



THE MESMAC GUIDE



**A PRACTICAL RESOURCE FOR COMMUNITY-BASED HIV PREVENTION WITH GAY AND BISEXUAL MEN
AND OTHER MEN WHO HAVE SEX WITH MEN**

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**A PRACTICAL RESOURCE FOR COMMUNITY-BASED HIV PREVENTION WITH GAY AND BISEXUAL MEN
AND OTHER MEN WHO HAVE SEX WITH MEN**

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Health Education Authority



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C O N T E N T S

Foreword	5
Terminology	6
THE FRAMEWORK	
Aims and objectives	9
Community development	12
Funding sources and costing	24
Workers and roles	26
Codes of conduct	29
Steering groups and management committees	32
Supervision and support	34
Equal opportunities	37
Evaluation	42
Heterosexism and homophobia	47
WAYS OF WORKING	
Getting started	63
One-to-one work	69
Groupwork	73
Outreach in public sex environments	81
Police liaison	96
Club work	100
Working with young men who have sex with men	108
Publicising the project	116
Materials and information	120
Research as a way of working	125
Lobbying professionals and policy makers	129
Bibliography	132

FOREWORD

The MESMAC project is one of the most complex initiatives that the Health Education Authority's HIV/AIDS and sexual health programme has supported. When the project started in 1988, the prevailing view was that gay men had acknowledged and responded to the threat of HIV; the findings of the project are appearing at a time when it is clear that the comprehensiveness and durability of such a response may have been exaggerated.

This book is a compilation of guidance and advice drawn from the experiences of people involved in the project. It is primarily intended to be a reference point for workers in the field, particularly those new to this area of work.

We would like to offer special thanks to all those connected with the project who, despite their heavy workload, have found the time to contribute to this book.

We would welcome comments and suggestions from readers, which should be sent to Dave Wiseman at the HEA.

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TERMINOLOGY

The expression *men who have sex with men* is used throughout this book. This term is fundamental to the MESMAC project, not least because it forms part of the acronym MESMAC itself.

Men who have sex with men comprises men who identify as gay, those who are bisexual, and others who would define themselves as heterosexual. The one common element is that, to a greater or lesser degree, they have sex with other men.

It should be emphasised that the term does not refer solely to men who do not identify as gay, and some projects and workers have chosen instead to describe their target group as *gay men and other men who have sex with men*. The decision to mention gay men specifically is due to a number of factors.

There is a political element in a conscious decision to use the term *gay men*. Some fellow professionals have difficulty saying the word *gay*, preferring *homosexual*. They may then progress to *gays*, or possibly even *gay men*. Some workers may feel that using *men who have sex with men* on its own as an all-embracing term encourages the denial of 'out' gay identity.

Finally, men who identify as gay may not be familiar with the term *men who have sex with men*, and may be alienated or mystified by it. It is thus advisable to prefix it with *gay men and other ...*

It should be stressed that there is a clear rationale behind the use of the term *men who have sex with men*: reference to gay men alone might leave married men, men unsure of their sexual identity, and others who do not define themselves as gay feeling left out or marginalised. These may be precisely the men that it is important to target, due to their lack of access to gay social and support networks.

In this book, the term *men who have sex with men* is generally abbreviated to MWHSWM; we apologise for its inelegance. If the term *gay men* is used, this should be taken to refer specifically to men who identify as gay, likewise *bisexual men* to mean men who identify specifically as bisexual.

It should be noted that in recent months the term *gay and bisexual* has gained increasing popularity. Those preferring to point out that *bisexual* can be used to refer to both 'behaviour' (ie: behaviourally bisexual, including heterosexually or gay identified men) and 'identity' (ie: bisexual). Whatever individual views are, it is clear that the debate will continue. The benefit of this is at least that we continue to actively question and consider who we are trying to address and the most appropriate means and options for doing this.

THE FRAMEWORK

AIMS AND OBJECTIVES

PHILOSOPHY

MESMAC represents an attempt to reconcile health education theory with practice. Based upon French and Adams' 'triphasic map',¹ which highlights behavioural change, self-empowerment and collective action as the three models of health education, it takes community development as the starting point for activity. MESMAC therefore takes a collective action approach to health education/promotion. Community development has at its heart a belief that it is important to start from where people are, and from a basis of expressed need. MESMAC acknowledges personal experience as a form of expertise and seeks to facilitate group development. From the outset, MESMAC has acknowledged the profoundly homophobic context in which men who have sex with men live their lives, and the potential impact of this upon both their sexual behaviour and their perceptions of HIV infection. A commitment to equal opportunities and to combating prejudice and discrimination was a fundamental feature of the project from the beginning. MESMAC was one of the first HIV-related projects funded by the statutory sector to be based explicitly upon such principles.

Before MESMAC began, the interventions that had been targeted at gay men consisted mainly of educational materials (for example leaflets and posters) and one-off events such as safer sex promotional evenings in pubs and clubs, together with safer sex workshops. The majority of these initiatives were undertaken by voluntary organisations, often staffed by gay men, with limited financial and technical resources. These early initiatives tended to focus almost exclusively upon those men who identified as gay.

The urgency of the HIV/AIDS epidemic, together with the fact that previous initiatives had been undertaken in the main by volunteers with little or no previous training in health education, meant that few initiatives were based upon sound theoretical principles. As a result, the methods used were inconsistent with the apparent aims of the projects. For example, many initiatives were concerned, understandably, with changing people's sexual behaviour; however, the methodologies were drawn from a self-empowerment model of education, and as such were incompatible with this aim. This does not mean that these initiatives were unsuccessful, but simply that their

success would not be most accurately measured in terms of behaviour change.

AIMS AND OBJECTIVES OF MESMAC

The aims and objectives of the national MESMAC project, together with the focus of each of the local sites, are reproduced below. It was essential to choose objectives that were specific, measurable and achievable within the short timespan allotted to the project (initially two years, subsequently extended to three). External evaluation by researchers based at Keele University was integral to the life of the project.

AIMS

- 1 To establish local community initiatives with men who have sex with men which will explore felt needs in relation to safer sex, and work towards meeting these needs.
- 2 To produce a training package to equip a core team of facilitators to develop this work as a general resource for safer sex work with men who have sex with men in various localities in England.

OBJECTIVES

- 1 To recruit and train a group in the facilitation skills necessary for HIV-related safer sex education.
- 2 To set up support for the facilitators in each of the local sites in order to achieve the above.
- 3 To use community development methods in order to:
 - Assess the needs of the local gay community.
 - Work with individuals and groups.
 - Enable choice and action on safer sex.
 - Put groups in touch with one another to develop models of good practice.
 - Assist in the development of individual and group action plans.
- 4 To evaluate the various methods used within the project, and the project as a whole.
- 5 To enable men who have sex with men to bring their needs to the attention of the appropriate organisations.
- 6 To provide information about HIV

prevention, local and national referral points, and other services.

FOCUS OF LOCAL SITES

Leeds: To work with men living in a large conurbation.

Leicester: To work with men from black communities.

London: To work with young MWHSWM.

Newcastle: To work with men in both urban and rural areas.

COMMUNITY DEVELOPMENT

It was decided to use a community development (CD) approach for MESMAC after a review of safer sex training and projects¹ suggested that much current health promotion activity for gay men had too narrow a focus.

There is a substantial history of CD work in the UK,² although using it for health education is a more recent development. CD is now growing in popularity, because more traditional approaches that do not take into account the social, economic, political and environmental contexts of choice and individual behaviour have not been very effective, and also because it offers a more flexible way of working *with* people to identify health needs and ways in which these can be met. Many communities/groups of gay men have organised around HIV/AIDS from the earliest days of the epidemic with little outside support, for example, from statutory agencies.

CD can offer such support and build upon identified needs, and it has the potential to *empower* (a process whereby individuals, communities and organisations gain control over their lives) and to involve men in promoting their own health by the process of the

work as well as any outcomes it might achieve.

CD should enable men who have sex with men to *participate* in:

- Decisions affecting their health and well-being.
- Educational programmes concerned with HIV, AIDS and wider health issues.
- Social, community and political life.
- Action to confront and challenge discrimination and inequality.

It has been suggested³ that four basic assumptions underlie participation:

- 1 That it is of value *per se* and a fundamental right of all people.
- 2 That decisions made by people on their own behalf are better decisions than those made for them by others.
- 3 That skills learnt through participation can be applied to other aspects of participants' lives, and will be expressed in the wider community.

- 4 That the experience leads to an increase in personal confidence and development.

The participation ladder (see below) developed by Brager and Specht⁴ is

helpful in showing that there are degrees of participation, with the ultimate goal being that the community has control. Few projects or organisations would be likely to achieve this, but it is worth aspiring to.

PARTICIPATION LADDER

<i>Degree</i>	<i>Participant's action</i>	<i>Illustrative mode</i>
Low	None	The community is told nothing.
	Receives information	The organisation makes a plan and announces it. The community is convened for informational purposes; compliance is expected.
	Is consulted	The organisation tries to promote a plan and seeks to develop support so that the plan will be accepted.
	Advises	The organisation presents a plan and invites questions. It is prepared to modify the plan only if absolutely necessary.
	Plans jointly	The organisation presents a tentative plan subject to change, and invites recommendations from those affected. It expects to change the plan at least slightly, and perhaps even more substantially.
	Has delegated authority	The organisation identifies a problem and presents it to the community, defines the limits and asks the community to make a series of decisions, to be embodied in a plan which it will accept.
High	Has control	The organisation asks the community to identify the problem and to make all of the key decisions regarding goals and means. It is willing to help the community at each step to accomplish its goals, even to the extent of relinquishing administrative control of the programme.

PRINCIPLES OF COMMUNITY DEVELOPMENT

Community development is based on a collective action model of health promotion.⁵ There are various useful definitions of CD, including one developed by Smithies and Adams whilst working at the HEA.⁶ This definition specifies a number of principles inherent in this way of working:

- Groups rather than individuals.
- Work with disadvantaged and marginalised groups is given priority.
- A positive holistic view of health is encouraged.
- CD aims to increase self-confidence.
- CD aims to improve relationships between professionals and voluntary and statutory groups, although it may also challenge statutory organisations in order to meet needs.
- The community defines its own needs rather than receiving a professionally presented list of needs.
- The process of the work is seen as important in its own right.
- CD values people whatever their

background, starts from where they are, and challenges discriminatory or oppressive behaviour from individuals or bureaucracies.

- CD promotes access to information and resources.

Another definition that influenced MESMAC is one written by Rooney Martin,⁷ which skilfully outlines the benefits of a CD approach for workers using it:

Community work enables workers in the community to:

- 1 Recognise the values with which they work.
- 2 Gain strength from collective action.
- 3 Develop confidence, knowledge and skills.
- 4 Develop an awareness and understanding of the issues and the structural causes of social problems.
- 5 Become empowered to create new, more equal relationships between the consumers and providers of service.
- 6 Establish new forms of association.
- 7 Take action to confront, challenge and break down prejudice.

It is vitally important that MESMAC projects should examine these principles and ways of working. If they subscribe to them, they must become equipped and supported to work in this way.

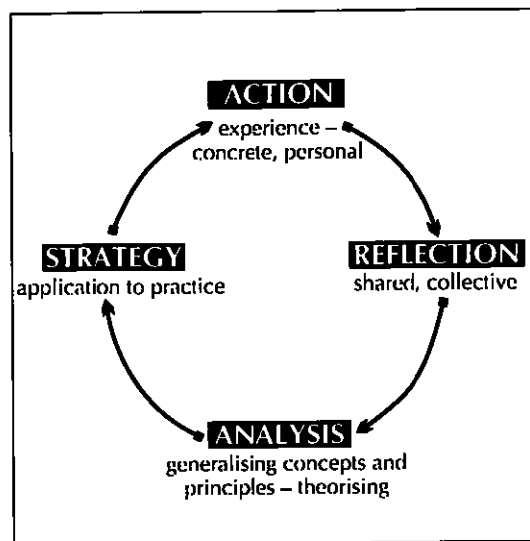
WHAT IS A COMMUNITY?

Communities can be defined as geographically based (such as Ealing in West London), or as communities of interest (such as gay men). Although men who have sex with men are clearly not a homogeneous group it is nevertheless true that they all suffer discrimination and oppression, and in addition they may all live in or come from the same locality.

CD can focus on the wider community (MWHWSM) or on particular communities (such as black men in Leicester who define as gay).

COLLECTIVE ACTION WITHIN THE COMMUNITY

Essentially, CD is about *action* and *change*. A useful model which illustrates the process-based nature of CD is the collective action cycle,⁸ opposite.



In this model, theory and practice are interlinked; theory is built on action, and then informs the future development of action. The MESMAC worker needs to guide groups through this process as part of a CD strategy. Members of the group share their experiences and feelings with each other and see that many of them are common to everyone. They then begin to form theories about their experiences, and use these theories to develop a strategy which can then lead to various forms of action.

The MESMAC worker will develop skills and be acting as a:

- Catalyst
- Co-ordinator

- Manager of the work
- Supporter
- Validator
- Arbiter
- Negotiator
- Organiser

However, the emphasis should be on enabling the participants to have a voice, not on speaking for them or doing things for them, although there may be times when this will be necessary.

The following stages show simply the processes workers might employ within a CD strategy, whether working within the community or within organisations.⁸

- Entry (to organisation, group, situation).
- Build up contacts and trust; clarify your role.
- Identify formal and informal groups, networks and structures.
- Work with others to identify main concerns/problems/areas of common interest.
- Identify where change is needed.

- Encourage collective commitment.
- Clarify openings and resistances (friends and enemies).
- Employ techniques to move towards change.
- Evaluate.
- Continue next stage of process.

CONSTRUCTING A FRAMEWORK FOR ACTION

CD can operate on a variety of levels. Often people view it as grass roots work – working with local communities. However, CD can have much wider implications than this, and if it is to develop into collective action that brings about change in the wider community or within statutory organisations then a CD strategy is necessary. If CD concentrates only on grass roots activity, projects will inevitably confront organisational blocks and barriers at the interface between communities and organisations.

A CD strategy aims to open up barriers and remove blocks by working on a number of levels. A successful CD strategy needs to comprise four elements:⁹

- Grass roots work

- Organisational development
- Community infrastructure
- Participation

GRASS ROOTS WORK

Resourcing grass roots work and local action is clearly the central element of any CD strategy. It is often the work that begins first and forms the major part of the CD strategy. It should aim to build upon the shared experiences of gay men's lives in order to promote new solutions to the group's own defined concerns and issues. This element of the strategy can utilise many methods. For example:

- Outreach work – going out to work with MWHWSM in pubs and clubs, cottages or cruising areas.
- Group work – talking with existing groups.
- Training – offering courses and sessions.
- Funding – offering small grants to pump-prime projects.
- Helping to set up groups – using advertising or word of mouth to start groups, and encouraging them to meet for social, self-help and social action reasons.

- Campaigning – enabling MWHWSM to express their concerns, perhaps by demonstrating or using the media.
- Producing materials – MWHWSM can produce their own educational and informational materials, which meet their needs and are relevant to the local context.

ORGANISATIONAL DEVELOPMENT

Work at grass roots level may be inadequate on its own to bring about far-reaching change. Organisations too need to develop and change to respond to the articulated needs of MWHWSM and in order for MWHWSM to participate in decision making and gain a fair share of resources. Policies may need to be changed as well.

Working in a CD way can draw on a range of methods, including:

- Participating in committees – enabling the involvement of MWHWSM in statutory sector and voluntary organisation structures.
- Lobbying – working from outside organisations to change their practices.
- Training for organisations' workers – this could include training about particular issues and/or processes.

- Structural and management change – suggesting to organisations that they should change their structures, processes and/or management methods, and enabling them to do so.
- Consultation and participation strategies (see page 19) – suggesting that the organisation consults more widely and sets up mechanisms for community participation, and enabling it to do so.

COMMUNITY INFRASTRUCTURE

Essentially this means bringing together groups and networks to encourage them to share (collectivise) their experience and concerns and to act together for change. Again it can involve a range of activities, many of which have been mentioned above, such as training events, conferences, financial support, producing publications, offering advice and support to groups, and forming forums and organisations.

CASE STUDY

London MESMAC's work with young gay men

The London MESMAC team visited twelve lesbian and gay youth groups in London, facilitating discussions with the young men present and looking at the available HIV/AIDS-prevention material. The young men were asked how appropriate the material was for them. The majority felt, for numerous reasons, that it was inappropriate, and many were also concerned about whether printed leaflets generally were the most beneficial method of health promotion for young men who have sex with men.

After these initial discussions all the

men attending these groups were invited to a meeting to discuss whether they themselves wanted to start some work on the issue of HIV and health promotion. The agenda for the meeting was left open, allowing the young men themselves to lead the discussion on what, if any, work they wanted to get involved in. The help and support that MESMAC could offer was outlined, and it was also explained that the project was set up in a community development framework.

From the initial meeting it became obvious that quite a few young men wanted to get involved in the project, so a further two consultation meetings were held, getting them to brainstorm the areas they would like to work on. They were clear that they wanted to

form some kind of group, yet within that there were too many methods of working that they wanted to cover, so they were given help to decide which areas they wanted to focus upon.

The group decided that they wanted to be an outreach and support group, eventually also working with other young men in promoting safer sex and safer drug use. However, they felt that it was equally important to be there as a support for young men coming out, with all that this entails, such as emotional support and practical help with housing and so forth, using referral agencies.

After deciding on the focus of the group, the young men listed the training they needed to help them form the group and meet its aims and objectives.

To date, the training needs identified and already met are: safer sex, drugs awareness, negotiating safer sex, deaf awareness, equal opportunities, and issues for young men who have sex with men.

When the initial meetings were planned, it was ensured that the venues were fully wheelchair-accessible, and a sign language interpreter was present at each meeting. One third of the established group are now deaf gay men, so it is standard practice that a sign language interpreter is present at all training sessions. This has been advantageous for the hearing members of the group, because it has enabled them to work alongside deaf gay men and get some insight into the issues they face; they are also the ones who have requested all the training that has taken place, including the deaf awareness course.

PARTICIPATION STRATEGY

Any MESMAC project will also need to consider the fourth element: how to involve MWHWSM in the structures and processes of the project itself. This can be achieved by MWHWSM taking part in steering groups, undertaking research, forming advice groups, and so on.

Within MESMAC we feel that CD is a particularly important and effective way to work with MWHWSM because:

- MWHWSM are a disadvantaged group, and CD works specifically to address the needs of disadvantaged groups and to reduce inequalities in health.
- CD supports different communities in working together.
- CD approaches involve valuing people's background and experience, and building on it.

- HIV prevention is not just about behaviour change; it is about creating a climate where men feel able to make choices. CD enables this to happen.
- CD approaches recognise that there are constraints on choice, such as environment, oppression, class, poverty, the need for relationships.
- CD methods boost the self-confidence and self-esteem of participants.
- CD empowers people to organise themselves.
- CD approaches are accessible.
- It promotes a sense of community.
- It allows educators to identify community needs that are not being met.
- Men can become involved, and this facilitates an exchange of ideas.
- Through CD methods it is possible to gain access to men who would not normally receive information or support, who in turn can then pass this on to others.
- CD methods allow ownership of the work by the men concerned.
- It is a holistic way of working; all men's needs are taken into account,

not compartmentalised into diseases, parts of the body or circumstances.

- Trust is promoted between workers and participants.
- It brings a great deal of energy and diversity into the work.
- It incorporates an equal opportunities approach.

LIMITATIONS AND DIFFICULTIES OF A CD APPROACH

CD offers potentially the most effective approach to health promotion among MWH SWM. However, like all other methods it has its limitations. It is important to be aware of these and to seek to minimise them where possible. As a group MWH SWM face oppression and disadvantage, and changes in the distribution of power and resources, as well as changes in attitude among some heterosexuals and institutions, are needed to address this. CD can assist in this process, but will not fundamentally change oppressive social and economic structures.

Difficulties include:

- Understanding and skill are needed to work in an enabling way rather than

being directional. Participants may, however, be used to being educated in directional ways and may find it difficult to adjust to CD at first.

- The police and legal systems need to be negotiated with for some aspects of the work, such as support for MESMAC work in cottages. Their support may or may not be forthcoming, or may be conditional.
- Some aspects of the work may be dangerous (such as cottages in big cities), or may limit the worker's personal life (such as having to socialise in bars and clubs that are also their workplace).
- MWHWSM who do not identify as gay or bisexual lack a sense of community.
- The pace of the work can be slow, and yet many MESMAC projects will have time-limited funding. This has implications for evaluation and the kinds of objectives you set.
- The funding body may not share the principles and aims of a CD approach. Sometimes statutory bodies find it difficult to act on the needs brought to light by a CD approach and find challenges to their ways of working difficult to take on board.
- Workers sometimes find it difficult to

let go and allow community members to take control.

- CD allows diversity into the work, which is a strength, but this can also bring about a loss of focus.
- Materials produced may not be as polished as those produced by statutory agencies and well-funded voluntary bodies.

CONCLUDING LESSONS OF TAKING A CD APPROACH

The following points have been learned from the MESMAC experience, and have also been influenced by the Salford Community Health Project checklist:¹⁰

- 1 There is a need for a clearly agreed management structure which recognises the contradictions of a CD project being part of a statutory organisation (if you are based in a local authority or health authority) or of a large voluntary organisation with bureaucratic processes. Dual accountability is needed: primarily to the community being served and contractually to the employing or funding body; mechanisms for feedback and decision making need to be decided at the outset.

- 2 The methods and criteria for evaluation need to be agreed at the outset.
- 3 Support structures need to be developed for the workers.
- 4 Ideally, an identity separate from that of the host organisation is required.
- 5 The project should control its own budget, which will need to include resources for development work.
- 6 There needs to be adequate discussion about the objectives and principles of the project before it starts.
- 7 Statutory and voluntary bodies that support a MESMAC project need policies allowing health workers to be involved; time, training and resources may need to be made available.
- 8 Workers need access to appropriate and good quality training and personal development opportunities.
- 9 An equal opportunities policy must be agreed at the outset, and monitored continuously.
- 10 Workers must not be expected to fill gaps or compensate for the shortcomings of existing health services, nor should they be seen as the voice of the community or a short cut to proper consultation.
- 11 CD work takes time: changes in the community and in organisations are sometimes slow to come about. In terms of HIV and AIDS, time is not on our side. CD is only one approach, and there need to be many others as well, such as mass media work. However, it has been shown that CD is potentially more effective, and can work as part of other health promotion methods; for instance, the community can be involved in designing media advertisements.
- 12 Organisations that fund/support a MESMAC project should be ready to act on recommendations to meet needs within the community.

REFERENCES

- 1 Gordon, P A *Review of Safer Sex Training Workshops*, HEA, 1989 (see also MESMAC first report)
- 2 Webster, G 'Community Development and Health — A Collective Approach to Social Change', BSA Conference, Health and Safety, Manchester, 1991
- 3 Liffman, M *Participation: Power for the Poor*, George Allen & Unwin, 1978
- 4 Brager, G and Specht, H *Community Organising*, Columbia University Press (p. 39), 1973
- 5 French, J and Adams, L 'From Analysis to Synthesis: Theories of Health Education', *Health Education Journal* 45(2), 1986
- 6 Smithies, J and Adams, L *Community Development and Health Education*, HEA, 1990
- 7 Martin, R *Definition of Community Work*, Federation of Community Work Training Groups, 1990
- 8 Smithies, J 'Organisation and Community Development', Unpublished Thesis, Sheffield Business School, 1991
- 9 *Healthy Sheffield Community Development Strategy* (produced by Health Sheffield personnel; contributors include Smithies, J and Webster, G, Labyrinth Training and Consultancy), 1992
- 10 Jayne, L and Youd, L *Salford Community Health Project: Checklist for Developing a CD and Health Project*, Salford Health Authority, 1986

FUNDING SOURCES AND COSTING

SOURCES

1 *Health authorities (district and regional)*

Under the new system, it is possible for the voluntary sector to look at contracting for the provision of services that are the responsibility of the health authority, or for services that it is desirable for the authority to provide but which they would prefer somebody else to carry out for them. Health authorities are also involved in joint funding initiatives with local authorities.

2 *Local authorities (county and district councils, metropolitan authorities and London boroughs)*

The most support has probably come from metropolitan authorities and London boroughs. In December 1991 the Local Authority Associations Officer Working Group on AIDS produced a booklet which discusses accessing funds from local authorities (see Bibliography).

3 *Charities*

Guides to charities are available in public

reference libraries, with the criteria and main funding focus listed.

4 *Trusts and foundations*

These are often funds that operate nationally or locally from monies established by benefactors. They have criteria for funding, often laid down by the founders of the trust; for instance, the City Parochial Foundation in London aims to help the poor in the capital.

Many trusts will not support anything that they think statutory bodies should be funding. Once again, public reference libraries should have guides to trusts and grant-making bodies. Councils of voluntary service are also able to advise on such matters, and some areas are lucky enough to have specialised funding advice workers.

WHAT FUNDERS ARE LOOKING FOR

The world of funding, and access to it, is getting tighter and tighter, so expectations will rise.

Ascertain if funds are available, and ask for instructions on how to apply. In any case, when making a submission you should be sure to provide the following:

- Aims and objectives, expected outcomes, and how the work will be carried out and managed.
- Detailed costings broken down into headings such as salaries, rent, equipment, stationery, etc.
- A set of audited accounts or an annual report, if available.
- The name of a contact person who can deal with any enquiries or discussions concerning the application.

Ensure that you have sound financial monitoring systems which you can demonstrate. You may find that the potential funder would be willing to provide funding for a book-keeper, but they would have to be confident that the organisation was sound and that it had demonstrated good financial management. You should consider submitting quarterly updates on expenditure, indicating overspends and underspends in each budget head.

COSTINGS

The following costings are based on the 1991-92 budget for MESMAC Tyneside,

although they do not necessarily reflect precisely what was spent. They are given as an example of the approximate costs of one project; needless to say, the variables in costings from project to project mean that they can only be taken as a point of reference, not as a model for actual budget submissions!

MESMAC TYNESIDE BUDGET FOR 1991-92

	£
Salaries and on-costs (2 full-time and 1 part-time)	37,000
Car mileage/staff travel	650
Petty cash	250
Postage	400
Training (incl. related travel and subsistence)	1,600
Travel/subsistence (other meetings)	850
Grants to groups	4,450
Outreach/scene work	700
Telephone	1,200
Professional supervision for workers	720
Stationery	750
Photocopying	250
Videos/books/subscriptions	550
Condoms/lubricant	4,000
Capital items/furniture	2,000
Management fees (to Newcastle Social Services)	3,000
Rent/rates/service charges	5,000
Gas/electricity	900
Sundries	1,000
TOTAL	£65,270

WORKERS AND ROLES

A considerable amount of confusion and bad feeling can be avoided by the development of clear person specifications and job descriptions. In this way, workers become clearer about what is expected of them and the specific tasks in which they will be involved. In developing these it is important to consider the project in the long term and anticipate which skills and tasks will become necessary at different stages. It is essential to recruit from the communities with whom you intend to work.

When more than one worker is involved in a project (and in our view this is essential, since nobody should have to do this work in isolation), decisions will need to be made about whether to differentiate between workers in terms of seniority and level of responsibility on the one hand, and areas of work on the other. When no such differentiation occurs and workers share a common role, the division of work should be discussed in full.

It is essential that workers' roles are clarified in terms of the overall management structure of the project. In this way, concepts such as accountability and consultation can be fleshed out, and areas in which workers can expect to be consulted and involved in decision making (or not, as the case may be) can be delineated.

Having said this, it is important to remember that community development involves a lot of uncertainty, and everyone involved in a project has to be willing to review the development of the work and make changes as necessary.

Decisions will need to be made regarding general skills possessed by all workers and specific skills relevant to particular areas of work. Decisions also need to be made about which skills would be expected of a worker on appointment, and which they can develop via in-service training.

The following checklist of skills and personal qualities offers a range of possibilities, by no means exhaustive. It should go without saying that no single person could possibly embody all of these skills and qualities; equally, the suggestions are subjective at times. Nevertheless, they may serve as a useful starting point for debate:

SKILLS

- Interpersonal communication
- Counselling
- Groupwork/facilitation
- Education/training experience
- Liaison and networking
- Time management
- Evaluation/record keeping/report writing
- Graphics and design
- A knowledge of community development techniques
- Experience of outreach or detached work
- Experience of working with young people/people with disabilities/men from the black communities or other potential target groups
- Strategic planning/knowledge of funding and policy issues
- An overview of health education strategies and structures

- A knowledge of the commercial gay scene, HIV and gay issues

PERSONAL QUALITIES

- Persistence
- Sense of humour
- Enthusiasm and a commitment to the work
- Feeling comfortable about one's sexuality, and that of others
- A commitment to equal opportunities
- The ability to reflect on one's own actions
- The ability to work with minimal supervision
- A non-judgemental approach
- The ability to relate to a wide range of men who have sex with men, which can incorporate young MWHWSM, men who don't identify as gay or bisexual, SM gays, gay Christians, older men, men who have been abused, and so on

- The ability to cope with stress
- A clear understanding of professional and personal boundaries, and the experience, responsibility, professionalism and stability to respect such boundaries
- Versatility and adaptability

- The strength to say no, and the ability to make appropriate referrals

NOTE: If gay men only are to be appointed to a particular post, this can be made explicit in recruitment advertisements, and is covered by exemption under Section 7(2)(e) of the Sex Discrimination Act. This avoids a muddled situation in which women and heterosexual men may spend a lot of time composing application forms for jobs that they are not going to get.

CODES OF CONDUCT

A code of conduct, constructed by the workers themselves and setting clear professional standards, is essential. If workers help to compile this code there is a sense of ownership and commitment to the principles it embodies: in this way it resembles a contract between the workers and the project.

The MESMAC Code of Conduct is included as an example. A rough draft was prepared by one of the project co-

ordinators and was discussed, reviewed and amended by the workers before being finalised and adopted. This code has been a strong unifying force in a national project comprising four demonstration sites, each with a different structure, host organisation and focus to its work. The Code of Conduct distinguishes the national MESMAC project from other initiatives, which may share the same name but which may not subscribe to the underlying principles.

CODE OF CONDUCT FOR MESMAC WORKERS

The purpose of this document is to establish and maintain good standards of work within the MESMAC project.

MESMAC is a Community Development project, and as such is based on the principles of equal opportunities:

- Men who have sex with men should be involved in the planning, consultation, management and implementation of the project.
- Workers will be encouraged through

support, supervision and training to develop ways of working which maximise this participation.

- The project should begin by working with people to identify their needs and concerns, and support them in developing appropriate action.
- The particular perspective of different communities of interest of men who have sex with men should be respected and represented in planning, policy and decision-making forums, and their life experience acknowledged as a form of expertise.

- Positive targeting should be employed to enable the involvement of people from black and ethnic minorities and other under-represented groups, e.g. people with disabilities.
- Networking and sharing skills, knowledge and information are central features of this work, enabling expertise to be shared and developed.
- Within the overall aims and objectives of the MESMAC project, the task of facilitators is to use their professional skills and the skills of

others to enable choice and action among MWHWSM in relation to safer sex.

The role of facilitators is to:

- Make contact and work with individuals and groups.
- Work with them to explore their needs as they see them in relation to safer sex.
- Put groups in touch with one another to develop models of good practice.
- Assist in the development of individual and group action plans.

RESPONSIBILITIES

- While most of the work undertaken will be of an informal nature (for example, on the streets or in pubs and clubs), as representatives of the MESMAC project workers have a responsibility to conduct themselves with the utmost professionalism at all times. This applies to dealings with other agencies, including the press.
- Workers should aim to respond to the needs of their clients. If a working relationship becomes impossible for any reason, appropriate referral to another worker/agency must be negotiated.
- Workers must respect the autonomy

and dignity of their clients, irrespective of their age, race, class, sexual orientation, capabilities or antibody status.

- Workers are responsible for negotiating and maintaining appropriate professional boundaries with their clients and must not use their clients to meet their own social, emotional or sexual needs. It is not acceptable for workers to have sex with clients.
- Workers must not impose any standards, values or beliefs upon clients. Nor should they encourage any course of action which is harmful to the client or others. It is acceptable to disclose one's own values or beliefs.

COMPETENCE

- Workers will be provided with opportunities for training throughout the life of the project, and should make use of available supervision to identify further training needs.
- Workers must monitor and keep a diary of their work, being able to

account to colleagues and managers for what they are doing and why. Access to the diary by the evaluator should be negotiated with the workers.

- Workers should recognise their limits and become familiar with appropriate referral agencies.

CONFIDENTIALITY

- Confidentiality must be maintained with regard to any information of a personal nature concerning clients and colleagues, including name, address, biographical details and any other information which might result in a client's identity being disclosed.
- Workers must not reveal confidential information pertaining to clients or

colleagues except to those upon whom they rely for support/supervision, and in this instance the identity of the individual(s) concerned must be thoroughly disguised. Should ethical dilemmas arise (e.g. possible danger to a third party), the situation should be discussed as soon as possible with the supervisor, manager or project co-ordinator.

SUPERVISION

- Workers must undertake to make full use of available supervision, which is provided with the aim of facilitating their personal and professional development. Supervision should be of a contractual nature, and the following should be agreed:
 - The time, place and frequency of meetings.
 - Whether the supervision is to be one-

to-one or group; arrangements for access to supervision outside normal working hours.

- Boundaries between supervision and personal counselling.

- The supervision is likely to change in nature as the worker and the project develop, and there should be opportunities for worker and supervisor to review the process. Access to an external member of the project team should be available if necessary.

STEERING GROUPS AND MANAGEMENT COMMITTEES

When a new project is being set up, a steering group is essential if a wide range of views is to be represented at the planning stage. Having a group (rather than just one person) will also mean that tasks can be shared, and areas of individual expertise can be maximised. Once the project has employed workers, the steering group may be transformed into a management committee or a less formal advisory group, and the membership and precise remit will probably need to be amended at this stage. The choice between a management committee and an advisory group is usually dependent on the nature of the host organisation and the overall management structure.

GUIDELINES FOR WORKING WITH STEERING GROUPS AND MANAGEMENT COMMITTEES

- 1 Identify the groups or individuals who need to be involved in steering groups/management committees. Include potential consumers, key local voluntary organisations, individuals with particular skills or experience, possible funders, possible supporters who are unconnected with any organisation, and maybe possible critics.
- 2 Develop an appropriate consultative process to identify their willingness to be involved, to what extent and in what form.
- 3 Clarify at the outset what the role of the group is. Does it make decisions? Is it purely advisory, or is it a reference point or support source for the workers? If it is advisory, make sure you know who will make the decisions. If it is decision-making, ensure that it is clear where the final responsibility rests. Is it with the funder? Does somebody have power of veto? What will the boundaries be?
- 4 Have written terms of reference which all members have agreed upon.
- 5 Allow for variations in the membership, structure and roles within the group. There should be space for ad hoc/co-opted members.

- 6 Make sure the group is as autonomous as possible. Recognise any restrictions or boundaries that may exist, but then allow the maximum flexibility which can be achieved within those boundaries.
- 7 Review the membership regularly, to ensure it reflects the needs of the work, the consumers and the providers.
- 8 Establish and write down lines of accountability.
- 9 If there is a local management committee/steering group and some kind of national body with a similar function, establish the clear difference in their roles and also the relationship that will exist between the two.
- 10 Recognise that national groups cannot, in a multi-sited initiative, have responsibility for the day-to-day running of the project, and that local groups are the only way to ensure a direct reference point to validate work.
- 11 When establishing groups, ensure that all aspects and interests are covered, such as training needs, black community needs and staff development needs. If representatives are not available, then other mechanisms need to be developed to

ensure that the issues are considered and responded to on a regular basis.

Within the four HEA-funded MESMAC projects, there was initial input into national forums (such as the Project Advisory Group*) from bodies such as NOVOAH (Network of Voluntary Organisations in HIV/AIDS) and NAHAW (Network Association of HIV/AIDS Workers). There was no direct worker representation, and indeed some felt this to be inappropriate, since input from workers could be achieved via feedback at training events and by using the project co-ordinators as a link. Nevertheless, there were issues about who was making the decisions, how and with what advice. The national forums had no real point of reference for the workers in the field. This situation was resolved by the establishment of quarterly project networking meetings open to all those involved in the project, and it was possible to discuss national issues and decisions at these meetings.

*The Project Advisory Group consisted of representatives from key organisations, HEA staff, the project co-ordinators, the evaluators from Keele University, and one member from each project site's steering group/management committee/advisory group.

SUPERVISION AND SUPPORT

Supervision is vital to all workers, and can take many forms:

- Structured and offering clear direction.
- Loosely defined, more of an opportunity to let off steam, without necessarily having a clear outcome.
- An opportunity to stand back from

the work and view it more objectively or from a different perspective.

- A safe environment in which to discuss personal issues, and hopefully prevent them from adversely influencing performance.
- Allows the manager an informal insight into how the staff are coping.

PEOPLE WHO OFFER SUPPORT

Managers

Steering groups

Management committees

Co-workers

Clients

Paid professional supervisors

Partners and lovers

Friends

OTHER SOURCES OF SUPPORT

Success

Positive feedback

Good time management

Holidays/recreation

Money

PEOPLE WHO OFFER A SUPERVISORY OVERVIEW

Managers

Steering groups

Management committees

Paid professional supervisors

SOURCES OF ACCOUNTABILITY

Self

Co-workers

Clients and the wider gay and
bisexual communities

Managers

Funders

PREREQUISITES FOR GOOD SUPERVISION/SUPPORT

- It should be regular, and the person offering support should take responsibility for scheduling it into the individual's work.
- It should be time for that individual alone (or possibly with a co-worker), and should take place in a tranquil environment without interruptions.
- The person offering support should be acceptable to the worker.
- People providing supervision should offer different perspectives, and

should be able to criticise
constructively.

- In projects whose structure may be complex, and where there may be multiple funders, it is necessary to clarify who precisely is offering what support, and in what kind of supervisory role; moreover, will they communicate, and might they clash?

PROBLEMS WITH SUPERVISION/SUPPORT

- Some people/groups have a responsibility to offer both support

and an overview (sometimes critical). These roles can conflict.

- There may well be a knowledge gap between managers and workers, partly because this is new work and many managers may have little experience of the issues. Unless workers spend vast amounts of time briefing managers, this may lead to managers seeming a little superfluous, or their input may be deemed inappropriate, and in such a situation managers can become de-skilled and demoralised. However, it could be argued that a good manager does not need to know about the work in detail so long as he or she is familiar with the overall aims and objectives and has negotiated expected outcomes. General management skills should be transferable from one area of work to another.
- If workers feel unsupported, or that their manager does not fully understand the issues, their friends, lovers or colleagues may well end up fulfilling the support role. That these people should provide at least *some* level of support is inevitable, but they should not act as the main reference point. It is worth underlining here that this type of work is bound to have a profound impact on one's personal life; perhaps the crux of the matter is keeping this impact within reasonable and manageable limits. To achieve this, workers should feel little

compunction about stating very clearly what kind of support they need.

- If adequate support is not forthcoming, strategies might include taking this up with the manager and his or her superior, discussing the issue at a management committee/advisory group meeting, calling in an outside consultant to do a management review, or employing someone to offer monthly professional supervision.
- Specific supervision and support issues may arise if the manager/supervisor is heterosexual with limited experience of working with men who have sex with men. One option might be to arrange for additional support from a gay man working in a similar field, while acknowledging all the skills that the heterosexual manager brings to the job.

EQUAL OPPORTUNITIES

It has already been stated that an equal opportunities approach is fundamental to MESMAC, and indeed it should form the basis of any work with men who have sex with men. Other sections in this book also refer to equal opportunities issues, as and when necessary. This chapter

summarises some of the key points in ensuring that your work is fully accessible to *all* men who have sex with men within your area. This does not mean that you cannot subsequently give priority to certain groups.

WHO SHOULD THE PROJECT BE OPEN TO/WORKING WITH?

- Men from black and minority ethnic communities
- Men with a learning difficulty
- Men with a physical disability
- Men with hearing, speech or sight impairment
- Men who don't have much money
- Young men/older men
- Men with widely varying sexual repertoires/practices
- Men with HIV and AIDS
- Men whose first language may not be English
- Men who don't identify as gay, but who have sex with other men
- Gay and bisexual men
- Men with different educational and class backgrounds
- Men with varying religious beliefs and cultural backgrounds
- Men who are homeless
- Men who use drugs

In a time-limited project with finite resources it may not be possible to reach *all* of these groups.

GENERAL PRINCIPLES

- 1 Workers and the work they do should challenge prejudice and *-isms* whenever and wherever they occur.
- 2 Groups and events should be open to all MWHSWM.
- 3 Groups not directly facilitated by workers may need to be encouraged to look at equal opportunities issues that they might otherwise neglect.
- 4 Self-respect and empowerment within groups should be fostered.
- 5 Structures and power imbalances within the group need to be challenged.
- 6 Safe spaces need to be created.

HOW TO MAKE GROUPS/EVENTS ACCESSIBLE TO ALL

- Any charges for events should be minimised/set on the basis of ability to pay.
 - A signer should be available.
 - Offensive or alienating comments should be sensitively challenged.
 - There may be a need for specialist groups (such as a black gay men's group) as well as the integration of all parts of the community into general groups.
- ## PUBLICITY/PUBLICATIONS FOR ALL
- They should use broad imagery which offers a range of possibilities in relation to age, race and physical appearance.
 - They should appear in a variety of locations/publications which reach all sections of the community.
 - They should use accessible language.
 - They may need to be produced in languages other than English through collaboration with the target groups. Mere translations from English may not be sensitive to specific cultural contexts.
- The venue should be accessible to men with mobility difficulties.
 - The venue should be easily reached by public transport.

- The needs of men who cannot read well, or at all, should be considered.

WORKERS/VOLUNTEERS

- Wherever possible, workers should be representative of the groups that they are targeting.
- Volunteers should be representative of the different communities.
- Both staff and volunteers may need training in equal opportunities issues.
- Careful thought should be given to the advertising of new posts in appropriate journals.

ISSUES

- Homophobia/heterosexism are often not actively addressed with workers, as it's frequently assumed that if they're gay men they are familiar with these issues and can cope with them (see Heterosexism and Homophobia, pages 47–59).
- Sexism and misogyny among some MWH SWM are frequently neglected: because the work is done largely with men by men, there can be a tendency to forget that there are regular

overlaps with women and women's issues.

- There is a danger that too much emphasis will be given to one particular area of equal opportunities, to the detriment of others.
- A 'hierarchy of oppression' is likely to be discussed, and time should be allowed to talk through such issues.
- Lack of money can militate against full implementation of equal opportunities policies (such as not being able to afford a signer, no money for improving access to premises or inadequate funds for truly representative publicity). However, care needs to be taken that lack of money doesn't become a catch-all excuse for not addressing equal opportunities issues.
- MWH SWM are not devoid of the -isms themselves. Real examples of this include:
 - Group discussions where women are referred to as 'fish'.
 - Counselling sessions where the word 'Paki' is used by the client, together with an obvious racist attitude.
 - Marginalisation of men with learning difficulties in groups.

- Marginalisation of older men, or men who don't fit the youthful, attractive stereotype.
- Unenlightened attitudes in group discussions towards men with AIDS or HIV infection.
- Derogatory comments about men who go cottaging/cruising.

SOME THOUGHTS ON CHALLENGING

- Challenges need to be constructive, assertive but not aggressive, and sensitive to the person and the occasion.
- When working with groups, it is a good idea to establish clear group guidelines about acceptable language and an equal opportunities approach. This will help to minimise inappropriate comments, and if somebody does then make an offensive remark, the challenge can occur within an agreed framework and the guidelines can be explicitly referred to. The group can thereby take joint responsibility for the challenge, rather than it being seen as the personal view of the facilitator.
- Groups can be offered sessions on sexism, racism and other areas relating to equal opportunities, employing an outside facilitator if necessary.
- Workers need to strike a balance between being viewed as holier-than-thou pontificators (to whom people cannot relate) and the opposite extreme whereby they collude with unacceptable attitudes. Such collusion can be tempting, especially when workers are trying to gain the trust and respect of people who are approaching the issues from a very different standpoint.
- It is also worth considering that community development requires you to take men from where they are, not from where you'd like them to be. This can lead to a reluctance to challenge, or to do it in such a half-hearted way that nobody will take any notice.
- The danger is that, faced with all the difficulties surrounding successful challenging, the worker may choose to let things pass. It may be helpful to talk to other workers to see how they deal with similar situations. They may have developed tried and tested techniques, or simply discussing the topic may suggest new approaches.
- If you are gay or bisexual you may be used to challenging heterosexist or

homophobic comments, and it is likely that you would wish heterosexuals to challenge them too; it is not the responsibility of gay men and lesbians alone to confront homophobia. It follows that you have a reciprocal responsibility to address other areas of oppression that do not directly affect you, regardless of the temptation to collude for pragmatic reasons.

- The timing of a challenge can be important. It may be a good idea to challenge an inappropriate comment briefly in a group situation, and then take the person to one side after the group to explain in more depth why their comment was offensive or ill-judged. Nevertheless, there may be pressure to challenge then and there, partly because you may not get another opportunity, and partly because the rest of the group expects it.

- An alternative option in a group may be to have an agreement that comments and attitudes that have emerged during the session will be addressed *en masse* at the end, in a time specially set aside for this. This may have the advantage of de-personalising the challenge, and allowing for a more structured and profound debate.

- Other ways forward include arranging more training for yourself, or obtaining more resources. The work should be constantly evaluated in accordance with equal opportunities principles.

EVALUATION

Most people in the course of their everyday work make judgements on its success by reflecting on their experience and considering what progress they have made. Evaluation makes this activity systematic. It involves:

- Monitoring work (collecting information about it).
- Trying to understand, explain and assess it.
- Using this to make decisions about action and improvement.

WHY EVALUATE?

Careful evaluation is essential to community development because it focuses thinking on:

- The underlying rationale of the work.
- Successes and failures in practice.
- Factors that have facilitated or hindered the work.

Evaluation is therefore central to:

- Improving and developing the work as it goes along.
- Being accountable for the work.
- Disseminating information that arises out of the project.

Evaluation faces two pitfalls:

- It can be imposed from the outside, with the result that project members have no ownership of it and might feel threatened by it. It may also not be tied into the project's objectives/goals.
- It can be token – added on to work as an afterthought.

In these circumstances, evaluation is unlikely to be made part of the everyday work of the project. The MESMAC solution to these problems has been to combine two approaches to evaluation:

1 *Self-evaluation by project workers*

The main purpose of this has been to use evaluation as a tool for the continuous development and improvement of the work. The information gathered through

self-evaluation will also help to account for the work of the project and to disseminate what has been learnt.

2 *Overall evaluation of the project by an evaluation team*

The main purpose of this has been to support project workers' self-evaluation, but also to provide an external look at the project as a whole. The evaluators will provide an overall picture of the project and co-ordinate the dissemination of what has been learnt.

This approach to evaluation is particularly appropriate to a community development project because it is collaborative. Everyone in the MESMAC project (not just the evaluation team) has a part to play. In the first part of the project a lot of effort went into establishing good working relationships between the evaluation team and other project members. The result of this is that local projects:

- Keep records of their work.
- Regularly review their work.
- Have started to evaluate areas of work to write up.

The evaluation team have also:

- Interviewed project members and clients.
- Participated in national and local project meetings.
- Supported self-evaluation with advice and training.

The result of this work will be reported and disseminated as widely as possible. All project members will be encouraged and supported in writing-up and dissemination work.

PRINCIPLES OF SELF-EVALUATION

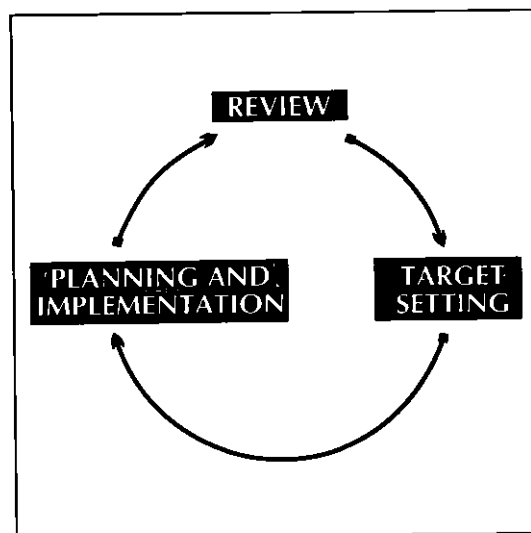
The rest of this section looks at the self-evaluation approach in more detail. The main principles of self-evaluation are:

- 1 It is part of reviewing work as it goes along (formative) and drawing conclusions from it at the end (summative).
- 2 It involves the participation of all interested individuals and groups (workers, managers, clients, etc.).
- 3 It involves developing agreed criteria for success.

- 4 Access to information and its use are negotiated.
- 5 Roles and responsibilities should be clearly allocated.
- 6 It uses both quantitative and qualitative information.
- 7 It needs proper resources (time, people, money).
- 8 Information should be sensitively interpreted, taking full account of the context of the work.
- 9 It should be understood and supported by managers.
- 10 Advice from people with special knowledge (of research or evaluation techniques, for example) might be needed.
- 11 Findings should be checked with someone who is sympathetic and knowledgeable about the work, but prepared to be critical.
- 12 Findings should be fed back into practice, used to inform the review of work and to help make decisions on how to develop it.
- 13 Methods of evaluation (and monitoring) should also be subject to review and improvement.

WORKING PRACTICES

The aim is to build evaluation into the work in a systematic way so that there can be continuous development. The process is best looked at as a continuous cycle, like the CD model of action and change:



Evaluation (and monitoring) comes in at each stage:

- 1 **Review:** judging where work is successful and how it needs improving.
- 2 **Target Setting:** deciding what will count as success and what information

needs to be collected in order to assess systematically whether goals have been met.

- 3 **Planning and Implementing:** deciding how information will be collected, and collecting it in the course of work.
- 4 **Review:** using information to judge the success of work, set new targets and inform decision making.

The result is a carefully evaluated body of information about the work which, as well as helping to improve work as it goes along, can also feed into processes of accountability and dissemination of lessons from the work.

PLANNING EVALUATION

Some detailed considerations that have to be taken into account when planning the evaluation part of the cycle above include:

- Why are you evaluating?
- What do you want to evaluate?
- How are you going to do it?
- Who is going to take on which tasks?

The following points can be useful as a focus for thinking:

1 *What are the goals of the evaluation?*

In the self-evaluation approach, improving or developing work is the starting point. The primary goal of self-evaluation is to review work systematically and judge whether the aimed-for improvements and developments have been achieved. This is done by monitoring (collecting information about the work) and identifying the criteria of success.

There may be secondary goals, for example, feeding into accountability and research.

2 *Which particular aspects of the work are to be evaluated?*

You might think about context, process and outcomes. Keep a lookout for unintended outcomes.

3 *What criteria will you use?*

How will judgements about the work be made?

How will you review whether your criteria are realistic?

How will you recognise and evaluate unintended outcomes of the work?

4 *Which methods of evaluation will be used?*

What information is needed to decide how successful the work has been?

Do you need to review criteria of success?

What information already exists or is already collected?

What information needs to be specially collected?

How will you collect it? (Methods include project diaries, evaluation sheets, questionnaires, debriefings, minutes of meetings, observation and interviews.)

How will you record the information?

5 *How will you organise the evaluation?*

Who will do what?

How will the evaluation work be divided up?

Who is good at what?

Who wants to develop new skills and/or knowledge?

What resources are needed?

What support is needed?

Who will provide it?

Who will give an outsider's view?

6 *How will you apply what is learnt through the evaluation?*

How will you use the evaluation to help inform decision making?

What are your reviews and planning sessions?

7 *How will you disseminate the results of the evaluation?*

Who are the findings for?

Who will see them?

Are there different audiences?

How will you write up the findings?

A separate HEA project, The Local Evaluation Support Initiative, has produced a basic manual on evaluation issues which provides a useful further resource on evaluation. It is called *Evaluating HIV/AIDS Health Promotion* and can be obtained from the HEA (see Bibliography).

HETEROSEXISM AND HOMOPHOBIA

Any project that involves working with MWHWSM will experience difficulties due to heterosexism and homophobia. Indeed, they represent one of the major barriers to effective HIV-prevention work.

WHAT ARE THEY?

Heterosexism describes the way in which everyone is assumed to be heterosexual unless otherwise stated. It leads to privilege for heterosexuals and the neglect of issues facing gay men and lesbians.

Presumed heterosexuality also leads to the dilemma of whether to hide the fact that one is lesbian or gay or to make a decision to 'come out', with all that this entails.

Homophobia describes the active targeting of lesbians and gay men, based on ignorance, fear and prejudice. It is also rooted in simplistic and stereotypical views of what lesbians and gay men are. It can take the form of verbal abuse, physical violence or vitriolic attacks in the press.

Homophobia feeds on heterosexism, and both can be equally pernicious.

HETEROSEXISM AND HOMOPHOBIA IN SOCIETY AT LARGE

Heterosexism and homophobia within society as a whole create an atmosphere in which MWHWSM can feel less valued and more vulnerable than their peers. The starting point of any prevention work is to help create a gay and bisexual community that has a sense of self-value and is confident enough to examine its sexual behaviour in relation to HIV.

The law in particular hinders effective HIV prevention with MWHWSM, not least because it fosters the notion that lesbians and gay men are second-class citizens. It gives legitimacy to a situation where not only is there no redress for discrimination on the grounds of sexual orientation, but such discrimination is actually enshrined in the law. This means that the work is often marginalised, trivialised or vehemently attacked. This is done in the knowledge that such attacks

can pander to the homophobia within society and rely on the fact that many lesbians and gay men are so oppressed and afraid that they may not be able to vociferously defend themselves. In other words, they are a soft target.

There is also resistance in parts of the gay and bisexual communities themselves to health education interventions that are perceived to be from 'official sources', particularly because safer sex messages in the past have not always been user friendly and have not carried a particularly sex-positive message.

The history of heterosexism and homophobia within Britain has led to a neglect of overall community work with MWHWSM. There have been few adequately funded community initiatives. Helplines have to exist on a shoestring, and social work, in general, caters poorly for MWHWSM. For the worker in a MESMAC project, this means having to deal with a huge backlog of general community development with MWHWSM, since this vital piece of work is in its infancy.

In order to do our work effectively we need to create positive attitudes towards sex in general and gay sexuality in particular. This has been made difficult because of the media's 'gay plague' mentality which has linked gay sexuality to HIV/AIDS, suggesting somehow that MWHWSM are responsible for AIDS

and that, unlike some other sections of the population, they are not innocent victims. In retrospect this type of media response has placed too much emphasis on the dangers of HIV infection to everybody, thus paving the way for the neglect of HIV prevention aimed specifically at MWHWSM.

Fear and oppression can also lead to a reluctance to identify as gay. This makes it difficult to gain access to the men you should be working with, many of whom may not wish to be identified as part of an overtly gay project.

HETEROSEXISM AND HOMOPHOBIA WITHIN HOST ORGANISATIONS

The level of heterosexism and homophobia will depend mainly on the nature of the host organisation, but even bodies that are used to working with MWHWSM may not always be satisfactory in their practices. Many agencies have no history of work with the gay community on any level, and they may not have an equal opportunities statement including the rights of lesbians, gay men and other MWHWSM.

Individuals within the organisation may be hostile, or may wish to marginalise the work. This can extend to people who

INSTITUTION	EXAMPLES OF HETEROSEXISM AND HOMOPHOBIA
The law	Gay men and lesbians cannot marry. Unequal age of consent. Laws forbidding consensual gay sex in public sex environments.
Religion	Condemnation of same-sex relationships as immoral and contrary to religious teaching.
The family	Families are assumed to consist of a man and a woman, perhaps with children (note the reference in Section 28 legislation to 'pretend family relationships').
The media	Invisibility of positive role models. Stereotype gay men in situation comedies. Abuse for lesbians, gay men and bisexuals in the tabloids. The linking of homosexuality with cases involving sexual abuse, kidnapping of boys, and so forth, in a way which would not happen if the culprit were heterosexual.
Education	Sex education in schools is based on reproduction. Social events at schools and colleges invariably presuppose heterosexuality.
Employment	The staff Christmas party; try taking a partner of the same sex! Employees can be sacked because they are lesbian/gay. Equal opportunities policies may be ineffectual.

have a specific brief for HIV prevention. Section 28 has allowed many organisations and individuals to legitimise their homophobia, and workers may also come across blocks created by key decision makers such as Directors of Education or even HIV/AIDS Co-ordinators who may have personal, moral or religious objections to working with MWHWSM. Some people may deride the work or be overtly offensive. Many professionals who should be working with MWHWSM are keen to leave all the work to your project, and prefer to target sections of the population with whom they feel more comfortable. Often they hold the key to future funding for time-limited projects such as MESMAC, and this means that it is not always politic to challenge them as strongly as one would wish.

Much valuable time that could be spent doing direct work with MWHWSM is thus spent educating colleagues about the issues facing MWHWSM, in an effort to induce them to address these issues in their own work and to increase the likelihood of continued funding for work with the gay community.

There may also be problems in trying to publicise your work within a large body such as a social services department or a health authority.

In the past, MWHWSM have even been omitted from overall prevention

strategies in certain cities, partly on the basis of the false belief that they were already being dealt with, but with an underlying layer of homophobia. Happily, it is becoming increasingly difficult to maintain such a position.

Workers with MWHWSM are often perceived by other professionals as being awkward, or as having a particular axe to grind on behalf of the gay community, much in the same way that women's issues are marginalised and women who speak out about sexist attitudes are branded as 'difficult'. This situation can leave workers who are also gay men feeling isolated, angry and frustrated, which can make it difficult to work effectively, especially when such complex work requires a high level of support.

HOMOPHOBIA EXPERIENCED BY PROJECT WORKERS

Gay (or bisexual) men working for a high-profile project targeting MWHWSM are, in a sense, professional gay men; they have to wear their sexual orientation on their sleeve. This can leave them vulnerable to homophobic attacks from many different quarters.

These attacks can range from abusive phone calls to homophobic articles about

the project's work in local papers, which have a history of publishing virulent attacks on any initiatives to do with the local lesbian and gay community.

Fear of personal attack may make it impossible for workers to appear in the media in order to publicise their project or to discuss issues relating to MWHSWM. No worker should have to live in fear of a brick through their living room window simply because they have appeared on the regional news as a *professional gay man*. An option here may be to ask heterosexual managers/colleagues to speak on your behalf. Radio programmes, for obvious reasons, are not such a problem!

The threat of homophobic attack is clearly present if one is working in a public sex environment (PSE) (see Outreach in Public Sex Environments, pages 81–95). At other times, workers may find that homophobia is kept under wraps, especially when it comes to fellow professionals. There may be very few overtly offensive comments, and most of them will be made out of earshot. It is debatable whether or not this is a good thing; at least one can respond to overt comments.

Homophobia at all levels makes any project of this kind stressful for workers, and systems for dealing with this stress and providing adequate support need to be firmly in place before the work begins.

HOMOPHOBIA EXPERIENCED BY PROJECT USERS

As well as dealing with one's own experience of homophobia it is often necessary to address the experiences of project users. It is important to maintain an optimistic, positive message about gay sexuality, even though the reality of some gay men's experience is negative. Examples of this include:

- 'Queer bashing'
- Abusive treatment from the authorities, including the police
- Problems with child custody
- Lack of support for MWHSWM whose partners are in prison (they can't join prisoners' wives groups)
- Harassment from neighbours (examples have included killing pets and posting excrement through front doors)
- Discrimination at work, including sacking
- Homelessness due to sexual orientation

HOW TO COMBAT HETEROSEXISM AND HOMOPHOBIA

The preceding litany of heterosexism and homophobia makes depressing reading. There is no escaping the fact that they are rife, and that they undermine the work, making it doubly difficult. However, there is also cause for optimism. The very funding of projects aimed at MWHWSM enables progress to be made in fighting negative attitudes. Even over a short period of time, this progress can be significant, especially in towns where little has been done before. Your work means that people are having to confront issues they might otherwise neglect, and every day it is eroding prejudice. For the first time, perhaps, 'out' gay men are present on important decision-making bodies. You are also establishing a history of work with MWHWSM in your area, and the momentum for further work will not easily be lost. At times when the work is frustrating or seemingly overshadowed by a multitude of problems, it can be easy to forget just how pioneering and radical it is.

1 *Predictability permits planning*

The predictability of many homophobic attitudes means that workers can brief themselves with convincing arguments

that will confound the opposition. Such predictability can be demonstrated by listening to a few radio phone-ins where members of the public are asked to contribute their views on homosexuality and related issues. Since the vast majority of homophobic arguments are based on ignorance, the preparation of counter-arguments is not terribly difficult.

Some popular myths are listed below:

- Gay men are child molesters.
- Gay and bisexual men don't have lasting relationships.
- Homosexuality is unnatural; it is not present in the animal kingdom.
- God forbids it in the Bible.
- Gay men aren't gay; they're terribly sad.
- Gay men would rather be heterosexual.
- Adolescents all pass through a homosexual phase; they must not be subjected to influences that might arrest their progression to a 'normal' heterosexual identity.
- Gay men are all promiscuous.
- Gay men will all end up old and lonely.

- Gay men are obsessed with sex; they fancy all other men.
- Gay groups are formed for the sole purpose of having sex (especially gay youth groups).
- Gay and bisexual men all have penetrative sex.
- Gay men can/should be converted back to heterosexuality.
- Gay men are always trying to convert others.
- Homosexuality is a cause of 'decadence/breakdown in society.
- If everyone were gay, how would there be any population increase?
- It's caused by genes, strange upbringing, dietary deficiencies in pregnancy ...

(These are all red herrings since they deny the legitimacy of a gay (or bisexual) identity, and are discussions which heterosexuals would not expect to be subjected to; mention of causes of homosexuality is often linked with notions of cure.)

2 *Anti-heterosexism training*

Anti-heterosexism training can be offered to fellow professionals. The emphasis

should be on them examining their own practice and attitudes, not getting a voyeuristic slant on what it's like to be lesbian, gay or bisexual. Sufficient time should be allowed for training, especially since heterosexism may be a new concept for many people.

The training needs to be carefully structured so as to challenge in a constructive manner. Some of the trainees will try to deny what is being said by criticising some aspect of the training, so forethought needs to be employed in order to minimise the justification for such criticism.

It is also important to maximise attendance at training sessions, or to make it obligatory in certain organisations. If this is not done, trainers may find themselves preaching to the converted.

Trainers should also consider whether or not it is appropriate for gay men and lesbians to be present in general training groups, or whether they should be offered specific courses; the danger can be that the lesbians and gay men present do all the hard work.

3 *Support*

Support is crucial for workers if they are to cope with the stress and anger caused by heterosexism and homophobia. This support could come from managers,

colleagues, a special support group, or a local network of lesbians and gay men involved in HIV-prevention work (see Supervision and Support, pages 34–6).

4 Challenging fellow professionals

The fact that fellow professionals, including those with an HIV-prevention brief, can themselves be heterosexist or homophobic is one of the most demoralising aspects of the work. Their motivation, together with your response, merits closer scrutiny.

Why are they doing this?

- (i) Personal moral stances that condemn homosexuality, or adherence to a religion that oppresses lesbians, gay men or bisexuals.

Action

- Anti-heterosexism training.
- A discussion illustrating that their morals or religion need not conflict with positive attitudes to MWHWSM. You may be able to suggest a dialogue with gay Christians from the Metropolitan Community Church or the Lesbian and Gay Christian Movement (if they are Christian),

or with people from other religions who are gay.

- A reminder that their first loyalty is to their clients:

... it is ... worrying that HIV prevention information for young gay men has recently been condemned by groups who seek to put their own moral perspective before individuals' rights to adequate health interventions. Rev. Margaret Rhinefeld, director of education at GMHC (Gay Men's Health Crisis) in New York has worked on the issue of HIV prevention and ethics. She suggests that health promotion workers must be clear that ethically their primary responsibility is to meeting the needs of their client group.

(Michael Rooney: *Gay Men Sustaining Safer Sex?*, NW Thames RHA, June 1991)

- (ii) Lack of a rationale for doing work with MWHWSM.

Action

- Remind them that, to date, 59% of HIV-positive reports and 77% of cases of AIDS in the UK have been among men who have sex with men. Develop this theme, if necessary, with reference to further statistics and reports.

- (iii) A perception that, as heterosexuals, they cannot or should not work with MWHSWM since this is the domain of gay men themselves; there may already be a specific project in their locality which targets MWHSWM.

Action

- There must be specific projects for MWHSWM, staffed by gay men, but they need to exist in tandem with general work aimed at the whole population. This general work must acknowledge that approximately 10% or more of people may be lesbian, gay or bisexual, and that they should be actively catered for in general HIV-prevention campaigns or materials.
- Since the majority of workers doing general work are likely to be heterosexual, it follows that the needs of MWHSWM will probably be ignored unless these heterosexual workers are pro-active. They need not feel automatically disqualified from working with MWHSWM. As long as they accept the need for additional specific projects, make well-informed referrals, and consult with MWHSWM when initiating general work, then they should not be criticised for being presumptuous or for working inappropriately.

- Workers can increase their knowledge of gay issues by subscribing to gay publications or attending anti-heterosexism training (see page 53).

- (iv) They don't know where to find gay and bisexual men for initial consultation, or for targeting.

Action

- Suggest active consultation with your project, or with other gay men. They can get in touch with lesbian and gay switchboards for information about how to reach local groups, or can network with their colleagues in other parts of the country to see how they managed to get in touch with MWHSWM.
- Some workers may need to have the commercial gay scene explained to them, and they may wish to put advertisements in gay publications in order to reach men in their area. It should be stressed that, despite their enforced invisibility, MWHSWM exist in all areas, and all have needs that should be addressed.
- One strategy is to suggest that, through initial soundings, a consultation group of MWHSWM in a given area should be established. This group can then report to the professional worker about its issues.

- (v) The notion that there are no high-priority groups, that everyone is at risk, and that we should not highlight certain sections of the population:

Action

- There should be a discussion about the de-gaying of AIDS in order to prevent an anti-gay backlash in the early days of the epidemic. The discussion should then illustrate how this process led to the neglect of work with MWH SWM, partly due to homophobia and partly due to the mistaken assumption that somebody else was doing the work.

- Some workers will need reassurance that it is now politically acceptable (indeed imperative) to state that MWH SWM are a high-priority group; various reports or articles in the gay press can be used in order to show the development of the debate.

Workers will need to realise that reinstating MWH SWM as a high-priority group must be done in a way that does not lead to stigmatization or suggest that they represent a pool of potential infection for the general population (which is often taken to be heterosexuals who don't use drugs).

- In short, some workers may not know

about the changing politics and rationale of HIV prevention with MWH SWM. It is as important to emphasise the need to keep abreast of the debate in the gay community as it is to know the latest biomedical information.

- (vi) General awkwardness about working with gay men.

Action

- If people are being paid to do HIV-prevention work, and MWH SWM are a high-priority group, then awkwardness is not an acceptable excuse.

Perhaps it is worth mentioning here that a lack of collaboration between gay men and heterosexuals working in the HIV-prevention field may be partly due to the fact that they do not share the same social networks: meeting for a drink after work or socialising in other settings can provide opportunities to look at issues in a non-confrontational way and try out new ideas.

- (vii) They are overworked and stressed; in such a situation, working with MWH SWM is more demanding than choosing comfortable targets.

Action

- You may feel some sympathy with this attitude, since HIV prevention is demanding and stressful, and it is tempting for all workers to reduce the strain by choosing easier areas of work. However, there needs to be constant evaluation to ensure that easy options don't become the

solution to stress, and that the goals of the work are being adhered to.

- A more appropriate solution to stress would be to increase the amount of support available. Bear in mind, too, that the support and respect workers win from MWHSWM, if they are seen to be addressing their needs, can in themselves make the stresses worthwhile.

SCENARIO

Challenging Heterosexism

SCENE

A meeting with other HIV workers, those responsible for health education in schools, or general youth and community workers. It might also be a training session at which you, a gay outreach worker, are present.

THE PROVOCATION

- An overtly heterosexist or homophobic remark is made.
- Those present praise a leaflet which is completely heterosexist (there is no

mention of MWHSWM, nor are there any images of them).

- A glowing reference is made to a consultation group made up of young people who are being asked for their views about safer sex education and leaflets available for their age group (16-25). There are no young MWHSWM in this consultation group, and no effort has been made to recruit any.

HOW YOU FEEL

- Incredulous
- Angry
- Frustrated
- Offended

- Provoked
- Obligated to say or do something

EXTRA FACTORS MAKING YOU ANGRY

- These people are paid to do HIV prevention.
- You have tried to persuade them in the past to do more work with MWHWSM.
- You have been nice to them in the past.
- They have not done the work.
- You have been in similar situations with these people before.
- You have heard the same person make the same sort of remark in the past, and have challenged it once before.
- Nobody else seems to have noticed the remark/example of heterosexism.

WHAT HAPPENS NEXT

You explain, with as much control as you can muster, why the remark was inappropriate, or why the leaflet is heterosexist. You restate all the

principles concerning work with MWHWSM. You may add how much you resent having to do this all the time.

HOW THEY FEEL/REACT

- *Here he goes again.*
- *Why does he have to be so aggressive?*
- *He doesn't understand my problems/constraints.*
- *I'm not going to listen.*
- *Isn't this embarrassing?*
- *Gay men are always awkward.*
- *He's just saying that because he's gay himself and is too emotionally involved/has no professional detachment.*

RESULT

- You still feel frustrated and angry.
- There will probably be little comment after your outburst.
- Very often, the only person to support you openly will be another gay man or a lesbian.

- Some people may be made to think a little.
- Most people will go away and try to erase the incident from their memory.
- There is little sign of change.

HOW TO COPE

Incidents similar to the one detailed above are not rare. They happen with alarming regularity and it is understandable that workers get angry. There is no easy way of changing people's heterosexual or homophobic attitudes, since they are symptomatic of the heterosexism and homophobia entrenched within society at large.

Nevertheless, one of the things that makes the above scenario so unproductive is that all the talking and analysis is done by the gay man present. Perhaps the key in such situations is to turn the tables and make all the others present examine their own heterosexism, or the heterosexism inherent in the leaflet.

YOU COULD DO THIS IN THE FOLLOWING WAY:

- State succinctly what the problem is.

- Say that you could elaborate, but that you want other people to examine the remark/leaflet/attitude and say why it is heterosexual. During this time, you should act simply as a facilitator of the discussion. If there are long silences, you should not fill them yourself. Remember that your goal is to get others present to discover for themselves what you would otherwise be lecturing them on. This process of discovery and self-analysis is more likely to have a lasting effect. It is not the responsibility of gay men alone to challenge heterosexism and homophobia. (See Equal Opportunities, pages 37-41.)

People who appear heterosexual and homophobic may feel powerless to begin to address the issues facing MWHSM. They are unlikely to move forward unless you have the time, patience and tolerance to help them examine their barriers, and suggest strategies for taking the work forward.

WAYS OF WORKING

GETTING STARTED

Assuming that the job descriptions, management and support structures, funding, and the overall philosophy of the project have been sorted out, what else do you need to get started? Some of the following points may be more relevant to potential managers than to new workers; managers and steering groups may also consider visiting existing projects to assist in their planning process.

THE OFFICE/BASE

■ It should be accessible.

Is it in the centre of town, or at the very least near convenient bus routes? Is it near the gay scene? Is it in a notoriously rough area of town, or equally in a very middle-class district where some men might feel uncomfortable? Can it be reached by people with mobility problems? Do users have to run the gauntlet of a series of gatekeepers? (This would apply especially in a big building with mixed use.) You obviously want to avoid a situation where nervous users have to ask a succession of possibly

unsympathetic people where the gay men's health project is based. In general, any co-users of the building should be compatible with the ethos of your project. You may have to strike a balance between accessibility and anonymity; for instance, you want 'out' gay men to find it easily, and it might even have a high visibility profile. On the other hand, men who lack confidence or who have a special need for discretion (such as married men) may wish to avoid any location that compromises their anonymity. Married men in particular may wish to have exclusive use of the building when they're meeting, for fear of bumping into an office/social acquaintance.

■ It should be big enough.

Have you got space for all the workers plus office equipment such as photocopiers? Is there storage space (for condoms and the like)? Will you have access to a quiet room for one-to-one work? If you're planning to work with groups, it's almost certain that you'll need a large and private on-site meeting room.

- It should be comfortable and welcoming.

Finances may be tight, but making a base welcoming and attractive radiates positive messages about how much the users are valued. Dingy and dirty rooms that show little sign of creative and sensitive thinking will leave negative subliminal impressions.

- It should be secure.

This is partly because the last thing you want in a stressful job is to come in after the weekend and find the place has been ransacked, and also because some of your records will be confidential.

EQUIPMENT

- Stationery and standard office equipment such as sellotape, Blu-Tack, rubber bands, scissors, etc.
- Photocopier (preferably good quality, and one that can easily double-side copy and reduce and enlarge).
- Computer/word processor/graphics package/typewriter. You need to think carefully about what you want your computer to do before buying; for instance, it may need to do mail-merge, and you may want a decent

laser printer to make documents look professional.

- Leaflet racks, shelving and other display materials, flip charts and stands. A white dry marker board is useful both for training purposes and as a memo/action board for the workers. It can also be used to show each worker's whereabouts.
- Tea- or coffee-making equipment. Cooker/microwave? Fridge? Cutlery and plates?
- Television and video.
- Overhead projector.
- Filing cabinets.

Resources

- Condoms and lubricant.
- A wide selection of leaflets (see Materials and Information, pages 120–24).
- Videos.
- Publications relating to gay issues and safer sex which can form the basis of a library for users and workers (see the HEA's *A Resource List of HIV/AIDS Publications*, which is free).

- Subscriptions to *Gay Times*, *Capital Gay*, the *Pink Paper*, *Boyz* and other gay publications.
- Posters (may need to be laminated for display purposes).
- Display boards (for safer sex promotions).

GETTING BRIEFED

This is essential, and is more viable for workers now entering the field than it was just a couple of years ago. You can be briefed in a number of ways:

- By talking to the people who set up your project, together with other general HIV workers in the locality.
- By visiting other projects working with MWHWSM.
- By reading reports, articles and evaluations of other projects.

There is now a wealth of relevant and helpful information, but the difficulty is getting hold of it and sifting through it. Ideally, a project in the same field may be willing to produce a starter pack for you, photocopying all the relevant materials that they have in their files. If you feel guilty about asking them, or they're

reluctant, it may be worth offering to pay for this service. This book, and some of the publications mentioned in the Bibliography, are also obvious starting points in getting briefed. It may be that reading is one of the most under-valued training exercises, possibly because it seems to demand more effort than going on a day's training course. Nevertheless, it can be far more effective, and far cheaper (compared with course fees and train fares). If you find the prospect of reading lots of material rather daunting, choose to do it somewhere relaxing and comfortable. For example, this may involve staying at home for the morning or for a full day. Reading is work, so don't feel guilty about it.

You can also be briefed by going on training courses or to conferences. Such events can be useful, if only for meeting others in the field and sharing information. However, you need to be quite critical in choosing relevant and well-run courses. The HEA has established a national enquiry and information service specifically for people involved in HIV-prevention work, the HEA NHPIS (National HIV Prevention Information Service). You can ring them on 071 724 7993 or fax them on 071 723 7688. The address is 82-86 Seymour Place, London W1H 5DB.

The HEA also has a Health Promotion Information and Resources Centre which can be visited in office hours at the HEA

offices, Hamilton House, Mabledon Place, London WC1H 9TX. They have advisers and a range of different resources.

NETWORKING WITH PROFESSIONALS

It is crucial to make contact with other workers in the field, and also with youth workers, drugs workers, trainers, social workers and so forth where appropriate. Networking is a prerequisite for good and appropriate referrals.

The local HIV-prevention scene may be very confusing, what with the varying roles of local authorities, health authorities and voluntary organisations. It is vital at the very beginning to understand who does what, and how they are connected; it may be helpful to illustrate this for yourself in a diagram on a wall chart. Finding out who is responsible for what (and where they fit into hierarchies) may reassure you that quite a lot is already being done, but equally it may alarm you to find out that there are yawning gaps.

Dealing with hierarchies may be very frustrating, especially if your project is democratic. It is an unfortunate paradox that many projects founded on

community development principles are based in organisations that do not adopt such practices. Even if your organisation is not like this you may come into contact with others that are. Hierarchies are very resilient, and so a relaxed and philosophical attitude may be called for.

HIV prevention has opened up the field of professional health promotion to a wide range of people who may have little formal training in health issues, and who may not see their HIV-prevention work as part of a career structure. This is relevant only in the sense that some of their colleagues may come from a very different background, and this can occasionally lead to tension or poor communication. If this appears to be an issue for you, it might help to talk about this diversity in a frank but constructive way so that any mutual mistrust or awkwardness can be minimised.

CONTACT WITH THE USERS

Having a nice office, lovely stationery and first-name relationships with all the other professionals in a ten-mile radius is not very beneficial unless you also have contact with the users. Initially this may include:

- Visiting established groups to chat to them.

- Introducing yourself to club/pub owners.
- Designing leaflets and adverts.
- Talking to individuals, especially people with influence in the gay community.
- Setting up a users' consultative group, or inviting users on to your steering group/management committee.
- Doing outreach in pubs and clubs.
- Using existing contacts (they may be your friends, but they're also gay men).

See also Community Development, pages 12–23, and Publicising the Project, pages 116–19.

Don't be disheartened by the lengthiness of this process; you cannot possibly make contact with all MWHWSM in your area, or even the majority of them, not even after two or three years!

NEEDS ASSESSMENTS

Below are a few brief points about needs assessments, which are usually carried out at the planning stage. It is, of course, integral to any community development

project that people's needs are constantly reassessed throughout the course of the work.

The reasons for carrying out a needs assessment are:

- To discover the level of current provision for MWHWSM in terms of commercial venues, social and support groups, public sex environments, communication networks and informal social groupings.
- To assess the suitability of current voluntary and statutory service provision for MWHWSM (for instance, are local GUM clinics operating in a non-heterosexist way?).
- To assess the knowledge of local MWHWSM concerning HIV and safer sex, and to make an estimate of current safer sex practices.
- To review past and current information campaigns aimed both at MWHWSM and at the wider population, to identify gaps, and to make recommendations for new initiatives.
- To assess the concerns and needs of MWHWSM in relation to issues other than HIV (such as housing, police harassment, and so on).
- To identify special cultural or social

influences on MWHSWM in a given geographical area.

Some points to consider when carrying out needs assessments include:

- It is important to try to discover new information that will be helpful when planning work, rather than simply finding out things that have already been written up in numerous other reports and needs assessments from other areas. At their worst, needs assessments can be used as a reason for delaying the start of new initiatives. At their best, they help to pinpoint appropriate ways of working and to brief new workers; failure to conduct a needs assessment can lead to projects being set up on entirely the wrong premises.
- Needs assessments will only give useful answers if the right questions are asked, and this would seem to suggest that they should be carried out by people who have good knowledge of HIV issues, the locality in question, and formal and informal networks for MWHSWM.
- It may be useful to study needs assessments from other areas, such as Leicester (see *Gay Men and HIV in Leicester*, Leicester City Council, 1991). The paper 'Working Where the Risks Are' by Peter Scott and Michael Rooney (see Bibliography) is also a useful source of advice on needs assessments.

ONE-TO-ONE WORK

Because MESMAC was established on a community development model (see Community Development, pages 12-23), the most effective way of working is within the context of groups as this is the best means of reaching as many people as possible with the message of safer sex. However, there is also a case to be made for doing work with individuals while staying true to the model of community development.

The rationale behind individual work is:

- Sexual identity (defining oneself as gay, bisexual or heterosexual) is a very personal issue, and some MWHSWM may be reluctant to join groups that
- are perceived as being aimed solely at men who identify as gay.
- Some individuals need one-to-one supportive discussions before they are ready to be incorporated into a group.
- One-to-one discussions can be a good way of assessing the community's needs, since individuals will often be more candid in a private discussion.
- Individual discussions can help to gauge the need for new groups.
- There is often no other available or appropriate service offering individual counselling. It can be difficult to turn men away in such situations.

CASE STUDY

Tyneside

ONE-TO-ONE WORK WITH MEN WHO HAVE BEEN SEXUALLY ABUSED OR RAPED

One category of men who may feel unable to work within a group is men

who have been sexually abused or raped. This section draws largely upon their issues and the experience of trying to deal with them.

For many of these men, the idea of joining a group of strangers and talking about their experience of abuse is too threatening, especially if they have never disclosed it to anyone else.

As one of the aims of community development is to empower people,

then our methods of working have to be flexible enough to allow people to work in the way that feels most comfortable and appropriate to them.

Confidentiality and trust are important issues for men who have been raped or sexually abused, and the level of trust required before they can talk openly is more difficult to build up in a group setting.

Individuals who have been raped will often contact the project because they are concerned about the possibility of having been infected with HIV by their attacker/s, and for them the issues of transmission and testing are a high priority. Others come to the project via a number of avenues: referrals from the probation service, social services, GUM clinics, or as a result of hearing about the project by word of mouth. Many of these men have very low self-esteem when they arrive at the project, and as a result have some difficulty asserting their own sexual needs and desires within a sexual relationship. The MESMAC project aims to increase people's levels of confidence and self-esteem so that they can negotiate safer sex, and this means there must be room for one-to-one work with those people who feel particularly vulnerable.

For MESMAC Tyneside, work with MWHSWM who had been sexually abused or raped was only a small part

of their work until a new worker was employed, who quite widely stated his interest in this area and who was himself a survivor of sexual abuse.

Many of the people who come to the Tyneside project as a result of their own sexual abuse say that they feel much more willing to talk openly with someone else who has been abused than to their social worker, probation officer, friends, and so on.

However, because of the time-consuming nature of one-to-one work it is impossible for one worker to meet the needs of all men who have been sexually abused, especially if that worker's brief is to do HIV-prevention work in a community development framework. It is also true to say that many of the people who approach the project because they have been raped or sexually abused do not have any interest in addressing HIV/AIDS or safer sex; obviously this can create a dilemma for a worker with a specific HIV-prevention brief.

It is also difficult to deal with men who approach the project because they have heard about its work with survivors, but who identify as heterosexual. Frequently MESMAC is the end of a long line of referrals for men who have already approached other agencies dealing with rape and sexual abuse, but which do not have a service for men.

Being aware that there is no other agency which one can refer them to makes it difficult to say that the project only deals with MWHWSM.

This part of MESMAC's work points to the need for separate projects to deal with sexually abused men, both gay and heterosexual, with a wider brief than HIV prevention. One obvious strategy would be to use the experience gained to lobby funders and service providers to set up projects of this nature.

OTHER MEN BENEFITING FROM ONE-TO-ONE WORK

Survivors of sexual abuse and rape are not the only MWHWSM seen on a one-to-one basis. There are many individuals who are referred to MESMAC by various agencies, or who read about the project in the local free papers where advertisements have appeared.

Occasionally, young men who are uncertain about their sexual orientation, or who have recently 'come out' to themselves, call the project to talk about the young gay men's group. New callers are always offered the opportunity to come along to MESMAC to talk with one of the workers about the group before attending so that they have some idea of what to expect. Many of these young men have not knowingly met a

gay man before, and so are extremely nervous about the prospect of meeting a whole room full of MWHWSM; they are therefore more likely to attend the group if they have already met one of the workers beforehand. .

Such meetings also give the workers a chance to explain their role as facilitators and to assess any particular needs new members have. Part of the package offered to young MWHWSM in the group is that there will be time at the end of the group for individuals to talk to the facilitators about anything which they feel unable to deal with in a group context. For instance, one of the group members was arrested by the police for cottaging and needed advice about housing, because his parents had read about his court appearance in the local newspaper and wanted to eject him from the family home. He initially felt unable to address this problem in the group because of the stigma attached to cottaging, but approached one of the workers for help after the group had finished. This member was subsequently confident enough to facilitate a group discussion about his experiences and issues concerning public sex.

Other men call the project because they are married and have read about the youth group in the local papers. Sometimes they can be referred to the married men's group, and they

subsequently contact one of the group's facilitators. However, there are many reasons why married men might be unable to make the commitment to a group meeting — for instance, their absence from home on a regular basis can lead to suspicion if a convincing explanation is not offered. Married men may have built up a great deal of courage to make this one call, and would be unlikely to make a further call to another agency or to one of the married men's group facilitators. Some have urgent questions which need to be dealt with by workers over the phone,

such as queries about the confidentiality of HIV testing. Usually these are one-off contacts who either get in touch with the married men's group or who are satisfied with the information they receive from the MESMAC workers.

Other one-to-one work occurs when doing outreach in public sex environments. This sort of work reaches men who do not necessarily identify as gay and who, in some cases, have no contact with the commercial gay scene and little or no understanding of safer sex and HIV prevention.

SUMMARY

One-to-one work is inevitable and often valuable, both for the worker and for the client. However, issues that should be addressed include:

- Good time management so that one-to-one work does not dominate.
- Honesty about the limits of individual work; clients and other agencies should not be led to expect something that cannot be delivered.
- Appropriate referrals should be made where possible (workers should be prepared to let go of clients). If there is no scope for referral, existing organisations should be encouraged to improve their practice/widen their target group, or funders should be lobbied so that new services can be provided. It can be very hard to say no if individuals require counselling and support, but if this is not part of the project's brief you have to be firm. One project cannot hope to plug all the gaps left by other services.
- Workers should have some training to improve their one-to-one techniques.
- Counselling situations can be very draining, and may raise specific supervision and support needs.
- Individuals should be encouraged to join appropriate groups and the need for new groups should be assessed.

GROUPWORK

Working with groups is obviously integral to any community development project. The benefits of groupwork are:

- It brings individuals together, and people can break their isolation.
- People share experiences.
- It is possible to get support and advice from other group members.
- Group discussions can lead to a more profound examination of often complex issues.
- People can be relieved to find they're not the only ones in the world who've had this happen to them/who think like that ...
- Groups can be a forum for challenging received notions and for promoting equal opportunities.
- People get to meet each other; they have a social function.
- Groups can be the springboard for community action, lobbying, further groups and activities.

- Groups can build confidence and self-esteem.

PREREQUISITES FOR SUCCESSFUL GROUPWORK

- Properly trained and supervised facilitators, who are suitable for that particular group, well briefed and well prepared for the activity/discussion. It isn't enough to hope that ideas for the session will dawn the minute you cross the threshold.

Facilitators also need to be comfortable with each other if working in pairs. Dual facilitation may be time consuming, but it is especially beneficial in the early days of a project when workers may be under-confident, or when tackling a very complicated topic. The other facilitator can also ensure that his or her colleague doesn't stray from the point, and that time limits are observed. Dual facilitation can also enhance continuity if one of the facilitators has to withdraw.

- Successful advertising to attract people to the group.
- Restricting the group to an appropriate size (depending on the topic, number of facilitators, etc.).
- A good venue. Unfortunately, good venues are the exception rather than the rule. Important points to consider are access, the level of comfort (especially seating), heating, ventilation, refreshment facilities, lighting (soft rather than fluorescent), decor and toilet facilities.

Inadequate venues have a very negative effect, whereas carefully selected and prepared venues can give you a boost before the group has even begun.

EXAMPLES OF GROUPS/GROUP ACTIVITIES

1 *Ongoing*

Young gay men's group
 Married men's group
 Social activities group
 Black gay men's group
 Health promotion group

Group for men selling sex
 Group for older MWHSWM (Evergreens, etc.)
 Police monitoring group
 Bisexual men's group
 Survivors group (for men who've been abused or raped)
 Group for men with learning difficulties
 Publicity design group
 Political lobbying group

2 *One-off groups*

Self-defence classes
 Safer sex workshop

REASONS FOR JOINING GROUPS

- To learn about the subject on offer.
- To get peer support.
- To break isolation and meet other MWHSWM.
- To work through personal issues.
- To socialise/get out of the house.

- As an alternative to the commercial gay scene.
- To meet men they can have sex with.
- To look for the ideal partner.
- Because they are community minded.

REASONS FOR NOT JOINING GROUPS

- Lack of confidence.
- Doubts about group confidentiality.
- Bad time, bad venue.
- Doubts about the organising body.
- Apathy.
- Fears that they'll be left out.
- Fears that they'll bump into old boyfriends/sex partners.
- Scepticism about groups in general.
- They prefer the gay scene.
- Their perception that the only MWHWSM to join groups are those who are too old, ugly, screwed up or

boring to score on the commercial gay scene.

- Poor advertising.
- The group is notorious (for example, it is perceived, rightly or wrongly, as a way in which the facilitators can pick up new sex partners; alternatively, it may be seen as very unsupportive and cliquy).
- The group may have an exclusive image (such as only white, middle-class, well-educated men).

WHY GROUPS OF MWHWSM BREAK UP

- The original task of the group has been fulfilled.
- No suitable venue.
- Lack of money or poor financial control.
- Poor or non-existent facilitation.
- Poor advertising.
- Bad image.

- Cliques that don't welcome new members.
- Men move on once they've gained what they wanted out of the group (such as new social contacts or help in coming out).
- Men start a relationship with somebody in the group, and they both subsequently cease attending.
- Men have unsuccessful one-night stands with group members/failed relationships and vow never to return to the group for fear of having to sit in the same room as *him*.
- Poor evaluation, inadequate chances for group members to feed back about what the group is like.
- Rigidity and an unwillingness to adapt to changing circumstances.

HOW GROUPS CAN BE MADE MORE SUCCESSFUL

- Never underestimate the importance of image, especially in a world where many gay men are sceptical about 'fuddy-duddy' groups and are used to the gay scene, which tends to focus on youth, beauty and sex. The group will need to look inviting, welcoming, well organised and lively. Publicity should be well produced, use strong and attractive images, and be well distributed through all the appropriate outlets (see Publicising the Project, pages 116–19).
- Facilitation needs to be professional and able. There should be thorough planning, and facilitators must avoid being cliquey, without alienating regular attenders. There should be clear guidelines for the facilitators about promoting equal opportunities, and the fact that it is almost certainly not appropriate for them to have sex with group members (see Codes of Conduct, pages 29–31).
- There should be regular evaluation of the group and a willingness to change unsuccessful strategies.
- Activities should be varied, interesting and accessible to all.
- Long-term funding should be sought for certain groups.
- Newcomers should be made to feel welcome; this can be achieved by meeting them individually beforehand, briefing them on the background to the group, and arranging rotas whereby other group members take particular responsibility for welcoming new people. Any

marginalization should be nipped in the bud. In some groups it may be a good idea to have regular (perhaps monthly) intake sessions: all the men who've expressed a desire to join the group in the previous month come together on their own for an induction/confidence-raising session before they're introduced to the larger group.

Making any group successful is no easy task, and MWHWSM can seem especially difficult to organise into viable groups. As well as the reasons mentioned earlier in this section, such as lack of self-confidence, fears about being left out, the notoriety of groups, and so on, there are other specific issues affecting groups of MWHWSM.

- In the gay community, groups have to clear a high credibility hurdle. The commercial gay scene may not be everyone's cup of tea but it is, to a certain extent, a known quantity. Moreover, despite its occasionally unsupportive aspects, it is a place where MWHWSM can gather on their own territory, and it can offer mutual support. The lure of the scene, the standards that it sets, and the service that it delivers (even if this may include an element of being the *lowest common denominator*) are therefore something which any group has to compete against.

- Some men who go on the scene become almost addicted to it, in the sense that if they don't go there on a certain evening, they fear that they will have missed out on something crucial. This means that even the most attractive group or residential event may fail to appeal to certain users. However, this does not explain why a man couldn't go to a group and then go on to the pub afterwards. Incidentally, it is essential that any group should avoid the trap of simply being seen as a prelude to going to the pub, a kind of initial rallying point; groups have to be worth going to in their own right.
- There is great scepticism about groups among some MWHWSM, often based on experience of bad groups. Furthermore, in the sometimes claustrophobic world of the gay scene, gossip, albeit exaggerated or inaccurate, can spread the bad reputation of a group and decrease the likelihood that anyone will want to be associated with it.
- Groups can be seen as middle-class talking shops where dreary or depressing topics are analysed to death; once again, it is important to promote a positive group image. Equally, there may be a false assumption that groups and discussions automatically lead somewhere, which may not be shared by your target audience. The whole concept of a group, especially one which

is non-directive, may be very alien to many MWH SWM. In the experience of a large number of men, groups (heterosexual, youth group, church group ...) have made them feel uncomfortable and marginalised in the past.

Taking a wider perspective, it may also be true that the political and social climate in Britain has changed over the last 10–15 years to one where mutual help and community involvement, together with respect for others, have degenerated into an *I'm alright Jack* mentality of selfishness which is not conducive to the establishment of successful groups.

- Another point to be made about groups of MWH SWM is that shared sexual orientation is not enough to provide cohesiveness for a group: so we all have sex with men – now what? Of course MWH SWM have issues in common, but very often another focus to the group is needed (a further shared interest, such as the countryside, drama, football or music).
- Workers also need to consider the issue of already-existing groups. Some of them may be long-standing lynch-

pins of the lesbian and gay community, providing an excellent service in sometimes adverse circumstances. However, some of them may be far from perfect, may clash with equal opportunities policies, may have a bad reputation, and may seem ripe for overhaul. How will you, as a salaried worker, be able to influence these existing (voluntary) groups and offer them consultancy without seeming like an impertinent upstart? Perhaps the only answer is that it takes a lot of time (which you may not always have), together with patience and sensitivity, to gain the respect and trust of these groups (see also Community Development, pages 12–23).

CONTRACTING WITH GROUPS

If your project is supporting but not directly facilitating a group, it is a good idea to agree on a contract setting out your mutual expectations. This can avoid a lot of misunderstandings and possible trouble or acrimony in the future. Below is a sample contract:

GAY MEN TYNESIDE

(a social activities
group)

Rationale for support from MESMAC:

MESMAC recognises that HIV prevention cannot be divorced from the wider issues facing gay men, and that general community development is necessary in order to facilitate the addressing of safer sex/HIV agendas.

It is crucial that gay men should not be isolated, that their self-esteem should be enhanced, and that they should have the chance to share experiences and issues in a supportive environment. The need for social alternatives to the commercial gay scene has been one of the strongest messages to come out of community consultation over the last two years.

What MESMAC can offer

- 1 Funding. This currently amounts to £250 for the year 1992-3, with a possible option for additional funding if finances allow.
- 2 Use of computer, photocopier and other office equipment free of charge. Use of stationery and stamps for mailings.
- 3 Professional advice and support from the MESMAC community workers. Training for core group members where appropriate.
- 4 Linking with other groups and individuals, both for networking and recruitment purposes.
- 5 Advice on safer sex issues for members.
- 6 Use of meeting room every Wednesday night from 7.00 to 10.00 pm, except for the first Wednesday of the month.
- 7 One-to-one supportive discussions for individuals connected with the group; we cannot, however, offer long-term counselling.
- 8 Any complaints about the MESMAC workers should ideally be taken directly to them. If this is inappropriate, please contact their manager or the social services complaints officer.

Special stationery requiring printing would have to be paid for by Gay Men Tyneside (GMT) out of its budget.

What MESMAC wants from the group

- 1 Receipts to cover expenditure/ properly managed accounts. Expenditure should be in accordance with the stated aims of the group.
- 2 Use of services such as photocopier by prior arrangement (such as phoning in advance); time spent with community workers by prior arrangement (phoning to make an appointment).
- 3 A commitment to equal opportunities so that participants are welcomed regardless of age, disability, ethnic background, etc.
- 4 A clear set of guidelines for the core group, which takes account of areas of responsibility and organisation. It is the general responsibility of core group members to act in a way that does not bring MESMAC or GMT into disrepute, and which is in line with the GMT rationale. In particular,

it is inappropriate for core group members to begin a sexual relationship with someone whom they are currently, or have recently been, counselling, or who is otherwise especially vulnerable (eg a person considered to be very impressionable or needing special educational, psychiatric or emotional support).

- 5 A procedure whereby participants can make known any grievances and have them appropriately addressed. This procedure should be publicised.
- 6 A commitment to further a group culture that promotes safer sex. There should also be scope for MESMAC to make specific input on safer sex issues, subject to negotiation.
- 7 Regular feedback on the progress of the group.
- 8 Acceptance of the guidelines relating to use of the meeting room.

OUTREACH IN PUBLIC SEX ENVIRONMENTS

Outreach in public sex environments (PSEs) is important because it is a way of reaching men who do not use the commercial gay scene or other social networks. Some cruising areas offer opportunities for unsafe sexual encounters, so it may be necessary to try to change peer norms and expectations in relation to safer sex. It is also useful to hear about additional issues facing men in PSEs, such as 'queer bashing' or police harassment. PSEs can be one of the locations in which men selling sex are encountered.

Examples of PSEs include toilets in parks, lay-bys, shops, theatres, town centres and rural communities; back alleys near gay bars and clubs; paths by rivers and canals; beaches; car parks and truck stops; saunas and swimming pools; trains; backrooms in bars and porn cinemas. In short, the list encompasses any location which offers willing participants and opportunity.

1 *The nature of activity*

This ranges from social interaction such as meeting friends and catching up with

gossip, through to cruising and identifying partners for sex which will take place there and then or elsewhere.

2 *Who uses PSEs?*

Students, unemployed men, young men, men selling sex, married men, men who don't identify as gay, older men, men with a learning difficulty, men in relationships — potentially anyone.

3 *Why do men go there?*

For sex, companionship, because they can't afford pubs, because they want an element of danger, because it can be anonymous with no strings attached, because this is their only access to other men, because of the unpredictability and excitement, because it's fun, because they're drunk, because they have a compulsive need for sex, because it's a no-nonsense way of getting sexual fulfilment, because they are bored ...

WAYS OF WORKING IN PSEs

MORAL JUDGEMENTS AND SUPERIORITY

Many MWHWSM, including workers, view PSEs as a rather sordid environment inhabited exclusively by dirty old men. The argument goes that men should be able to operate within the more respectable confines of gay bars, and that continued use of PSEs brings the gay and bisexual communities into disrepute. Such attitudes, while understandable, need to be challenged by workers, who can point out some of the hypocrisy and double standards involved.

For instance, is it more acceptable to pick somebody up for a one-night stand at a club, take them home, have sex, and then kick them out without so much as a piece of toast, rather than go to a park for a sexual encounter which is unambiguous and immediately fulfilling in a physical sense? Workers may also need to raise awareness about the wide range of PSE users and the reasons they go there, and it may be worth explaining that many men don't use the scene because they're married or they don't know it exists, they don't like it, or they can't afford it. It follows that workers must also strive to be non-judgemental when they are working in a PSE. You are unlikely to endear yourself to PSE users if you give

them the impression that they're disgusting perverts, and it will be necessary to adopt a positive attitude towards PSE use which nevertheless addresses issues of safety from attack and police arrest, sexual violence and safer sex practices. It may also be useful to look at the question of choice: for instance, PSEs are fine if you actively want to use them, but not if you'd prefer to go elsewhere but don't have the courage, money or experience to do so.

WHO SHOULD YOU NOT WORK WITH IN PSEs?

Will you avoid men who are very drunk, violent, excessively randy, who seem to be mentally ill, or who are under the age of consent?

Violent situations are best avoided at all costs, and you should ask yourself what possible benefit you can get from attempting to talk to a man who is very drunk, who is actively propositioning you, or who is engaged in sex (you may spy a couple having unprotected sex, but is it wise to tackle them then and there about it?).

The question of age is problematic, with otherwise helpful police officers (if you have established some liaison) or managers/steering groups putting pressure on you to work only with men who are over 21. Some people consider

that distributing condoms to a 17-year-old is tantamount to encouraging an illegal sexual act. You need to give this matter very serious consideration, and to have a clear rationale about which age groups you will approach and why, and what the substance of your intervention will be. There is an obvious difficulty in assessing age accurately, especially if it's dark. An appropriate strategy with some young men may be to ask other PSE users to have a word with them on your behalf; they may be more than willing to do this, since there can be a strong sense of community in PSEs. Many PSE users are also keen to discourage very young men from using the location, since their presence is likely to heighten police activity. In extreme cases where it seems that a very young man is in a vulnerable position you may feel morally or even contractually bound to report what is happening to a third party, such as the police or social services (in the latter instance this would especially apply if you were employed by social services and required to follow child protection guidelines). This can cause all sorts of conflicts concerning your role in the PSE.

THE ROLE OF THE WORKER

Essentially workers are guests in the PSE when they're actually working, even if they use the same location at other times on a personal basis. A worker who is present for health promotion reasons is

in a privileged position which should not be exploited (it can sometimes be similar to being the only sober person at a party). It is not acceptable to reveal to third parties that an individual has been encountered in a PSE, though it may be necessary to take action in cases where men are in danger of violence or abuse. Possible strategies for work in a PSE include talking to men about safer sex or more general gay issues, assessing the extent of anti-gay violence and police harassment, distributing condoms, lubricant and written information, putting up stickers or posters, or arranging to meet men back at the office or in another appropriate venue for a more in-depth discussion about HIV testing and so forth. It is not acceptable for workers to combine outreach in a PSE with personal sexual gratification. They will need to make their own decisions about whether occasional visits to a PSE in a working capacity also mean that it is inappropriate to use the same venue for personal encounters at another time.

HOW TO GET STARTED

Even if workers are familiar with a PSE, they will need to observe it before they contemplate any interventions. They may need to research a number of PSEs before they choose the most appropriate one for targeting. Points to consider are: Is it used extensively by the specific groups

you are targeting? Is it easy for you to get to? How popular is it with the police? If it's a toilet or park, are there adequate entrances/exits, benches where you can sit around?

Once a PSE has been identified, you need to become comfortable with it, and what this involves depends on the nature of the PSE. If it's a park, that could mean visiting it at quiet times of the day to get the feel of it. It can be useful to note well-worn paths, cubby-holes, piles of cigarette butts which indicate places where men sit and wait/chat, and also evidence of condom use. Clearly this all needs doing as unobtrusively as possible.

Familiarisation with cottages might include checking the number of cubicles, whether they have locks, the content of the graffiti, opportunities for contact between cubicles (i.e. holes), and checking out the places where men gather outside cottages (such as on nearby walls, benches or patches of grass). It may be thought safest and most appropriate to work only with men outside cottages, rather than men who are standing at a urinal, wash basin or in a cubicle. The latter options might increase the chances that your role is unclear, or that you'll get arrested.

The next step might be to visit the PSE when it is in use, without making any interventions. For safety reasons, you should always work with another person,

though a couple chatting but not cruising may well excite suspicion. If for any reason you are on your own, you should be aware of the messages that you are giving out while observing. A person watching without cruising might lead to suspicions that they are a plain-clothes policeman, voyeur or basher.

One way of gaining a foothold in a PSE without leading to misunderstandings (and it can speed the work up too) is to identify a PSE user who is well known and respected, and who is willing to introduce you and your colleague to other PSE users so that you can explain your role and offer reassurance. This approach was eventually adopted in Newcastle with considerable success, but the trick is to find that key user who is willing to offer up time and who will also have to accept that while they are accompanying you they cannot get involved in sex. Obviously, an element of luck may come into this.

You may wish to visit a PSE at the same time every day/week, or vary your visits. The former has the advantage of predictability for users, and you may be able to develop deeper contacts; the latter has the advantage that you'll encounter a wider range of men. It may be safer to visit an outdoor PSE in daylight, but you may find that it is not well used. If you visit it at night, stay near a lamp for greater safety. Sitting areas or the fringes of the PSE itself might be more sensible

locations than dark corners or undergrowth, which could lead to all sorts of misunderstandings and trouble. Some outdoor PSEs are best avoided immediately after the time when straight pubs and clubs turn out their customers, some of whom may fancy a spot of anti-gay violence.

WORKER SAFETY

Workers should minimise any risk to themselves, but workers and managers should realise that a PSE is by definition a risky environment. Risk reduction can involve:

- Always working in pairs.
- Telling somebody when you're working, and checking in when you've finished.
- Carrying a personal alarm and 'Rights on Arrest' card.
- Taking self-defence classes.
- Withdrawing from the PSE at the first sign of trouble.
- Avoiding unnecessarily dangerous spots or times.
- Ensuring adequate insurance cover, and checking the conditions under which claims would not be honoured.

WHAT TO TAKE TO A PSE

- Leaflets, condoms, lubricant, 'Rights on Arrest' cards, phone numbers of other projects or services, business cards.
- Something to carry everything in (such as a bum-bag).
- A personal alarm.
- You may want to take cigarettes and matches, because even if you don't smoke these can be helpful for gaining introductions and confidence. On the other hand, you may decide that this contradicts your wider health promotion brief.
- Warm clothing in winter.
- Any ID card you may have.
- A letter of support or endorsement from your employer or the police.
- The phone number of a good solicitor.
- Monitoring forms (it might be best to leave these in the car/office).
- News of any future events you have planned, something concrete which men can get involved in.

WHAT NOT TO TAKE TO A PSE

- Lots of money, cheque books, credit cards, jewellery.
- Confidential phone numbers or details of users (in case the information falls into the wrong hands).

RECORD KEEPING

As with all record keeping, you need to decide what records you want, and why. There's no point in keeping copious records if they don't serve any purpose. Records might be needed to justify funding, to serve as a reminder when meeting users, to identify common themes/issues, or to help develop the work generally. Professionally kept records may also offer a guarantee against accusations of improper conduct in a PSE. Since PSE users are often engaging in illegal activities, or are anxious to keep their sexuality secret,

confidentiality and security of records are paramount, and it may be best not to use real names which could identify users if records fell into the wrong hands. (See also the MESMAC monitoring form used by Leeds, page 95. Debriefing is dealt with in Club Work, pages 100–107).

STICKERS AND POSTERS

Stickers and posters with safer sex messages or phone lines are a good way of reaching men at times when workers are not present. Equally, more venues can be covered by sticker campaigns. The problems here are largely ones of durability (materials may be defaced or torn down, though spray stencils might be an answer), and not wanting to draw undue attention to a PSE that might otherwise be discreet. For instance, stickers can attract the attention of police and bashers, and thereby endanger the very men you are trying to help.

SPECIFIC TYPES OF PSE

CASE STUDY

Saunas: A Case Study from Leicester

At the very start of outreach, Leicester MESMAC workers had a meeting to discuss a plan for outreach in the various locations around Leicester for a period of one month. It was decided that the purpose would be primarily to observe and take note of activities and numbers of black men rather than to attempt to make contact.

Besides the clubs and pubs, saunas and a variety of cottages around Leicester were targeted. Specific times were arranged to visit these locations, and work rules and guidelines for outreach were also set down. It was decided to work in pairs, except in saunas where it was felt that people would otherwise be discouraged from talking. In all locations it was possible to note how many black men were present, whether they were Asian or Afro-Caribbean, how old they were, how approachable they might be, and who they were socialising with. It was considered best not to talk about MESMAC until the workers had a clearer idea of the people and the territory. If the subject did come up, the workers simply mentioned

involvement in Black HIV and AIDS Forum, rather than with a MWHWSM project.

The first outreach session took place in sauna A, which is used by a mixture of men: straight, gay, bisexual, and other men who have sex with men but who don't identify as gay. In the first session it was merely necessary to see how many black men were present during a two-hour period on a weekday evening. There were acknowledgements from almost all of them, either a 'hello' or just a nod of the head. This can sometimes be the best way to make initial contact with these men; conversation was limited quite naturally, but was made more difficult by the fact that other men were cruising either the user or the worker. Nevertheless, these black men would be a little more familiar next time.

The sauna was visited on the same day of the following week during the same two-hour period, and it was noted that most of the black men who were there before were again present. Thus regular visits on this day and at this time would ensure that the worker would become familiar to the users, and both parties would become more comfortable with each other. The sauna was also visited during an evening session in the same

period; a very different group of black men was encountered, and they were generally much younger.

The second sauna, sauna B, is used almost exclusively by MWHSWM, which made approaching them much easier. The outreach worker had already made contact with several men, and at this stage was simply being friendly and discussing anything except sex and MESMAC work.

Sauna C was not as busy as the other saunas but it had a more intimate feel to it. Many of the men present would have sex with other men, but would not define as gay. Most of them seemed to know each other from elsewhere, and thus sensitivity was required.

It would seem that there are a good many black men using saunas in Leicester to meet other men as general contacts or for sex. Although there may be quite a few black men who are on the commercial gay scene and visit

saunas, the observation seemed to suggest that most are closeted MWHSWM. This shows that there is a section of presumably quite active black men who may otherwise have been overlooked by other groups within the HIV-prevention field. It is important to show sensitivity towards their needs when approaching them.

Outreach work in saunas A and B has continued, but C has not been producing very good results, partly due to the fact that a lot of the men using it are straight, and come in pairs after a session in the gym. The gay men and other MWHSWM who use it are quite often simultaneously users of sauna A. The atmosphere in sauna C does not make it easy to approach anyone for a chat. It makes sense to discontinue work in sauna C for the time being, perhaps returning at a later stage.

This observational work allowed the workers to prioritise and to get the most out of their limited time and resources.

SAUNAS

There is a clear difference between working in an overtly gay sauna and a regular private or municipal sauna. In gay saunas it is theoretically possible to come to an arrangement with the owners

so that your outreach work is explicit, has their official blessing, and can stretch to putting up posters or providing free condoms and lubricant. In regular saunas it is highly unlikely that such overt work will be possible. It is, of course, true that many saunas rely on a gay clientele to

remain profitable, and that upwards of 60% of those present at any time may be gay. Moreover, unless they are naive in the extreme, it is likely that the owners/attendants will be aware that sexual activity of various kinds takes place in the sauna, and these same attendants may be gay themselves (though possibly closeted). The crucial consideration, however, is that in such situations sexual activity is tolerated to a greater or lesser degree only so long as it is reasonably discreet. If outreach workers try to get co-operation from managers of regular or municipal saunas, they are in effect making an issue of the sex that occurs, and forcing the managers to take action. Unless the managers are very enlightened, this action is unlikely to be positive. It would therefore seem that any outreach in non-gay saunas has to be covert and conducted with great sensitivity. The notion of sex being tolerated as long as nobody makes an issue of it may extend to overtly gay saunas which fear official/police interference.

Workers need to be clear that they are doing outreach in saunas for valid reasons, not just because there happen to be a lot of MWHWSM there or because it seems superficially like an attractive option; being an HIV worker in a gay environment does not automatically mean that you are able to do any effective HIV prevention. It may be stating the obvious, but it is difficult

handing out condoms and leaflets to naked men. Workers might even consider it compromising to have to take such materials into a sauna environment. Slow familiarisation, with ensuing one-to-one discussions (possibly setting up meetings away from the sauna) may be the best strategy.

Approaching men in an unambiguous way, while simultaneously deflecting the advances of other men (and all this with no clothes on!) is clearly not easy. There is also the danger that an inappropriate approach might cause a man to complain to the management there and then, which would cause problems for you as a worker and risk compromising everyone else present (since, as in other PSEs, outreach workers are privileged guests, not participants). This reinforces the need for caution and a long period of observation, since familiarity with the venue, users (i.e. who's gay and who isn't) and general sauna etiquette is something that cannot be achieved overnight. Don't forget that if you make a mess of things in a sauna, you can't beat a hasty retreat (as might be possible in a cottage/park) – firstly you have to get your clothes back on, and secondly you have to pass the attendants.

Other points raised by Leicester workers include:

- Don't be too talkative; this may put

people off. You may need to keep a relatively low profile.

- Talk about sex if the subject arises, but don't mention outreach work straight away. Find out about all the needs of black men, not just those directly related to HIV.
- Don't feel you have to talk to someone every session.
- Encourage men to come out of the

sauna (for instance, invite them to join groups).

- Black men can be very closeted in saunas, and will often find it hard to make the first move in a conversation.
- Black men may have many barriers, and you will need persistence to break them down.
- If you're using volunteers, those who speak an Asian language may be especially useful.

CASE STUDY :

Cottages: A Case Study from Leicester

Leicester MESMAC identified six cottages, the first of which was situated in a large park. Two hours spent here proved unsuccessful. A large park with three cottages was also visited, but no black men were seen to enter any of the toilets. A cottage located in an area with a large black community was also tried, but with equally poor results.

The Leicester observation work was clearly unsuccessful, although they had covered several very different types of toilets in different locations. After some thought they came up with the

following reasons for their lack of success: firstly, they had chosen the wrong times — they had visited the toilets in mid-afternoon when most people would still be at work. More appropriate times would be during the lunch period and just after five in the evening when most work finishes. Secondly, many black men would be deterred from going into a toilet that may well be known as a pick-up place, since it might get back to their friends, families and communities, with adverse implications. Thirdly, the risk of being picked up by the police for no reason (at home or in the streets) is a real one for black men (far more so than for white men), and hanging around well-known cottages would only add to that risk.

Finally, the economic status of many

black men means it is not always possible to own a car, and thus one of the main accessories of the cottager is not available. If they are on foot they appear more suspicious and an easy target for the police.

The poor result in cottages showed the Leicester workers that they needed to take these factors into account when

planning the next period of outreach work. It may be appropriate to target other cottages that are accessible to black men with cars; maybe black men don't use cottages as much as white men in order to make sexual contact. One issue may be that if a black man is seeking sex with other black men he may use a means of contact that ensures he meets other black men only.

COTTAGES

- It is probably best not to enter cottages in case they are raided. It is also very difficult to be present in a cottage without either being drawn into sexual activity or appearing to be a policeman. Cottage work can be done outside the building — on benches, a nearby wall, a patch of grass, or perhaps in a neighbouring café.
- A premature explanation of your role as an outreach worker may frighten people off or cause other negative reactions. However, if you do not make your role plain at a relatively early stage, clients may feel disappointed or resentful, as if you have deceived them, when you do finally explain why you are there.
- Don't stay if you don't feel safe. If you

feel uncomfortable for whatever reason, don't be brave and hang around. You risk being subject to violence or a police raid.

- When doing purely observational work rather than actual interventions, don't make it obvious that you're hanging around. For instance, you can sit on a park bench, or in a nearby café.
- Be careful if you make the first move to talk to someone; they may be a policeman. Since the other person's initial interest in you is probably sexual, you must also be careful about the signals you're giving out by making the first approach.
- Don't pester people using cottages; they're there to have sex or meet other men (or maybe even to have a pee!).

MONITORING OUTREACH WORK

Most projects will consider the need for forms to help them monitor outreach work. A sample form (from Leeds) is illustrated on page 95 (see also Evaluation, pages 42–6).

The following points need to be considered when devising a monitoring form:

1 *Why are you monitoring?*

- To discover gaps in service provision, both from the project and from other organisations.
- To build up a body of information for use by organisations nationally which are considering developing services for men who use PSEs.

2 *What are you monitoring?*

Only the bare minimum of information needs monitoring in order to assist service provision for men using PSEs (see Other Ethical and Practical Issues below).

Suggestions about appropriate information include:

- **Presenting issues** – such as worries about HIV and other STDs. Often,

HIV is very low on people's agendas, and things such as police harassment may be perceived as having a higher priority. This knowledge enables you to feed into other, maybe more appropriate organisations (such as police monitoring groups or housing organisations).

- **Contact with other related agencies** – this is useful to see why men do or don't use other services, and what could be done to make their (or MESMAC's) services more accessible.
- **Age and race** – this can be difficult to monitor without explicit questioning, but it can be useful in deciding whether the particular location you are working in is most appropriate in terms of reaching a wide range of men. If you are only reaching younger white men, you need to ask why. What strategies can you develop to overcome this?
- **Number of contacts, and where the contact was made** – this is to make sure you are not counting the same person more than once. It also shows how men are accessing the project's services.
- **Number of condoms/information taken** – to account for resources and to gauge the true (often hidden) costs of this type of work. It will be useful for future funding.

- **Workers' feelings** – this serves three purposes: firstly, as the basis for debriefing between the two workers after each session; secondly, to feed into general evaluation material; thirdly, to highlight some of the personal issues workers face in order to gain more effective support from management. The workers' feelings should be recorded on the session monitoring form, not on the individual men's forms.

3 *Who will have access to the information?*

- For the sake of confidentiality the two MESMAC workers should be the only people with access to the 'raw' information (i.e. monitoring forms). There needs to be negotiation with the evaluation team to devise ways of passing on information that helps them with their evaluation while maintaining the strictest confidence. The men you work with should not have access to this information unless they expressly request it. They will be able to see their individual monitoring form, but not the sessional form which holds details of workers' feelings. Every effort will be made to allow them access to the overall processed results.

4 *How will information be stored?*

Through individual monitoring forms

and a sessional form which feeds into a monitoring chart offering an overview. No information that could identify a person (other than to the MESMAC worker) will be kept on the forms or on the chart. The forms will be kept in a locked drawer.

5 *How will it be interpreted in a useful way?*

The workers produce monthly statistical reports which, at the end of the piece of work, can be pulled together with the help of the evaluation team into an overall report. A strategy for disseminating the reports needs to be devised as soon as possible.

How long is the piece of work?

Three months street work, one week writing up.

Other ethical and practical issues

- Do you tell men that you are monitoring your meetings with them? If you do, will that put them off talking to you (their activities are criminalised by the law and marginalised by their communities), and will it engender a sense of mistrust? Conversely, what right do you have to collection information

without telling men how it will be used? It may also help to formalise your relationship with men.

- Will the men have the right to see what's written about them, either on the monitoring form or as a completed and written-up piece of work?

Ideally, the answer is yes on both counts, but there are clear problems here:

- If you are to have an open-access form of record keeping, you would need to identify the men on the monitoring form so they can see their own forms.
- As a worker, you may find it difficult

to own up to sexual feelings (which this work inevitably arouses) or negative feelings about a user if you are aware that they will have access to this information.

- It is important to bear in mind the nature of cottaging and PSE. It is probable that many men do not expect or want to take part in a sociological exercise.
- How can the information be disseminated to a relatively transient community?
- The relationship with the men is often very short-lived.

MESMAC STREET WORK MONITORING FORM

NAME:	
DATE:	
AGE GROUP: (Circle age in brackets)	>16 18—25 26—35 36—45 46—60 60+
RACE: (Please circle)	Afro-Caribbean Asian White Other (please state):
MAIN PRESENTING ISSUES: (Please circle)	HIV/Housing/Police/IV Drug Use/Other Drugs (please state): STDs/Other (please state):
CONTACT WITH OTHER AGENCIES (Please circle)	Leeds AIDS Advice/Switchboard/GUM Clinic/Other (please state):
CONTACT WITH MESMAC BEFORE?	YES NO
IF YES, HOW MANY?	
IF YES, WHERE? (Please circle)	Street/Scene/Centre/Group Comments:
RESOURCES:	Condoms KY Pack Info

A monitoring form for a street work session (as opposed to a form for an individual) would include the following elements:

Date
 Total number of contacts
 Total number of first contacts
 Total number of repeat contacts
 Major issues arising from the session
 Feelings
 Issues for supervision/steering group

POLICE LIAISON

WHY LIAISE WITH THE POLICE?

- To facilitate outreach work in PSEs.
- To establish a lesbian/gay community liaison group.
- To offer them training on lesbian/gay issues in order to improve their practices.
- To discuss anti-gay violence.

The main reason for police liaison hinges on outreach work in a PSE. Advantages might be that:

- You won't get arrested.
- If you do get arrested, you can quote the name of a contact person in the police force.
- The police may agree to steer clear of the PSE when you're down there.
- The police may offer to give details of your project to men they caution/arrest (they may see referral to you as an alternative to arrest).

- There may be beneficial side effects, such as offers of a permanent liaison group on lesbian/gay issues, or requests for training.

HOW YOU MIGHT GO ABOUT THIS

- Choose who will liaise.

Will it be yourself, and if so, is that going to compromise your work in any way, your profile or anonymity?

If you don't wish to liaise yourself, your manager may be the most appropriate person. Make sure that whoever does liaise is well briefed, and that they keep a record of any meetings and outcomes. Bear in mind that the police may be impressed by important people in hierarchies (i.e. probably not yourself!).

- Who will you liaise with?

This might be a representative of the vice squad, a community liaison officer, or an officer with special responsibility for HIV/AIDS issues. Once again, it may be best to go for a

high-ranking officer who has clout. The personnel in the vice squad are regularly changed, so there may be a lack of continuity.

■ How do you liaise?

You could try an exploratory letter or phone call, followed by a meeting, depending on the level of involvement you want. Some projects have chosen simply to inform the police that they will be carrying out work in an unnamed cruising area between a given set of dates, not naming the workers or giving much further information apart from the overall brief of the project.

ISSUES

Your agenda in a PSE is very different from that of the police. They may be keen to support your work if they think you are dissuading men from using PSEs (in effect, helping to clean the place up). This may well not be the case; in fact, such an attitude is probably contrary to the ethos of your work. This means that you may have to be a little vague about your motives, or risk losing their interest.

The police are very concerned not to be identified with anything that could be

construed as encouraging illegal activity. This means they are touchy about positive attitudes towards PSEs, and very sensitive about working with young men (under 21/18/16). If they think you are handing out condoms to young men, they may choose to disassociate themselves from your work. The police often quote the peril faced by young men in cruising areas as a reason for raiding them.

If the police offer to steer clear of the PSE when you are working there, this will require a lot of precise planning. Do you really want to be tied to rigid rotas for your outreach work? Moreover, will this hands-off approach be confined to the vice squad, and if so, what about individual police officers in cars who take it upon themselves to enter the PSE completely unannounced? PSEs located in or near railway stations will also come under the jurisdiction of the British Transport Police.

If the police offer to give PSE users your details, even as an alternative to arrest, how will this affect your image? Will you be seen as close allies of the police, maybe even their agents? If you choose this option, it would at the very least be necessary to publicise widely how it works within the gay and bisexual communities, so as to allay any suspicions that you are hand in glove with the law. Given the fact that some PSE users are not part of the gay scene, will you be able to explain to them what your relationship with the police is?

It is also probable that the reason the police wish to refer men to you is linked with their notion of PSE use as some kind of deviant aberration which requires counselling. Do you subscribe to this concept?

If your main aim in liaising with the police is to avoid arrest, can you really guarantee that you'll never get arrested/stopped? You may still go through a distressing experience before your credentials are established. It is also worth considering that even with no police liaison, the fact that you are a professional who is not in the PSE to have sex or commit any illegal act means it is highly unlikely that a successful prosecution could be made against you. Bear in mind that you could bring in your manager/job description/minutes of meetings where

such work was approved in order to support your statements. However, the trauma of being arrested, even without a successful prosecution, should not be underestimated.

There are plenty of gay police officers, and others may well be progressive and supportive, both personally and in their policies. However, the police are not renowned for their general understanding of gay issues, nor for any particular sensitivity. Many MWHWSWM have been treated very badly by the police. You may think this is a reason for trying to liaise, maybe with a view to getting a permanent consultation group going. Alternatively, looking at your immediate goals in outreach, you may consider it a waste of time trying to confront what at best may be ignorance and at worst rampant homophobia.

Offences that could be committed while working in PSEs

London MESMAC consulted GALOP (Gay London Policing Project) and a number of barristers about the legal situation concerning PSEs

If the police want to be awkward, they can do so in a number of ways. It is just about possible that they could invoke the following:

- Obstructing the highway
- Breach of the peace
- Public order offences
- Soliciting

There would, however, be little chance of a successful prosecution.

The most likely offences you could be accused of are:

Aiding and abetting, or incitement to:

- Gross indecency
- Importuning for immoral purposes
- Indecent assault
- Behaviour likely to outrage public decency

■ Insulting and obscene behaviour

For any of these prosecutions to be successful, you would have to have committed an act of encouragement; this is difficult to prove.

To cover yourself, you might produce a flyer to give to clients, explaining the laws on gay sex; this has ethical implications, as outlined earlier. It may be worth talking to a local needle exchange which has experience of similar issues.

In short, an element of personal risk is always involved in this sort of work, but a successful conviction following arrest is very unlikely unless you have compromised your professional role (mainly by having sex in the PSE).

■ Age limits

You might be accused of incitement to commit an offence by talking to under-21s, but this is highly unlikely.

■ Other

The police have in the past used the possession of tough 'gay' condoms to hassle rent boys; they might do the same to PSE users. This is a scare tactic rather than an attempt at conviction.

CLUB WORK

Each of the four MESMAC sites has felt it important to do some work on the commercial gay scene. The main reason is the large number of gay and bisexual men and other, MWHWSM who can be reached by targeting these venues. Sites have been interested in assessing the needs of men on the scene, as well as raising awareness of HIV/AIDS and safer sex in this setting. In addition, it was felt important to establish a presence on the scene and use it to raise the project's profile.

Some sites have also had specific reasons for doing scene work. For example, London MESMAC's intention to work on the scene was reinforced after consultation with young men in youth groups, who felt that their friends who socialised on the scene may be particularly vulnerable – for example, they may not be receiving safer sex information or peer support.

Although people outside the project often see the scene as one of the most obvious places for MESMAC work, it has been less obvious exactly what can be done. All of the sites carried out some preliminary observation work to familiarise themselves with the scene and find out what would be appropriate. In areas where there were several

lesbian/gay venues, work observation helped workers to decide which venues would be suitable to work in.

The work has varied, but basically consists of going to commercial gay venues (pubs and clubs) and making contact with men to discover their safer sex needs and so forth and to talk to them about their experiences, as well as increasing awareness of the project. Most of the work on the scene so far has been with men who are socialising. However, there has been some liaison with managers and, to a limited extent, with bar staff.

SOME ISSUES TO CONSIDER

■ Where to do the work.

For some sites there was no option, there being only one gay club in Leicester, for example. For others, a choice was made through observation.

■ Where to begin.

Most sites have found the thought of

doing work on the scene daunting. Indeed, many wondered whether it was appropriate in such a setting, since people might not want to discuss HIV/safer sex and other issues while socialising.

■ How to approach people.

Workers felt that in a club environment they would need to keep interactions brief. This underlined the need to be very clear about what they were offering.

■ Contacting managers.

Workers on some sites visited managers beforehand to explain what they would be doing and to seek their support.

■ Who does the work?

Scene work has generally been conducted in pairs, who often split up to talk to people. Given the size of the scene, two sites have chosen to use volunteers to work with them, which has involved issues such as training.

■ Creating a presence.

In order to enhance their visibility, the projects have all used T-shirts, cards, posters, flyers and badges while working on the scene.

■ Who is the work targeted at?

Is it aimed at young MWHWSM, men who identify as gay, bar staff, men from the black communities?

SOME EXAMPLES OF CLUB WORK

LEICESTER

Leicester began its scene work with a period of observation. Workers visited the club in Leicester on several evenings to discover the best nights to meet black men. They then started attending the club regularly and tried to get themselves known by hanging around and approaching people. They would tell them who they were and what they were doing, and give them a card with their name and address. As the work progressed and the workers became known, they would talk to men about condoms, safer sex, sexuality, work, fears of coming out, and so on. Later they used such contacts to inform men of forthcoming socials and safer sex workshops, both as a way of advertising and also to get people involved in the project. This was also an attempt to build the individual contacts into more collective work.

The workers found that men met in the club began to visit the MESMAC office, and some of them attended a safer sex workshop. Interestingly, the team found that men encountered in outreach work in saunas were able to talk to them in the club. The workers felt this was because it was a gay venue and therefore much easier to talk openly about sexuality and safer sex.

NEWCASTLE

Newcastle also started with observation, but this was interrupted by the departure of one of the workers and a prolonged gap before a new worker was appointed. Eventually they decided on a series of safer sex promotions in gay bars and clubs. These consisted of displays of posters from Britain and abroad, distribution of free condoms and lubricant, and the use of volunteers to greet people as they arrived at the venue and to take round baskets of condoms (or even a converted cinema tray). Feedback sheets were filled in to report on the response. In August 1991 the workers set up permanent display racks in two gay venues; these racks contained condoms, KY jelly and a selection of leaflets. By early 1992 this scheme had spread to a total of five gay venues in Newcastle, thereby reaching something like saturation point. Funding of about £3,500 from the Northern Regional Health Authority, district health

authorities and local authorities helped to finance the initiative, and in a six-month period some 7,500 condoms were given away.

The rationale behind the scheme was that there is still a great deal of embarrassment associated with buying condoms, and it can be easier to pick them up in an arguably 'safer', exclusively gay setting. Many men had also made it clear that they couldn't always afford to buy condoms. It seemed that the least that any health promotion initiative could do was to back up its messages about condom use with the chance to get hold of them for nothing. This provision also communicated messages, both explicit and subliminal, that gay men's health is important enough to spend money on.

The presence of the racks in bars has raised the profile both of MESMAC and of condoms, and has made it easier for condom use to be seen as the norm, rather than the exception that has to be negotiated every time. The range of condoms distributed has comprised Durex Extra Strong, Mates Super Strong and HT specials. The latter have proved exceptionally popular, due largely to their relative rarity, cost when paid for, and perhaps also to their superior thickness. There has been some scepticism about distribution, but the overwhelming reaction has been very positive. Bar staff have been very cooperative, and there is

no evidence of any abuse of the system. The fact that the stands hold leaflets as well as condoms and KY jelly has meant that new leaflets can be introduced into venues without having to ask the management's permission on every occasion.

On a technical note, two of the stands were converted from ordinary three-tier leaflet racks made of perspex and plastic, and a further three were bathroom racks made of plastic-covered wire and purchased from the IKEA furniture store. The stands were decorated with homoerotic images, the MESMAC logo, pictures of the Newcastle waterfront, and slogans such as 'Help yourself to a healthy sex life'.

The scheme was not original, in the sense that it was developed from the free condom distribution scheme operated by Scottish AIDS Monitor in Glasgow. Provision of condoms alone does not necessarily ensure their use and/or safer sex, but the interim evaluation indicates that a relatively modest outlay can finance a scheme with innumerable obvious and more hidden benefits. A full evaluation of the scheme was conducted in autumn 1992.

LEEDS

Workers at the Leeds site began their scene work early in the project through

talking to bar staff, but this was unsuccessful as they had not been clear enough about what they wanted or could offer. They decided to design a questionnaire to discover whether men felt it appropriate to have HIV/AIDS/safer sex issues raised on the scene and, if so, how.

They also wanted to assess needs. With the help of volunteers they interviewed 300 men, and discovered that the majority did want safer sex issues raised, if only through leaflets. The workers used the results to lobby club and pub managers, and also as a basis for a press release to advertise the project and feed back the findings to the community.

LONDON

London's work on the scene so far has mainly been observational, visiting several clubs and pubs to find suitable venues for their work. There has also been some outreach, mainly as a way of advertising meetings. More recently, two London workers carried out a questionnaire on the scene prior to setting up a group for black men.

As in all the other sites, the workers have found the experience important in terms of discovering which issues men are concerned about, as well as finding out what provisions are already available. For instance, they have found that there

is very little safer sex information on the scene in London.

DIFFICULTIES AND POSSIBLE SOLUTIONS

■ Co-operation of club managers.

Although most managers have allowed the workers into clubs, not all have been supportive. It helps to meet them beforehand to explain the project, and they can also be lobbied using the results of questionnaires. Visiting clubs to restock condom racks helps to build up relations with bar staff, and the Newcastle project now has a club/pub manager on its project development group.

■ Approaching men.

Some workers found that they only talked to men they felt safe with. You may be tempted to approach only handsome, young men, or conversely these may be precisely the men you avoid because they may seem intimidating. Workers can feel particularly awkward in a role where their professional duties may conflict with their social needs. One strategy for starting to talk to people is to get

an introduction through a known third party.

Several MESMAC sites decided that it was a good idea to hand out cards, because of the noisy environment and the need to keep interactions brief. However, they had to consider very carefully what the cards should say, so that people could take them home without compromising themselves.

A further barrier related to the presence of lesbians in a club where the workers were seen to deal only with men; women were often angry that nothing was being done for them. A suitable response would be liaison with lesbian safer sex initiatives where available, the presence of lesbian volunteers at more organised promotions, or distributing lesbian safer sex literature. It can also cause resentment or misunderstanding if workers approach only black men, especially where black men have white partners. A possible strategy here might be to lay on additional workshops for mixed race couples, or to make it quite clear whom the project is aimed at.

■ Establishing boundaries.

It may prove impossible to work in one venue and socialise in another, especially in towns with a small gay scene. This can cause confusion

among users as to what is or isn't 'allowed' for workers, and it can also mean that it is impossible to have a quiet night out without being accosted by people wanting to talk about work issues. In such situations it can be very difficult to say no, especially if the opportunity to talk to a particular individual may not readily repeat itself.

■ **Building individual contacts into collective action.**

It is hard to establish anything other than minimal contact if clubs are busy and people don't want long conversations. It may be that more detailed work needs to be done away from the scene, in a more conducive environment which is quieter, less sexually charged, and less dominated by alcohol consumption. This might involve specially planned workshops or sessions at pre-existing groups (see Groupwork, pages 73–80).

■ **Reaching a select population.**

Not everybody goes to clubs and pubs (see Outreach in Public Sex Environments, pages 81–95). Groups excluded might comprise men who don't identify as gay, married men, black men, men on a low income, older men, men under 18, or men who don't like loud dance music, alcohol, and what they may perceive as an

impersonal and cruisy atmosphere. This issue can be partly addressed by visiting as wide a variety of venues as possible, and also by going on different nights. It might be appropriate to target straight venues, or venues catering specifically for black men or older men.

EVALUATION

Debriefing seems to be the most suitable way to evaluate club work, using a prepared sheet of headings as prompts and then building these records into work reviews. It can be difficult to find a suitable place to debrief at 2 am though a warm car, an all-night café, or a nearby house or office might be appropriate. However, tiredness and flagging motivation after long and sometimes stressful sessions are significant barriers. It may be useful to buy a personal tape recorder to debrief into, though workers need to be clear about who is responsible for the subsequent transcription. Whatever system is adopted, debriefing should not be omitted.

Project diaries and forms can also be used to record information, such as which club was visited, the age range and ethnic mix, whether the atmosphere was

positive or not, what happened and who was approached, the number of condoms handed out, and so on. Having such categories in mind also helps workers to remember what to observe.

Record keeping needs to be purposeful so it can be used for evaluation, and it certainly needs to be built into a cycle of work development so that it becomes part of evaluation rather than isolated monitoring.

SAFER SEX PROMOTIONS

Safer sex promotions are only a small part of a wider strategy, but they can raise the project's profile, and that of safer sex. Promotions can take a number of forms, such as a roadshow with posters and free condoms/KY, nights built around specific occasions (Easter/St Valentine's Day/Christmas) or themes (Ancient Egypt/science fiction/Hollywood musicals ...), or they can incorporate the standard components of gay scene entertainment, such as drag and strippers. There is plenty of scope for imagination, and there is much to be said for using innovative approaches that stand out as a refreshing change from the sometimes tired and unadventurous formulas that can predominate.

A checklist of equipment and prerequisites might include:

- Condoms, lubricant, leaflets, badges, stickers.
- Informed workers and/or properly trained and briefed volunteers.
- Display boards and posters.

Foreign posters can be popular because they have novelty value and are often more explicit. The more popular ones need to be watched in case over-enthusiastic users 'borrow' them.

Posters and other visual materials should be professionally and attractively presented and appropriate to the audience and occasion. For instance, German posters featuring men with erections are likely to be popular at men-only nights, whereas they may attract adverse comment at an alternative disco attended by lesbians. If a number of roadshows are held in the same club/town, it might be best to vary the posters on display every time so as to maintain interest.

- Displays may also require you to bring along lighting, extension cables, Blu-Tack, Sellotape, drawing pins, and so on. Condoms and other giveaways will require containers such as sweet jars, plastic or wicker baskets, cinema trays ...

The positioning of displays is important.

They should be accessible, preferably in a place which everybody has to pass, but where they can stop unimpeded and discreetly, often to take a surreptitious glimpse at the materials. Embarrassment will stop many otherwise interested men from looking at displays that are crammed into a small back bar or booth. An ideal place might be on a well-trodden path between the bar and the toilets. Problems can arise because venue managers often wish to keep prime sites free, due to fire regulations, potential overcrowding or the need to maximise profit. Venue managers are involved in a profit-making enterprise which may well conflict with your health promotion brief. Ideally, managers are themselves committed to safer sex promotions, but this is not always so, and to a certain extent you may be admitted to a venue on sufferance, and you may have to bite your tongue even if you encounter rudeness, ignorance, awkwardness or plain hostility from venue managers. You can minimise any conflict through sensitivity to the commercial needs of venues plus good communication, but in

the final analysis you may need the co-operation of the venue more than they need you. It might be worth hypothesising about what circumstances, if any, would lead you and your project to refuse to work in a particular venue.

If you are planning to distribute condoms and other giveaways, think about how this will be done. People arriving can be given freebies, and it may be a pleasant surprise for them to be greeted at the door by friendly volunteers who give them a sticker and explain that there's a promotion on. Conversely, customers can be intimidated by over-enthusiasm, and may resent being showered with condoms which they see as proof that somebody is making gross assumptions about their sexual behaviour. It might be worth considering giving people a pack of giveaways as they leave, but whatever happens there is a need to balance excessive reticence (whereby you don't approach people who'd actually like information/condoms) with an over-the-top approach which causes discomfort or resentment.

WORKING WITH YOUNG MEN WHO HAVE SEX WITH MEN

See also the case study on London MESMAC's work with young gay men, pages 18–19.

more vulnerable position. They are also the group that gets the least attention.

WHAT IS A YOUNG MAN?

'Young' can mean a number of things to different people; it may follow the standard definition of young people (16–25), or it may refer to all young men under 26, with no stated lower age limit. There are clearly many sensitive issues concerning work with men below the age of 16, some of them justified, some of them based on homophobia. There are obviously young men well below 16 who are having sex and who are at risk of HIV infection. Discussions should take place among workers, managers and steering management groups about your project's policies regarding MWHWSM under 16.

WHY ARE YOUNG MWHWSM SO IMPORTANT?

If MWHWSM as a whole are particularly at risk of HIV infection, then it follows that young MWHWSM are in an even

AIMS OF WORKING WITH YOUNG MWHWSM

GENERAL

- To break their isolation.
- To encourage them to build a positive sexual identity.
- To establish a network of support where young MWHWSM can explore the issues that are relevant to them.
- To foster self-esteem and self-confidence.
- To offer positive role models.
- To encourage a group culture where safer sex becomes the norm.
- To provide information about HIV and safer sex for young MWHWSM.

- To empower them and enable them to make informed decisions about safer sex and relationships.

POSSIBLE SPECIFIC GOALS

- 1 To reach young MWHWSM who are isolated, vulnerable and distressed, and cannot seek advice and support from the usual sources such as families, friends, teachers, youth workers and clergy.
- 2 To set up a heavily advertised phone line which by-passes the access routes for young MWHWSM which are blocked due to homophobia.
- 3 To use existing materials from Britain and abroad, together with feedback and the active collaboration of young MWHWSM, to produce local leaflets for young MWHWSM which tackle coming out, positive images, safer sex and HIV, and power and relationship issues.
- 4 To work with organisations and institutions where barriers exist (due to heterosexism and homophobia):
 - To encourage these organisations to be aware of the specific needs of young MWHWSM.
 - To create an atmosphere in these organisations where young

MWHWSM are treated sympathetically and appropriately, where they feel safe to be open about their sexuality and can begin to address their needs, and where they are also referred to specialist gay networks.

- To ensure that health education and HIV prevention aimed at the general population adopt an anti-heterosexist standpoint which acknowledges that at least 10% of young people may be either lesbian, gay or bisexual, and accordingly provides appropriate and sensitive messages.
- 5 To offer safer sex workshops for young MWHWSM, together with other forums where sex and sexuality can be discussed. Such forums would also address assertiveness and negotiating safer sex.
 - 6 To do outreach work with young MWHWSM on the commercial gay scene, in PSEs, and in venues used by young male sex workers.
 - 7 To address the needs of young MWHWSM who have been sexually abused or raped.
 - 8 To offer supportive one-to-one discussions on issues such as coming out, safer sex, HIV testing, and so on.

- 9 To create a group culture where safer sex is the norm and is readily sustainable.

Young MWHWSM share the needs of all young people (such as their marginalisation in decision-making processes) and of all MWHWSM (such as homophobia and repression). Additional issues they face include housing problems due to their sexuality (such as being thrown out of the family home), poor self-image, possible vulnerability to abusive situations and lack of bargaining power, lack of affirmative information about their sexuality and safer sex, a dearth of positive role models, and crushing isolation and anxiety which can lead to despair and even suicide.

Young MWHWSM are to be found in young gay men's groups, gay pubs and clubs and in PSEs, but this still leaves a huge number of young men who have no access to social and support networks. It is possible that their first sexual encounter with another man will be influenced by factors such as ignorance, low self-confidence and gullibility. They may believe what another, maybe older and 'more experienced' man tells them about safer sex and HIV status, and their ability or desire to then insist on safer sex will probably be minimal. Even young men who identify as gay and use gay bars are still very much in need of further

information, activities and support which will enable them to practice safer sex.

ISSUES

- Since most young men who have sex with men are not 'out', and are very much isolated, it is essential to reach out to them and encourage them to break their isolation.
- Young MWHWSM will only feel willing to take such a large step if they have confidence in the professionalism and confidentiality of the services being offered. These services will also need to project strong images which reassure young men that it is acceptable and natural to be gay.
- Given that mention of positive images raises the spectre of 'promoting homosexuality', the project will need to brace itself for criticism and challenge homophobia in what will necessarily be high-profile work.
- HIV cannot be addressed in isolation; it is important to take into account all the other issues facing young MWHWSM.
- Young MWHWSM need to be addressed through specialist *and* general work.

SECTION 28 AND THE PROMOTION OF HOMOSEXUALITY

The Section adds a new Section 2A to the Local Government Act 1986.

It states:

- 1 A local authority shall not:
 - a) Intentionally promote homosexuality or publish material with the intention of promoting homosexuality.
 - b) Promote the teaching in any maintained school of the acceptability of homosexuality as a pretended family relationship.

But paragraph 2 states quite clearly:

- 2 Nothing in subsection (1) above shall be taken to prohibit the doing of anything for the purpose of treating or preventing the spread of disease.

Department of Education Circular 12/88 develops this theme:

Section 2A(2) makes it clear that nothing in Section 2A(1) prevents anything being done for the purpose of treating or preventing the spread of disease. Thus, activities in the counselling, health care and health

education fields undertaken for the purpose of treating and preventing the spread of disease, including AIDS, will not be prohibited. This includes activities concerned exclusively with the needs of homosexuals.

Thus no HIV-prevention work is subject to Section 28. This is in addition to the fact that there have been no prosecutions under the Section, and that any future prosecutions are highly unlikely due to the difficulty in proving (and defining) promotion. Indeed, many organisations would welcome a test case which would demonstrate the inoperability of the Section.

The main effect of Section 28 has been to legitimise anti-gay prejudice and homophobia, and to offer people a pseudo-legal reason for not doing work that they would not have wanted to do in the first place. It is this reluctance to do the work, often for personal moral reasons, which must be tackled (see also Heterosexism and Homophobia, pages 47-59).

Section 28 does not affect the activities of school governors, nor of teachers. It will not prevent the

objective discussion of homosexuality
in the classroom.
(DOE Circular 12/88 para. 18)

Schools cannot, in general, avoid
tackling controversial sexual matters,
such as contraception and abortion,

by reason of their sensitivity. Pupils
may well ask questions about them
and schools should be prepared to
offer balanced and factual
information and to acknowledge the
major ethical issues involved.
(DES Circular 11/87 para. 21)

C A S E S T U D Y

Tyneside Young Gay Men's Group

One of the most obvious gaps in terms of service provision for MWHWSM on Tyneside was the lack of a young gay men's group. Such groups had existed in the past, but a couple of years had elapsed since the closure of the most recent initiative. Following collaboration with FRIEND (a local support and social group for gay men), together with a steering group which met throughout the summer of 1991, a new group was established in October 1991 with the two MESMAC community workers as joint facilitators. This was seen as the best way of getting a group going without further delay, though it was always envisaged that funding should be sought to employ sessional facilitators. The group meets weekly at the premises of a city-centre advice and information service for young people.

Who goes to the group?

Usually between 15 and 20 people attend. There is a core group of regulars, together with others who come sporadically, or perhaps on a one-off basis. Well over 60 young

MWHWSM have passed through the group over a period of some nine months. The age range is 16-25, with most members aged around 20.

The social background of the group is very varied, with a mix of people who are waged, unemployed, students, financially and socially disadvantaged, or relatively well off.

Members come from Newcastle, Gateshead, North and South Tyneside, and as far afield as County Durham and Northumberland. The only other similar provision in the area is the Sunderland Lesbian and Gay Young People's Group.

The purpose of the group

- To help young MWHWSM come to terms with their sexuality.
- To meet the social needs of young MWHWSM in the area.
- To provide a safe and comfortable environment where young MWHWSM can meet and discuss issues that are relevant to them.
- To provide support and advice to young MWHWSM about any aspect of their lives on a confidential basis.

- To provide a safe environment where young MWHSWM can make new friends, have fun, and build up a network of support from people who share the experience of being gay.
- To make sure that each group member is aware of the complaints procedure used by MESMAC so that they have access to this if they feel that the group is being facilitated inadequately.

The role of the facilitators

- To help co-ordinate group activities.
- To provide advice or information on a confidential basis.
- To facilitate/co-facilitate group discussions on topics decided by the group members.
- To ensure that the group follows MESMAC's guidelines on equal opportunities, and that sexist/racist remarks are challenged whenever they occur.
- To ensure, as far as possible, that all members are made to feel welcome at the group and that no one person becomes excluded for any reason.
- To provide some input about the issues of HIV and safer sex whenever the group requests it and to encourage a group culture where safer sex becomes the norm.
- Facilitators should not have sex with any of the group members.

Publicity

Publicity has consisted of:

- Networking with other lesbian and gay organisations to encourage referrals.
- Information distributed via the Community Education Service in Newcastle and Gateshead.
- Leaflets and posters in gay venues.
- Advertisements in local newspapers.
- Word of mouth.
- Networking with other organisations/bodies such as the GUM Clinic.
- Outreach in a PSE.

What the group does

Discussions on topics such as:

HIV and safer sex

Relationships

Cotraging

Coming out

Pornography

Religion

Sexism

Racism

Experiences of sex, and sexual
hang ups.

Activities such as:

Watching videos

Ice-skating

Trips to the seaside

Cooking a curry

Compiling photo-love stories

Badminton

A residential in Northumberland

Ten-pin bowling

Evaluation

There have been two evaluations based on individual questionnaires and group discussions. A further major evaluation is planned.

Issues

Many of the issues for the Tyneside Young Gay Men's Group are typical of wider issues for all groups or specific gay groups (see also Groupwork, pages 73–80).

Other major lessons learnt include

- The undeniable need for such groups, and the lack of general provision for young MWH SWM and lesbians in the youth service.
- A feeling of marginalisation within the youth service, which also seems reluctant to refer individuals.
- The difficulty of attracting ongoing funding (which means that the MESMAC workers still facilitate the group).
- The crucial importance of having clear sexual boundaries for the facilitators.
- The need to share information with other groups of young MWH SWM and lesbians, in terms of gaining support, finding out about funding opportunities and sharing ideas about group activities.

PUBLICISING THE PROJECT

Publicity can be national or local, planned or unplanned, and positive or negative. Various media such as the press, television and radio, or specially designed leaflets can be used. More formal reports and general dissemination of learning are also vital aspects of publicity.

NATIONAL PUBLICITY FOR THE FOUR HEA-FUNDED MESMAC PROJECTS

To date there have been three MESMAC reports. The first describes the background to and the setting up of the national project. The second and third describe the first two years of the project's work. These are available free to interested organisations and individuals, with the intention of letting others have an overview (see Bibliography).

A *Learning So Far* document, also available on request from the HEA, has been compiled by one of the national co-ordinators. This provides a brief description of the work to date, together with lessons that have been learnt. The

intention here is to satisfy some of the demand for more detailed information about MESMAC from a wider and more varied audience.

Detailed evaluation reports have been distributed within the project (see Bibliography). They aim to let the HEA and other parts of the project know what is going on. Abridged versions of the reports have been published as articles in journals and magazines. These reports or working papers aim to pass on information about specific pieces of work to others contemplating the same kind of initiative.

Presentations at conferences have been directed at HIV professionals and people thinking of doing similar work. They aim partly to serve as encouragement.

PRESS PUBLICITY

There have been articles in the local and national press. These have covered the Leeds theatre group and scene questionnaire, and also the Newcastle leaflet. This leaflet was aimed at both professionals and users, and sought to

explain and raise the profile of the project, but it was criticised by a local councillor on the grounds that it corrupted young people and promoted homosexuality (April/May 1991). Newcastle's recruitment advertisement for a new worker was also commented on by Auberon Waugh in the *Daily Telegraph* (April 1991), with the final paragraph, 'What community development technique can reduce HIV infection? Only Newcastle-upon-Tyne has the answer.'

London MESMAC sprang into the news (May 1991) when Family and Youth Concern requested materials, purporting to be a 17-year-old gay man, materials they later described as 'crude, explicit, and sometimes degrading'.

It seems quite difficult to get good publicity in the local (or national) press, largely because the local press especially tends to see gay issues as a source of titillation and knee-jerk reactions from outraged readers (always good for circulation), rather than as a subject to be treated seriously and responsibly. Workers may decide it is not worth the bother of trying to get a story into the local press, unless they have access to a sympathetic reporter. Care also needs to be taken about who is authorised to talk to the press.

This situation is, of course, very much to be deplored, since positive stories in

general publications (rather than the gay press) may be the only way of reaching some men who do not identify as gay. It is worth noting that, apart from one feature about London MESMAC's work with black MWH SWM in the *Pink Paper*, there have been very few features about MESMAC in the gay press itself. The blame for this may lie at the door of the project for not actively promoting itself; in trying to protect itself from a hostile general press, it may not have exploited potential allies within the gay media.

Adverse publicity in homophobic newspapers is one of the hazards of the job, and as long as pieces of work are rational and well planned there should be no reason to steer clear of them simply because the local paper might pick them up and have a field day. If there is adverse publicity, it is crucial to co-ordinate a consistent response, and funding organisations should be kept properly informed about press stories and their background, preferably before they appear.

Local and national papers have also been used for paid advertising; examples of this are adverts for Leeds MESMAC in the *Pink Paper* and *Boyz*, and small ads in the personal column of Tyneside free papers for the young gay men's group.

PUBLICITY AS PART OF THE WORK

- Stalls and promotions at Gay Pride or World AIDS Day events raise the profile of the project and let potential users know you're there. This is, of course, only a small part of a community development approach.
- Posters and leaflets advertise the project and encourage involvement. You may need to choose between glossily printed leaflets which look professional but which may rapidly become out of date, and cheaper, more easily updated materials which can be photocopied.
- T-shirts identifying workers as part of the project may encourage people to talk to them. T-shirts can also help volunteers to feel part of the project and raise the profile.
- Mugs, badges and other paraphernalia/gimmickry are also useful (see also Safer Sex Promotions, pages 106–7).
- Meetings, workshops and events can also be listed in the local press, gay press and via switchboards. Gay switchboards, with a turnover of volunteers, may need regular and unambiguous briefings about what your project is currently offering.
- Printing and distributing flyers – these will encourage people to come to particular events. Since personal contact is more effective, they should be combined with outreach.
- Business cards.
- Outreach on the scene and in PSEs – this can make the project more accessible to people who might not read the press or flyers.
- Mailshots to other groups working in the same field – this will let them know what you're doing and will encourage appropriate referrals.
- Word of mouth – this is perhaps the most effective way of involving people in the project, but it can also be labour intensive.

ISSUES

To be most effective, materials designed to appeal to particular target audiences should be produced by members of that group, or at the very least they should be consulted and materials should be piloted with them.

The wording of publicity is crucial in communities where identity is important.

For instance, Leicester's poster highlights the fact that it works with black men rather than MWHWSM. The London site decided not to mention AIDS or the terms 'gay' or 'men who have sex with men' on their contact cards in case this meant people did not take them home.

There may also be problems in using locally appropriate images in national (gay) papers if other local sites feel that the images used are not consistent with their own work.

MATERIALS AND INFORMATION

Projects are likely to need written or visual materials connected with some or all of the following areas:

- Safer sex for men who have sex with men.
- Safer sex and coming out for young MWHWSM.
- Safer sex for men from the black communities.
- Safer sex for SM gays.
- Safer sex for men using public sex environments.
- Negotiating safer sex.
- Specific materials relating to oral sex or condom use.
- Other sexually transmitted diseases.
- Local health services, such as GUM clinics.
- Local support networks, gay groups, counselling and advice services.
- HIV testing.
- HIV treatments.

- Being HIV positive.
- Services for men who are HIV positive.
- Drug and alcohol use.
- Services related to drug and alcohol use.
- Issues relating to safety (especially in cruising areas) and police attitudes to MWHWSM (including 'Your Rights on Arrest' cards).

NATIONAL AND LOCAL PERSPECTIVES

National leaflets may already be available free, and in some cases they may be good. Nevertheless, there is almost always a need for supplementary local materials with local references and images. They can help to combat the London-focused nature of many national materials, and they can be produced in response to locally expressed needs in conjunction with users.

INVOLVEMENT OF USERS

Users need to be consulted to help decide which national or pre-existing materials should be distributed, and also to identify gaps. They should be involved in the production of new materials, and there is a need to pre-test draft materials on a representative cross-section of the community. There can be a conflict between the need to involve users and the desire to produce a sorely needed leaflet or poster as quickly as possible.

DUPLICATION

One problem with producing materials locally is that they can ignore lessons learnt elsewhere, and sometimes duplicate materials that already exist, though it can be argued that their specific local slant alone makes them worth producing. There is a serious lack of national co-ordination of materials, with no central resource library. It would also be helpful to have a central resource of materials from abroad.

IS IT PORN OR IS IT HEALTH EDUCATION?

There is an ongoing conflict between the need to produce explicit materials and the real or self-imposed censorship that can impede this process. It doesn't help

that the law relating to obscene materials is notoriously unpredictable. Some gay safer sex materials are not supposed to be sent through the general post, yet far more explicit sex aids catalogues suffer no such hindrance. Does the law draw the line at the dreaded erect penis, and if so, what constitutes an erection? Does it depend on the proverbial *angle of dangle* or the level of tumescence? And what about the American porn mags featuring unambiguous erections which can be purchased throughout the nation? Definitions about what is obscene can vary depending on the subjective opinions of the lawyer consulted.

Despite all these difficulties there have been considerable (if still unsatisfactory) advances, especially if one considers what would have been possible only five years ago. The 'Hot Sex Now' materials produced by the Terrence Higgins Trust are a case in point, and have gone a long way in pushing back the boundaries of acceptability. One of the lessons learnt in the production of those particular materials was that explicit language and explicit images combined were more likely to arouse condemnation (that is to say, you can probably use the word 'fuck' with a tame image, but something less stark is required with a raunchier photo).

Some would also say that explicit images can do more harm than good, possibly by alienating some MWHSWM and otherwise helpful allies. One crucial

aspect is ensuring that materials aimed at gay men go only to gay men – but then where does this leave men who don't identify as gay?

There is also a debate concerning the explicitness of language: are men more likely to relate positively to 'fuck' and 'suck' than 'anal sex' and 'oral sex'? Do MWHSWM use a standard language when referring to sex and the body? Some men might be alienated if you are too bold, but explicit language is often better received in the long run, and it is probably more likely to be respected than pseudo-biology class or medical speak. The problem has always been that English offers no viable middle path between medical language and the vernacular (unless you want to refer to *willies* and *bonking*), so you have to choose one or the other.

Workers promoting safer sex with men are bound to view explicit images as a necessary medium, but there also needs to be some sensitivity to the political debate among gay men and lesbians concerning pornography, abuse and exploitation.

REPRESENTATIVE IMAGES

Can you satisfy everyone with one image, or will you need to offer a wider choice? If you produce a leaflet or poster that features one man only, should he be

black or white, old or young, dressed in leather or jeans, a Greek god or something more representative of what is revealed when the disco lights go up at 2 am? A number of images may be required. It is also a good idea to use strong and memorable graphics rather than a hectic mess which confuses the reader.

ACCESSIBILITY OF LANGUAGE AND IMAGES

Besides the debate on explicitness, the general appropriateness of the language has to be considered.

Language can often come from an educated, white, middle-class perspective which assumes far too much prior knowledge or makes esoteric cultural references. There is also the problem of making materials accessible to different cultures, and offering them in a selection of appropriate languages. It is pointless simply to translate existing materials, which will retain their peculiar cultural references; new materials should be produced through collaboration with the users concerned.

VIDEOS

When it comes to safer sex, there is a dearth of good videos. English productions can be tasteful to the point

of uselessness, and most workers have had to look to Holland, Germany, America or Australia for suitable alternatives. The *Gay Man's Guide to Safer Sex* and *Getting It Right: Safer Sex for Young Men* videos (available by mail order through the gay press and selected retailers) represent a major step forward, and will hopefully pave the way for a wide range of appropriate materials. The issue of explicitness and the law applies to videos too. Workers using explicit videos need to be careful how they are employed, and in what forums, in order not to contravene the (vague) law.

Workers should also be careful about using videos in the right context; it is sometimes tempting to play a video when nothing else has been planned for a session, or because it seems to demand a minimum of effort. Videos are only a visual aid, and can rarely be used in isolation. They require a proper introduction and adequate opportunities for discussion afterwards. The narrow choice of videos should not prevent workers from carefully choosing one that is suitable for the audience.

ACCURACY AND CONSISTENCY

Clearly, materials need to be accurate, because if they are not they may put men at risk and bring your project into disrepute. They also need to be consistent in their message, so that you can't really

be distributing one leaflet that is quite permissive when it comes to oral sex, and another that rates it as very risky. Materials need to be up-to-date, especially given the fluid nature of knowledge about HIV/AIDS. A good source of accurate and up-to-date information is the *National AIDS Manual* and there should also be opportunities to pre-test materials with local health professionals.

NOVELTY AND SATURATION

There is a great deal to be said for novelty when it comes to materials and their distribution, since men can rapidly tire of the small number of leaflets and posters available. Equally, even the best materials can reach saturation point after only a few months, and new materials are needed to rekindle interest and re-emphasise safer sex issues. Unfortunately, of course, this can boil down to cost and the time involved. It is worth bearing in mind that when materials have reached saturation point in pubs or clubs, it is important that they should still be available in locations (such as GUM clinics) visited by men who don't go on the scene or who may not identify as gay.

EVALUATION AND THE LIMITS OF MATERIALS

It is essential that materials should be evaluated to assess their impact and effectiveness. It should also go without saying that leaflets, posters and videos alone are not going to make men adopt safer sex, and they need to be part of a far wider strategy.

OTHER MATERIALS

Other materials might include badges, stickers, mugs, beer mats, pens, books of matches, and so on. It might also be useful to produce condom wallets with appropriate messages and graphics.

RESEARCH AS A WAY OF WORKING

Research can encompass anything from questionnaires to observation work, record keeping, project diaries and interviews. The following issues are worth considering before embarking on research:

- Who is it for? Yourself and your work, a funding agency, lobbying purposes?
- What do you want to know? This is vital if you are to decide on the best way of collecting data. For instance, if you want specific information from a large number of men, a questionnaire may be best. More in-depth information concerning men's views about their own experiences may require unstructured interviews.
- How will it be used? If you have a clear idea about how the information will be used it will often help with its collection – and it will improve motivation to do the work!
- Who will do it? Yourself, volunteers, or both?
- How much time do you have? This determines what is possible, and you need to build in time for analysis and writing up in addition to the collection of data.
- How will you analyse, write up and disseminate the research? This includes thinking about any support that you may need to enable you to complete these tasks.

PRACTICAL EXAMPLES

All MESMAC sites have gathered information through networking, reading current literature, attending conferences, and so on. Indeed, much of the work involved in assessing the needs of men via group discussions and outreach can be seen as informal research.

Needs assessment can also take on a more structured form, especially when it is an integral part of planning or deciding where precisely to work. For example, Leicester carried out a month's

observational outreach in saunas (see pages 87–8), using monitoring forms to record information after each session. They had a specific purpose, since they needed to know which venues were most suitable for contacting black men. Thus the workers included questions on their monitoring forms about the number of black men present, their ages, whether they were alone or in pairs, and so on. By varying the times and days that they attended the venues and by keeping careful records, they were able to plan a detailed outreach timetable which took into account places that seemed good to work in and ones that seemed unsuitable. The workers used their data to compile a report on what they had found and the implications of this for future work. Although they felt that this period of observation and outreach had been invaluable, the work was frustrating at the time since it inhibited them from making actual contact with men and doing real work.

Participant observation and outreach work has been likened to ethnography in that it involves studying and forming relationships with a community in order to understand it from its members' point of view. A worker in Newcastle began work on a high-rise estate by having a key introducer (a gay community worker who lived in one of the tower blocks) to give him access to men and to offer him the chance to attend activities such as tenants' meetings or bingo nights. The

purpose was to gain some appreciation of the issues facing men on the estate, to get a flavour of the general atmosphere, and to become known, trusted and liked. The experiences were recorded in a project diary. Although the techniques are in some ways similar to ethnography, it should be remembered that there is a different relationship to the work. Indeed, one of the problems of using research as a technique is to keep it focused and to ensure that it is rigorous, rather than seeing it merely as a beginning to work or simply record keeping.

One of the more systematic and quantitative pieces of research work has been a questionnaire carried out by the Leeds team (MESMAC Working Paper No. 2; see Bibliography). The workers wanted to find out from a broad cross-section of men using the scene what their needs were in terms of HIV/safer sex and whether they felt it was appropriate to raise such issues on the scene (see Club Work). They decided the best way to get this information quickly was to use a questionnaire, and volunteers helped to interview 300 men. The issue of how to balance the needs of research against those of the work arose: for example, should they use a rigorous questionnaire which could lead to statistical analysis, or just ask a few questions to yield information which would help to plan work? On reflection it was felt that perhaps the research was not systematic

enough, being seen primarily as a prelude to work on the scene. The workers felt it would have been better to see it as a piece of work in its own right, and to have thought more about the questions and analysis. This was especially the case when it became clear that the results would be useful for lobbying, and the workers wanted to feel confident about their findings.

The London project also carried out a questionnaire on the scene as a prelude to starting up a group for black men, and the results accompanied a press release which advertised the group.

ISSUES

See also Leeds MESMAC monitoring form in Outreach in Public Sex Environments, page 95.

■ Weighing the needs of research against work needs.

You may need to pilot research, even if this takes time, or you may need to think more carefully about questions and analysis if the results are to be used for lobbying or for organisational development. There can also be a concern about appearing voyeuristic

or damaging work relations by asking otherwise useful questions.

■ Processing collected data.

Records may be kept and not used, or there may be too much information to analyse. Time needs to be built in to complete research activities so that records are analysed and written up, not just acted on informally. It is also important to keep records consistently if the results are to be used for research.

■ Balancing time spent on research work.

Collecting, analysing and writing up data can be seen as time taken from more pressing work, and therefore it is not given priority. It can be frustrating to collect information relating to men's needs while resisting the temptation simultaneously to address those needs. It helps to see research as part of a responsibility to share learning and experience with others.

■ Lack of skills or resources to do more systematic research.

This can be overcome through training or by seeking support and advice from others.

■ **Piloting.**

Although time-consuming, it is important that research tools such as questionnaires are piloted and adapted as appropriate. Otherwise it will be too late to reword parts of a questionnaire that don't work well.

■ **Changing records.**

Record keeping needs to be reviewed to ensure that it is yielding relevant information. Information needs may change as the work develops.

■ **Confidentiality.**

This is a major concern, and there is a fear about keeping records that may identify people or their sexuality. It can be hard to gain express permission

to take notes or collect information without engendering a sense of suspicion or mistrust.

■ **Circulating results amongst the community.**

Although the press can be used, there is also an issue about how information can be fed back to men in more transient communities, such as men who go cottaging.

■ **Evaluation.**

It is important that information collected through research should be fed back into the project's work by including it in the evaluation process.

LOBBYING PROFESSIONALS AND POLICY MAKERS

Professionals and policy makers may need to be lobbied for a variety of reasons, including funding (see also Heterosexism and Homophobia). A great deal of time has to be spent persuading them that MWHWSM have special needs, and that resources should be provided to meet those needs (not just in the sphere of HIV prevention).

However, it takes only a passing acquaintance with HIV-prevention history and practice in Britain to recognise that the reality has been less than satisfactory. MWHWSM have been neglected in favour of more comfortable, socially acceptable options. In the earlier days of the epidemic, the fear of stigmatisation of MWHWSM required that AIDS should be seen as something affecting the whole of the population, that HIV was not simply a 'gay plague'. This de-gayng of AIDS was understandable at the time, but played into the hands of those who were not committed to working with MWHWSM. The perceived threat to the general population permitted them to direct their energies elsewhere, which for many must have come as a relief. This was compounded by the idea, furthered by

gay men themselves to deflect an anti-gay backlash, that MWHWSM were all into safer sex, and that as a group they had been 'dealt with'. The resultant dearth of health projects for MWHWSM is increasingly being highlighted, and the re-gayng of AIDS is high on the political and practical agenda. Commentators in the gay press, together with speakers at conferences, are emphasising the need to reverse the scandalous neglect of the health issues of MWHWSM, and the new organisation GMFA (Gay Men Fighting AIDS) is a manifestation of this concern. The existing projects for MWHWSM in Britain have had to wage the same battle over the last two to three years, and although the climate is changing for the better in some respects, any new projects will have to respond to the same challenge.

The HIV statistics seem clear, and yet newspaper reports are testimony to the fact that small increases in heterosexual infection always take precedence over the continuing and enormous rates among MWHWSM. The conclusion may be drawn that if people are blind to such evidence it is because of very deep-rooted homophobia which cannot be changed

overnight, especially in a society that in numerous ways still sanctions discrimination against gay men and lesbians.

HIV and AIDS are clearly not the only health issues in Britain today: cancer and coronary heart disease cause thousands of deaths, and it can sometimes be easy to forget that there are innumerable calls upon a finite number of resources, both financial and human. Workers should be aware of wider perspectives, if only to counteract criticism from those who think that HIV/AIDS work is comparatively over-funded.

There should, however, be no need for defensiveness: it is your job to represent your clients' needs as effectively as possible. In the broader sphere of gay community development, nobody can argue that work with MWHWSM and lesbians has ever been properly funded or supported.

HOW TO LOBBY

- You can present facts and cogent arguments in a professional manner through your own or other people's documents and statistics. The results of evaluation also provide useful material. Sources of relevant statistics would include the local health

authority's annual report (under the AIDS Control Act) on HIV/AIDS, together with the local GUM clinic's annual report.

- You might consider inviting key people to users' forums, or to specific groups (such as a young gay men's group) so that they hear about the issues directly from the people involved.
- You can speak at conferences, seminars and meetings of fellow professionals. It is difficult to walk the tightrope between appearing as a strident politico and being completely ineffectual, particularly as some people will always be looking for an excuse to deny your message. Speeches and so forth can help to change the climate gradually, but their impact is limited.
- Workers in statutory organisations may be well placed to gain access to policy-making committees where they can represent the needs of MWHWSM. Other people on these committees may find them very time consuming or rate them as a low priority, so if you adopt a positive approach and attend meetings regularly, respond promptly to any requests for written information, or even offer to help draft documents, then you may be able to gain a large amount of influence.

- Successful lobbying depends very much on finding allies, either to help present your case or within your target organisation. Once found, these allies need to be nurtured like exotic plants. You can be straightforward and honest with the ideal ally, but others may require more delicate handling. The reality is that a health authority or social services department (for instance) is full of people using finely honed skills to outmanoeuvre each other. Joining in with such activities may be tiresome, but ultimately necessary for success.

In the HIV field it seems that personalities and individuals in post are disproportionately influential and crucial, perhaps because this is a relatively new field. Predictably, your most vociferous allies are likely to be gay men and lesbians, though fortunately this is not always the case. A clear knowledge of an organisation and its structure, together with people's power, budget control, place

in the hierarchy, or reputation is vital in maximising your influence.

- Other tools to be used in lobbying include open days, anti-heterosexism training and other study days. Remember that professionalism and a record of good work are not going to do you any harm either.
- A key problem in lobbying is the question of how to cope with somebody who is influential (they may hold the key to your future funding) but who is either homophobic, incompetent, or both. To what extent can you challenge them, especially if this will antagonise them and endanger your future? How much are you prepared to compromise, particularly if some of their attitudes or comments are personally offensive to you as a gay man? In such situations, your best option may be to use a manager or similar person as an intermediary/representative.

B I B L I O G R A P H Y

GENERAL

MESMAC 1st Report, Health Education Authority, January 1991

MESMAC 2nd Report, Health Education Authority, August 1991

MESMAC 3rd Report, Health Education Authority, August 1992

MESMAC Project: A Summary of Some Key Issues from Two Years' Community Development Work with Men who have Sex with Men, Health Education Authority, July 1992

MESMAC Working Paper No. 1, 'MESMAC Tyneside: Working with Men on a Housing Estate', Health Education Authority, 1992

MESMAC Working Paper No. 5, 'The Impact of the MESMAC Project: An Interim Review', Health Education Authority, 1992

MESMAC Working Paper No. 6, 'MESMAC Leeds: An Evaluation of the Establishment of a Lesbian and Gay

Theatre Group,' Health Education Authority, 1992

A Resource List of HIV/AIDS Publications, Health Education Authority, 1993

Evans, Sandberg and Watson, *Working Where the Risks Are: Issues in HIV Prevention*, Health Education Authority, 1992

Evans, Sandberg and Watson, *Healthy Alliances in HIV Prevention*, Health Education Authority, 1993

Jones, *HIV Prevention: A Working Guide for Professionals*, Health Education Authority, 1992

Aggleton, Moody and Young, *Evaluating HIV/AIDS Health Promotion*, Health Education Authority, 1992

Coxon, Davies and McManus, *Longitudinal Study of the Sexual Behaviour of Homosexual Males under the Impact of AIDS A Final Report to the Department of Health*, Project Sigma, London, April 1990

Delancy, Martin, Goldblum, Peter and Brewer, Joseph, *Strategies for Survival: A Gay Men's Health Manual for the Age of AIDS*, St Martin's Press, New York, 1987

Rooney, Michael, *Gay Men: Sustaining Safer Sex?* North West Thames Regional Health Authority, June 1991 (available from HIV Project, 82-86 Seymour Place, London W1H 5BD, tel: 071 724 7443)

Rooney, Michael, *Risks Worth Taking: Developing Effective HIV-Prevention Work with Gay Men and Other Men who have Sex with Men*, North West Thames Regional Health Authority, 1992

Rooney, Michael and Scott, Peter, 'Working Where the Risks Are: Health Promotion Interventions for Gay Men and other Men who have Sex with Men in the Second Decade of the HIV Epidemic' (Working document presented at the District HIV-Prevention Co-ordinators Conference in November 1991) Health Education Authority, 1991

King, Edward, Rooney, Michael and Scott, Peter, *HIV Prevention for Gay Men: A Survey of Initiatives in the UK*, North West Thames Regional Health Authority, 1992

Dowsett et alia, *Class, Homosexuality and AIDS Prevention: Resource Materials for Trainers and Educators in HIV/AIDS Education*, Macquarie AIDS Research Unit, Sydney, 1992

Connell, R.W. and Dowsett, G.W., et alia *Social Class, Gay Men, and AIDS Prevention*, Macquarie AIDS Research Unit, 1991, Centre for Applied Social Research, School of Behavioural Sciences, Macquarie University, Sydney, New South Wales 2109, Australia (available on request)

Connell, R.W. and Kippax, S., *Sexuality in the AIDS Crisis: Patterns of Sexual Practice and Pleasure in a Sample of Australian Gay and Bisexual Men*, Macquarie AIDS Research Unit, 1990 (details as above)

Dowsett, G.W., *Reaching Men who have Sex with Men in Australia. An Overview of AIDS Education: Community Intervention and Community Attachment Strategies*, Macquarie AIDS Research Unit (details as above)

King, Edward, *Safety in numbers: safer sex and gay men* Cassell, 1993

COMMUNITY DEVELOPMENT

The Public as Partners – A Tool Box for Involving People in Commissioning Health Care, Health Gain Conference, East Anglia Regional Health Authority, 1992

Community Participation in Health for All, UK Health For All Network, 1991

Adams, Lee and Smithies, Jan, *Community Development and Health Education*, Health Education Authority, 1990

Community Development and Health — The Way Forward, Healthy Sheffield, 1993

Freire, Paulo, *Pedagogy of the Oppressed*, Penguin, 1972

Open University (eds.) *Roots & Branches — The Winter School Papers*, Open University, 1992

Public Health Alliance (eds.) *Community Development and Health — Reclaiming the National Agenda*, Public Health Alliance, 1992

OUTREACH WORK IN PUBLIC SEX ENVIRONMENTS

MESMAC Working Paper No. 4, 'Outreach Work in Saunas: The Experience of Leicester Black MESMAC', Health Education Authority, 1992

Stoakes, Aggleton and Jordan, *Models of HIV/AIDS Health Promotion and Outreach Work with Men who have Sex with Men*, Department of Education, Bristol Polytechnic, 1990

Aggleton, Jordan, Stoakes and Wilton,

Outreach Work with Men who have Sex with Men: Report from a National Consultation, Southmead Health Authority/Health Education Authority, 1991 (available from District HIV/AIDS Co-ordinator, Southmead Health Authority, Southmead Hospital, Bristol BS10 5NB. Price: £3.95 inc. postage)

Beckstein, David L., *AIDS Prevention in Public Sex Environments: Outreach and Training Manual*, Santa Cruz AIDS Project, 1990

Lerro, M., Freeman, A. and Valentino, J., *Safer Sex Behaviour Reinforcement in Public Parks*, Dallas County Health Dept, AIDS Prevention Project, 1989

Van Reyk, Paul, *On the Beat: A Report on an Outreach Program of AIDS Preventative Education for Men who have Sex with Men*, AIDS Council of New South Wales, December 1989

Laud Humphreys, R.A., *The Tearoom Trade: Impersonal Sex in Public Places*, Chicago, 1970

Dowsett, G.W. and Davis, M.D., *Transgression and Intervention: Homosexually Active Men and Beats. A Review of an Australian HIV/AIDS Outreach Prevention Strategy*, National Centre for HIV Social Research, School of Behavioural Sciences, Macquarie University, Sydney NSW 2109, Australia (available on request)

Henriksson, B., and Mansson, S.A., 'Sexual Negotiations: An Ethnographical Study of Men who have Sex with Men', University of Gothenburg (paper given at the Aids & Anthropology Group meeting in Amsterdam, July 1992). This paper concerns participant observation in pornographic cinemas in Stockholm, and contains a very comprehensive list of other work relating to PSEs.

SAFER-SEX WORKSHOPS/RISK REDUCTION STRATEGIES/WORK ON THE SCENE

MESMAC Working Paper No. 2, 'Using a Questionnaire to start Work on the Scene: the Experience of Leeds MESMAC,' Health Education Authority, 1992

Kelly, Jeffrey A., *Behavioural Group Intervention to Teach AIDS Risk-Reduction Skills (Project Aries)*, University of Mississippi Medical Center, Jackson, Mississippi, 1990

Kelly, Jeffrey A., et alia, *Population-wide Risk Behaviour Reduction through Diffusion of Innovation following Intervention with Natural Opinion Leaders (i.e. using popular men in gay bars to do peer education)*, University of Mississippi Medical Center, 1990

Kelly, Jeffrey A., et alia, *A Skills-Training Group Intervention Model to Assist Persons in Reducing Risk Behaviors for HIV Infection*, AIDS Education and Prevention, Vol. 2, No. 1: 24-35, 1990

Shernoff, Michael and Bloom, Daniel, *Designing Effective AIDS-Prevention Workshops for Gay and Bisexual Men*

Aids Education and Prevention (1): 31-46, 1991 (available as reprint from Michael Shernoff, Chelsea Psychotherapy Associates, Suite 1305, 80 Eight Avenue, NYC, NY. 100011 USA)

YOUNG GAY MEN

MESMAC Working Paper No. 3, 'Community Development with Youth Groups: some Practical Lessons from London MESMAC', Health Education Authority, 1992

Alyson, Sasha, (ed.), *Young, Gay and Proud!*, Alyson Publications, Boston, USA, December 1991 (3rd edition)

Duke, Craig, *The 'Young and Gay' Manual (a six-week series of workshops on HIV/gay issues for young gay men)*, Victorian AIDS Council, Australia, October 1991

National AIDS Trust Youth Initiative,
Living for Tomorrow, NAT, 1991

NUT Working Party on Lesbian and Gay
Issues in Education, *Lesbians and Gays
in Schools: An Issue for Every Teacher*,
NUT, London, July 1991 (available from
NUT, Hamilton House, Mabledon Place,
London WC1H 9BD)

Who Cares?, issue 18, winter 1991/92,
concentrates on lesbian and gay issues for
young people in care, including five-page
photostory (available from *Who Cares?*,
8 Walkley Street, London EC1V 7QE)

Colvin, Madeleine, with Hawksley, Jane,
*Section 28: A Practical Guide to the Law
and Its Implications*, National Council
for Civil Liberties, 1989

Directory of Social Change, *Guide to the
Major Trusts*, 2nd edn (covers over 400
grant-making trusts and foundations,
with information and advice on how to
apply for a grant. Available from Radius
Works, Back Lane, London NW3 1HL,
tel. 071 435 8171

Directory of Social Change, *A Guide to
Company Giving* (gives details of
donations from 1,000 leading companies
in the UK)

HETEROSEXISM AND HOMOPHOBIA

Canadian AIDS Society, *Homophobia,
Heterosexism, and AIDS: Creating a
More Effective Response to AIDS*
(available from Canadian AIDS Society,
100 Sparks Street, Suite 701, Ottawa,
Ontario K1P 5B7)

FUNDING

Directories relating to funding can often
be found in your local Reference Library
or Council for Voluntary Service.

The Local Authority Associations Officer
Working Group on HIV Infection and
AIDS, *Guide to Funding: An
Introduction to Local Government
Finance*, December 1991 (Compiled
by Lesley Davies, Professional Support
Officer in the London Borough of
Richmond-upon-Thames)

OTHER MESMAC PUBLICATIONS

Community, contacts and collective action

Report of the MESMAC forum

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