

GBMSM Services at Sandyford

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. Sandyford also offers some enhanced services for GBMSM with additional support needs or within certain priority groups. These services are currently branded as the Steve Retson Project but are currently undergoing a service review and are subject to branding change. The specific services and clinics offered are also currently under review and subject to change.

Staffing

Staffing and skill mix is aligned to services being provided from Health Care Assistant (HCA) delivered “test only” services to Medical or Advanced Practice oversight for urgent drop-in services.

Reasons For Using the GBMSM-specific Service:

- Client preference if identifying as GBMSM
- GBMSM with additional needs or vulnerabilities limiting access to routine Sandyford services
- GBMSM client self-referral for STI testing and sexual health advice
- For assessment for counselling of GBMSM (generic and cognitive; via Choices)
- Hepatitis A and B, and HPV immunisation (initiation or follow-up) in GBMSM

Referrals

- Self referrals can be made through the Sandyford switchboard 0141 211 8130 or at any Sandyford site. Certain services can also be booked online
- Written referrals from within NHS GG&C to GUM services may be vetted to attend GBMSM-specific services if additional needs or vulnerabilities are identified
- Choices referrals can be made electronically via NaSH, or self-referral by contacting Sandyford Counselling and Support Services on 0141 211 6700

Choices counselling services

Choices aims to address the psychosocial determinants of sexual risk taking behaviour by providing stepped emotional and mental health care and support to GBMSM. Please see separate protocol for full details, criteria and interventions.

This 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, providing up to 10 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. The diagnosis of a rectal STI (and particularly repeat diagnosis) should trigger an offer of referral to Choices.

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.

Documentation

- Contemporaneous notes using NaSH for Sandyford-based services
- Where NaSH is not available, handwritten notes can be kept and scanned to client's NaSH profile

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 even 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 is not obviously reconciled with their sexuality they should be offered appropriate support 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 successful suicides are people who have seen a health professional within the preceding week. Staff should try to bear this in mind during all consultations.

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)

General Health Issues

The GBMSM community has above average numbers of smokers, frequent drinkers and drug users, probably because gay venues tend to be pubs and nightclubs. Those GBMSM who are not keen physical fitness devotees frequently have poor diet and exercise profiles.

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.

Alcohol

Whilst alcohol abuse is more common among lesbians than for other women, the same is not true for GBMSM. Research suggests that GBMSM drink more frequently than others do, but that they have the same levels of risk for heavy alcohol abuse.

Importantly, 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:

- Ask about disclosure of sexuality in patients who divulge an alcohol problem
- Encourage / explain safe drinking
- Support / refer identified alcohol problems (see support agencies below)

Diet / Exercise

Reinforce the importance to health of a balanced diet and exercise. Suggest sources of support for weight loss and exercise. Many GBMSM belong to a gym, but this may not imply a healthy lifestyle or exercise level. Cardiovascular fitness does not have to be achieved in a gym, and advice on regular light exercise should be given along with healthy eating and dietary advice.

Smoking And Substance Use

Smoking is more prevalent among GBMSM. Smokers should be encouraged to discuss strategies to give up or cut down, and informed of sources for continuing anti-smoking support.

Whilst substance abuse has become more prevalent among younger people in general, GBMSM have been shown to use more often.

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.

Support Agencies

LGBT Youth Scotland

<https://www.lgbtyouth.org.uk>

t: 0141 552 7425

LGBT Health & Wellbeing and LGBT Helpline

<https://www.lgbthealth.org.uk>

www.lgbt-helpline-scotland.org.uk

t: 0300 123 2523

Unity LGBT Asylum Seeker Support

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

[unity-lgbt-support-group](http://www.unityinthecommunityglasgow.wordpress.com/unity-lgbt-support-group)

t: 0141 387 0978

Galop LGBT+ Anti-Violence Charity

www.galop.org.uk

Hate Crimes t: 020 7704 2040

Domestic Abuse t: 0800 999 5428

Friday/Monday; sex and drugs support

www.fridaymonday.org.uk

t: 0808 802 1221

Police Scotland Hate Crime Reporting

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

Equality and Human Rights Commission

www.equalityhumanrights.com

t: 0141 228 5910

FearFree Domestic Abuse Support

www.fearfree.scot

t: 0131 624 7270

NHS GGC Drug and Alcohol Recovery Services

www.nhsggc.org.uk/your-health/know-who-to-turn-to/alcohol-and-drug-recovery-services/

Alcoholics Anonymous Glasgow LGBT meetings

<https://www.alcoholics-anonymous.org.uk/>

t: 0845 769 7555

Tue, Thur, Fri