

Focus on GBMSM care at Sandyford

What's New:

Support service information updated

Revised order and retitled to reflect increased mainstream services

Remove reference to referral criteria etc.

Rewording to discuss syndemic factors

All Sandyford services offer a holistic, inclusive and welcoming care for gay, bisexual and other men who have sex with men (GBMSM). The majority of GBMSM care is provided through routine Sandyford services including urgent care and PrEP clinics. We also offer a specific counselling service called Choices and undertake outreach work in sex-on-premises venues.

Sexual Orientation and Support

Sexual orientation in any individual is often complex and may be variable. It is important not to assume that GBMSM who attend Sandyford have stereotypical attitudes or behaviour. Some GBMSM would not describe themselves as gay or bisexual.

Whilst some GBMSM have large numbers of casual partners, there is a very wide spectrum of activity. This can range from simultaneous multiple partner activities (such as gay saunas or sex parties), through long-term "open" gay relationships, to married men who occasionally have sex with other men. Staff should be aware of the less common GBMSM sexual practices.

Staff should be sensitive to this wide variation in behaviour and attitudes. A non-judgemental approach and respect for each patient's lifestyle is important, regardless of pattern. Bear in mind that for some the process of identifying themselves as GBMSM may have been traumatic: and that feeling comfortable with who they are and what their preferences are may have been a source of personal struggle.

If a patient reports negative feelings about their sexuality they can be offered appropriate support through one of the agencies listed at the end or referral through Choices.

Mental Health Issues

Studies reveal a high incidence of stress in GBMSM of all ages related to homophobia in their families, institutions, the workplace and society, and financial insecurity. Low self-esteem is common.

Clinical depression, suicidal ideation and anxiety states are more common amongst young GBMSM. Up to 30% of youth suicide has been reported as occurring among the young GBMSM community, far higher than their numbers in society. Most people who die through suicide have seen a health professional within the preceding week. It is therefore important to undertake and document a risk assessment when you pick up any concerns.

Physical violence, bullying, harassment and loss of job or housing are all problems more frequently reported by GBMSM.

Staff should:

- Facilitate disclosure of mental health concerns when seeing GBMSM
- Refer or identify sources for appropriate support (see support agencies below)
- Seek senior support including emergency referral if concerned

General Health Issues and Syndemic Factors

Syndemic factors describe how multiple issues in a person's life combine to adversely affect their health. As a result, some GBMSM find it hard to maintain good health-promoting behaviours such as access to good diet, exercise, avoidance of smoking and alcohol.

Young GBMSM who have been rejected by their families may be particularly vulnerable, and may not have developed a range of domestic skills. Organisations such as LGBT Youth Scotland can support such individuals.

Staff should be alert to and where possible document syndemic factors such as enduring mental health problems, vulnerable housing or living in areas of deprivation, drug use, past trauma, gender-based violence.

Alcohol

GBMSM may be less likely to seek access to help for alcohol problems, particularly if this involves disclosure of their sexual preferences. Heavy alcohol use may be a symptom of depression, or part of a failure to come to terms with sexual orientation.

Staff should:

- Encourage / explain safe drinking
- Support / refer identified alcohol problems (see support agencies below)

Substance Use

There is an emerging trend for drug use during or for sex, facilitated through internet apps and websites, where intravenous administration (known as "slamming") is reported on a frequent basis. A subset of this is known as "chemsex", which specifically relates to the use of GBL, crystal meth or mephedrone for sex. Clinicians should be familiar with the common adverse event presentations of recreational drug use. Clinicians should be aware of prevalent drug trends: mode of administration, context and substances used. Prevalent use in Glasgow includes: ketamine, GBL, mephedrone, crystal meth, cocaine and MDMA. Choices team will be able to assist in advising appropriate plans to support clients. Clients not wishing to engage with Choices can be directed to the support agencies below. Offer clients options regarding harm reduction interventions.

Specific GBMSM Specific Services

Sandyford offers a limited range of enhanced services for GBMSM with additional support needs or within certain priority groups. These services were previously branded as the Steve Retson Project. These include a specific counselling service 'Choices' and outreach services at sex-on-premises venues.

Choices counselling services

Choices is a specialist counselling service at Sandyford for men who are concerned about the risks they are taking during sex which may put them at risk of HIV and other STIs. This service recognises the difficulties often faced when trying to discuss the real-world practice of safer sex, including the many different reasons and pressures that contribute to this. Choices will provide a safe and confidential space to talk honestly about their experiences of these issues and how it affects their relationships and the risks they may take. Men will be supported to make positive changes to reduce risk and improve health. CBT is the main vehicle.

Choices is staffed by two counsellors working a total of 1 FTE so all referrals are subject to a suitability assessment. Clients who are accepted will be provided with up to 12 sessions of one-to-one counselling.

Clinical staff should prioritise the identification of the following men for referral

Vulnerable men: problematic alcohol or drug use, low self-esteem, mental health problems and experience (past or present) of violence and childhood sexual abuse.

PEPSE use: The need for PEPSE should trigger assessment of sexual risk events, particularly where repeat presentation for PEPSE is identified. This should include enquiry about sociosexual and health determinants that are associated with perceived greater vulnerability to rectal STIs and HIV. Non-consensual and violent sex should be further explored in context of vulnerability, including domestic gender-based violence.

Repeat rectal infections: repeat rectal STIs should trigger review of risk reduction interventions that may be appropriate following discussion with clients about the context of risk events.

Drug use: Drug involvement should be part of routine history taking in GBMSM attendees and if identified can be used as a starting point for dialogue about risk of blood-borne viruses and STIs. Drug use during or for sex should be explored specifically (see below for further details). The clinical conversation should be used to explore the context of drug-taking and its association with other recognised co-existing vulnerabilities and the complexities of sexual networks.

[removed reference to documentation – generic information relevant to any health care intervention]

Support Agencies

Waverley Care Scotland

www.waverleycare.org/services/greater-glasgow-and-clyde-2/

LGBT Youth Scotland

www.lgbtyouth.org.uk

t: 0141 552 7425

Unity LGBT Asylum Seeker Support

www.unityinthecommunityglasgow.wordpress.com/unity-lgbt-support-group

t: 0141 387 0978

LEAP Sports

<https://leapsports.org/>

t: 0141 202 0777

Terrence Higgins Trust

www.tht.org.uk/about-us/scotland

t: 0141 332 3838

LGBT Health & Wellbeing

www.lgbthealth.org.uk

t: 0141 255 1767

Helpline Freephone: 0800 464 7000

Opening Hours: Tue/Wed/Thu (12-9pm); Sun (1-6pm)

Helpline Email: helpline@lgbthealth.org.uk.

Helpline Live Chat: lgbthealth.org.uk (a red chat box will appear in the corner of the website when available)

Crime and Abuse

Police Scotland Hate Crime Reporting

www.scotland.police.uk/contact-us/report-hate-crime-and-third-party-reporting

Galop LGBT+ Anti-Violence Charity

www.galop.org.uk

Hate Crimes t: 020 7704 2040

Domestic Abuse t: 0800 999 5428

FearFree Domestic Abuse Support

www.fearfree.scot

t: 0131 624 7270

Substance misuse

NHS GGC Drug and Alcohol Recovery Services

www.nhsggc.scot/your-health/right-care-right-place/addictions/

Alcoholics Anonymous Glasgow LGBT meetings

www.alcoholics-anonymous.org.uk/

t: 0800 917 7650

Web-based group locator

Friday/Monday; sex and drugs support

www.fridaymonday.org.uk

Website run by Terrence Higgins Trust understanding chemsex

Kinder Stronger Better

<https://kinderstrongerbetter.org/alcohol-drugs-and-the-lgbtq-community/>

t: 0141 353 1800

Website run by Glasgow LGBTQI community and substance use professionals