

# Talking spaces



**A Therapeutic Groupwork Approach  
to HIV Prevention with Gay Men**



**Tim Foskett**  
with research by Alfred Hurst

# PACE

project for advice counselling + education

Published by: The Project for Advice Counselling and Education  
34 Hartham Road  
London N7 9JL

Telephone:: 0171 700 1323  
Fax: 0171 609 4909

© PACE 1996

ISBN: 0 9529411 0 4

Design: art<sup>2</sup>g<sup>0</sup> (0171 386 7316)  
Print: Leighton Printing (0171 607 3335)

# Talking spaces

## A Therapeutic Groupwork Approach to HIV Prevention with Gay Men

Dedicated to

*Stephen Lumley*

who believed in the power of the talking space

## Talking Spaces

### A Therapeutic Groupwork Approach to HIV Prevention with Gay Men

PACE, the Project for Advice, Counselling and Education, has provided services to lesbians and gay men in the field of HIV for over a decade. *Talking Spaces* sets out the research background and theoretical basis of our therapeutic groupwork approach to HIV prevention with gay men.

*Talking Spaces* includes a detailed evaluation of PACE Workshops for Gay Men, including the results of a follow-up questionnaire asking service users their views on the impact of the workshops. The results demonstrate the effectiveness of a therapeutic groupwork approach in:

- successfully engaging gay men in a sexual health initiative
- building self-esteem and emotional well-being among gay men
- enabling gay men to develop improved assertion and negotiation skills
- enabling improved communication between gay men about sexual activity
- successfully integrating HIV prevention into generic services for gay men

*Talking Spaces* concludes with discussion of the issues raised and recommendations for future work.

#### *What others have said about Talking Spaces:*

*"I welcome this innovative report from PACE, which will give commissioners much to think about when commissioning targeted HIV prevention services for gay men. Talking Spaces demonstrates the need for effective HIV prevention strategies to address the psychological and emotional well-being of gay men, and is an excellent example of qualitative evaluation."*

**Simon Hall, Kensington & Chelsea and Westminster Health Authority**

*"The findings in the report are very encouraging and will prove useful in planning future work in this area. It is good to see such a well planned, intelligent and successful health promotion campaign, with encouraging outcomes."*

**Shaun Whelan, Terrence Higgins Trust.**

*"We welcome this new report from PACE. It is an important and interesting example of the growing diversity of needed and appropriate responses to the epidemic."*

**Kristina Bird, HEA's HIV Prevention Information Service**

*"What many HIV care workers have known anecdotally for years is being given the attention it deserves. Preventative sex is inextricably linked to psychological well-being. I hope this project acts as a springboard to a wide range of therapeutic approaches to prevention work."*

**Geoff Warburton, Terrence Higgins Trust.**

*"A piece of work that will be far reaching in understanding HIV prevalence amongst gay men."*

**Veya Aghoghogbe, Lambeth, Southark and Lewisham Health Authority.**

## Contents

<i>Acknowledgements</i>	8
<i>Summary</i>	9
<i>Conclusions and Recommendations</i>	10
<b>1</b> <i>Introduction to PACE</i>	11
<b>2</b> <i>Background and Research Context</i>	13
<b>3</b> <i>Our Approach to HIV Prevention with Gay Men</i>	18
<b>4</b> <i>The Workshops</i>	20
<b>5</b> <i>The Evaluation</i>	25
<b>6</b> <i>The Effectiveness of the Workshops</i>	28
<b>7</b> <i>Conclusions and Recommendations</i>	36
<i>References</i>	37
Appendix I: <i>The Questionnaire</i>	38
Appendix II: <i>Participants perceptions of the impact of workshops</i>	42

## Acknowledgements

I would like to thank the following people for their encouragement and contributions to PACE Workshops for Gay Men and to this report. Alfred Hurst for his considerable support in establishing the programme, facilitating the workshops and contributing to this report. Gregor MacAdam for his support and facilitation of Let's Talk About Sex. The staff of PACE for their comments and support, and particularly Hamid Kamara for his administration of the programme, and Julienne Dickey for her assistance with the report. Ford Hickson from Sigma Research for advice on the design of the questionnaire and assistance with this report. Kristina Bird from the HEA's National HIV Prevention Information Service for her assistance in tracing references and journal articles. Jim Mills for his assistance with statistics. Wendy Clarke and John Foskett for comments on the report. My supervisors Lois Graessle and Alvin Marcetti.

I would like to thank Lambeth, Southwark and Lewisham Health Commissioners for funding this evaluation project. PACE Workshops for Gay Men were funded by the following local and health authorities: L.B.Camden, Camden and Islington H.A., Ealing, Hammersmith and Hounslow H.A., East London and City H.A., L.B.Hackney, L.B.Hounslow, L.B.Islington, L.B.Kensington and Chelsea, Kensington & Chelsea and Westminster H.A., Lambeth, Southwark and Lewisham H.A., L.B.Newham, L.B.Westminster and the North Thames Regional H.A.

Finally, I would like to thank the workshop participants and questionnaire respondents who, through their courage and honesty, have taught me a great deal.

**Tim Foskett, October 1996.**

## Summary

This report sets out the research background and theoretical approach of PACE Workshops for Gay Men towards HIV prevention work in London. It provides information about the workshops that took place between October 1995 and February 1996, and details of a summative evaluation of the programme, using follow-up questionnaires to participants. The results of the evaluation indicate that the intended outcomes of the interventions were achieved, in particular that emotional well-being and inter-personal skills were considerably enhanced by participation in workshops. The report concludes with discussion of the issues raised and recommendations for future work.

## Conclusions

This evaluation demonstrates the effectiveness of a therapeutic group work approach to HIV prevention with gay men. Workshop participants report the following changes, sustained over time.

- enhanced self-confidence
- greater clarity about sex and relationships
- increased assertiveness and ability to negotiate in relationships
- increased motivation and ability to make changes in relationships
- greater self-acceptance
- resolution of historical problems or difficulties with sex and relationships

Our findings highlight the enormity of the task to enable gay men to negotiate sexual activity with a partner. This supports the need for on-going provision of opportunities for men to explore the wide range of issues involved in sex and relationships.

Psychological and therapeutic models have considerable insight to offer in relation to human behaviour change. Our findings demonstrate that, on the whole, these models have been seriously neglected by the HIV prevention field.

## Recommendations

We recommend that:

1. HIV prevention initiatives engage in a model of on-going cumulative change and development, at the levels of the individual, their sexual relationships, and the gay male community as a whole, rather than pursuing a dramatic quick-fix.
2. The establishment of a larger, long-term experiential group work programme for gay men, offering a variety of workshops and counselling groups on the themes of sex and relationships.
3. That such a programme be supported and evaluated by an integrated, rigorous evaluation system.
4. That black organisations be funded to provide groups for black men, that black facilitators be employed where possible and that PACE continue to pursue joint working with black HIV prevention organisations to address the issues and dynamics of inter-racial relationships.



## Part 1 Introduction to PACE

### Introduction

The Project for Advice, Counselling and Education (PACE) has been established in London for over ten years, providing counselling and other personal development opportunities from a variety of therapeutic approaches to lesbians and gay men, as well as training and consultancy services to a wide range of local and health authorities in the fields of lesbian and gay equality and HIV prevention and care.

PACE has provided HIV Prevention services directly to gay men for six years. Since the beginning of 1995 the emphasis of our HIV prevention work has shifted away from information-giving activities, towards longer experiential and therapeutic workshops and groups.

### Philosophical Approach

Our philosophy as an organisation is based upon the principles of the counselling, psychology and psychotherapy movements which have developed over the last 50 years. Counselling is an effective means of self-empowerment, following the principle that an individual who experiences problems or difficulties is best placed to find their own solutions to those problems or difficulties. PACE supports the provision of counselling services from a range of different perspectives, including the psychodynamic, humanistic and existential schools. The role of the counsellor or therapeutic group facilitator is to help create an environment where the individual is able to consider issues or difficulties in their life, experience the reality of their feelings about these issues within a therapeutic relationship, and explore the options available for meeting their needs (Rogers 1961, Egan 1975).

PACE also recognises the experiences of lesbians and gay men in our society, and particularly the experience of oppression. The impact of heterosexism and homophobia on the emotional well-being of lesbians and gay men has only begun to be documented (Odets 1995, Young 1996, Davies & Neale 1996), and yet it is clear to us that these experiences have had a considerable impact on the way lesbians and gay men perceive themselves and their place in our society. As a result of heterosexism, many lesbians and gay men may not experience support and affirmation for their sexuality, and ultimately for themselves, until they become part of the wider lesbian and gay communities. Homophobia and heterosexism are also inherent within much mainstream counselling and psychotherapy theory and practice. PACE has a long-standing commitment to developing non-pathologising models of working with lesbians and gay men.

## Choice of Methodology for this Report

Our choice of methodology for this evaluative report was influenced by factors such as the relatively small number of interventions and participants, the amount of funding made available for evaluation purposes, and a desire for the research method to be congruent with the interventions themselves. To evaluate non-directive, person-centred workshops and groups with some form of objective measure designed by people not involved in the experience of the interventions would, in our view, have militated against gaining a full sense of the impact of the experience.

Many commentators have acknowledged the difficulties in researching experiential and therapeutic processes. Clarkson (in press) has commented that using quantitative research methods to evaluate therapeutic interventions is like trying to catch butterflies with bulldozers. It seems to us that the statements of many of the respondents resemble butterflies in their subtlety, and it is a testimony to qualitative, phenomenological research that we have been successful in catching them.

In his review of the use of outcome measures in HIV prevention Bonnell (1996) offers support for this view:

“Prout (1992) suggests that an ‘illuminative’ approach is required, whereby qualitative methodology is used to question the participants themselves as to how the intervention affected their knowledge, attitudes or behaviour. Given the profound methodological problems often encountered regarding attribution, it may sometimes be the case that an illuminative approach is actually a more reliable way of attributing an outcome to a process than is the use of quantitative measures.”

This evaluation has not attempted to externally evaluate change in behaviour. We find it hard to imagine a methodology that could do this without taking a prominent position within the intervention itself, and therefore fundamentally changing the nature of the intervention. Indeed, one of the uncomfortable tensions for the facilitators of the workshops and groups, was on the one hand being committed to a theoretical approach that does not prescribe how participants make use of the workshop or how participants should ‘change’ as a result of the workshop, and on the other hand, agreements with funders to achieve a range of specified outcomes.

Principally, we have chosen to ask participants about their perception of the impact of the workshops and groups, on a general level and with particular reference to the intended outcomes of the workshops programme.

## Part 2 Background and Research Context

There are a range of issues arising from the research context of HIV prevention which in our view demand attention. We have been hindered to some extent by the lack of psychological research in the field of HIV prevention, where the research agenda is dominated by the medical and sociological disciplines. We believe that psychological and therapeutic models have considerable insight to offer in relation to facilitating human behaviour change, and it is to the detriment of us all that they have been neglected by the HIV prevention field.

In addition, other factors have emerged from our experience of facilitating workshops with gay men, which have shaped our approach considerably and are worthy of acknowledgement.

These issues can be grouped into three areas: Information Provision, Psychological and Emotional Issues, and Community Issues.

### Information Provision

There is considerable research indicating that most gay men have a reasonable level of knowledge about how HIV is transmitted, and correspondingly how they can protect themselves and others through the use of safer sex (Williams 96, Thornton 93). There is also increasing evidence that while information provision contributed significantly to condom use in the early stages of the epidemic, recent information provision has had little impact on transmission rates (Williams 96, Thornton 1993)

In his review of research into HIV prevention with men who have sex with men, Aggleton (1995) states:

“There is no evidence that increasing knowledge levels (beyond the near saturation level already reached) is likely to have any beneficial effects on the behaviour of men who have sex with men. Efforts to assess such knowledge levels are best eschewed in favour of those examining beliefs about HIV and AIDS, and the relationship between these beliefs and sexual practice.”

In the context of working with young people, Anne Oakley (1996) has said:

“The most outstanding lesson that emerges from many years of studying young people and sexual risk-taking is that *there is no inevitable connection between knowledge and behaviour.*” (author’s emphasis)

She goes on to say that the challenge to health education is not primarily to give young people knowledge, but to help them “to *apply* it to their own situations.” (author’s emphasis). These principles are equally relevant to work with gay men.

Elsewhere Oakley et al (1994) have shown that sexual health is only one of a number of priority needs expressed by young people. Concerns such as money, housing and relationships with family often figure as more important. Oakley has concluded that those interventions that meaningfully address some of the other concerns of young people, as well as sexual health, are more likely to be effective than singular sexual health interventions.

## Psychological and Emotional Issues

### *Self-Esteem and Emotional Well-Being.*

Our approach starts from the premise that self-esteem plays a critical role in a person's life and is the foundation for their behaviour in the wider world. If a gay man does not value himself, it is unlikely that he will always act in his own best interests. Many lesbians and gay men may have unconsciously internalised oppressive concepts, believing, at an unconscious level at least, the negative assumptions perpetrated about them. One consequence of this is that a person may be more likely to practice behaviour that involves a higher risk of HIV transmission. In a study of drug users Mabel Camacho (1996) found that psychological problems such as anxiety or depression were related to risky drug use and risky sexual practice. The San Francisco Department of Public Health has reported a study by Van Gorder (1995) where 119 men were asked their views on the factors that interfere with their commitment to practise safer sex. The issues cited included: feelings of depression, numbness and denial about the epidemic, grief and loss, low self-esteem from the effects of homophobia and racism, ageism and a fear of growing older, the need for greater intimacy, the need to feel that others cared about them, the need for a greater sense of community, and a poorly defined sense of the future. Kelly (1991) has found that one factor in men 'lapsing' into unsafe sex is 'the wish to please a partner', which may also be an indicator of low self-esteem.

In their review of research on factors associated with unsafe sex, Thornton and Catalan (1993) state: "a wide range of intrapersonal variables have been implicated in high risk sexual behaviour. Among gay men these include internalised homophobia, lack of social skills, denial of risk, low self-esteem, depression, suicidality, lack of coping skills to deal with stress and lack of spiritual or religious resources."

The Department of Health has also highlighted the need to address issues of self-esteem in their recent HIV Health Promotion Strategy (1995), stating:

"Information about HIV will need to be embedded in messages which support effective sustained behavioural change, including developing self-esteem and negotiation skills."

### *Meaning and Value*

Self-esteem is also related to a person's sense of the ultimate value and meaning of their life. For many gay men, the existential questions of Who am I? and What is meaningful to me? are difficult to answer. The traditional heterosexual responses to these questions either do not fit or are not easily attainable, and the alternatives offered by existing gay culture are for many gay men equally unattainable or unfulfilling. There is a need for gay men to talk with others about meaning and value in their lives, particularly in the realm of sex and relationships, and on-going support to develop a true sense of value in themselves and the lives they lead.

### *Conflicting Beliefs, Feelings and Desires.*

Through our work with gay men, it has become clear that many gay men live with considerable levels of internal difference or conflict, between what they believe about sex and relationships, what they feel about sex and relationships and what they want in terms of sex and relationships. These internal differences may be acknowledged by the person, or equally may be denied or suppressed. When they are denied or suppressed the possibility of unconsidered and therefore risky behaviour is heightened. In his book *Games People Play*, Berne (1964) develops the Transactional Analysis model of the inner parent, adult and child, characterising beliefs and morals, logic and rationality, feelings and desires, respectively. The therapeutic intervention, according to Berne, is to support the individual to make explicit the dialogues and conflicts between the different levels of their inner self, and seek a way to manage or resolve these conflicts, rather than ignore or avoid them.

The psychotherapist Susie Orbach in her book *What's Really Going On Here?* (1994) has proposed the importance of developing emotional literacy as a way of managing the dialogue and conflicts between thoughts, feelings and desires.

It is valuable to offer time, space, structure and models (such as Berne's) for gay men to begin to explore their inner conflicts and find their own means of resolving or managing them. It must be acknowledged that this type of psychotherapeutic work cannot be achieved overnight, since it takes time and commitment to develop emotional literacy. Through this process gay men can gradually be encouraged to recognise their own power and ability to make choices within the context of internal conflict about sex.

### *Relationships and Assertion Skills.*

There is increasing evidence that significant HIV transmission between gay men occurs within existing relationships (Aggleton 95, Hart 93). There are many factors involved in this phenomenon, in particular the internal conflicts or differences discussed above, between sexual beliefs, feelings and wants. These are difficult enough to manage in one person, but when two people (both with their own set of internal conflicts) come together to engage in a relationship, the situation is fraught with possibilities.

In addition, Thornton and Catalan (1993) have found that “non-assertive attitudes in negotiating safer sex and poorer sexual communication skills” are predictors for lapses from safer practices and consistent high-risk taking among gay men.

It is beneficial for gay men to have the skills and ability to identify these conflicts and find a way to address them within the relationship openly and honestly, as opposed to an unacknowledged move into unconsidered and unprotected sex.

### ***The Impact of Sexual Abuse***

We are aware of sexual abuse being raised and discussed quite frequently during PACE workshops and groups. Martindale et al (1996) have reported that, of a large cohort of gay men between the ages of 18 - 30, one third had been sexually abused during childhood. Hickson et al (1994) have reported that approximately 25% of a large British sample of gay men have reported sexual abuse. The impact of sexual abuse is both complex and variable, however it seems plausible that if a person’s first experience of sexual activity is non-consensual and involves an abusive power dynamic, there may be significant implications in relation to choosing and asserting safer sex with sexual partners. There is a need for significant numbers of gay men to be able to explore their experiences of sexual abuse in a safe and constructive environment.

## **Community Issues**

### ***Community Culture***

Gold (1995) has suggested that some aspects of current western gay community culture, particularly disrespectful and judgmental ways of relating, may contribute to the incidence of unprotected sex. Many gay men, while deriving support and pleasure from the gay scene, also experience it as hostile and destructive at times. Not only does this potentially cause emotional harm, but it militates against honest and open dialogue between gay men.

Consequently, it is important to provide opportunities for gay men to explore how community culture might be developed that is respectful and inclusive, and fosters honest and supportive dialogue about sex and relationships.

### ***Living in the Epidemic***

Gay men are living in the centre of a major epidemic, with disproportionately high death and bereavement rates in the contemporary Western world. Whether they are directly affected or not, gay men cannot escape the community experience of devastation and loss. Odets (1995) has highlighted the implications of living within this context for North

American gay men; in particular the sense of inevitability of contracting the virus for some gay men, and the role of grief and denial as contributors to HIV transmission. Although our experience in the UK is different, there are strong parallels between the emotional and psychological experiences of gay men in the UK and North America.

## Part 3 Our Approach to HIV Prevention with Gay Men

The research and issues discussed above raise innumerable questions about how best to respond to HIV prevention, and suggest a range of possible options. We believe that experiential and therapeutic groups for gay men provide a unique opportunity to address the issues highlighted above, and effect psychological and behavioural change that will contribute to reducing the transmission of HIV.

### *Experiential and Therapeutic Groups*

In their review of experiential group research, Bednar and Kaul (1994) report a large body of research demonstrating positive outcomes of experiential and therapeutic group work. The shift in the field of education towards participative and experiential learning also highlights the effectiveness of these approaches. Bednar and Kaul identify a range of factors (originally postulated by Yalom (1985)), that when experienced in a therapeutic group, have been shown to contribute to positive change. These factors are:

- ***catharsis*** - the expression of feelings and emotions
- ***cohesion*** - a sense of belonging and safety
- ***self-understanding*** - insight into who I am and what makes me tick
- ***interpersonal learning*** - about interpersonal dynamics and behavioural skills
- ***instillation of hope*** - for the possibility of change or development
- ***identification*** - using others as role models
- ***universality*** - the realisation that other people share my concerns or difficulties

It should be noted that these factors are non-specific to the *content* of the group, but relate to the *process*, the underlying experience, of participating in the group.

Experiential and therapeutic groups for gay men can:

- encourage participants to talk openly and fully about their feelings with other gay men
- foster a sense of belonging and safety as part of a group of gay men
- promote insight into personal identity and what is important to each person as a gay man
- provide 'live' opportunities to learn about relating to other gay men and develop new skills such as assertion and negotiation within a gay context



- provide opportunities to identify with a variety of other gay men
- provide opportunities to feel understood when talking about difficult or emotive subjects

Thornton and Catalan (1993) also acknowledge the role of psychological interventions in HIV prevention:

“...the evidence indicates that psychological treatment approaches are effective in enabling individuals to make and maintain sexual behaviour change.”

## Conclusion

We acknowledge that this approach does not offer a simple intervention that will dramatically reduce the incidence of HIV transmission overnight. We do not believe that such an intervention exists. Our approach is an holistic intervention that responds to the complex and multi-layered phenomenon of sexual relationships between men in the 1990s. We believe that by a combination of enhancing gay men’s emotional well-being, providing opportunities for gay men to explore their personal difficulties or conflicts in relation to sex and relationships, and developing their interpersonal skills, an important contribution to HIV prevention is made. Not only are men more able to promote their own health in sexual situations, but they also become more skilled in providing support and safety to other gay men.

## Part 4 Intended Outcomes of the Workshops and Groups

From the background and research context discussed in part two, and in consultation with funders, the following range of intended outcomes for the workshops was developed. As a result of the workshops/groups, participants would:

- have a more accurate understanding of safer sex
- have gained ideas and motivation for better and safer sex
- feel more comfortable and confident about talking about sex with others
- have an improved understanding of themselves and their sexuality
- have identified changes they wish to make in sexual relationships
- have identified strategies for achieving their sexual goals
- feel more assertive in relationships in general and in sexual relationships in particular
- feel more confident negotiating generally and negotiating about sex in particular
- feel closer to having the kinds of relationships they want
- feel more confident to deal with sexual situations they haven't handled well in the past
- have an enhanced sense of emotional well-being
- talk about and recommend the workshops to other gay men

These intended outcomes were therefore the basis for the design and planning of the workshops and groups and the focus of quality assurance and evaluation.

### The Workshops

Between the 8 November 1995 and 4 February 1996 five workshops and one six-week group were provided to gay men in the London region. The workshops are listed in Table 1. All events had a general focus of sex and/or relationships, and shared the common factors of a group experience for gay men, with agreements and structure to facilitate experiential learning. The average contact time for the workshops was just over 10 hours.

The workshops were advertised in the gay press. Participants were asked to telephone PACE to book a place on a workshop. The longer weekend workshops and group proved most popular with in some cases twice as many applicants as places available. In total 64 gay or bisexual men participated in the workshops over the three month period.

Workshops and groups varied in the type of facilitation and structure provided, depending on the specific theme and format of the group. The facilitators for the workshops were experienced counsellors and therapeutic groupworkers who used a range of theory and skills predominantly from humanistic and existential counselling, group therapy and adult learning approaches. Exercises and activities were designed to help participants explore ideas and feelings, and make sense of them within their life. These included talking to others in pairs or small groups, talking together in the large group, using art or movement activities and guided imagery.

**Table 1: Workshops and Groups.** The number of contact hours for the event is shown in the column marked Contact Hours. The number of participants for each workshop or group is shown the column marked Participants, and the number of respondents to the questionnaire is shown in the column marked Respondents.

Workshop Details	Contact Hours	Participants	Respondents
<b>Let's Talk About Sex</b> A six week group for young gay men (under 30) to talk about sex, relationships and the rest..... Wednesdays 8 Nov to 13 Dec 6.30 - 8.30 pm Neal's Yard, Covent Garden	12	16	5
<b>Sex Positive</b> A supportive, structured two-evening group for gay men living with HIV to talk about sex and relationships. Thurs 9th & 23rd Nov 6.30 - 9.30 pm Shepherdess Walk, Hackney	6	3	1
<b>It Takes Two to Tangle</b> A (two evenings & one day) workshop to explore gay men's experiences of relationships and a chance to develop negotiation & relationship skills. Individuals and couples welcome. Thurs 16 & 30 Nov (6.30 - 9.30 pm) The Landmark, Lambeth and Sat 18 Nov (10.30 - 4.30 pm) South London Venue	12	15	10
<b>Talking Dirty</b> A workshop to explore the fun and the difficulties of talking about sex, and help you develop skills to talk openly about sex with friends and lovers. Sat 2 Dec 10.30 - 4.30 pm PACE, Islington.	6	7	6
<b>Getting What You Want for Christmas!</b> A (one day & one evening) workshop for gay men to develop assertion skills, to get what you want in relationships, in bed and for Christmas! Sat 9 Dec (10.30 - 4.30 pm) and Thurs 14 Dec (6.30 - 9.30 pm) River House, Hammersmith	9	14	10
<b>Resolutions!</b> Do you want to make 1996 different? Resolutions is a residential weekend workshop for gay men to take stock of sex and relationships in '95, and turn New Year's resolutions for '96 into reality! Starts Fri 2 Feb 7.00 pm - Ends Sun 4 Feb 4.00 pm, Little Grove, Buckinghamshire	17	15	8

At the first meeting of each workshop participants made agreements about how the group intended work together in a way that was constructive, supportive and rewarding. Participants had the choice not to participate in something if it did not feel right for them. At the beginning of the workshop or group participants were invited to identify their own needs and expectations within the general topic or theme of the workshop. A summary of what participants hoped to gain from the workshops is provided in Table 2.

Towards the end of each workshop there was an opportunity for participants to review what they had felt and learned during the workshop, and time to think about what differences this may make to their life.

**Table 2: A Summary of What Participants Hoped to Gain from the Workshops**

<ul style="list-style-type: none"> <li>• Self-awareness</li> <li>• Confronting negative attitudes</li> <li>• Open-mindedness</li> <li>• Help to understand peoples motivations</li> <li>• Be healthy</li> <li>• Increase confidence</li> <li>• Sort my head out</li> <li>• Learn from others</li> <li>• Discuss relationships</li> <li>• Clearer attitude towards sex</li> <li>• To face facts about self</li> <li>• Be more assertive about self &amp; sexuality</li> <li>• Be with other gay men</li> <li>• Discuss monogamy and cruising</li> <li>• Discuss serious subjects outside pubs/clubs</li> <li>• Telephone numbers</li> <li>• Psychological barriers to be broken down</li> <li>• Ability to <i>really</i> enjoy sex</li> </ul>	<ul style="list-style-type: none"> <li>• Understand myself and why I do things</li> <li>• Learn to help others</li> <li>• Skills involved in initiating healthy relationships</li> <li>• Unlearning patterns</li> <li>• Learn new ways of relating</li> <li>• Dynamics of open relationships (do they work?)</li> <li>• Discussion of co-dependent relationships</li> <li>• Ability to deal effectively with specific situations</li> <li>• How to keep the honeymoon period</li> <li>• Learn to integrate sexual relationships with longer friendships</li> <li>• Separate out emotional needs from practicalities</li> <li>• To relate to others after bereavement</li> <li>• Greater honesty within all relationships</li> <li>• Is it possible for gay relationships - or just give up?</li> <li>• Understand the feelings of being single or a couple - which is appropriate at present?</li> <li>• Learn about the development of relationships</li> </ul>
--	--

### Attrition Rates

The attrition (or drop out) rate for the workshops was quite low, varying between 0 and 3 men for each workshop. This indicates that participants found the experiences valuable, given that they attended workshops voluntarily in their own time.

### Quality Assurance.

At the end of each event participants completed a quality assurance form, asking them how personally useful the workshop had been, to what extent the aim of the workshop was met and about their future needs. Participants rated how personally useful the workshop or group was, on the following scale.

1	2	3	4	5
not at all useful	a little useful	partly useful	mostly useful	very useful

**The average rating for the workshops was 4.5.**

Participants also rated the success of the workshop or group in achieving its stated objective on the following scale.

1	2	3	4	5
not at all met	met a little	partly met	mostly met	fully met

**The average rating for meeting the objective of workshops was 4.2.**

Both figures indicate a high level of participant satisfaction and workshop effectiveness.

The quality assurance form also asked participants what was most effective about the group or workshop. Participants stated:

- Having time to explore feelings in a safe environment
- Being offered possibilities not doctrines
- Meeting new people and feeling a bit less isolated for a while
- The techniques were very effective in helping me to understand how I felt and behaved - this was new to me
- Listening and discussing issues with people in the same situation
- I found the workshop very practical
- Chance to talk to strangers about a topic which is not generally covered with friends
- Talking about sex
- The chance to meet other gay men
- Useful to consider issues for people who are having problems around changing their risk behaviour - never considered that before
- By analysing how change affects people, different approaches for help/support can be devised
- Opportunity to talk through emotionally complex issues in a supportive environment

When asked about their dissatisfactions, participants stated:

- I felt that there could have been more on negotiation skills
- Too short
- Some of the issues addressed by others felt so enormous and needed more time and effort, and made my issues seem inconsequential by comparison
- It would have been helpful to consider the differences between minority groups

One of the lessons for us from this series of workshops was to be realistic with participants about the limitations of workshops or groups. By and large we were able to respond to the majority of issues and concerns that participants bring. However, it is clear that there are few quick fixes for emotional and psychological issues in relation to sex, sexuality, relationships and HIV transmission. It is also clear to us that longer workshops and groups are the preferred format for working effectively with these issues.

***Other Findings from the Workshops***

One of the most resounding features of the workshop programme was the frequent feedback from participants that they had *never* had an opportunity to talk with other gay men in this way before - and that gay cultural and social norms often militate against expressing thoughts and feelings about sex and relationships honestly. This lends weight

to the need for opportunities for gay men to consider how we might develop a community culture that is conducive to peer support on issues such as sex and relationships.

### ***An Enormous Task: To Talk About Sex***

From the beginning we chose to focus workshops and groups on the themes of sex and relationships, partly in response to Oakley's suggestion that a more holistic approach to sexual health promotion is likely to be more effective. We have found that groups consistently choose to begin talking about the more general relationship issues from their chosen agenda, and then proceed towards the more intimate and sexual. Throughout this process the group will often refer to the difficulty they experience in discussing sex with others.

It could be said that this is because the group are essentially strangers, and it is not surprising that sexual discussion would be inhibiting. There must be some truth in this proposition, however it is remarkable how much personal history *is* shared between participants about their lives, histories and personal choices (with the same relative strangers!). It seems to us that sexual issues are among the *most* personal of all the possible intimate things to talk about with others, whether they be workshop participants, friends or lovers. Difficulties in talking about sex encountered within the workshops, directly reflect difficulties encountered in sexual relationships, and therefore provide opportunities for considerable insight and personal learning.

These findings illustrate the enormity of the task to enable people to be able to negotiate sexual activity with their lover, and may also indicate why so few HIV prevention initiatives have attempted to achieve this outcome.

## Part 5 The Evaluation

### Methodology

A more extensive *summative evaluation* (Bonnell 1996) of the impact of the workshops and groups was designed by using a questionnaire (Appendix I) asking participants to self-identify what has changed for them, if anything, as a result of the workshop. The questionnaire asked 19 questions covering: the workshops; the impact of the workshops; personal information about relationships and sex in the last 12 months; and demographic information.

The questionnaire was sent to 64 individuals who participated in workshops. 32 questionnaires were returned, providing a 50% response rate. This level of response to a postal survey in itself suggests a **high** degree of value in the workshop programme from respondents. 28 (87.5%) **respondents** had attended one workshop, 4 respondents (12.5%) attended more than one workshop.

The questionnaire was sent to participants during the week of the **19th March** 1996. The maximum time period between attending the workshop and completing the questionnaire was 4.5 months, with a minimum time period of 6 weeks for the last workshop. The median time period was 3.5 months.

### Demographics: Information About the Respondents.

**Statistical Relevance.** Although we have stated below that certain quantities and percentages suggest or imply evidence in favour of particular theories or propositions, we would like to emphasise that the small size of our sample means that these findings are rarely significant at a statistical level, and should therefore be read and used with careful consideration.

**Age.** The ages of respondents ranged from between 20 to 70 with an average age of between 31 - 35, reflecting an age distribution consistent with a wide range of other study samples of UK gay men (e.g. Hickson et al 1996).

**Ethnicity.** The ethnicity of those participating in the workshops and those responding to the questionnaire is detailed below in Table 3.

Table 3 - *Ethnicity of Participants and Questionnaire Respondents*

Ethnicity	Participated in workshops	Responded to questionnaire
Asian	4 (6%)	1 (3%)
Black-African	1 (1.5%)	
Black-Caribbean	2 (3%)	
Chinese	1 (1.5%)	
Irish	4 (6%)	2 (6%)
White - Other	11 (17%)	4 (12%)
White - UK	40 (62%)	25 (75%)

8 (12%) of the 64 participants were from black or other ethnic minorities. This percentage is consistent with census data for the London region.

**Relationship Status.** 20 respondents (62%) had been in a relationship with a regular sexual partner in the previous 12 months. Given the size of our sample this figure is similar to that found by other studies. Hickson et al (1996) report a slightly higher finding (87%) from their survey at the Lesbian and Gay Pride festival.

**Unprotected Sex.** 10 respondents (31%) had been involved in unprotected anal intercourse in the last 12 months - 6 of these with a regular partner and 3 with a casual partner, and one with both a regular and a casual partner. This level of unprotected sex is consistent with that found in a number of other studies (e.g. Hickson et al 1996)

**HIV Status.** 16 respondents (50%) did not know their HIV status. 5 (16%) said they were HIV antibody positive and 11 (34%) said they were HIV antibody negative. This is consistent with the findings of others studies of the London gay male population.

### ***A Representative Sample?***

We were struck from the responses to the questionnaire at how similar participants were to other study samples of gay men. Variables such as age distribution, ethnicity, incidence of unprotected sex, incidence of HIV, and relationship status of our sample were remarkably consistent with data from other samples of gay men. Although the sample is too small to draw hard conclusions from this apparent representativeness, it does confirm that therapeutic workshops are accessible and effective for a wide range of gay men, and that the men who were drawn to the workshops had as high a level of risk of HIV transmission as other gay-identified men.



### *The Experiences of Black Men*

Table 3 shows that 12% of workshop participants were black or from an ethnic minority. This percentage is consistent with the ethnic distribution of London. However, we received very few responses to the questionnaire from black and ethnic minority men. The sample is too small to attribute significant meaning to this, however the workshops themselves raise a number of issues about the participation of black men. The facilitators for all workshops were white men, and in most cases there were only one or two black participants at each workshop. We believe it would take considerable internal resources and trust for black men to feel safe to express their feelings about sex and relationships in a group that is predominantly white. We believe that some black participants felt able to participate fully, while others may have found the group inhibiting.

Participants were invited to identify issues and topics for future workshops on the quality assurance form. One of the most requested topics for future workshops was inter-racial relationships and PACE has since developed this area of work.

## Part 6 The Effectiveness of the Workshops

The effectiveness of the workshops can be appraised by answering two questions.

- Did the participants report, over time, that their expectations were met and that the experience was personally useful to them?
- Did the participants report change, sustained over time, consistent with the intended outcomes of the workshop programme?

The results below demonstrate that the answer to both these questions is 'yes'.

17 (53%) respondents stated that their expectations had been fully met by the workshop or group, a further 12 (38%) said their expectations had been partly met, with 3 (10%) stating that the workshop had not met their expectations. It is inevitable that some people will not find experiential group work helpful to them, and in some cases referrals to other types of interventions were made. Over 90% of respondents reported that their expectations had been fully or partly met, suggesting a high degree of satisfaction with the workshops overall.

As stated above, at the end of each workshop participants were asked to rate how personally useful the experience had been to them. Respondents were asked the same question on the follow-up questionnaire. The average rating at the end of the workshops was 4.5. The average rating from questionnaire respondents, 3.5 months after the workshops, was 4.0.

Thus, the respondents rating of personal usefulness was sustained over the 3.5 month follow-up period, suggesting evidence of integration of learning and development on a longer-term basis.

Respondents were also asked whether they had discussed or recommended the workshops to other gay men. 81% of respondents had talked to another person about the workshop and 66% had recommended the workshops to other gay men. Again, indicating a high degree of satisfaction.

### Participants perceptions of the impact of the workshops

In evaluating the impact of the workshops in relation to the intended outcomes of the programme, we used a mixture of open ended questions and a checklist of possible outcomes. The results of the open-ended questions demonstrate that many of the intended outcomes have been achieved.

In particular participants frequently report:

- enhanced self-confidence
- greater clarity about sex and relationships
- increased assertiveness and ability to negotiate in relationships
- increased determination and ability to make changes in relationships
- greater self-acceptance
- resolution of historical sexual and relationship problems or difficulties.

The full set of responses is given below.

“Overall, what difference if any has the workshop made to you?”

- Better understanding of myself re. sex and how I behave in certain situations.
- It was a staging post in being comfortable with other gay men.
- Helped me change my behaviour be more direct and open.
- I’m less “afraid” of sex, and don’t feel bad or guilty in asking for what I want in relation to sex.
- I have sorted out a lot of issues surrounding past relationships and my reactions to current ones.
- Gave support to our relationship on sexual difficulties.
- It gave me the confidence to ask for what I wanted in bed without being ashamed.
- Made me aware of my gay identity and also made me more comfortable in being with other gays in a residential setting.
- It has helped me start moving forward.
- It gave me the confidence to make significant life-changes. It marked a turning point for me.
- More relaxed re. relationships and demands put on partners.
- Made me more confident in myself and reinforced my sense of gayness
- It gave me time out to consider the future.
- In part because I found the workshop difficult and frustrating it’s actually had a beneficial effect - I’ve decided to do something rather than just talk about it.
- Adopting a “clean, clear and concise” approach to negotiating in many areas.
- Unfortunately, understanding assertiveness has backfired. Now that I’m aware of other people’s position I’ve gone on the defensive.
- It has made me more aware of my rights as an individual, in particular to say no, in work/everyday and in sexual situations.
- Made me 10 times more assertive and confident around gay issues and my right to exist. Recently confronted homophobic hassles whereas previously I would not have.
- Stopped me worrying about key sexual questions too afraid to ask friends.
- Dealing better with ageing and loss of sex-drive and motivation.
- I felt very positive at the time, but no other major benefits since.
- It has made me look at myself and consider my actions more - also made me realise that in relationships I have to think of two of us and not just other people around.
- It has made me assert my needs within a relationship.
- Nothing tangible, but helped crystallise certain processes already underway.
- Made me think more about my behaviour and way of operating in relationships - particularly the current ones.
- The workshop was probably an important part of the whole jigsaw of changing relationships in my life.
- It has given me more clarity and sense of priority.
- None - 2 Respondents

“What difference has the workshop made to your relationships with other people?”

- My lover who attended the group with me found, as I did, it began to make it easier to relate to each other sexually.
- I am calmer, I am looking at relationships more objectively.
- It has just made me aware of how hard and easy it can be to ‘get on’ with people.
- I’m easier in groups, I have more confidence in asserting my needs.
- Made me be more honest with what I feel and that sometimes it’s good to feel differently from others and express that.
- I feel calmer and more open.
- I’ve become slightly more self-accepting and therefore more open to others and ready to listen.
- Made me slightly more confident and assertive.
- It’s helped me to start to shift the balance of my life toward more social time and a bit less work!
- Indirectly its contributed to greatly improved relationships.
- More focused, better understood.
- Respecting other gay men, realising that they have an inner struggle. I use the word ‘Queen’ much less, more informed about the virus and pharmacology.
- I am less intolerant of other people’s motivations.
- In some ways easier, more confident, but perhaps more self-reliant as well.
- Have become withdrawn and reclusive
- Made me scrutinise the other person more.
- I feel more in control of my part of the relationship and more aware of my needs.
- Can’t describe - too difficult to pinpoint.
- In particular it formed a part of my coming to terms with life as a single man (after many years in a relationship).
- I have become a bit less secretive, sensitive and defensive especially about sex.
- None - 6 (19%) Respondents

“What impact has the workshop had on your sexual activity?”

- None yet but it has made me more open to the possibility of a one-to-one relationship.
- Less inhibited at sex - talking about it and doing it.
- Easier for a while. Made me more aware of my sexual needs.
- It has helped to clarify possible reasons for particular sexual activity - cruising.
- Slightly increased confidence.
- As a result I do things I want to do and, not things I don’t want to e.g. unsafe sex, without shame, fear etc.
- Boosted my confidence!
- I’ve become almost celibate since the workshop while energies are channelled into other directions.
- I feel I can justify my stance without being offensive.
- It has made me more aware of my conduct and sexual practice, but not necessarily stop me from engaging in unsafe practices.
- Less expectations.
- Ground to a complete halt. Fear has overtaken.
- In itself, not very much, other experiences and influences have probably been more important.
- I have differentiated between relationships and physical sex which with my current partner is good for me.
- I have had very little sexual activity since the workshop, but is that a coincidence?
- None - 8 (25%) Respondents

Two respondents stated that the workshop had not had any impact on their lives.

### The Remaining Outcomes

The remaining outcomes were evaluated using a checklist of possible changes that respondents may have identified as result of the workshops or groups. We also included a range of variables relating to general emotional well-being, to evaluate the impact of the workshops on this aspect of participants lives. These are reproduced below. Respondents were asked to tick a one of five boxes (as in the Example 1 below) indicating how much change, if any, had taken place, and to leave the boxes blank if they were unsure or did not know whether the workshop had affected them in the way described.

**Example 1**

a lot    a little    no    a little    a lot  
 more    more    change    less    less  
                    confident in bars

The checklist of possible changes was mixed between variables where the desired outcome was “more” (for instance: comfortable talking about sex with your lover) and others where it was “less” (for instance: likely to have unsafe sex).

<i>Variables where the desired outcome was “more”</i>	
<ul style="list-style-type: none"> <li>• confident in bars</li> <li>• confident in bed</li> <li>• able to negotiate generally</li> <li>• able to negotiate about sex</li> <li>• comfortable talking about sex with friend</li> <li>• comfortable talking about sex with your lover</li> <li>• motivated to keep sex safe</li> <li>• comfortable being gay</li> <li>• self-knowledgeable</li> <li>• sociable</li> </ul>	<ul style="list-style-type: none"> <li>• secure</li> <li>• self-assured</li> <li>• assertive</li> <li>• optimistic</li> <li>• happy</li> <li>• clarity about personal goals in relationships</li> <li>• clarity about personal sexual goals</li> <li>• confident to handle difficult sexual situations</li> <li>• confident in having satisfying relationships</li> <li>• knowledgeable about HIV and safer sex</li> </ul>
<i>Variables where the desired outcome was “less”</i>	
<ul style="list-style-type: none"> <li>• shy</li> <li>• anxious</li> <li>• isolated</li> </ul>	<ul style="list-style-type: none"> <li>• pessimistic</li> <li>• depressed</li> <li>• likely to have unsafe sex</li> </ul>

The above list is referred to throughout the remainder of the report as the ‘checklist variables’.

**Positive Impact**

A positive impact is reflected by changes reported by respondents which are consistent with the intended outcomes of the workshops. All but two respondents reported some positive change on the checklist variables above. The vast majority of respondents reported positive change on more than 5 variables. 20 (62.5%) respondents reported positive change on more than 10 variables. Table 4 provides a summary of the responses to the checklist variables.

**Table 4 - Summary of Responses to the Checklist Variables****More than half the respondents reported being more:**

- self-knowledgeable
- able to negotiate generally
- comfortable being gay
- self-assured
- clear about their goals in relationships

**More than a third of the respondents reported being more:**

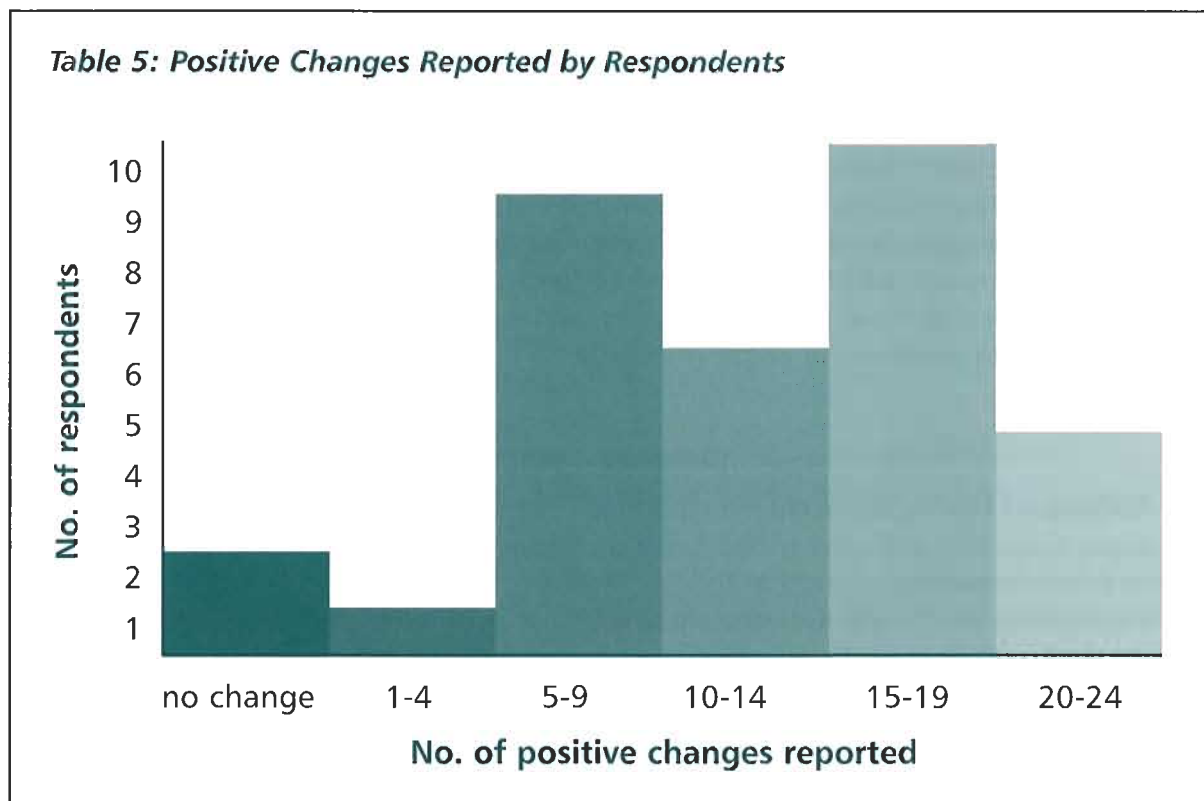
- clear about personal sexual goals
- able to negotiate about sex
- comfortable talking about sex with friends
- comfortable talking about sex with their lover
- motivated to keep sex safe
- confident in bed
- optimistic
- secure
- assertive
- confident to handle difficult sexual situations
- confident in having satisfying relationships

**More than a third of respondents reported being less:**

- shy
- anxious
- isolated.

Just under a third of respondents (31%) reported being less likely to have unsafe sex.

Table 5 provides details of the number of positive changes reported by the sample.



Appendix II provides a graphical summary of respondents answers to the checklist variables.

### ***Negative Impact***

Negative change refers to changes reported by respondents which contradict the intended outcomes of the workshops. Five respondents reported negative change on one variable on the checklist, a further three reported two, four and 20 negative changes respectively. All but two of these respondents reported more positive change than negative change overall. The respondent who reported 20 negative changes seemed to value the workshop experience, stating that he had recommended the workshop to other gay men and had talked about it with others "in a positive way".

In some instances negative change is to be expected. For example someone who has historically lived by very simple, moral rules about sexual activity may find themselves more confused at the end of a workshop if other participants have questioned the basis of these rules. This state of confusion may be a necessary step to them exploring their sexual belief system, which may also be at the bottom of their reason for coming on the workshop in the first place. This is an illustration of what Rogers (1961) has called the 'paradox of change', which is the experience of regression before progression, or stasis before movement. Alternatively, it is conceivable that someone who knows he and his

boyfriend are HIV negative may use the workshop to clarify his ideas about personal risk management strategies, and may indeed leave the workshop with the intention of having more 'unsafe' (sic) sex.

In other cases, people may be registering their discontent with the workshop they experienced, or indeed they may have identified negative change in themselves as a result of the workshop. We believe it is not possible to obtain a 100% success rate with any intervention, and particularly an intervention that has a non-directive ethos such as ours. Our concern is to maximise the safety and minimise the destructive possibilities of workshops and groups, which we believe has been achieved to a very high degree. This is an on-going clinical concern for groupworkers, and we are aware of the power of this approach for both positive and negative change.

### ***The Nature of Change***

While a few respondents claim that their experience of the workshop has changed their lives enormously, most responses declare small but fundamental changes consistent with the intended outcomes of the interventions. These changes were reported after a median follow-up time of 3.5 months. Lasting changes at the psychological, emotional and behavioural levels are, in our view, more likely to be incremental and cumulative, rather than earth-shattering.

### ***Relationship Skills***

We found that respondents who had been in a relationship in the 12 months preceding the workshop reported significantly more change on the checklist variables than did those who had not been in a relationship ( $r=0.168$ ,  $p=<0.05$ ). This does not indicate that the workshops are of no use to single men, but it does suggest that men in relationships gain more from the experience, possibly because they have more of an opportunity to apply their learning within their lives.

### ***Sex and Relationships***

Our observation (discussed above) that groups consistently choose to begin talking about the more general relationship issues and then proceed towards the more intimate is reflected within the responses to the questionnaire. We received 27 written responses to the general question *"Overall, what difference if any has the workshop made to you?"* which was greater than the 20 responses to the more specific question *"What difference has the workshop made to your relationships with other people?"*, which in turn was greater than the 15 responses to the last and most personal question *"What impact has the workshop had on your sexual activity?"*



This concept is also reflected in the responses to the checklist variables. 20 men stated that the workshop had improved their ability to negotiate generally, this is reduced to 14 men who state they are better at negotiating about sex. And fewer men (12) state that they feel more able to talk about sex with their lover.

This indicates the need for on-going provision of opportunities for men to explore their feelings about talking about sex and relationships, since the task is not at all simple. Again, this supports the suggestion that HIV prevention initiatives should engage in a model of on-going cumulative change and development, rather than pursuing a dramatic quick-fix.

### ***Reliability of Responses***

There is a significant correlation ( $r=0.309$ ,  $p=<0.1$ ) between the personal usefulness rating and the amount of change reported on the checklist variables. The more useful the respondent found the workshop, the more change is attributed to the workshop. Not only does this imply a degree of consistency in responses, but it provides evidence that perception of usefulness actually translates into perceived changes in respondents lives. This correlation is important since it suggests that while participants may enjoy the workshops, there is also evidence of integration of learning and development into their lives on a longer-term basis.

## Part 7 Conclusions & Recommendations

### Conclusions

This evaluation demonstrates the effectiveness of a therapeutic group work approach to HIV prevention with gay men. Workshop participants report the following changes, sustained over time.

- enhanced self-confidence
- greater clarity about sex and relationships
- increased assertiveness and ability to negotiate in relationships
- increased motivation and ability to make changes in relationships
- greater self-acceptance
- resolution of historical problems or difficulties with sex and relationships

Our findings highlight the enormity of the task to enable gay men to negotiate sexual activity with a partner. This supports the need for on-going provision of opportunities for men to explore the wide range of issues involved in sex and relationships.

Psychological and therapeutic models have considerable insight to offer in relation to human behaviour change. Our findings demonstrate that, on the whole, these models have been seriously neglected by the HIV prevention field.

### Recommendations

We recommend that:

1. HIV prevention initiatives engage in a model of on-going cumulative change and development, at the levels of the individual, their sexual relationships, and the gay male community as a whole, rather than pursuing a dramatic quick-fix.
2. The establishment of a larger, long-term experiential group work programme for gay men, offering a variety of workshops and counselling groups on the themes of sex and relationships.
3. That such a programme be supported and evaluated by an integrated, rigorous evaluation system.
4. That black organisations be funded to provide groups for black men, that black facilitators be employed where possible and that PACE continue to pursue joint working with black HIV prevention organisations to address the issues and dynamics of inter-racial relationships.

## References

- Aggleton P. (1995) Men Who Have Sex With Men. Social and Behavioural Research: implications for needs assessment. Health Education Authority, 1995.
- Berne E. (1964) Games People Play, Penguin.
- Bonnell C. (1995) Outcomes in HIV Prevention. The HIV Project.
- Clarkson P. (In press) An Integration of Theory, Research and Supervised Practise. Counselling Psychology, Routledge, expected 1997.
- Department of Health (1995) HIV & AIDS Health Promotion; An Evolving Strategy.
- Davies D. (1996) & Neale C. (edit) *Pink Therapy*. Open University Press.
- Egan G. (1975) *The Skilled Helper*. Brooks/Cole.
- Gold R. (1995) Why we need to rethink education for gay men. AIDS CARE Vol 7, Supplement 1, 1995.
- Hart G.J. (1993) Risk behaviour, anti-HIV and anti-Hepatitis B... AIDS, Vol 7, No.6, 1993.
- Hickson F.C.I. et al (1996) No aggregate change in homosexual HIV risk behaviour among gay men... AIDS Vol 10, 1996.
- Hickson F.C.I. et al (1994) Gay men as victims of non-consensual sex. Archives of Sexual Behaviour 23 (3) p 281 - 294.
- Kelly J.A. et al (1991) Situational factors associated with AIDS risk behaviour.... American Journal of Public Health Vol 81, No.10, 1991.
- Mabel Camacho L. (1996) Psychological dysfunction and HIV/AIDS risk behaviour. Journal of AIDS and Human Retrovirology, Vol 11, 1996.
- Martindale S.L. (1996) et al Risk behaviour and HIV seroprevalence among a cohort of young men... Paper presented at 11th International Conference on AIDS, Vancouver 1996.
- Oakley A. et al (1996) Review of effectiveness of sexual health promotion interventions for young people. EPI Centre, London University Institute of Education.
- Oakley A. et al (1994) *Young People, Health and Family Life*. Open University Press.
- Odets W. (1995) *In the Shadow of the Epidemic*. Cassell.
- Orbach S. *What's Really Going On Here?* Virago, London. 1994.
- Prout A. (1992) Illumination, Collaboration, Facilitation, Negotiation - evaluating the MESMAC Project. In Aggleton P. et al *Does It Work? Perspectives on the evaluation of HIV/AIDS health promotion*. London: Health education Authority
- Rogers C. (1961) *On Becoming a Person*. Constable.
- Thornton S. (1993) Preventing the sexual spread of HIV infection - What have we learned? International Journal of STD & AIDS Vol 4, 1993.
- Catalan J.
- Van Gorder D. (1995) Building Community and Culture... AIDS and Public Policy Journal Vol 10, No.2, 1995.
- Williams D.I. et al (1996) A case study of seroconversion in gay men... Genitourinary Medicine Vol 72, 1996.
- Yalom I. (1985) *Theory and Practice of Group Psychotherapy*. Basic Books. USA.
- Young V. (1996) *The Equality Complex*. Cassell.

## Appendix I: *The Questionnaire*

### Pace Workshops for Gay Men Feedback Questionnaire.

This questionnaire asks you questions about yourself and your experience of PACE Workshops for Gay Men. The questionnaire is anonymous, and we will keep all information you provide confidential.

Please try to be as honest as possible when answering the questions, tell us what you did like as well as what you did not like. Where we ask for more details please try to give as full an answer as possible. If you attended more than one workshop and have different answers to some questions, please put both answers down.

Please complete the questionnaire as soon as possible and return it to PACE in the envelop provided by **Tues 2nd April 1996.**

### The Workshops

1. Which of the workshops below did you attend?

- |  |  |
|--|--|
| <input type="checkbox"/> <i>KY Babies</i>                      | (Oct 95 - iCare - Listening Skills and Change)           |
| <input type="checkbox"/> <i>Basic Delights</i>                 | (2 Nov 95 - Red Admiral Project - Condoms and Safer Sex) |
| <input type="checkbox"/> <i>A Night of Fireworks!</i>          | (3 Nov 95 - Route 15 - Fireworks)                        |
| <input type="checkbox"/> <i>Let's Talk About Sex</i>           | (Nov/Dec 95 - Covent Garden - Young Gay Men's Group)     |
| <input type="checkbox"/> <i>Sex Positive</i>                   | (Nov 95 - Shepherdess Walk - For HIV Positive Men)       |
| <input type="checkbox"/> <i>It Takes Two to Tangle</i>         | (Nov 95 - The Landmark - Relationships)                  |
| <input type="checkbox"/> <i>Talking Dirty</i>                  | (Dec 95 - PACE - Talking About Sex)                      |
| <input type="checkbox"/> <i>Getting What You Want for Xmas</i> | (Dec 95 - River House - Assertion Skills)                |
| <input type="checkbox"/> <i>Resolutions!</i>                   | (Feb 96 - Little Grove - Making Changes)                 |

2. Did you attend all the meetings of the workshop or group?

- Yes       No      If no, what were your reasons for not attending?

---



---

3. What were you hoping to get from the workshop?

---



---

4. Were your expectations met by the workshop?

- Yes       Partly       No       Don't Know

Please give details \_\_\_\_\_

alot more	alittle more	no change	alittle less	alot less	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	shy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	sociable
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	anxious
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	self-knowledgeable
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	secure
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	isolated
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	self-assured
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	assertive
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	optimistic
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	pessimistic
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	happy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	depressed
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	clarity about personal goals in relationships
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	clarity about personal sexual goals
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	confident to handle difficult sexual situations
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	confident in having satisfying relationships
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	likely to have unsafe sex
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	knowledgeable about HIV and safer sex

11. Have you talked with other people about the workshop?

Yes       No      If yes, what did you talk about? \_\_\_\_\_

12. Have you recommended the workshops to other gay men?

Yes       No

**Relationships and Sex**

13. In the last 12 months have you had a regular sexual partner?

Yes       No      If No go to Question 15

14. In the last 12 months have you fucked without a condom or been fucked without a condom, with a **regular partner**?

Yes       No

15. In the last 12 months have you fucked without a condom or been fucked without a condom, with a **casual partner**?

Yes       No

**About You**

16. How old are you? \_\_\_\_\_

17. How would you describe your ethnic origin?

Ethnicity	Asian	Black-Other	White-UK
	Black-African	Chinese	White-Other
	Black-Caribbean	Irish	Any Other

18. In which London Boroughs do you:

In which London Boroughs do you...	Live	
	Work	
	Study	

19. Please tick the box that applies to you.

- I do **not** know my HIV status
- I am **HIV** positive
- I am HIV negative

***Thank you for completing the questionnaire.  
Please return it in the envelop provided to PACE, 34 Hartham  
Road, London N7 9JL, by Tues 2nd April 1996.***

**Appendix II: Participants perceptions of the impact of workshops.**

Key - each box represents 2 responses (6% of sample).

a lot more	a little more	no change	a little less	a lot less	no answer

*Variables where the desired outcome is 'a lot more' or 'a little more'.*

Successful outcomes are indicated by significantly more shading on the left hand side of the table, compared to right hand side.

a lot more	a little more	no change	a little less	a lot less	no answer	
						confident in bars
						<b>confident in bed</b>
						able to negotiate <b>generally</b>
						able to negotiate <b>about sex</b>
						comfortable talking about sex with friends
						<b>comfortable talking about sex with your lover</b>
						<b>motivated to keep sex safe</b>
						comfortable being gay
						self-knowledgeable
						sociable
						<b>secure</b>
						self-assured
						assertive
						<b>optimistic</b>
						<b>happy</b>
						clarity about personal goals in relationships
						clarity about personal sexual goals
						confident to <b>handle difficult</b> sexual situations
						confident in having satisfying relationships
						knowledgeable about HIV and safer sex

a lot more	a little more	no change	a little less	a lot less	no answer

*Variables where the desired outcome is a lot less or a little less.*

Successful outcomes are indicated by significantly more shading on the right hand side of the table, compared to left hand side.

a lot more	a little more	no change	a little less	a lot less	no answer
					shy
					anxious
					isolated
					pessimistic
					depressed
					likely to have unsafe sex



# Talking Spaces

## A Therapeutic Groupwork Approach to HIV Prevention with Gay Men

PACE, the Project for Advice, Counselling and Education, has provided services to lesbians and gay men in the field of HIV for over a decade. *Talking Spaces* sets out the research background and theoretical basis of our therapeutic groupwork approach to HIV prevention with gay men.

*Talking Spaces* includes a detailed evaluation of PACE Workshops for Gay Men, including the results of a follow-up questionnaire asking service users their views on the impact of the workshops. The results demonstrate the effectiveness of a therapeutic groupwork approach in:

- successfully engaging gay men in a sexual health initiative
- building self-esteem and emotional well-being among gay men
- enabling gay men to develop improved assertion and negotiation skills
- enabling improved communication between gay men about sexual activity
- successfully integrating HIV prevention into generic services for gay men

*Talking Spaces* concludes with discussion of the issues raised and recommendations for future work.

### What others have said about Talking Spaces:

*"I welcome this innovative report from PACE, which will give commissioners much to think about when commissioning targeted HIV prevention services for gay men. Talking Spaces demonstrates the need for effective HIV prevention strategies to address the psychological and emotional well-being of gay men, and is an excellent example of qualitative evaluation."*

Simon Hall, Kensington & Chelsea and Westminster Health Authority

*"The findings in the report are very encouraging and will prove useful in planning future work in this area. It is good to see such a well planned, intelligent and successful health promotion campaign, with encouraging outcomes."*

Shaun Whelan, Terrence Higgins Trust.

*"We welcome this new report from PACE. It is an important and interesting example of the growing diversity of needed and appropriate responses to the epidemic."*

Kristina Bird, HEA's HIV Prevention Information Service

*"What many HIV care workers have known anecdotally for years is being given the attention it deserves. Preventative sex is inextricably linked to psychological well-being. I hope this project acts as a springboard to a wide range of therapeutic approaches to prevention work."*

Geoff Warburton, Terrence Higgins Trust.

*"A piece of work that will be far reaching in understanding HIV prevalence amongst gay men."*

Veya Aghoghogbe, Lambeth, Southark and Lewisham Health Authority.

Cover illustration: Lee Stannard  
Design: art'g°

# PACE

project for advice counselling + education

34 Hartham Road, London N7 9JL