Gay Men’s Support Work

Evaluation Report to Big Lottery Fund

December 2014
Context

Of an estimated 107,800 people living with HIV in the UK, 40% live in the greater London area and the majority 53% are gay men/MSM with new HIV diagnoses among this cohort increasing annually with an all-time high of over 3,250 diagnosed in 2013 (Health Protection England). Gay and bisexual men report negative experiences and discrimination from healthcare practitioners because of their sexual orientation and have higher levels of anxiety, depression and suicidal feelings and a third of experience domestic abuse in a relationship with a man (Stonewall 2011). Gay men/MSM diagnosed HIV positive are known to experience higher levels of mental health issues (Positively UK States of Mind 2013; NAM 2013), facing complex and long-term stress around diagnosis and side effects of medications (WHO 2013). Unsupported mental health problems lead to an inability to adhere to HIV medications. Rates of drug and alcohol misuse are higher within the gay/MSM community (Health Protection England 2012), and this cohort are four times more likely to be diagnosed with an STI alongside HIV compared to 6% of heterosexual men.

Need for this work

Positively UK have been supporting men since 2010 with support services limited to generic peer mentoring, peer case work and the support group Gaytalk. Numbers accessing support are rising year on year:

<table>
<thead>
<tr>
<th>Time period</th>
<th>Numbers gay men registered and accessing support</th>
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<tbody>
<tr>
<td>2010 to 2011</td>
<td>20</td>
</tr>
<tr>
<td>2012</td>
<td>25</td>
</tr>
<tr>
<td>2013</td>
<td>83</td>
</tr>
<tr>
<td>2014</td>
<td>122</td>
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Furthermore there is a small cohort, 13 registered in the last two years, who identify as bisexual/MSM.

When asked the main reasons for accessing services at Positively UK; HIV status was predominant issue with people primarily seeking peer support and services that run by people living with HIV, and within a safe and confidential space. Having dedicated LGBT staff and the fact that services were free were lower down the list.

![Diagram showing beneficiaries answers as to why they access services at Positively UK]

**Beneficiaries answers as to why they access services at Positively UK**
People also commented on the value of trained peer workers and volunteers:

“Personal contact with staff”

“Highly competent, committed, caring staff”

**Difference the work is making**

Outcomes for our work are recorded across 10 areas to promote the best physical, emotional and social well-being. In evaluating the work to date 95% of beneficiaries said they had reduced social isolation and were better able to manage treatments as a result of accessing support services, with 90% better able to manage their sex life and negotiate safer sex. 80% were better able to access other services, while two thirds said they were better able to manage finances (77%) and were more confident (64%).

![Aggregated and average final scores for beneficiaries across each outcome](chart.png)

**Beneficiaries reporting improvements in each outcome**

Only half of the beneficiaries reported progress in areas of talking about HIV (59%) and understanding of HIV (50%), when aggregated reported greater understanding of HIV; this was due to many have a good understanding when accessing the project. However when scores are aggregated these two areas show the greatest progress across all outcomes:
Case Study: Bill

Bill was diagnosed in 2007 and shortly after this his relationship broke down. Bill had become increasingly isolated and found the only way to break out of this was to start using drugs. When he referred himself to Positively UK Bill was struggling with Crystal Meth addiction.

Bill was assigned a peer mentor. Peer mentors are trained volunteers, all living with HIV, supporting others through times of difficulty and change. Working together Bill and his peer mentor set a number of goals to enable Bill to take control of his life. His peer mentor supported Bill to identify and attend support services to manage his drug use. He also introduced him to the Positive Health Scheme at the YMCA and to nutritional advice from the charity Food Chain. Through all this Bill and his peer mentor met regularly and the peer mentor provided weekly telephone support to help Bill manage his emotional issues.

Bill has now been in recovery for his drug use for six months, attends Positively UK’s monthly support group, Gay Talk and has also been accepted onto Positively UK’s volunteer programme. In January will begin his training as a peer mentor, and will be in a position to help others who are experiencing the issues he has himself faced and overcome.

Case Study: Dan

Dan is 30 years old and was diagnosed HIV positive in January 2013 after a short period of illness. For six months Dan didn’t engage with any support services apart from going to the bi-monthly appointments at his clinic to have his bloods checked.

He was in denial and very angry. He was surprised at his positive diagnosis as he always associated HIV with older men who were into particular scenes. Dan thought of himself as separate from that. He only had sex with guys his age or younger, didn’t party too much and never touched drugs. When Dan came to Positively UK for support he wanted to speak to other gay men living with HIV to understand more about the condition, how to tell people about his status and information about treatment. After a short assessment, Dan was matched with a trained peer mentor, Ken.

Dan and Ken met weekly for an hour at a coffee shop in Soho. Using his own personal experience and training, Ken, helped Dan slowly come to terms with living with HIV. Dan was able to talk through his anger and process his concerns about his diagnosis. When Dan started treatment, Ken was on hand to provide him with information and advice about side effects and adherence.
Ken also worked with Dan to practice different ways to tell people he was now HIV positive. After twelve sessions Dan had joined a support group for gay men with HIV, started treatment and disclosed to his best friend and his mum.

**Future Need**

Beneficiaries were asked what additional services they would want to access in future if funding and capacity permitted. Social events were the top priority, alongside workshops and information sessions in particular treatment updates. Areas to promote well-being such as yoga, mindfulness and life-coaching were also popular.

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**Feedback from beneficiaries about additional services**

**Social Events:**

In the current group social events were included with the majority of the Gay Talk Support group meetings at Positively UK but at times replaced by a social meeting such as a group meeting in Soho or trip out. However feedback has identified that beneficiaries were unhappy with this approach:

“The Gay Talk monthly group sometimes is a bit chaotic... I don't really like it meeting at the Duke of Wellington in Soho... But it has been helpful also and I have appreciated the input of those attending.”

“More social activities would be beneficial – a social activity should not replace, but be in addition to, the monthly meeting.”

In future social groups and outings will be held separately to the monthly Gay Talk Support Group.

**Future Workshop Content:**

Beneficiaries were asked to identify what topics they wanted workshops and information sessions to address. Mental health/emotional well-being was by far the greatest priority with areas of sex and relationships, decision making, and managing HIV and its treatments requested by at least 50% of the cohort.
Feedback from beneficiaries about future workshop content

**Project Planning**

Positively UK provide a range of services to meet these needs including:

- Recently diagnosed workshops – Take Part, Learn, Connect
- Over 50s group Aged to Perfection
- Welfare rights and employment support project
- Mindfulness and yoga

To build upon the established and successful interventions to move gay men the project should be developed further, targeting:

- Gay men newly diagnosed HIV positive
- Gay men isolated due to sexuality and/or HIV status
- Gay men living with HIV identifying problematic recreational drug use
- Gay men aged 50+
- Men who have sex with men (MSM) but don’t identify as gay, including men who have sex with men and women (MSMW)/bisexual men

Integrating with the range of services available at Positively UK the support package will encompass:

**Assessment and Case Work**: Increase capacity by recruiting a peer gay men’s project co-ordinator to undertake one-to-one assessments, identify specific needs, develop individual action plans encompassing gay men’s services, wider services at Positively UK, referrals to external agencies, and exit to self-management.

**One-to-one Mentoring**: Volunteer Peer Mentors providing support through the action plan in enabling service users to reach their goals.

**Gay Talk Group Support**: Monthly meetings led by HIV positive gay peer mentors providing opportunities for service users to connect with their community, establish support structures and access information on managing health, sex and relationships and living well.

**Gay Talk +**: A series of quarterly events offering advice on treatments and healthy living and talks from healthcare staff.
**Gay Talk Social:** Ad hoc social events for gay men living with HIV to socialize and build peer and social networks.

**Recreational Drug Use Support:** Building relations and increasing work with drug club clinics and training for project staff and volunteers in recreational drugs and holding conversations on their use.

**MSM:** To develop and pilot tailored support for men who identify as bisexual or MSM and address their specific needs.

**Project Evaluation and Development:** Reviewing user need, identifying best practice from other areas, developing new services and collaborations. In particular we will focus on addressing mental well-being, substance misuse and intimate partner violence and use of new techniques such as life-coaching.

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