

**Deconstructing mental health relating to Gay and Bisexual men
@ London School of Economics, 3rd November 2004**

Everyone at the seminar has been invited by the Terrence Higgins Trust (Gay Men’s Sector Development Team). The aims of the seminar were that attendees:

- Deconstruct what is meant by mental health with reference to gay and bisexual men, and subsequently the work that gay men’s health promoters undertake in this area
- Consider how a focus on the mental health needs of gay and bisexual men impacts on the overall goal of *Making it Count* to reduce the incidence of HIV infection

N=28 people attended the seminar. N=17 returned evaluation form before leaving (61% response rate; compare PEP ETT at 80% and Condoms ETT at 94%).

COMMENT: Response rate is lower than previous Think Tanks, suggesting the picture given by the evaluation is more optimistic for this Think Tank than for previous ones.

PART 1: BEFORE

Q1. How much do you know about mental health?

	<i>Mental health</i>	<i>PEP</i>	<i>Condoms</i>
Little or nothing	12% (n=2)	0%	6%
Some	41% (n=7)	46%	18%
Lots	35% (n=6)	46%	71%
Expert	12% (n=2)	8%	6%

COMMENT: Similar range of naivete and expertise as previous Think Tanks.

Q2. How much of your work is concerned with gay & bisexual men?

- 35% All
- 41% Most
- 12% About half
- 12% Some
- 0% None

COMMENT: Attendees biased towards gay men’s rather than generic workers.

Q3. Which of the following roles do you carry out? (tick as many as apply)

- 4 Health promoter
- 3 Counsellor
- 2 Mental health service provider
- 5 Health promotion service manager/coordinator
- 3 Researcher
- 2 Policy maker
- 1 News media
- 1 Sexual health clinic manager
- 1 Community developer

COMMENT: Range of job roles; more health promoters than mental health providers

Q4. Which area of Britain do you work in (or which country if outside the UK)?

- 2 Nationally
- 12 London
- 1 South
- 1 Midlands & Eastern
- 1 Northern Ireland

COMMENT: Heavy bias toward London.

Q5. What are you hoping to personally get out of today?

- a view about mental health & gbm
- analysing mental/sexual health
- to be challenged
- better understanding of CHAPS plans
- better understanding of wider health issues facing gbm
- clarity on thinking around links between mental & sexual health
- clearer info & research re: mental health needs
- consensus on most important issues
- ideas
- increase knowledge (x2)
- increase understanding; network about combined sexual/mental health outcomes
- insight into issues that will inform analysis of interview data
- learn more about best practice
- think through mental/sexual health needs together
- understanding of mental health needs & service provision of gbm
- unsure

PART 2: AFTER

Q6. For you, how thoroughly were each of the following tasks done during the course of the day.

	%		
	<i>A lot</i>	<i>A little</i>	<i>Not at all</i>
Analysing and discussing the term “mental health” (as opposed to mental illness).	59	41	0
Deconstructing what is meant by mental health with reference to gay and bisexual men.	47	47	6
Considering how the mental health of gay and bisexual men impacts on HIV incidence.	35	59	6
Deconstructing the work that gay men’s health promoters undertake in the area of mental health.	24	71	6
Thinking outside of the usual service and policy confines.	24	71	6
Clarifying the role of health promoters and researchers in the construction of the mental well being of gay and bisexual men.	24	65	12
Considering the inter-dependance of mental health and sexual health. {missing for n=1}	25	63	13
Exploring the biological, psychological and social influences on mental health.	12	71	18

Q7. Do you know more about {think tank topic} than when you arrived?

	<i>Mental health</i>	<i>PEP</i>	<i>Condoms</i>		
			<i>behavioural causes</i>	<i>needs</i>	<i>interventions</i>
No more than when I arrived	47%	17%	82%	59%	23%
A little more	35%	67%	18%	41%	65%
Much more	18%	17%	0%	0%	12%

COMMENT: Overall less new learning than for previous two Think Tanks.

Q8. What, in your opinion, are the major obstacles to mental health for gay and bisexual men? {no response for n=4}

- definitions
- failure to recognise effects of homophobia
- funding [illegible], especially research
- have to thin about this; a process this has contributed to
- isolation; value of operating with [illeg.]; role models place more stress on the individual
- lack of evidence base & awareness
- lack of gm's health strategy which isn't HIV focussed
- lack of service provision & awareness of the issues
- lack of support, loneliness, access, media & societal prejudice
- school culture; recognition of mental health needs and how to respond to them
- societal norms
- the term itself

Q9. Looking back at what you said you were hoping to get out of today, how much was that satisfied?

	<i>Mental health</i>	<i>PEP</i>	<i>Condoms</i>
Worse than when I arrived	0%	0%	0%
Not satisfied at all	6%	0%	12%
Partly satisfied	65%	65%	71%
Well satisfied	30%	35%	18%

COMMENT: Self-referred effectiveness was similar to previous Think Tanks. {Suggesting *formal learning* is not the sole concern of attendees.}

Q10. If someone you know were invited to a future Expert Think Tank Seminar, would you recommend attending?

	<i>Mental health</i>	<i>PEP</i>	<i>Condoms</i>
Yes	88% (n=15)	92%	94%
No	6% (n=1)	0%	0%
Other	6% (n=1)	8%	6%

other comments:

- lacked mental health experts & language; no conclusions; very wooly.
- maybe, if it looked well prepared.

Q11. What would have made the event more likely to have met its aims?

{no response from n=4 and illegible for n=1}

- attendance by more gm's health promoters
- better informed preparation; bit more homework by organisers
- better prep on evidence base before event
- evidence base
- framework setting day in sexual/mental health fields; more focussed questions for
- groups; not ending with brainstorm but something though through
- inclusion of mental health organisations
- it was good; keep them with plenty of discussion time
- more focus at start on why Think Tank is being held and current knowledge on mental/sexual health
- more representation from generic mental health agencies
- more specific questions
- more time
- not sure

Q12. What other comments do you have about this event? {no comment from n=9}

- Darren's talk good, had structure; Bob & Philips talks were lists of issues without structure
- enjoyed it a lot
- excellent, provided much food for thought
- good opportunities for discussion
- thank you
- well organised and facilitated throughout
- well run; good idea to have them
- worth having; discussion is always good

Ford Hickson

Ford.Hickson@sigmaresearch.org.uk

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