

MSM Masterclass

Module: **Young men**

FACILITATOR GUIDANCE NOTES

Description to be shared with participants in advance

In this session we will consider young men to be those in their teenage years. You will hear about what young gay and bisexual men report about early sexual experiences and their views of sexual health services. There will be an opportunity to reflect on what you think works well about current service provision, and consider how we can encourage younger gay and bisexual men to engage with sexual health services, and sustain that connection. We will also consider a specific scenario in terms of engaging with a young gay man for the first time, using this situation to reflect on our focus and what we want to achieve.

Suggested duration of this session is 60 minutes.

Before the session

Ensure participants complete Reflection Sheet 1 and the Preparatory Session before attending the Masterclass

In preparing for the Masterclass ask participants to pay particular attention to the engagement they have with younger men in clinics before the session: ask them to jot down any issues or topics or questions that they feel are important.

By the end of this session participants will have:

1. Developed a greater awareness of the sexual lives of young gay and bisexual men, not just in terms of behaviours (what young men do) but also what sexual relationships mean to them.
2. Identified the importance of a dialogue that is about feelings, intimacy, pleasure, vulnerability as well as safety, STI/HIV risk and testing.
3. Considered how to give advice and information tailored to the needs of the individual and identified the importance of establishing an ongoing relationship with young gay/bisexual men.
4. Recognised the individual professional characteristics, and characteristics of services, that are needed to help attract and retain younger men in services.

Follow up

Further information is available from these sources.

- HIV Needs Assessment (NHS Lothian and NHS GGC)
FAQ Scotland Chapter 20: Younger Men at: <http://www.faqscotland.co.uk>
- LGBT Youth Scotland <https://www.lgbtyouth.org.uk/professionals>

Resources: PowerPoint slides as a hand-out.

Short film/requires appropriate tech/sound to be set up in advance and checked.

Outline

The session is built around a number of slides which draw on information from the NHS Lothian/GGC HIV Prevention Needs Assessment including the FAQ Community Engagement work, and other work that address the experiences, needs and rights of gay, bisexual and men who have sex with men.

Slides may have prompts for discussion; either as one group or in pairs/smaller groups. As a general guide around 5 minutes should be allocated for 'discussion' slides – some slides suggest 10 minutes.

Facilitator guide notes for PowerPoint slides is suggested as follows:

Slide 1 Title/Introduction

The information on the slides we will be looking at in this session draws on work from the HIV Prevention Needs Assessment/FAQ community engagement work, young men participated in online surveys and interviews. Some of the information is also from older men looking back to their teenage years.

Slide 2

(Facilitator: no need to read learning outcomes out but just refer to these as follows) This slide describes what we intend participants will get from taking part in this session.

Slide 3

And this slide identifies the key topics that we will address in our conversations.

Discussion: (10 minutes) Initially in 3's/small group with some feedback later in the allocated time.

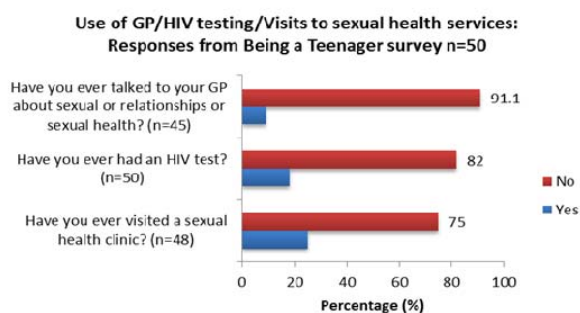
So, to get us started as a group here are a few discussion points.

- How would you describe the connections or relationships your service currently has with younger gay and bisexual men?
- What would you like to be doing?
- What gets in the way of providing the service you would like to provide?

Slide 4

Are young men accessing services?

Thinking now about what services young men might go to when it comes to sexual health and relationships, the slide takes information from the Needs Assessment/FAQ community engagement work and shows where young men say they are going in terms of services, to talk about sexual health. (*Allow time to view the graph*) It's possible to take an optimistic view that *some* young men are attending services, or see the larger red lines and identify that *by far the majority are not engaging with us*.



Slide 5 + 6

The next 2 slides also draw on the FAQ 'Being a Teenager' survey which asked young men what would draw them to a service and what might put them off.

The first question was: what might prevent you from coming to a clinic?

(Give participants a few moments to read this)

What might prevent you from coming to a clinic?

- A lack of privacy, when the clinic isn't discreet, because someone might see me or know me there
- Being scared, frightened, or nervous about tests or a positive STI diagnosis
- Feelings of embarrassment or shame
- Being judged or staff being unfriendly

The next question was: What would encourage you to come to a clinic?

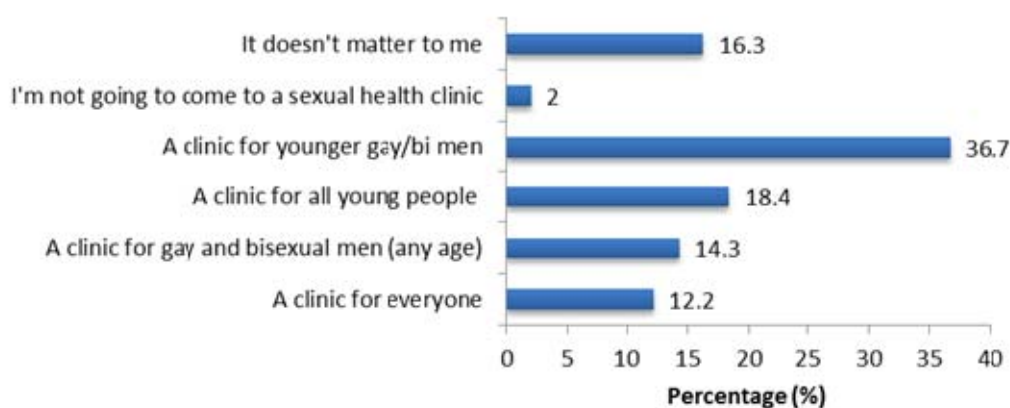
What would encourage you to come to a clinic?

- Friendly staff and a relaxed atmosphere
- Confidential, anonymous and discreet
- If I had a worry, had risky sex or had symptoms
- If I knew more about clinics/if there was better publicity about clinics
- If I could get good information about STIs and sexual health
- Free condoms and lube/C Card
- Going with a friend/Hearing about it from a friend

Slide 7

With these barriers and facilitators in mind young men were also asked about the kind of service they would be drawn to – from a targeted young people's clinic to one that might be for gay and bisexual men. What comes out of this is the need for choice and so the need for all our services to be capable of working with young gay and bisexual men wherever they appear.

If you were coming to a sexual health clinic what would you prefer? (n=49)



Slide 8

Discussion: As a full group.

Do these findings reported in the last few slides reflect or challenge your own thoughts and experiences about providing a service for younger men?

Slide 9

Coming out

We have addressed some practical questions about services already, but the session now turns to some consideration of broader issues that impact on young men's wellbeing. When we think about the experiences of young men it is important to remember something raised in the Preparatory Module – that talked about the importance of 'coming out'.

- For many gay and bisexual men, the self-realisation about their sexual identity coincides with puberty.
- Coming out is the process whereby a person discloses to others their sexual identity. It is thought that the average gap between a young person realising their identity and disclosing it to others is 3 years.
- During this time young men can be very concerned about whether their families and friends will have adverse reactions to their identities. Sadly, for some young men, these adverse reactions do occur resulting in fractured supportive networks at a time when they are most needed.
- The young men we work with in sexual health services will have different experiences, they will be at different stages of self-realisation about their sexual identity, some will have some good support systems but many may not.

Discussion: Do you have experience of working with young men and considering the issues around coming out? Any thoughts or questions which arise for you in terms of support for young men?

Slide 10 + 11

Working with young men. What might we have concerns about?

This slide draws again on the FAQ interviews. These quotes are all from young men who are teenagers and highlight some of the issues and concerns we might have for them.

Quote 1 tells us that teenagers as young as 15 might be using one of the many apps out there to meet other men (you might have heard of Grindr or others), and of course this may not be to meet young men of the same age.

- **“On the whole apps serve a purpose but it's quite sleazy. It's cute if they want a relationship but it's sleazy. I don't use them now because I'm in a relationship but I was 15 when I first used them.”**

Quote 2 tells us something about the experience of services:

- **“It wasn't a long discussion really. Nothing stood out. She did ask me about unprotected anal sex and I told her yes. She maybe thought it was hard for me to**

go to the doctor so she didn't talk about it a lot. She just said use condoms and stuff."

Quote 3 (slide 11) captures many of the issues we might be concerned about for young men – the fact that many men do not talk about HIV status, that how someone looks might lead to assumptions about status, the influence of alcohol on decision making, and that young men's decisions might be strongly influenced by their desire for sex.

- "If he's clean I'd consider raw, otherwise a condom. If he was definitely positive I'd probably not do it. It would depend on how drunk I was, how good looking he is, how long I'd been without having sex."

Discussion: Full group.

Is there anything about what these young men tell us that is either familiar or surprising to you?

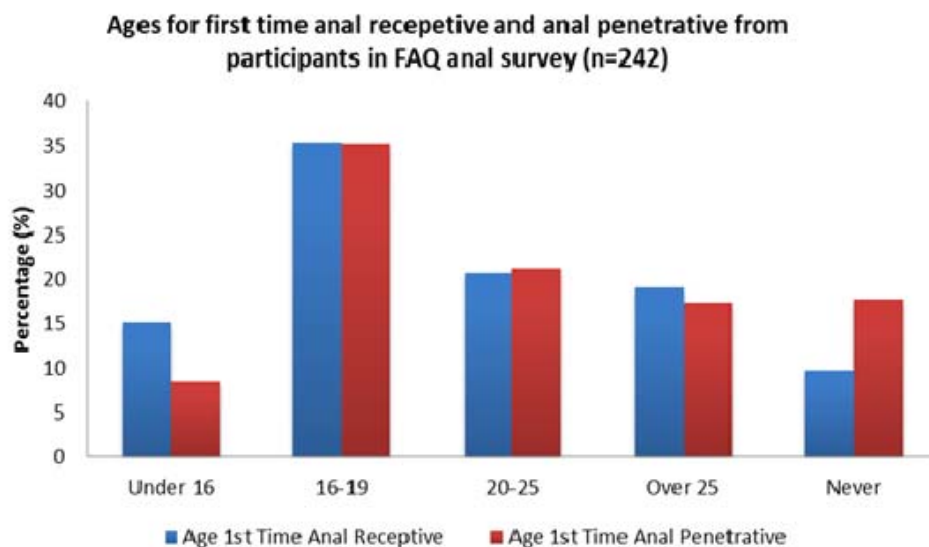
Slide 12

First experiences of anal sex: when do we need to consider anal sex and risk?

Of course we know that condomless anal sex is the means by which men are most at risk of HIV. In the Needs Assessment community engagement work men were asked when they had first experiences of anal sex, we asked so that we could think about when we need to start with education and support on this for younger men. You can see from the slide that from FAQ interviews over half of men reported that first experiences were as teenagers.

Slide 13

From one of the FAQ online surveys we can see again that around half of respondents report first experience of anal sex as teenagers.



Slide 14

Discussion

Is there anything about reports of age of first anal sex that is either familiar or surprising to you? What questions or concerns does it raise for you?

Slide 15

We have a short film here to help us think about how we work with younger gay men.

Jamie is 16 and has never attended a clinic before. He comes to a drop-in general sexual health clinic for the first time with urethral symptoms.

Watch film.

Slide 16

Discussion (10 minutes)

Firstly, in 3s

- In such a situation, what would be your focus?
- Are there differences in the approach you would use or the outcomes you would want if a 16-year-old young woman had come presenting similar symptoms?
- In the consultation with this young man, how do you balance the 'technical issues' of testing or partner notification or vaccination without these elements dominating the consultation?
- What needs to be achieved in terms of a follow-up plan for Jamie? What would your approach be?

Slide 17 (10 minutes)

This slide identifies some further reflective questions for us to consider *as a full group*.

- When you think of younger gay and bisexual men do you consider them first: As young? As male? As gay or bisexual? How might this matter?
- Do you provide the same level of care in assessing the quality of young men's relationships in the same way you would do for young women?
- How ready are you, or your service, to talk about sex (including anal sex) with young gay and bisexual men in their teenage years?
- How does your service build relationships and establish patterns of regular attendance? Can you do this in the teenage years?

Slide 18

Ask participants to take the last minute to note down a few thoughts on the reflection sheet provided.