerged stigmatized (Botnick 2000; see also Green and Halkitis 2006; Kurtz 2005; Shernoff 2006; Westhaver 2005). This research has found, for instance, that gay men who engage in “high risk” drug and sex behaviors (like PnP) experience feelings of shame, guilt, or sadness associated with having placed themselves (or other men) at risk of HIV-infection (e.g., because they engaged in condomless sex) or because they outlived the epidemic (i.e., “survival guilt”; see Botnick 2000; Davis et al. 2006; Mimiaga et al. 2008).

HIV/AIDS-related stigma can also be linked to PnP’s existence on the Internet. Ashford (2009:299) notes that, for sexual minority groups (such as PnP), the use of e-based mediums such as, “bulletin boards, chat rooms, [and] profile based sites” has grown exponentially. This is not surprising given that the Internet allows groups such as PnPers to anonymously seek out certain high-risk drug- and sex-related behaviors (e.g., Grov 2010, 2012; Grov et al. 2007). These groups can evade detection from law enforcement personnel, drug and/or safe-sex outreach workers, and others who might further stigmatize them.

Through the various systems of social control—behavioral science, criminal law, medicine, and public health—gay men, drug-users, and those who are HIV-seropositive (or who are merely at risk of infection) have experienced a history of oppression and marginalization. These stigmatizing experiences have subsequently led to the emergence of various cultural and subcultural groups that center around counternormative drug- and/or sex-related behaviors and activities. Throughout their formation, these subcultures engage in various re-appropriations of mainstream cultural signs, symbols, and rituals that give their behaviors—both on and off the Internet—meaning. While these behaviors seem to disregard the norms and values of the mainstream, they are, in fact, the meaningful expressions of those who seek to mend and empower themselves from the stigma of being criminalized, medicalized, and pathologized.

Given that the PnP subculture has largely moved to the Internet, this article describes—through virtual ethnography—189 PnP personal ads from the “Men Seeking Men” section of Craigslist’s Los Angeles portal. By doing so, we portray the subcultural values, rituals, and characteristics of this group, and we illustrate some of the ways in which they present themselves. An acknowledgment of this subculture’s experiences, in addition to an exploration of the meanings PnPers attach to them, can lead to the creation of more appropriate, more effective, less stigmatizing, less marginalizing, and more culturally sensitive policies. Until such a time as PnP is acknowledged as a subcultural *milieu*, however, any resultant policy will continue to criminalize, medicalize, and pathologize its members, and their true needs will not be met.

METHODOLOGY

Research Design

This study is a virtual ethnography that combined two ethnographic methods: *ethnographic content analysis* and *instant ethnography*. Ethnographic content analysis is a method that “situates textual analysis within the communication of meaning” (Altheide 1987:68). Different from conventional content analysis—in that it does not

measure “static content within media texts” (Ferrell et al. 2008:188)—ethnographic content analysis acts as a cultural tracker by “following traces of cultural forms, activities, and histories” (Acland 1995:19). The second, instant ethnography—also known as the “ethnography of performance” (Ferrell et al. 2008:180)—counters the claim that an ethnographer must spend considerable amounts of time “inside a group or situation” (Ferrell et al. 2008:179), and, instead, allows him or her to view “crime, criminality, and criminal justice as a series of [instant] contested performances undertaken in dangerous little everyday theatres” (Ferrell et al. 2008:181). This combination provided a structure that allowed for an analysis of the underlying meaning of PnPs subcultural forms and activities in an on-line environment—in particular, PnPers’ “dangerous” performances acted out through their on-line personal ads—and it allowed for an exploration of the links between their activities and their histories. Steinmetz (2012) notes the importance of developing virtual ethnographic methodologies for use in on-line message boards. According to Steinmetz (2012:27), virtual ethnographies can provide a way to better understand “the immediacy, the emotions, and the connection to other users” of the site, and can allow the researcher to feel and experience those emotions and connections (see Blevins and Holt 2009).

The Virtual Field Site: Craigslist

Globally, Craigslist is the largest Internet source for both classified and “help wanted” advertisements (“ads”). Craigslist was chosen as a source for data because its boundaries are not closed and restrained; thus, its features can be accessed by anyone. Second, Craigslist is public and does not require login credentials—anyone can post or read Craigslist’s ads, regardless of where they are physically located (e.g., a person in New York City can peruse apartment listings in Los Angeles). This is relevant in that it could affect the manner in which personal ad posters present themselves, especially if they include photographs and/or intimate information about themselves. Third, Craigslist is free; it does not charge to place a personal ad—anyone with access to the Internet can participate. This, in turn, allows for a richer mixture of people who use the site. Fourth, Craigslist is user-moderated, allowing users to “flag” inappropriate content, which affects the amount of freedom experienced by ad posters. Last, Craigslist’s numerous portals—over 450 cities in 50 countries (Buckmaster 2008)—allows for the global sharing of ideas, information, and culture heritage.

Sampling

A sample of Craigslist personal ads from the Los Angeles portal of Craigslist’s “Men Seeking Men” section was collected over a 10-day period commencing April 12, 2012 and ending on April 21, 2012. April was chosen because it is one of the only months with no bank holidays, and it followed the 2012 Easter holiday. It was assumed that any ad postings would not be influenced by holidays or Easter-related vacations, such as time off from employment or school.

A purposive sampling method, in which only PnP personal ads were analyzed, was used. For an ad to be included for analysis, it had to first contain at least one of three PnP-specific drug argots: “party” (e.g., “party and play,” “party ‘n’ play,” “partying”), “PnP,” or “Tina.” These were determined to be the most widely used argots among PnPers—gleaned from the literature (e.g., Berg 2008; Cabangum 2006; Cimino 2005; Green and Halkitis 2006; Grov 2010). Secondly, these argots could not have been used within a “No PnP” context, meaning, upon analysis of each ad, if the poster specified, “No PnP,” or “No partying,” the ad was not included.

Using Craigslist's search function (located at the top of each ad section), the keywords (i.e., "Party," "PnP," and "Tina") were entered during three separate searches, performed each morning between the hours of 1:00 a.m. and 3:00 a.m. from April 12, 2012 to April 21, 2012. Despite the time of day in which the ads were reviewed and collected, the ads could have been posted at any time during that day. All of the ads that met the criteria were then selected. Duplicate ads (i.e., ads that were placed more than once, but at different times) were not included in the final analysis unless different information appeared in each ad. In some cases, individuals re-posted their ads without removing their previous ads, perhaps to gain more exposure or because they were unable to see their original ad and believed that it had been removed by Craigslist monitors.

The resultant ads ($n=189$) were arranged chronologically. In contrast to Grov's (2012) study of MSM on Craigslist in New York City, the majority of ads (59.8%) analyzed in Los Angeles were placed during the daytime (8:00 a.m. to 7:59 p.m.). Fridays were the most common days when ads were posted (29.1%), and Mondays were the least common (1.6%).

Coding

The coding scheme allowed for the articulation of several subcultural concepts of which the theoretical framework was comprised. In particular, ads were reviewed for commonalities in the ways in which PnP ad posters presented themselves (i.e., photos and other descriptions of their appearance), their techniques for reducing harm (type of person sought, where to meet, etc.), the usage of communication (i.e., argot, slang, and writing style), and the types of deviant behavior in which they sought to engage (e.g., bartering or sharing drugs, purchasing drug, certain types of sexual acts). Due to researcher subjectivity, and in order to maintain reliability of data, two additional researchers coded random samples of 10% of the ads. A 90.2% level of interrater reliability was achieved.

PNP CRAIGSLIST ADS

Demographics

The average age of the ad posters was 33 years ($n = 183$) with a median age of approximately 34 years. In terms of location, 37.6% of the posters listed their area as "Central Los Angeles," 22.2% listed the "San Fernando Valley," 12.2% listed "Long Beach/562," 6.9% listed the "San Gabriel Valley," 7.5% listed "Westside/South Bay," and only one (0.52%) poster listed that he resided in the "Antelope Valley" (see Table 1). One's race or ethnicity was listed in only half (47.1%) of the ads. Most listed as white (19.2%). Hispanic or Latin/o was the second largest category (18.5%), with 10 ads listing black (5.2%), five ads (2.6%) listing an ethnicity that was recorded as "other" (e.g., "mixed race"), and only three (1.6%) listing their ethnicity as Asian.

Most of the ad posters (89.9%) did not list their sexual orientation or HIV status (88.8%). Eleven posters (5.8%) listed their orientation as "bisexual," four posters (2.1%) indicated "gay," and three (1.6%) listed "straight." One poster listed that he was a cross-dresser. Two (1.1%) indicated they were HIV-seropositive, while 19 (10.1%) listed their status as HIV-seronegative.

Appearance

When describing their appearance, a large majority (78.8%) of posters included descriptors. Some used “very good-looking” (16%), “masculine” (12%), “hot” (3%), or “worked-out” (12%) to describe themselves. Others posted “average body” (9%) or “lean” (11%). Still some posters described themselves as “overweight” or “chubby” (4%). These descriptors were often included whether or not the posters had chosen to list their size and weight (see [Table 2](#)).

TABLE 1
Demographics

	<i>N</i> = 189	% of ads (<i>N</i> = 189)
Location		
Central Los Angeles	71	37.6
Long Beach/562	23	12.2
San Gabriel Valley	13	6.9
San Fernando Valley	42	22.2
Westside/South Bay	14	7.5
Antelope Valley	1	0.52
Hours of ad placement		
8:00 a.m.–7:59 p.m.	113	59.8
8:00 p.m.–7:59 a.m.	76	40.2
Days of week		
Friday (2)	55	29.1
Saturday (2)	54	28.6
Sunday	13	6.9
Monday	3	1.6
Tuesday	10	5.3
Wednesday	30	15.9
Thursday (2)	24	12.7
Sexual orientation		
Bisexual	11	5.8
Gay	4	2.1
Straight	3	1.6
Not listed	170	89.9
Race/Ethnicity		
White	36	19.2
Hispanic/Latin/o	35	18.5
Black	9	5.2
Asian	5	2.6
Other	3	1.6
Not listed	100	52.9
HIV status		
Seropositive	2	1.1
Seronegative	19	10.1
Not listed	149	88.8

Pictures

In all, 133 of the 189 ads featured a picture (70.4%). The subject matter of the photographs (see [Table 2](#)) varied, but typically consisted of semi-nude photographs—most of them showing a close-up image of either a penis (34.4%) or buttocks (26.5%). Only two photographs showed the poster’s face (1.1%). Ten ads (5.3%) featured photographs of group man-on-man sex. Only one ad (0.5%) featured a totally nude picture (without his face).

The choice of picture seemed to be related to the type of sex or “scene” that was

sought. For example, if oral sex was sought, at times, the ad featured a picture of a penis (22%). If anal sex was desired, a picture of buttocks or of a sphincter was sometimes displayed (40%).

TABLE 2
Descriptors Used by PnP and Posters

	<i>N</i> = 180	% of ads (<i>N</i> = 180)
Appearance	149	78.8
"Very good-looking"	31	16.0
"Masculine"	23	12.0
"Worked-out"	23	12.0
"Lean"	20	11.0
"Chubby/overweight"	8	4.0
"Hot"	5	3.0
"Average body"	5	3.0
Pictures	133	70.4
Penis	65	34.4
Buttocks	50	26.5
Group sex	10	5.3
Face	2	1.1
Nude (no face)	1	0.5
Preferred Sex vs. Picture		
Anal sex (w/pic)	76	40.0
Oral sex (w/pic)	42	22.0
Preferred Sex Role	114	60.3
Bottom for top	40	35.1
Top for bottom	40	35.1
Versatile	17	15.0
Versatile bottom	9	7.9
Versatile top	7	6.1
Preferred Sex Scene	146	77.2
Anal intercourse	97	51.0
Fellatio	63	33.0
Group Sex	10	10.0
Mutual masturbation	8	4.0
Bareback Sex	38	20
Drugs		
Argots	175	92.6
Poster had drugs	81	42.8
Personal Identifiers		
E-mail	0	100%
Other	0	100%
Preferred Meeting Point	142	75.0
Travel	85	45.0
Host	79	42.0
No preference	25	13.0
Hotel	2	1.1

Sexual Rituals

A conservative majority (60.3%) of the ads listed the poster's preference for a particular sex role. Of those ads listing a sexual role preference, 35.1% listed "bottom," 7.9% listed "versatile bottom," 15% listed "versatile," 6.1% listed "versatile top," and 35.1% listed "top." Among men who have sex with men, a bottom is the person who is penetrated, the top penetrates, and the versatile both penetrates and receives.

A large majority of the postings, 77.2%, mentioned a specific sexual act desired, typically expressed using slang (e.g., “blow job” or “giving head”). Some common examples of sex acts sought were fellatio (33%), anal intercourse (51%), mutual masturbation (4%), or group sex (10%). Other ads stated that the poster was simply looking to “PnP” or “party” (see [Table 2](#)). Few specifically requested bareback or condomless sex in their ad (12.7%).

Drugs

Approximately 88.4% of the ads mentioned drugs—mostly crystal, but in a few cases, GHB (see [Table 2](#)). With respect to drugs, 92.6% of the ads mentioned drugs using argot or symbols (e.g., “T” or “G”). No ads mentioned a drug by its chemical name (e.g., crystal methamphetamine or GHB).

Almost half (42.8%) mentioned that the poster had party drugs, typically expressed as “[I] have favors,” and/or that they were willing to share drugs with a prospective mate, which was typically expressed as “will share,” “willing to share,” or, “I’ll take care of you,” to cite a few examples. However, two ads did mention that the poster was willing to share if the respondent had money to offer him.

Only one ad poster offered to trade sex for the use of a respondent’s drugs, and two of the ads were explicit solicitations for buying drugs. One ad was explicit: “Looking for Tina, nothing more. Have funds for it.” The other ad was a bit more descriptive: “Looking for my friend Tina, think I owe her some money. Into PNP, 420 and Tina is a must, can fund.” None of the ads, however, were explicit solicitations for the selling of drugs.

Meeting Point

A significant majority (75%) mentioned or described a setting preferred where the poster sought to meet and engage in PnP. It was almost an even split between those who wanted to be met at their location and those who sought to meet at another location. Seven-nine posters preferred to host (42%), while 85 posters preferred to travel (45%) to a prospective mate’s location. Twenty-five posters expressed no preference (13%). Two ads listed a hotel as the location, with both ad posters requesting that a potential mate travel to them.

THE PNP SUBCULTURE ON CRAIGSLIST

While a “typical” profile of a Los Angeles county Craigslist PnP emerged, it is important to note that this profile was based solely on the averages of the coded data herein. The typical user was white, 33 years of age, 5’10¹¹, 172 pounds, either “top” or “bottom” (e.g., “versatile”), and with no HIV serostatus listed. Furthermore, he placed his ad on a Friday in the Central Los Angeles section; he preferred not to meet at his home; he reported that he was physically attractive (e.g., “very good-looking,” “handsome”); and, he did not specify whether he had illicit drugs that he was willing to share.

PNP Language: Drugs

Below is an example of one Craigslist PnP ad in which HIV serostatus and illicit drugs are mentioned:

ParTy TOP looking for BBOTTOM - 24 (Los Angeles)

Date: 2012-04-20, 8:38AM PDT

Reply to: XXXXX-XXXXXXXXXX@pers.craigslist.org

Young tall handsome Peruvian TOP looking to PNP today with a fun and chill bottom who HAS FAVORS TO SHARE

YOU HOST. looking to travel. BB only, STD and HIV neg here.

Lets blow some clouds OR get to the point and fuck today! send stats and pics for a response, SERIOUS ONLY NO GAMES NO BS NO ENDLESS EMAILS.

To the average viewer, only some of this advertisement may be legible. The ad's poster uses sub- culturally specific drug and sex argots to distort the meaning of his ad as well as to ensure that his message is delivered to a very specific audience (e.g., Sonenschein 1969). In a study of New York marijuana users, Johnson et al. (2006:46) explain that, when used by drug users and drug sub- cultures, argots function primarily to "maintain secrecy . . . to hide subculture communications from outsiders"—especially law enforcement. Furthermore, they hold that the "words or terms themselves—constitute important verbal threads that effectively connect participants," and can often convey "how participants feel and think about [drug] use" (Johnson et al. 2006:46). These symbols "describe the rituals and conduct norms that define . . . and constitute . . . the subculture" (Johnson et al. 2006:46). In other words, these symbols give meaning to their deviance or criminality.

Many of the PnP ads that were analyzed included particular drug and drug-use related argots. For example, the term "favor" was commonly used to denote having or seeking drugs, such as "lookinG for favors" or "Has favors to share." The latter phrase also indicates that the poster has drugs that he is willing to share. In some ads, posters were a bit more specific as to the type of drug they preferred; for example, "420" is a common way to connote marijuana, and often posters indicated that they were "420 friendly." Posters who included "let's blow some clouds" or the word "dragon" were referring to crystal ("cloud" and "dragon" are terms used to describe the smoke that is exhaled from a glass pipe). Still, most posters (99.5%) indicated their search for crystal meth by indicating PnP, Party, Tina, or Party 'n' play.

Many of the common argots used to describe party drugs were combined with a capitalization scheme; these were found throughout the ads that were analyzed. For example, "LookinG to ParTy," in this form, uses argot with a drug-specific capitalization scheme. The capital "T" represents crystal methamphetamine, while the capital "G" is used to represent GHB or GBL.

PNP Language: Sex

Capitalization schemes were also used to refer to preferred sexual practices. In the above ad, BBOTTOM indicates that the poster seeks bareback (condomless) sex from a bottom. Many PnP ads (67.2%) also included sex argots to indicate desired sexual activities. For example, those seeking fellatio indicated that they "need oral bottom," while those wanting anal sex posted argots such as "bottoms apply." In contrast, "looking to kick back and stroke" was used to tell ad viewers that mutual masturbation was sought, while "3way" or "group action" was used to seek-out multiple sex partners.

Subcultural Secrecy

In addition to using argot that is understood within the culture or subculture, outsiders, such as law enforcement or even, criminologists, can be left confused and unable to

understand its meaning. This has allowed PnPers to hide from not only arrest, but also from researchers. Posting anonymous ads with only a few personal identifiers provides another layer of secrecy as well. Thus, it is nearly impossible to identify these men during their “routine” activities. For instance, in those ads that featured pictures, only bodies were included—no faces. Additionally, no personal names were given, no phone numbers or email addresses were provided, and, within days (and some- times hours), the ads themselves were gone, leaving no trace of the poster. Last, as mentioned above, all of the ad posters used PnP-specific argots, and none mentioned drugs by their chemical names (e.g., crystal methamphetamine, GHB/GBL, marijuana). This is similar to the ways in which drug dealers and buyers communicate (e.g., Collins 1999), and perhaps, illustrates an attempt by ad posters to maintain secrecy while having the opportunity to engage in “deviant” or criminal behavior that might otherwise be stigmatized or labeled.

The omission of certain information from PnP ads is also a method for maintaining secrecy and limiting condemnation. For example, most of the ad posters did not disclose their HIV serostatus. This reluctance is not surprising given that individuals who are HIV-seropositive often experience fear of rejection, fear of being scorned, or even fear over facing potential criminal sanctions. In the face of the AIDS epidemic, the sweeping changes—the renouncement of unprotected sex, the disavowal of party drugs, and the pressure to disclose one’s HIV serostatus—were perceived as stigmatizing admonishments (e.g., Adam et al. 2011). As a result, some, like those who PnP, felt pressure to either modify or abandon behaviors that were used as protective and coping mechanisms: disclosing HIV serostatus, wearing condoms, refraining from drug use, and getting tested (Groves 2010). Rather, they continued and sought out others to engage in behaviors that the mainstream had decried as unhealthy or dangerous.

DISCUSSION

In every war there are enemies, and when forced to defend themselves, we know that enemies have a tendency to hide. These two points provide a fitting context for our discussion on the experiences of gay drug users. Despite the often well-intentioned efforts of those on the front lines of the war on drugs and the fight against HIV/AIDS—addiction counselors, criminal justice practitioners, healthcare workers, policymakers, psychologists, public health officials, social workers—the fact remains that many of the strategies they employ result in more harm than good. In fact, one of the harms caused—stigma—helped to bring the drug- and sex-related rituals associated with some gay cultures and subcultures to bear.

The Internet allows PnPers to hide and avoid detection, which keeps them safe from stigma and all its accompaniments. Whether on-line or among themselves, PnPers are empowered and able to resist the laws, the stigma, and the medicalization that results from mainstream societal norms. PnPers can also resist being stigmatized by the gay mainstream; indeed, some of the non-PnP Craigslist ads we observed were found to contain language such as “No PnP,” or “No tweakers.”

The ways in which PnPers present themselves on-line, how they communicate and negotiate risk and/or reduce harm to themselves and others, and the types and reasons for their engagement in deviant behaviors, such as illicit party drug usage and condomless sex, do have meaning; this was apparent across all of the PnP ads. Still, most PnPers who post on Craigslist recognize the potential harms of being discovered for violating these norms. Through the anonymous posting of cryptic personal ads, those

who PnP are thus able to partake in the soliciting or offering of drugs and sex with little to no interference from the mainstream, from law enforcement, and from gay culture (and other gay subcultures).

Implications

It is imperative that those wishing to address the behaviors of those who PnP—or who seek to understand PnP as a whole—acknowledge the potential harms that can arise out of seemingly well-meaning gestures of support. It is also important to remember that many gay men have “fatalistically changed identit[ies]” as a result of having been “AIDS affected [and] grief affected” (Botnick 2000:51). As a result, many of these men are “less willing or able to cope with sexual safety” and have thus turned to the Internet—“an attractive venue for finding partners and settings where HIV need not be cognitively present” (McKirnan et al. 2007:158). These men may respond differently to messages regarding safe sex, HIV, and drug usage, based on who they perceive themselves to be. The future of safe sex ads and promotions should thus consider the populations that will respond favorably to these messages and those who may perhaps rebel.

Because there is often a normative pattern of sexual interaction among gay subcultures (Green and Halkitis 2006), a better understanding of these interactions could give rise to more effective policies to address their specific sex- and drug-related behaviors. User-based solutions can also be effective. For example, in a study that addressed the “[drug] user side of harm reduction” (Friedman et al. 2006:1), researchers focused on early intervention efforts in the cities of New York, Rotterdam, Buenos Aires, and others areas throughout Central Asia and found that the efforts of drugs users were actually helpful in curbing HIV infection. They concluded: “Drug users are active agents in their own individual and collective behalf, and in helping to protect wider communities, and that ‘harm reduction activities and research should take note of and draw upon both the micro-social and formal organizations of users’” (Friedman et al. 2006:1). Even PnPers on Craigslist in Los Angeles were aware of the potential harms of engaging in such behaviors, and, at times, even sought to protect others. For example, one ad admonished an unidentified partner for having “used” them for their drugs. The ad also served as a warning to other potential partners that this type of behavior would not be tolerated.

The current policies that address the behaviors associated with PnP are ultimately ineffective. For this reason, many of these failed policies are “a costly distraction from programs that we know work—programs such as effective prevention, protection against discrimination, reducing stigma . . . and providing access to testing and treatment” (Cameron 2009:63). Such policies will continue to push stigmatized gay drug-users into similar subcultures, where eventually they will hide—perceiving themselves to be the enemy—out of the reach of *any* attempts to help them.

Limitations

This article is limited in that only a content analysis of PnP ads was conducted. While it would have been preferable to conduct open-ended interviews with PnPers, recruiting research participants via Craigslist posed some ethical concerns. Nonetheless, this article can help other researchers and provide a foundation for other ethnographies.

These findings are also limited in that many gay men and MSM post advertisements on

other personal ad sections of Craigslist (e.g., “Casual Encounters,” “Miscellaneous Romance”). Ads from these other sections could, thus, be an additional research project. Further, PnP is certainly not specific to Los Angeles County, or California, or even the United States—it occurs across the globe (in other countries, such as the United Kingdom, France, and Germany, drug-driven sex is often referred to as “chem sex”). Thus, these findings cannot be generalized outside of Los Angeles; indeed, given the various micro-cultures within the PnP subculture, these findings most likely cannot be generalized to even the group that was sampled.

Additionally, the methodology is limited inasmuch as the sampling time frame was brief and did not account for all of the ads that may have been posted during each 24-hour-period that was sampled. Future studies of this sort should attempt to gather as many ads as possible either through an automatic collection or by utilizing more collection periods each day.

Last, as noted by Steinmetz (2012), there are inherent problems with virtual ethnographies that utilize on-line message boards. In addition to the inability to confirm identities, the boundaries of space are difficult to replicate and temporality makes it difficult to experience the data in real-time. For instance, the sample is not representative as it is likely that those who posted after 3:00 a.m. and then removed their ad hours later had no chance of being in the study.

Nevertheless, the purpose of this study was to articulate the similarities in the ways in which members of one subculture of PnP in a single metropolitan area (i.e., the greater Los Angeles area) presented themselves on-line. As a result, we were able to determine some of the types of drug argots they used, the information they disclosed (or did not disclose), and the ways in which they reduced harm to themselves. In doing so, we were able to establish a link between their behaviors and the underlying meanings of their behaviors.

CONCLUSION

Despite the paucity of PnP-specific research, there are countless studies of similar drug- or sex- related behaviors; these neither mention PnP specifically nor do they elucidate the collective experiences of gay men who use illicit drugs and/or engage in condomless sex (see Carpiano et al.’s 2011 study of the role of neighborhoods and networks in drug use among gay men or Kelly et al.’s 2009 study of stress and coping among HIV-seropositive barebackers, as examples). Rather, the available research on the combining of drug- and sex-related behaviors by gay men, including qualitative studies from the disciplines of cultural studies (see Green and Halkitis 2006) and sociology (see Davis et al. 2006) and quantitative findings from the fields of addiction science (e.g., Klein 2011; Lee et al. 2004), epidemiology (e.g., Carpiano et al. 2011), and behavioral health (e.g., Berg 2008) has focused solely on the individualized psychosocial and health-related consequences of these behaviors.

Most of these studies, albeit providing useful information on the consequences of high-risk behaviors, still neglect to acknowledge the subcultural *milieu* that exists among gay men who “party” and “play.” They fail to consider that the behaviors of those who PnP may have an underlying meaning that cannot be uncovered using conventional, quantitative research methods—but that is, nonetheless, important to a deeper understanding of these men and their actions. Such an understanding could potentially lead to responses and policies that are more effective, more personalized, and ultimately, more *meaningful*.

As long as researchers remain focused on individual-level factors, such as “self-esteem and social awkwardness” (Green and Halkitis 2006:317), policies in the war on drugs and the fight against AIDS will continue to stigmatize and marginalize these men and push them into hiding. Importantly, the significance of social context will continue to be overlooked and the “interactional pressures attendant to . . . gay sexual subculture[s]” (Green and Halkitis 2006:317) will not be addressed.

This article described one such subculture and gave reasons underlying the meaning of its deviant behavior. It is hoped that this critique will inform criminal justice, public health, and the behavioral sciences that the perpetuation of stigma in this group of men (e.g., by criminalizing and pathologizing them) will not cause their behaviors to abate. Indeed, it may actually create new ones.

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