

# Assert Yourself!

*Evaluating the performance of an HIV prevention intervention*

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Ford Hickson  
Richard Boxford

**Outcome Evaluation**

# Preface

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Writing from Florida in 1977, Heimberg and colleagues observed:

**“Recently, we have witnessed a dramatic increase in assertion training, and today it might be conservatively be described as a ‘movement’. Unfortunately, research has not kept pace with the growing number of enthusiastic converts, and a professional innovation is now being marketed as a panacea to an unsuspecting public.”**

This report does not seek to market the *Assert Yourself* course as an innovative solution to HIV infection during sex between men. It does seek to explore what use the course may be in the context of a strategic programme of HIV health promotion activity for gay men and bisexual men. It does this by looking at what happened when the course was implemented, and by raising questions about how we judge the value of HIV prevention activities.

At Sigma, the purpose of health promotion evaluation is to enable health promoters to do what they are trying to do, better. The format of this report reflects our aspirations for the collaborative nature of outcome evaluation in HIV health promotion. The first two chapters are authored by someone involved in the commissioning, development and delivery of the intervention (Richard Boxford). These give the background to the course and a description of it. Chapters 3 and 4 are by a researcher from an independent agency (Ford Hickson). These give the evaluation design and its findings. The final chapter is co-authored by the health promoter and researcher, summing up the findings and making recommendations for future implementations of the course.

In order to allow this intervention to be meaningfully compared with other interventions, the evaluation uses an ASTOR intervention description (Aim, Setting, Target, Objectives and Resources; see Hartley *et al.*, 1999). This is a systematic way of describing HIV prevention interventions, their implementation and their outcomes. Rather than viewing the outcome of an intervention as simply a function of the method (eg. groups), ASTOR considers the ‘performance’ of the intervention as a whole. We hope this highlights the similarities and differences between *Assert Yourself* and other interventions.

This document reports data supplied by men involved with twelve courses run in London. The evaluation also received useful data from men on two further courses, in Suffolk and Dublin. Many thanks to all the men who generously provided information and gave comments on the course. Thanks are also due to: the SWAN trainers who facilitated the courses; Dr Sharon Abrahams (Institute of Psychiatry, King’s College Hospital) for advice on the meaning of success in evaluation; James Bensley (Gay Men Fighting AIDS) and Peter Weatherburn (Sigma Research) for reading and commenting on earlier drafts of this report; David Reid who conducted the telephone interviews and Dale Brown who transcribed them (both of Sigma Research).

**Ford Hickson**



© Sigma Research  
Faculty of Humanities & Social Sciences  
University of Portsmouth  
Unit 64, Eurolink Business Centre  
London SW2 1BZ  
Tel 020-7-737 6223  
Fax 020-7-737 7898  
[www.sigma-r.demon.co.uk](http://www.sigma-r.demon.co.uk)  
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## SUMMARY: INTERVENTION DESCRIPTION AND OUTCOMES

DESCRIPTION	OUTCOMES
<p><b>Setting</b> Advertising – The course was advertised in the gay press, and internally at Gay Men Fighting AIDS (an HIV health promotion volunteering organisation), and with a direct invitation to men on a health promotion mailing list.</p> <p>Location – The courses reported on all took place in London, at the University of London Student’s Union, the FACTS Centre and the Immune Development Trust. All took place at weekends.</p>	<p><b>How did men hear about the course?</b> 59% in the gay press; 13% by word of mouth; 8% through Gay Men Fighting AIDS; 7% in a direct mailing; 14% through other or multiple sources.</p> <p>No evidence that demographic groups access the course through different routes.</p> <ul style="list-style-type: none"> <li>■ 91% felt that the directions to the building were clear.</li> <li>■ 87% felt that the room was easy to find in the building.</li> </ul>
<p><b>Target Group</b> The course is for gay men and bisexual men who want to be more assertive and confident in their everyday lives.</p>	<p><b>Who got it and did they need it?</b> Course completers are similar to other gay community recruited samples of men resident in London, but a much higher proportion were single.</p> <p><i>Before the course (need)</i></p> <ul style="list-style-type: none"> <li>■ 32% had a ‘low’ assertiveness score.</li> <li>■ 41% agreed they find it hard to say ‘no’ to sex they do not want.</li> <li>■ 54% disagreed they can usually tell their partners what they like to do sexually.</li> </ul> <p><i>Attrition</i></p> <ul style="list-style-type: none"> <li>■ 53% of men booking a place completed the course.</li> <li>■ 68% of men attending Day One completed the course.</li> </ul> <p>No evidence for an association between attrition and either demographics or indicators of need.</p>
<p><b>Objectives</b> Four 6 hour meetings (2 days on, 19 off, 2 on) with 12-14 men and 2 trained facilitators + Reflection and communication on change one month after course finishes.</p> <p>During Day One, men set their own goals for the course using a personal programme, identifying situations which they would like to be more assertive in.</p> <p>The course provides a space to share ideas about solutions to these situations and an introduction to assertive techniques for dealing with them. Group discussion in a relaxed and safe environment allows men to:</p> <ul style="list-style-type: none"> <li>■ explore the relationship between feelings, thoughts and behaviours.</li> <li>■ acquire an increased awareness of rights and responsibilities.</li> <li>■ explore barriers to choice, change and communication.</li> <li>■ practise skills through role play.</li> <li>■ experience personal power through use of assertiveness in controlled supportive environment.</li> </ul>	<p><b>What happened?</b> Courses started with approximately 13 men and lost an average of four before the end.</p> <ul style="list-style-type: none"> <li>■ 5% felt the waiting time for a place on the course was unreasonable.</li> <li>■ 88% felt the organisation of the course was good.</li> <li>■ 25% would have liked more information about the course beforehand.</li> <li>■ 93% felt the course leaders listened carefully to what they said.</li> <li>■ 93% felt they were treated with courtesy and respect.</li> <li>■ 91% felt the course leaders knew what they were doing.</li> </ul> <ul style="list-style-type: none"> <li>● The quality of the course administration &amp; its delivery was high.</li> <li>● The course provides a safe and supportive environment for the majority of men.</li> </ul>

<p><b>Aims</b> To increase men's ability to choose who they have sex with and what kind of sex they have, and to ensure men are equipped and competent to negotiate sex.</p> <p>The personal resources and interpersonal skills needed to negotiate sex are not specific to sexual situations but are general life skills. The aims of the intervention are therefore not sex specific. They are:</p> <ol style="list-style-type: none"> <li>1. Increased ability to recognise choices.</li> <li>2. Increased communication skills (eg. ability to: make requests; say 'No'; negotiate compromise; express feelings; give and receive compliments).</li> <li>3. Increased ability to instigate change (eg. ability to: make assertive challenges; give and receive constructive criticism).</li> </ol>	<p><b>Is it effective?</b> Because of the course (N=84 course completers):</p> <ul style="list-style-type: none"> <li>■ 82% felt they were able to recognise more clearly the choices they have in everyday life.</li> <li>■ 72% felt they were more able to express themselves.</li> <li>■ 72% felt saying 'no' had become easier – less common among men in long term relationships.</li> <li>■ 68% felt they were more able to make everyday requests.</li> <li>■ 61% felt they had increased the value they placed on being gay – particularly older men and those not diagnosed HIV positive.</li> <li>■ 2% felt the course was a complete waste of their time.</li> <li>■ 94% would recommend the course to other gay men who wanted to be more assertive.</li> </ul> <ul style="list-style-type: none"> <li>● The majority of men felt the course worked for them.</li> </ul> <p><i>After the course (need among course completers)</i></p> <ul style="list-style-type: none"> <li>■ 6% had a 'low' assertiveness score (32% before)</li> <li>■ 12% agreed they find it hard to say 'no' to sex they do not want (41% before)</li> <li>■ 21% disagreed they can usually tell their partners what they like to do sexually (54% before)</li> <li>■ Mean assertiveness score was significantly higher after than before the course (p&lt;.05).</li> <li>■ Amount of change in RAS was associated with their score before the course (p&lt;.05).</li> </ul> <ul style="list-style-type: none"> <li>● The course increases men's assertiveness.</li> <li>● The course has a larger impact on those who are less assertive on entry.</li> </ul>
<p><b>Resources</b> Administration, advertising, training space, trainers, refreshments &amp; materials.</p>	<p><b>What did this implementation cost?</b></p> <ul style="list-style-type: none"> <li>■ approximately £260 per place, plus recruitment costs.</li> </ul>

# 1 Key concepts in assertiveness

*Richard Boxford*

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## 1.1 WHAT IS ASSERTIVENESS?

Being assertive involves identifying what you want and communicating it in a clear, level headed manner. This results in you getting what you want more often, and when not, reaching compromises you can live with. Common areas of life where people benefit from being assertive are their sex life, work situations, at home and with friends and family. Being assertive is not about changing the world – it is about being in the world, and the way in which we deal with it.

Being assertive can help you take control in your life and make decisions that do not involve you giving away your own rights or interfering with other people's. It allows you to interact with people on an equal basis. Being assertive is about communication. Once you have identified changes and choices, you need to communicate them clearly, honestly and directly. It may sound obvious, however many of the difficulties we encounter in everyday life stem from our inability to say what we really mean. Instead people often either do not say what they want at all, or they say it in a way that is indirect and confusing.

To be assertive, you need clarity about the choices available to you and the confidence to act. Hence, it is necessary to have a belief in personal rights, and to be able to claim them. Discrimination and inequality, such as that experienced by gay men, can result in a diminished sense of personal rights, with subsequent disempowerment and feelings of lack of control or choices. This affects thinking and attitude, as well as feelings and behaviour.

## 1.2 INCREASING ASSERTIVENESS

People may find it difficult to be assertive because they lack the understanding and skills required to be so. People may also be unaware of their lack. They may instead, purely experience frustration, failure and unhappiness in their endeavours. Because assertiveness is based in understanding and skills, it can be learnt.

Acquiring assertiveness is both an internal process of self-knowledge and an external process of change in interacting with others. It combines the development of self-awareness, an awareness of the potential for change, and practical skills to effect change. This can be achieved through interactive experiential group-work and role play.

Acquiring assertiveness is about change. That it is possible is based on the belief that much of our behaviour is learned and is, therefore, capable of being unlearned or relearned. For this reason, becoming more assertive involves recognising your current behaviour patterns in a range of different, everyday situations. You can then identify the ones that you would like to change to assertive behaviour and begin making those changes.

To be assertive we need self-esteem. One way of developing self-esteem is through an increased sense of personal rights. This leads to increased confidence and self-determination and enhances the ability to respond to a wider range of choices. By making a commitment to change and claiming rights, participants are able to identify choices and increase control in their lives.

For gay men, claiming equal rights can be particularly difficult. Society and its institutions do not value gay men – gay men are not treated equally by the law, the church, the state, the medical profession and other institutions. There are still very few positive role models for gay men. Prevailing media messages continue to be largely negative, telling gay men that they are of less value than others. The discrimination and prejudice that gay men encounter in their daily lives, at work, at home and in public places can lead them to believe that they have no rights. It can be hard to establish and maintain a sense of worth and harder still to be able to make choices and exercise control.

### **1.3 THE THEORY OF ASSERTIVENESS TRAINING (AT)**

Assertiveness Training provides a set of key skills that enable people to claim their rights, make choices, take control and communicate more effectively. These skills provide new avenues for better relationships with friends, partners, families, work colleagues and sexual partners. They are the skills that gay men need to build a sense of self-esteem.

During AT, key themes and skills are introduced gradually and built upon with repetition and reinforcement throughout the course. Participants confront their weaknesses and (sometimes self-defeating) behaviours, as well as the effects of the prejudice they have encountered. These moments are often challenging, difficult and distressing. They are balanced by the re-affirmation of self-worth. There is an opportunity to acknowledge shared experience, to facilitate a sense of belonging. It is important to identify strengths and achievements. A personal sense of competence develops from success in role play. This in turn, raises expectations.

Without an inner understanding and self awareness, retention of the knowledge and skills is similarly limited and often difficult to sustain. AT places equal emphasis on feelings, thoughts and behaviours, encouraging men to be aware of and acknowledge how they feel, as well as what they think and what they do. Those who engage with the training in this way have a richer awareness and a more concrete, practical ability to go on to apply the skills in their lives. This enables individuals to continue their own future development independently.

### **1.4 SWAN AND THE ASSERT YOURSELF COURSE**

SWAN is the National Association of Gay Men's Assertiveness Trainers. SWAN was founded by the Sheffield Centre for HIV & Sexual Health in 1996. Over the first three years, four 'training the trainer' ten day courses took place (three nationally and one for GMFA in London). All trainers were trained by Carol Painter, a freelance trainer accredited by Redwood. As a result, there were over forty SWAN accredited trainers in 1999. All SWAN trainers are gay or bisexual men.

SWAN is committed to providing high quality skills and assertiveness training for gay and bisexual men. As a national association, it has established minimum standards and policies to reflect its aim of all training being delivered consistently and to a high quality.

In September 1997 Enfield & Haringey Health Authority commissioned two founders of SWAN (Gary Dyke and Richard Coates) to design a course to enable gay men to be more assertive. The course was to be delivered over four days in two modules. Richard Boxford (the commissioner and another SWAN trainer) also contributed to the design. The course developed was called *Assert Yourself*.

Gary and Richard ran the initial design three times in Central London, after which the three trainers discussed the design and made minor adjustments. Response to the pilot courses indicated sufficient interest among men in London to make a series of courses feasible, and the course was implemented a further nine times in London, at regular intervals over the next 18 months. A further four implementations were held outside London (three in Suffolk and one in Dublin) during that time.

# 2 *Assert Yourself:* Intervention description

*Richard Boxford*

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This chapter describes the *Assert Yourself* course in ASTOR format (see Hartley *et al.*, 1999). The description is a template for its implementation, and also includes the specific details of the 12 courses run in London, commissioned by Enfield & Haringey Health Authority.

## **2.1 AIMS: WHAT IS THE INTERVENTION INTENDED TO CHANGE?**

The two primary health promotion aims suggested by *Making It Count* (CHAPS SDG, 1998) which *Assert Yourself* is intended to contribute to are: that men are able to choose who they have sex with and what kind of sex they have; and that men are equipped and competent to negotiate sex.

The personal resources and interpersonal skills needed to negotiate sex are not specific to sexual situations. They are general life skills needed in a wide variety of situations. The aims of the intervention are therefore not sex specific. They are: increased ability to recognise choices; increased communication skills (eg. ability to: make requests; say 'No'; negotiate compromise; express feelings; give and receive compliments); and increased ability to instigate change (eg. ability to: make assertive challenges; give and receive constructive criticism).

It is intended that participants develop a stronger awareness and ownership of feelings, and an understanding of how this informs thinking and behaviour. Through practice on the course, participants should be able to do the following more clearly, concisely, directly and specifically:

- Make requests
- Say 'No'
- Negotiate workable compromises
- Make assertive challenges
- Express their feelings
- Give constructive criticism
- Receive and deal with criticism
- Give and receive compliments
- Understand and have a sense of everyday rights
- Understand and have a sense of sexual rights

## **2.2 TARGET GROUP: WHO IS THE INTERVENTION INTENDED TO CHANGE?**

*Assert Yourself* was expressly designed for gay men and bisexual men. These implementations were run for men who lived, worked or studied in the city they were held in.

## **2.3 SETTING: HOW DOES THE TARGET ENCOUNTER THE INTERVENTION?**

As the course is a 'they-come-to-you' (or pull) intervention, a front-end is necessary to alert men to the existence of the course, and to allow them to access it. The pilot courses and subsequent courses were recruited in similar ways, using multiple sources.



Advertisements for the course were displayed in the gay and HIV press, including Pink Paper, Boyz (London), Axiom Magazine, Positive Nation and Axiom News. In addition, direct invitation to the course was made to approximately 300 on a mailing list held by another health promotion agency.

Adverts and invites gave a direct-line telephone number for the course administrator. All men telephoning and expressing an interest were sent a sheet containing brief descriptions of the aims and objectives of course, the trainers and venue, who the course was for, and a statement of intention on equal opportunities. They were also sent a booking form for the next available course. Places were allocated on a first-come-first-served basis and were usually confirmed three weeks before a course commenced.

Twenty bookings were taken for each course, in order to have a maximum of fourteen participants, allowing for cancellations and dropping out.

All the courses were held at the weekend, and a variety of locations were used. In London, courses were held at the University of London Student's Union, the Immune Development Trust and the FACTS Centre.

## 2.4 OBJECTIVES: WHAT DOES THE INTERVENTION CONSIST OF?

The course takes four days over two weekends, three to four weeks apart. Each day takes about six hours (including breaks). Groups of nine to twelve men go through the course together, with two SWAN trained facilitators. The groups are closed (men cannot join the course part way through) and men are asked to attend the whole course. While individual elements of the course may be useful, it was designed to be completed.

Five SWAN trainers co-facilitated the courses, two trainers for each course, rotating in pairs. The trainers were Richard Boxford, Gary Dyke, Richard Coates, Neil Walbran and Christopher Scott-Burrows. Two SWAN trainees, Stuart McKenzie and Mark Reedman, observed and assisted on two courses.

The page opposite gives an overview of the course content, and its individual elements. All of the elements were implemented on all courses except for the Personal & Collective Gay History. When other elements on Day Three required extended time, this element was dropped.

## ASSERT YOURSELF

### DAY ONE

The first day 'sets the scene' for the course by outlining the theory of assertive behaviour and the skills needed to be assertive. It involves a higher level of input from the trainers than the subsequent three days.

- Introductions – facilitators and participants.
- Course Structure – an overview of the next four days.
- Group Brainstorm – on what being assertive means to them.
- Feelings, Thoughts and Behaviour – presentation of a model of the inter-relationship between them and group discussion.
- Feeling Safe; Body Alert exercise; recognising Early Warning Signs – group discussions on what is safety, what is risk taking, the right to feel safe and how to recognise safety.
- Group Working Agreement – the foregoing provides the basis for a consensus statement which fosters ownership of the group, a feeling of safety and control.
- The Bill of Rights – presentation of the idea of a bill of rights, group exercise and discussion.
- Asking for what you want – an exercise introducing the first core assertiveness skill.
- Behaviour Types and Body Language – introducing and identifying typical behaviours.
- Personal Assertiveness Programme – men elect a number of real life situations that they want to be able to deal with more assertively. This forms the basis of material for most subsequent skills practice.
- Temperature check – At the end of each day, men were asked to complete a form asking them how they felt about different aspects of that day. These were a means by which facilitators could take regular 'temperature checks' of the group, and a low threshold way for men to indicate dissatisfaction or make suggestions.

### DAY TWO

The second day begins to explore some of the societal reasons why gay men might find it difficult to ask for what they want. Several more key skills are introduced and participants are given time to work on personal situations they want to change before making a commitment to change at the end of the day.

- Good Boy Trap – shows how social stereotyping combined with the need for approval results in particular difficulties for gay men being assertive.
- Saying No – introducing a core skill & role-play practice in threes.
- Workable Compromise – scripted role-play in threes.
- Listening Skills – introduction and pair work.
- Skills Practice – in threes using their Personal Assertiveness Programme.
- Commitment to Change – participants are asked to identify and share with the group one situation from the Personal Assertiveness Programme that they can realistically tackle before the second weekend of the course.
- Facilitators suggest the participants establish network groups for informal discussion between the two modules. The group is encouraged to identify how they might gain peer support from one another over the three weeks before the second module to sustain the momentum of change and skills.
- Temperature check (as Day One)

### THREE WEEK BREAK

■ Development of Peer Support Networks – During the three weeks break between the week-ends, men may form Network groups. These are peer support networks for informal support and practising skills, both between the two modules and after the course. The space between the two modules allows time for participants to consolidate and reflect on learning.

Participants are sent a reminder letter concerning start times a week before Day Three.

### DAY THREE

Day three moves participants on to more difficult core skills, with the focus on practising these in relation to personal situations already identified by participants themselves. Criticism is balanced against the skill of giving compliments.

- Feedback – from participants about their experiences in the intervening three weeks.
- Assertive Challenges – introduction and role-play in threes.
- Giving & Receiving Criticism -how to deal with it and role- play from real life scenarios.
- Giving and Receiving Compliments -group carousel in which one ring gives compliments, the others receive, then reverse, group discussion.
- Personal & Collective Gay History – acknowledging achievements by gay men, to introduce themes of positive identity and self esteem.
- Temperature check (as Day One)

### DAY FOUR

The fourth and final day has three components. Most of the morning focuses on sex and how assertiveness skills might relate to sexual situations. The afternoon ties up the course and looks forward.

- Why (gay men) Have Sex – developing understanding and self-awareness of the motivations and wide range of needs that may accompany sexual activity, then how assertive skills can be applied to take more personal control in sexual situations and relationships and become more effective in successfully meeting those needs.
- Sexual Bill of Rights – discussion of a suggested addition to the Bill of Rights (Day One).
- Skills practice – a final chance in a safe environment to work on personal situations and skills they feel still need practice.
- Certificates & Farewells – Men are given 'certificates of attendance'. The final element of the course is centred around raising self esteem and identifying ways of maintaining change beyond the course.

### FOUR TO FIVE WEEKS AFTER DAY FOUR

■ Follow-up – a letter is sent out to participants, inviting them to write to the course facilitators (to reflect on their learning and progress). The network groups also offer an opportunity to continue the process of personal development with like-minded people after the course has ended.

## 2.5 RESOURCES: WHAT IS REQUIRED TO MAKE THE INTERVENTION?

Assertiveness training needs no specialised equipment, but does need trained facilitators and the usual training facilities. As such, the resources required are very similar to the majority of 'group-work' HIV-prevention interventions. The following are budget headings used in the running of these courses. Obviously, the cost of these resources will vary dependant on availability.

<i>Administration</i>	A centralised administrator is necessary both before the course and for at least a month afterwards. The amount of time needed will vary depending on how the course is recruited and the number of courses being administered. The current implementations were recruited through multiple sources (mainly press advertisement), and required approximately one day per month of administration time.
<i>Advertising</i>	The most variable expenditure. These implementations employed an average of two, quarter page adverts per course in the National and London gay press.
<i>Training space</i>	The course involves a lot of moving about and needs a large room that can seat all participants in a circles, and with sufficient space to break into smaller groups for discussion.
<i>Trainers</i>	Two trained (SWAN) facilitators are required per course.
<i>Refreshments</i>	Tea, coffee, biscuits.
<i>Materials</i>	Course folder, handouts and certificates.

# 3 Evaluation questions and design

*Ford Hickson*

Sigma Research were approached by Enfield & Haringey Health Authority in April 1998. We were asked to provide a piece of evaluation research whose aim was to generate evidence about the outcomes of the *Assert Yourself* course. The first thing to do was determine how the intervention was supposed to contribute to a reduction in HIV incidence. Why would it work?

## 3.1 ASSERTIVENESS AND SEXUAL HIV EXPOSURE AMONG GAY MEN

There are numerous explanations why men engage in unprotected anal intercourse (UAI) with men of a different HIV status to themselves (Keogh, Weatherburn & Stephens, 1999; Henderson *et al.*, 1999). Possible reasons (which HIV health promotion is attempting to address) include not recognising that their partner is HIV sero-discordant (s/d), not understanding what exposure may mean, ignorance about the probability of transmission, or being unable to do otherwise either through lack of ability or by being given no choice. In practice, it will usually be a combination of these, not least because there are two people involved. In addition, the balance of reasons uninfected men have UAI with infected men are probably, on the whole, different from the reasons infected men do so with uninfected men. Similarly, the balance of reasons men with diagnosed HIV infection engage in s/dUAI are probably different from those of men with undiagnosed HIV infection. It may also be the case that the balance of reasons is distinct and different across other ways of grouping men.

We hypothesise that assertiveness is related to the control all men have over their sexual behaviour, and in particular the control they have over sexual HIV exposure. The relationship is represented in Figure 3.1.

The hypothesis is that men who are assertive are less likely to be involved in HIV sero-discordant unprotected anal intercourse (s/dUAI) than men who are not assertive, all other things being equal. For example, men may find it difficult to say no to other men having unprotected anal intercourse (UAI) with them, or to insist on using one or not engaging in UAI if their partner dismisses the option.

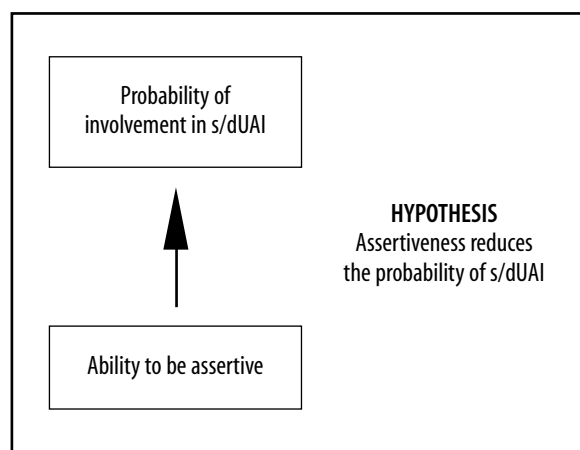


Figure 3.1: The way assertiveness may be related to HIV exposure (specifically sero-discordant unprotected anal intercourse)

Where could we look for evidence for or against the hypothesis that assertiveness is related to s/dUAI? We could ask men who have had s/dUAI (or UAI that may have been s/d), why they did so, and see if assertiveness featured in their accounts (eg. Keogh, Weatherburn & Stephens, 1999; Henderson *et al.*, 1999). And we could look for associations between measures of assertiveness and measures of s/dUAI in cross-sectional surveys (eg. Hickson *et al.*, 1999). We could also look for

evidence in experimentally designed research, using an intervention we know increases assertiveness. For example, we could recruit a group of unassertive men, implement the intervention with a randomly selected half, and vary what we did with the other half. Change in indicators of s/dUAI among those getting the intervention but not the others, would be very strong evidence that assertiveness reduces s/dUAI.

Clearly, as assertiveness is not the only HIV-prevention related need men have, a man being assertive does not automatically mean he will not be involved in s/dUAI. In fact, as involvement in s/dUAI is more than a function of HIV-prevention related need, a man may still have s/dUAI with all his needs met. The above hypothesis is simply that men who lack assertiveness have, as a group, a higher probability of involvement in s/dUAI than men who are able to assert themselves.

The research reported here is **not** primarily concerned with generating evidence for or against this hypothesis. Whilst the validity of the hypothesised relationship between assertiveness and s/dUAI may be disputed, it is entirely independent of both our ability to change men's assertiveness, and the success or failure at any particular intervention at doing so. Everyone concerned with reducing s/dUAI has an investment in the answer to this question and intervention evaluations are not the place to address it.

### 3.2 ASSERTIVENESS TRAINING IN DIFFERENT TYPES OF HEALTH PROMOTION INTERVENTIONS

There are a variety of routes by which AT might 'work'. As a direct contact intervention, AT would be for homosexually active men, to increase their assertiveness. For this to work, assertiveness must be an HIV prevention related need (that is, we need to be confident of the hypothesis in Figure 3.1). How this type of intervention is proposed to 'work' is represented in Figure 3.2.

We could also use AT as part of a social diffusion intervention. Here, AT would be for peer educators or key community members, to increase their assertiveness, which in turn may increase the number and quality of contacts these people make in their social networks, which in turn reduce HIV-related need of people in those networks.

AT could also be used as part of health promotion facilitation. Health promotion staff could attend AT to increase their assertiveness, which may increase the effectiveness and efficiency of the health promotion work they carry out, which in turn reduces HIV-related need in the population they work with (see Painter (n.d.) and Dunn and Sommer (1997) for a description of the ways in which this may operate, and evidence for its effectiveness in other occupations).

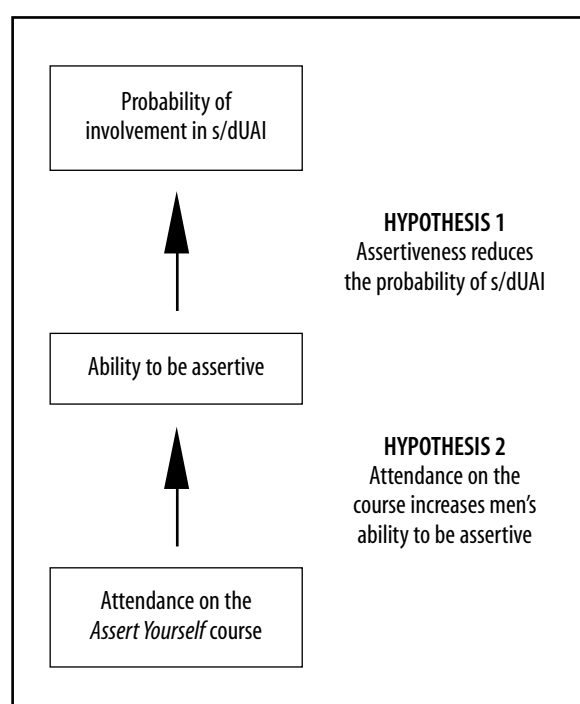


Figure 3.2: The way in which course attendance may be related to assertiveness, and hence HIV exposure

*Assert Yourself* was developed and delivered as a direct contact intervention (one which engages with homosexually active men in order to reduce HIV related need among them). Consequently, the evaluation focuses on changes (or not) in assertiveness among men who go on the course. Some of the men who participated on the *Assert Yourself* course may also be involved in social diffusion projects, or be workers in HIV health promotion. Hence the course may also be contributing to a reduction in HIV incidence in the additional ways described above.

However, the evaluation was not of AT as an element of a social diffusion project, nor as part of health promotion facilitation. We do not, therefore, attempt to assess the validity of the claims that: social diffusion projects work better when the people involved are able to be assertive; or that health promotion staff do better health promotion when they are able to be assertive.

### **3.3 ASSERTIVENESS AND THE ASSERT YOURSELF INTERVENTION**

If we are wrong that assertiveness is an HIV-related need, and it has no association with engagement in HIV sero-discordant unprotected anal intercourse (s/dUAI), then even if *Assert Yourself* increases men's assertiveness, it will not contribute to a reduction in HIV-incidence. In Figure 3.2, this would mean hypothesis 1 is wrong. It would not mean that *Assert Yourself* 'does not work'. Hypothesis 2 is independent of hypothesis 1. It would mean that our approach to influencing men's sexual behaviour is mistaken (ie. increasing assertiveness does not reduce HIV exposure).

If we attempt to look directly at the relationship between AT and sexual exposure, and find no association, we do not know whether the AT has failed to increase assertiveness, or whether assertiveness is unrelated to sexual exposure. If we observe a difference but do not measure changes in assertiveness, we will not know which needs the intervention met, and will be unable to assess whether any particular man would benefit from it. Consequently, we are unlikely to make an accurate judgement of the value of an HIV health promotion intervention by looking at changes (or not) in the sexual behaviour of people who encounter them.

Since the *Assert Yourself* course is unlikely to be the only way in which men could increase their assertiveness, and since assertiveness is not the only need related to s/dUAI, there seems little point in trying to link course attendance to s/dUAI directly other than to demonstrate our 'control' over men's sexual behaviour. If we want to test hypothesis 1 we would do so with an intervention we knew increased assertiveness, if we want to test hypothesis 2 we do not require data about s/dUAI. In addition, the size of study needed to generate confidence about the impact of course attendance on the probability of s/dUAI is much larger than studies to test either hypothesis 1 or 2.

Since we were asked to generate evidence about the impact of the course (and not about the relationship between assertiveness and sexual HIV exposure) the research reported here focuses on hypothesis 2. If the intervention is shown to be effective, it may then be used in experimental designs to test hypothesis 1.

With the limited resources available, we decided a before-and-after self completion survey design would generate most evidence, supplemented with 20 telephone interviews with course completers. Participants on courses that had already run were sent post-hoc questionnaires.

### 3.4 SELF-COMPLETION QUESTIONNAIRES

The core method used in the evaluation was self-completed questionnaires, posted to men along with other course mailings.

#### 3.4.1 Evaluation questions and measures

The surveys sought information about the following areas. To avoid repetition, the precise questions asked, and the scales used, are in the findings along with the answers.

<p><b>Setting</b>            How the course was heard about            Use of potential health promotion settings            Prior experience of workshops</p>	<p><b>Objectives</b>            Ratings of quality of service delivery            Ratings of utility of specific course elements            Ratings of emotional safety &amp; enjoyment</p>
<p><b>Target</b>            Sexuality and gender of sexual partners            Post-code of residence            Relationship status            Ethnic group            Age            Education qualifications            HIV testing history            Involvement in HIV prevention            Rathus Assertiveness Schedule before course            Indicators of s/dUAI need before course</p>	<p><b>Aim</b>            Self-assessment of change            Rathus Assertiveness Schedule after course            Indicators of s/dUAI need after course</p>
	<p><b>Resources</b>            Ratings of time invested</p>

#### 3.4.2 Attendances, data sought & response rates

This section describes what questions were asked of which men, and who responded to them. The following table gives the numbers of men booking for and attending the twelve courses. This data was gathered as part of the course administration, rather than as part of the evaluation. There were estimated to be two telephone enquiries for every place booked.

Attendance (n)	Booked	Day 1	Day 2	Day 3	Day 4
Oct'97	13	11	10	6	7
Nov/Dec'97	18	15	12	8	9
Jan'98	16	12	12	11	10
Mar/Apr'98	17	13	9	8	6
May'98	15	12	11	8	8
June'98	17	12	10	6	6
Sept'98	14	12	8	7	7
Nov'98	17	16	14	8	8
Jan'99	14	9	8	8	8
Feb/Mar'99	19	12	12	11	11
May'99	16	14	12	12	11
June'99	20	13	12	12	12
<b>Totals</b>	<b>196</b>	<b>151</b>	<b>130</b>	<b>105</b>	<b>103</b>

Booking for the June '98 course had already commenced by the time the evaluation was agreed. Therefore, the twelve courses were split into two groups of six, the first six receiving only a post-hoc (after the event) survey, the second six receiving a before-and-after survey.

Attendance (n)	Booked	Day 1	Day 2	Day 3	Day 4
1 <sup>st</sup> six courses	96	75	64	47	46

No data were sought from the 50 men who booked a place on the first six courses but did not complete one. All 46 men who completed one of the first six courses were sent a self-completion questionnaire. This contained the demographics, experience of workshops and HIV prevention, the Rathus Assertiveness Schedule, the three indicators of HIV related need, the delivery quality indicators, and the ratings of the utility of elements of the course and impact. Of these, 31 returned the questionnaire (a response rate of 67%).

Attendance (n)	Booked	Day 1	Day 2	Day 3	Day 4
2 <sup>nd</sup> six courses	100	76	66	58	57

Three different questionnaires were sent out to men on the second six courses, to coincide with the mailings required for their administration. These questionnaires are referred to as T1, T2 and T3.

- T1** was sent out approximately one month prior to Day One, with the original confirmation of booking to all 100 men. It contained demographics, experience of workshops and HIV prevention, the Rathus Assertiveness Schedule, and the three indicators of HIV related need.
- T2** was sent immediately prior to the second half of the course, with the reminder of the date and time of Day Three, to the 66 men who had attended Day 2. In addition, the same questionnaire was sent to the 24 men who had booked a place on the course but not attended Day One, and the 10 men who had been at the beginning of Day One but not at the end of Day Two. It contained delivery quality indicators, reasons for non-attendance and intentions to re-attend.
- T3** was sent approximately one month after Day Four, with the follow-up letter sent as part of the course to the 57 men who completed the course and the man who attended all but Day Four. It was also sent to any participant who had previously returned either T1, T2 or both. It contained ratings of the utility of elements of the course and course impact, the Rathus Assertiveness Schedule, the three indicators of HIV related need and an invitation for further comment on the course.

Overall, 82 men returned at least one of the three questionnaires (making the rate of any response 82%). Any response to the evaluation was more common among course attenders than among non-attenders.



Response rates	Did not attend Day 1	Incomplete course	Completed
2 <sup>nd</sup> six courses (n)	24	19	57
Returned any form	15 (63%)	16 (84%)	51 (89%)
Returned T1	15 (63%)	15 (79%)	47 (82%)
Returned T2	1	11 (58%)	42 (74%)
Returned T3	0	8 (42%)	39 (68%)
Returned both T1 & T3	0	8 (42%)	35 (61%)

This part of the evaluation was designed as a before and after exploration of course completers, and generated such data for 61% of the population. We were also interested in attrition, and the design generated demographic data about 63% of non-attenders, and 79% of those partially completing a course.

### 3.5 STRUCTURED QUALITATIVE INTERVIEWS

All men were invited to a telephone interview at the end of the third and final questionnaire. As the evaluation was focussed on the impact of the course, we mainly wanted to speak to course completers. (Men were also offered a copy of the survey findings at the same time). Twenty men who completed the course offered to be interviewed. One was no longer at the number given, and three were not at home on at least two occasions of calling (morning & evening) before the close of fieldwork. The remaining sixteen men were contacted and all were interviewed. The interviews were structured and lasted approximately one hour. Men were asked about:

- how they heard of the course;
- what was appealing about it and why they thought it might suit them;
- what they particularly remembered about the course (unprompted recall), and why;
- what they thought about thirteen named elements of the course (prompted recall);
- what they thought was missing from the course;
- general assessment of the impact of the course;
- impact of the course on six areas of life (occupation or daily routine; friendships; partnerships; sex life; HIV; other family relationships).

The interviews were recorded and transcribed and thematically coded. What men said is used as an additional source of evidence about the performance of the intervention, men's experience of it, and its impact.

# 4 Findings from the evaluation

*Ford Hickson*

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## 4.1 TARGET – WHO GOT THE INTERVENTION, DID THEY NEED IT, WHO DROPPED OUT AND WHY?

Who benefits from an intervention is, first and foremost, a function of the setting used. *Assert Yourself* used a variety of settings for recruitment, and which routes men used to access the course is explored in Section 4.2. First we give an overview of the men who went on the course. Several men in the telephone interviews commented on the variety or diversity of the men on their course, and the importance of the other group members to them. Asked to sum up his experience of the course, one man said:

**“It was a very positive experience, I enjoyed and valued the people I met, and it was a positive step in my development.”**

Men themselves bring the most to all HIV health promotion interventions and particularly in experiential groups where they provide their personal resources for the benefit of others. This also suggests that the variety of men on courses may be as important as similarities between them.

### 4.1.1 Description of course completers

This section describes the 78 men who completed the course, and returned either the post-hoc survey (n=31, 67% of completers) or T1 before the course commenced (n=47, 82% of completers).

#### Residence & Sexuality

The target group for the course was ‘gay men and bisexual men who live, work or study in London’. Respondents were asked the first half of their home post-code. The majority of the course completers lived in London post-code areas or the surrounding areas. A few lived further afield. In response to ‘How would you describe your sexuality?’, 92% indicated gay, 6% bisexual and one man specified another term.

In the rest of the section, comparisons are of course completers with the London resident sample of the 1998 National Gay Men’s Sex Survey (Hickson *et al.*, 1999) recruited at Pride events, and to the sample of London scene and service users recruited by Dodds *et al.* (1998). The proportions of these two samples which identify as gay and bisexual are very similar to *Assert Yourself* course completers.

#### Age

The mean age of course completers was 37.2 years (standard deviation = 8.1, median 37, range 22 to 59). This is older than other gay setting recruited samples (the mean age of the samples in both Dodds *et al.* (1998) and Hickson *et al.* (1999) is 32 years, as it invariably is in opportunistic gay community recruited samples). No men under the age of 20 who booked a place on the course took part in the evaluation. The courses did not disproportionately benefit younger men.

### **Ethnicity**

In response to 'How would you describe your ethnicity?'; 87% indicated they were White and 13% (n=10) indicated they were from minority ethnic groups. These are similar proportions as we find among other samples of predominantly gay men in London (eg. 11% in both Dodds *et al.* (1998) and Hickson *et al.* (1999)).

### **Highest Education Qualification**

Men were allocated to three groups according to the highest formal education qualification they had: 17% had no qualifications or O-levels (GCSE/CSE/GCE); 24% had A-levels or a diploma of some kind; and 59% had a degree. This high level of education is similar to other samples of predominantly gay men in London (53% had a degree in Hickson *et al.*, 1998; 57% had more than three years education since the age of 16 in Dodds *et al.*, 1998). As response rates are invariably higher among men with higher education, these figures probably over-estimate the education levels of the men on the course. However, it is unlikely these courses disproportionately benefited men with lower educational attainment.

### **HIV testing history**

Men were asked if they had ever received an HIV test result, and if so what their last test result was: 41% had never tested for HIV; 49% had tested and their last test was negative; and 10% had tested positive. These are very similar proportions to research samples of predominantly gay men in London (11% had tested positive in Hickson *et al.*, 1999).

### **Relationship status**

Men were asked 'Do you have a regular male sexual partner at the moment?'; 67% indicated they were single; 8% indicated they were in relationships that had started within the last year, and 25% indicated they were in longer term relationships. Far fewer men were currently in relationships (33%) than in the *National Gay Men's Sex Survey 1998* (61%, Hickson *et al.*, 1999). Hence, these courses disproportionately benefited single men.

### **Involvement in HIV prevention**

Men were asked 'Are you currently involved in any HIV prevention work (paid or voluntarily?)'. (Post-hoc respondents were asked if they were involved at the time they went on the course.) Overall, 27% said they were involved in HIV prevention. Involvement was more common among men on the first six courses (58%) rather than the second six (6%), although there was at least one man involved in HIV prevention on every course but one. This reflects Gay Men Fighting AIDS (a gay men's HIV health promotion volunteering organisation) being used as a setting for recruitment in the earlier courses.

### **Previous experience of personal development courses**

The *Assert Yourself* course was the first personal development course attended for 60% of course completers. Post-hoc respondents were more likely to have been a course before (only 42% were new to such courses compared with 72% of before-and-after respondents ( $p < .05$ )). This difference reflects the differences in recruitment used in the first and second six courses. The first six recruited a higher proportion of men who were involved in HIV prevention (see above), and these men were more likely to have previously attended personal development courses ( $p < .05$ ).

### **4.1.2 Need for the course**

How much need the men who went on the course were in, depends on whose definition of need we use. One answer could be that all men who attended the course needed it, because that was why they were there. In the interview, men identified and articulated their need in a variety of ways. This man identifies a developing problem.

***“What made you think the course might be for you?”***

**I had quite a few very unsuccessful relationships where I thought I was taken advantage of ... I was unable to actually say what I really wanted which would result in me feeling pretty bad about myself and it was making me increasingly unhappy.”**

The following respondent articulates his need in the context of a particular point in his life.

***“What was it about the course that appealed to you?”***

**Well the thing is I had only moved to London in [month], so I was really like unsure of myself and I hadn't found my feet yet ... it was very different from what I'd known ... I think [the course] was what I needed at the time, I just needed a boost, you know ... to meet some other people who seemed in the same boat as me, so that I could come to London and realise that I wasn't the only person in the world who was feeling shy or needed some help.”**

Others recognised a long standing need. Asked to sum up their experience of the course, two men offered regrets.

***“I wish I'd done it a long time ago.”***

***“Its the best [course] I've been on and if I had gone on one like that about ten years ago I might have had a more enjoyable life.”***

We assume that all men attended the course because they were expecting to get something out of it. However, this is not necessarily an increase in assertiveness (or a reduction in any HIV-prevention related need). It was not the aim of the course to recruit men, explore their (HIV prevention) needs and then address them. Since the aim of the course was to increase assertiveness, it only makes sense to judge need for the course against that.

Some would say that all people would benefit from greater clarity and self-insight, and so everyone 'needs' assertiveness training. However, we would still expect some to be in greater need than others, and the aim of recruitment to the course is that men who are not assertive go on the course. Implicitly, men who are assertive already are not expected to go on the course. Many HIV prevention needs are graduated (you can have them more or less met, rather than simply having them met or not). Rather than saying whether an individual is in need or not, it may be easier (and make more sense) to consider whether groups are in more or less need than each other.

Need prior to the course was judged against three measures: a standardised scale and two agree/disagree statements. The following concern the 47 course completers who returned T1.

#### **Rathus Assertiveness Schedule (RAS)**

This is a 30-item assertiveness scale (Rathus, 1973) to which we made slight modifications. Men are asked to rate 30 statements from -3 (least like me) to +3 (most like me). All the statements concern typical reactions and behaviours in situations requiring assertiveness. Half the statements reflect an assertive behaviour or response, half an unassertive behaviour or response. Hence, completing the scale gives men a 'score' between -90 and +90 (see Appendix)

Figure 4.1.2 shows the proportions of men with each score, grouped in bands of ten. If this scale is normally distributed in the general gay adult male population, the average score would be zero, and the distribution would be symmetrical on either side of it. Since we do not know the distribution of this scale in the general gay population, we cannot say whether men taking the course were more or less assertive than gay men in general. If the average score is indeed zero, then these men are overall less assertive than the general population of gay men. The average score was -20.3.

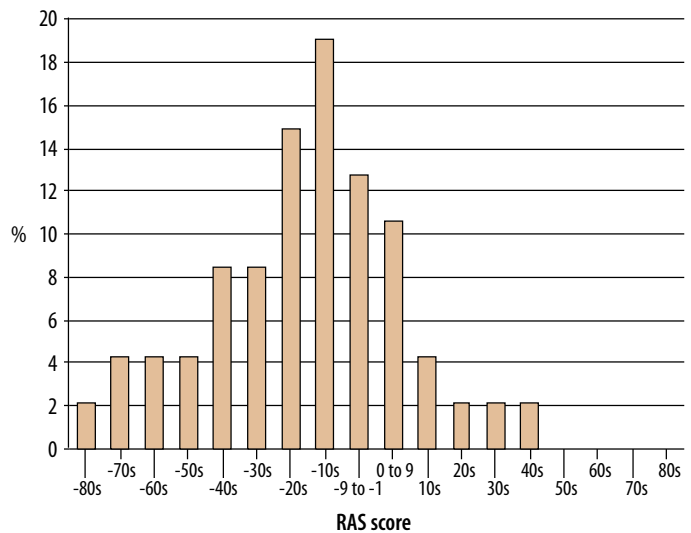


Figure 4.1.2: Distribution of RAS scores before course (n=47)

Janda (1996) suggests that people with a score below -29 may benefit from AT. We divided men at intake into three groups on the basis of their initial RAS score: high (+30 or over), average (-29 to +29) and low (-30 or below). Two men (4%) had a high initial RAS. A third (32%) had a low initial RAS. If a low RAS score is taken as the definition of need for the course, then about a third of the men who took the course were in need of it.

### Indicators of s/dUAI need

In addition to a general assertiveness scale, we also wanted some indicators of socio-sexual need related to men's control over their sexual behaviour (including control over involvement in s/dUAI). Indeed, this was expected by some men to be part of what the course was concerned with.

**"I thought it would address sex, and expressing myself better about what I wanted, or recognising what I want first of all and then being able to express it"**

Two measures were used. Both required men to agree/disagree to statements on a five point scale. The first statement was 'I find it hard to say no to sex I don't want'. Overall, 41% of course completers agreed with this statement before the course, and a further 13% indicated the middle of the scale. The second was 'I can usually tell my partners what I like to do sexually'. Overall, 54% of course completers disagreed with this statement before the course, and a further 17% indicated the middle of the scale.

If agreeing with the first or disagreeing with the second is taken as defining need for the course, then 67% of men were in need before the course. If either of these responses or a low initial RAS score is taken as the definition, then 74% of men were in need. This means we were unable to generate evidence of need for the course for 26% of course completers.

### 4.1.3 Attrition

Attrition refers to men dropping out of the course, and out of the evaluation. Attrition is problematic for courses for a number of reasons, including unnecessary administration, unused places, and possible disruption to the implementation of the course and its subsequent impact.

It is generally difficult to get at the reasons people drop out of things, because they tend to drop out of research at the same time. There were very similar patterns of attrition across the first and second

groups of six courses. The following shows the proportions of men still in the course at the beginning of each day (from the monitoring data supplied by the course administrator).

Attrition	Booked	Day 1	Day 2	Day 3	Day 4
All 12 courses (n)	196	151	130	105	103
% of booked		77%	66%	54%	53%
% of Day One attenders			86%	69%	68%
% of Day Two attenders				81%	79%
% of Day Three attenders					98%

Almost a quarter of the men who booked a place on the course did not attend Day One. Of those who did attend Day One, a further third did not complete the course, about equal numbers not returning for Day Two and Day Three. Almost all the men who attended Day Three also attended Day Four.

Thirty men who did not complete one of the second set of six courses supplied demographic data in T1 (15 who did not attend Day One, and 15 who attended only some of the course). Comparing these 30 with the 47 who did complete the course, we found no evidence that attrition was higher in any demographic group compared to others. This interviewee suggests one reason for attrition.

**“I remember feeling very annoyed when some people didn’t turn up ... I thought they were most discourteous ... but I changed my mind at the end because I thought really, the people who stayed on the course were the ones for which it really mattered.”**

We tested the hypothesis that attrition was due to absence of need by looking at the initial RAS of men who did not attend Day One (mean initial RAS -7.9, n=14), those who partly completed a course (mean -16.1, n=15) and course completers (mean -20.3, n=47). Although the scores are in the direction we would expect if the hypothesis were valid, these differences were not statistically significant.

That 15 of the 24 men (63%) who did not attend Day One returned T1 (see Section 3.1.2) suggests many of them still intended to go on the course after receiving confirmation of their place. However, only one man who did not attend Day One returned T2. He indicated he was ill.

Five of the ten men who did not complete the first week-end returned T2. They were asked ‘Why did you not attend all the sessions?’ (two of these men also returned T3). All five indicated a mismatch between what they were looking for and what the course consisted of, in terms of the pacing, content or style of the course and its facilitation. Incidentally, one man interviewed by telephone had

**“...booked [a place on *Assert Yourself*] at the same time as I booked a [other agency] course ... I thought one of these courses would be good ... I suppose it was just give it a try and if it isn’t any good then you can sort of duck out.”**

Six of the eight men who completed the first week-end but did not attend the second returned T3. Four indicated they were unwell, one was on holiday and one indicated he was “too lazy”.

There are many reasons for attrition, the balance of which probably change over the duration of the course. Earlier attrition may be addressed by altering access to and information about the course. Later attrition appears to be due to unforeseen circumstances (eg. illness) and is unlikely to be influenced by the intervention design.

## 4.2 SETTING – HOW WAS THE COURSE ENCOUNTERED, WERE THE VENUES ADEQUATE, WHAT DIFFERENCE DOES THE COURSE BEING FREE MAKE?

The setting used by an intervention determines who encounters and may subsequently benefit from it. For example, who sees a poster in the press is limited to the readership of the papers the ad is placed in; the same poster displayed in a particular place may be seen by the people who go to or past that place. Which groups of people see the poster can be manipulated by placing it in particular papers whose readership is known, or in a place known to be visited by the groups/s we want to see it. For ‘they-come-to-you’ interventions such as *Assert Yourself*, the way in which the course is recruited to largely determines who goes on it. Hence, the profile of the men just examined (Target) follows, and does not proceed, the way in which men got on the course (Setting). If we changed the setting (ie. the way the course is recruited to), we might expect the group of men to have a different profile.

### 4.2.1 Hearing about the course

Men were asked ‘How did you hear about the *Assert Yourself* course?’. Figure 4.2.1 shows responses for post-hoc respondents, and those returning T1 (n=106; two men could not recall where they heard about the course).

Most men (62%) had heard about the course through the adverts placed in the gay press. Thirty seven men mentioned The Pink Paper, 18 mentioned Boyz, 8 mentioned Axiom, 4 mentioned Gay Times, and two mentioned Positive Nation. One also mentioned QX, although this magazine was not used for advertising. Two could not remember. These do not sum to 100% as some men indicated two or more papers. The press was also mentioned by all men who indicated multiple settings, bringing the total indicating the press to 74%.

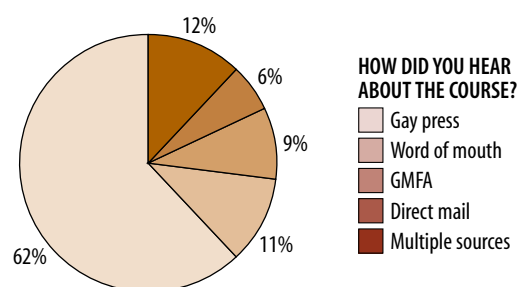


Figure 4.2.1: Success of the settings (n=106 men who booked a place on the course)

Eleven per cent indicated they heard about the course through word-of-mouth, and 9% through Gay Men Fighting AIDS. Fewer men heard through direct mailing (5%), and 11% indicated they heard about the course through multiple sources. There were no significant differences across the demographic groups (described above) in the way men heard about the course, apart from the obvious association between hearing about the course through GMFA and being involved in HIV prevention.

The twelve courses were advertised with thirty quarter-page advertisements in the gay press, costing approximately £250 each; a total of £7500. The number of placements was in the same rank order as the number of men mentioning the publications (ie. most in the Pink Paper, fewest in Positive Nation).

If 74% of the 103 course completers heard about the course in this way, this is a recruitment cost of £99 per completer. However, if considered in relation to bookings and enquiries, the cost is £52 per booking, or £26 per enquirer. Judgements about the performance of this recruitment is difficult in the absence of comparative data.

### 4.2.2 Getting to the course

At T2 (and on the post-hoc), men were asked whether they agreed or disagreed with four statements about the run-up to the course. The first was that “The length of time I had to wait between contacting the organiser and the first weekend was unreasonable.” Figure 4.2.2a shows that the vast majority of men (83%) disagreed with the statement and only 5% (n=4) agreed.

The second statement was “I would have liked more information about the course before I started it.” Figure 4.2.2b shows that about a quarter of men would have appreciated more information about the course before it commenced.

The third statement was “The directions I’d been given to find the building were clear” and the fourth was “At the building, it was easy to find the place the group was happening in”. Figures 4.2.2c and d show that the vast majority of men agreed with these statements. Those that did not agree were spread across the different groups, and no ‘difficult to access’ venue was identified.

We found no evidence of an association between endorsement of these four statements and the demographics described above, nor with (in)completion of the course.

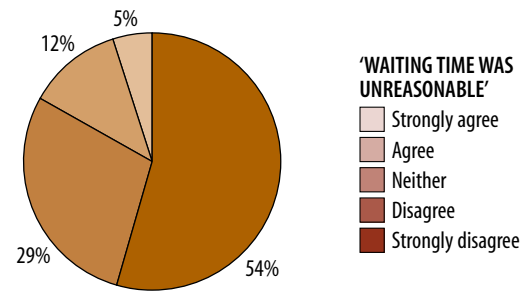


Figure 4.2.2a: Opinion of waiting time (N=84 men who attended Day One)

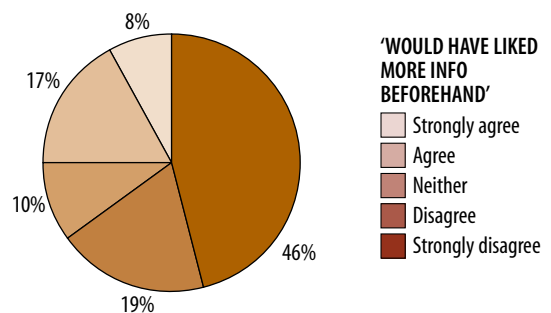


Figure 4.2.2b: Opinion of amount of pre-course information (N=84 men who attended Day One)

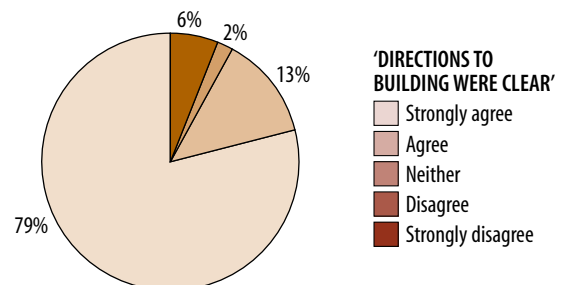


Figure 4.2.2c: Opinion of directions (N=84 men who attended Day One)

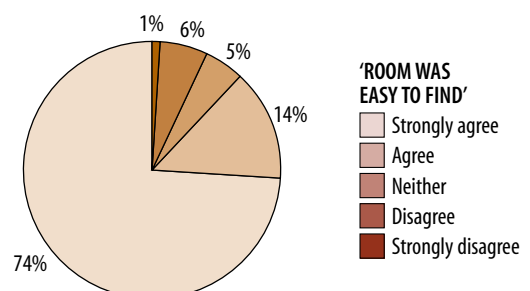


Figure 4.2.2d: Ease of locating the training room (N=84 men who attended Day One)



### 4.2.3 Cost and value

Charges for a course are part of its 'front-end,' and can be considered part of the setting which influences who benefits from the course. For example, we may expect the above profile of course completers to be different if men were asked to pay £20 to go on the course, the course was free, or they were payed £20 to attend.

Advertising for the course emphasised that it was free to participants, apart from their time. It was clear that course completers thought the course worth four of their days. Course completers were asked whether they agreed or disagreed with "Going on the course was a complete waste of time for me." The overwhelming majority disagreed strongly one month after completing the course (Figure 4.2.3). Asked to sum up his experience of the course, one man said:

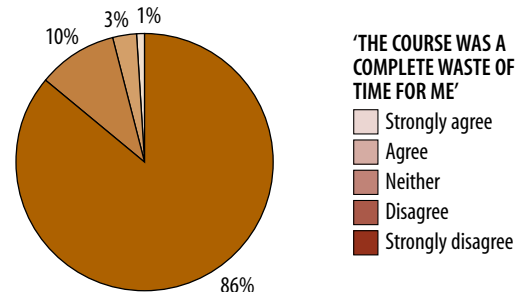


Figure 4.2.3: Rating of time invested (n=69 course completers)

**"It was of great help, it was probably the best thing that I have done in a long time ... I certainly am not sorry that I spent two week-ends doing it."**

It was also clear from the telephone interviews that some men thought the course worth some of their money as well. We should bear in mind that these are after-the-course judgements.

**"I would be prepared to pay something definitely. Whether I would have gone on this course is a different matter. I think that the skills that are offered and whatever else are worth paying for, but maybe I needed to go on it to learn that."**

That the course was free to participants was a prominent part of its advertising. It was also mentioned unprompted by several men in the interviews, when they were asked what was appealing about the course. When asked why the course being free was important, men balanced it both with their available resources, and with how much they valued the course. The value of the course is clearly related to what they got out of it. Compare these two interviewees. The first respondent had a high RAS score both before and after the course; the second had a low RAS on entry and an average RAS after the course.

***"What was it about this particular course that appealed to you?"***  
**It was for gay men and it was free ... I doubt I would have gone along if I'd had to pay for it."**

***"What was it about this particular course that appealed to you?"***  
**Well I suppose the fact that it was for gay men and that it didn't cost me anything ... I'm on a fairly tight budget and I would have been happy to pay a small charge but I probably wouldn't have been able to pay the full commercial cost."**

Given the actual cost of the course it is unlikely many men would be able and willing to pay the full cost of attendance. Charging participants a fee for the course could effectively bring only a small proportion of additional resources to it. However, a nominal fee may increase the efficiency of the course. Its clear that for some men, the chief appeal of the course is that it is free (and for gay men), and not that it can impart assertive skills. A nominal charge (which may possibly be waived) would stress the value of the course, and may attract a smaller proportion of men in less need of it.

However, charging for access to health promotion can only reinforce the economic inequalities already present in HIV infection among gay men (see Weatherburn *et al.*, 1999). It should also be recognised that this may change the perception of the course for some men. Asked to summarise his experience of the course, one man said:

***“Its my only experience of a gay targeted product which is totally non exploitative, it really is like being given a gift, its an absolute jewel.”***

Rather than charge for entry to the course, it may be more equitable to keep the course free, and explore other means of altering the setting to increase the proportion of attenders in need.

### 4.3 OBJECTIVES – WAS THE COURSE WELL RUN, WHAT WAS IT LIKE ON THE COURSE, WHAT WAS VALUED AND WHY?

Before attempting to see whether an intervention does what it is supposed to (in this case, increase assertiveness), we need to be confident that it has been properly implemented.

#### 4.3.1 Implementation quality

The post-hoc survey and T2 asked men to rate their agreement with four statements about the quality of the implementation of the course.

The first was “The group leader(s) listened carefully to what I said.” Figure 4.3.1a shows that 93% agreed with this statement, 6% indicated the middle of the scale, and only one man disagreed. For comparison, 8% of 2104 gay men visiting a GUM clinic in the last year disagreed that ‘The staff listened carefully to what I said’ (Hickson *et al.*, 1999)

Agreeing with the statement was significantly associated with completing the course: 96% of completers (n=73) agreed compared with 70% of non-completers (n=10, p<.05).

The second implementation quality indicator was “I was treated with courtesy and respect”, and again the vast majority of men agreed with this statement (Figure 4.3.1b).

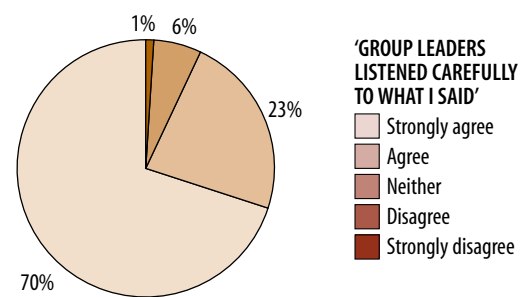


Figure 4.3.1a: Rating of individualised service (N=83 men who attended Day One)

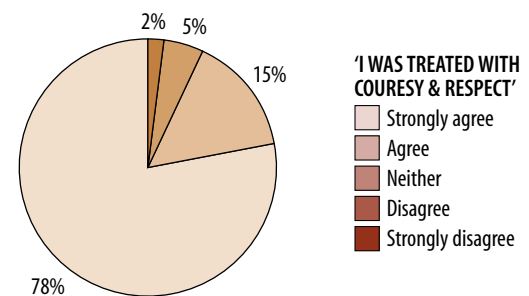


Figure 4.3.1b: Rating of manners (N=84 men who attended Day One)

The third statement was “The group leaders knew what they were doing”. None of the 84 men attending Day One of the course disagreed with this statement (Figure 4.3.1c).

**“The trainers as well I thought were absolutely excellent, really, really good, very well organised and good use of time. They seemed to know what they were talking about.”**

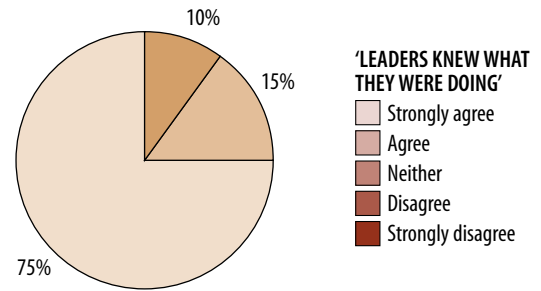


Figure 4.3.1c: Professionalism of implementation (N=84 men who attended Day One)

The final indicator of the quality of the implementation was “The organisation of the course was good” (Figure 4.3.1d). Whilst only two men disagreed with this statement, those agreeing were slightly less emphatic than on the previous statements. Agreeing with this statement was also significantly associated with completing the course: 92% of completers (n=73) agreed compared with 64% of non-completers (n=11, p<.05).

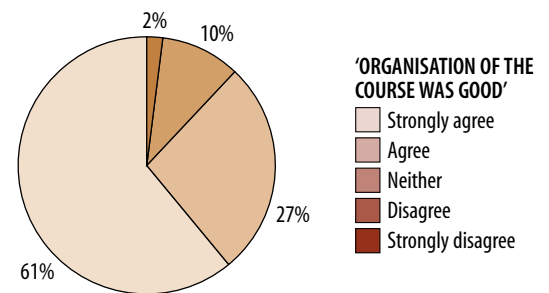


Figure 4.3.1d: Rating of overall organisation (N=84 men who attended Day One)

### 4.3.2 The learning environment

A room full of (unassertive) strangers may be expected to be a little quiet at first.

**“At the very beginning of the course, we all kind of came in and sat around in silence, and everyone was really kind of cold.”**

This atmosphere did not persist, where it was present. Men were asked to agree or disagree with “Most of the time, I did not feel safe enough with the group to express my feelings”. Eight men (11%) agreed with this statement, and were found in no particular group.

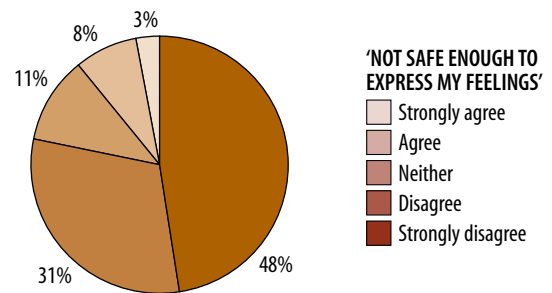


Figure 4.3.2a: Emotional safety (N=75 course completers)

For several men in the interviews, the ease of the general atmosphere of the course was memorable.

**“What about the course sticks in your memory?**

**I recall it was a friendly atmosphere, it seemed very easy, which I suppose was quite surprising because some of the things that myself and other people were talking about were quite personal.”**

**“It was a very good atmosphere, I felt very comfortable, it was a very comfortable atmosphere, it felt very supportive.”**

The self-completion forms asked men about the importance of two features of the course: the sexuality of the facilitators and the HIV status of the course participants, again using agree/disagree statements.

The first “Knowing the course leaders were gay men was important to me.” was overwhelmingly endorsed by 86% (Figure 4.3.2b). This proportion did not significantly vary across the demographic groups.

In the telephone interviews, when asked what was appealing about the course, many men offered that the course was specifically for gay men as important to them.

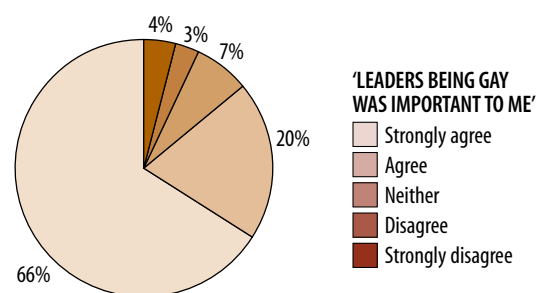


Figure 4.3.2b: Importance of gay facilitators (N=75 course completers)

**“I liked that it was run by gay men for gay men ... because some of the things you are covering are personal stuff and I think I just feel more comfortable with other gay men.”**

Remember that all these men had attended a gay specific course, so the findings refer to the importance of this feature of the course to them. We were unlikely to get the opinions of men who would not attend such a course. However, for these men, being with other gay men made a real difference.

**“It was specifically for gay men, which I thought would make it a bit easier when it actually came to speaking out loud and speaking in the group. I thought I would find it a lot more easier and would be more relaxed ... I think if it had been mixed or particularly heterosexual I don’t think I would have had the courage to speak up.”**

It is very likely that an identical course that was not specifically for gay men and bisexual men, would both attract a different profile of men, and for gay men would alter the functioning of the course and probably its outcomes. This would, in effect, be a different intervention.

The second statement was “I would have preferred to be in a group where all the participants had the same HIV status as me”. In contrast to the sexuality of facilitators, a minority of men endorsed this statement.

Response varied between those men who had tested positive and those who had not. Only one of the 62 men who had not tested positive agreed with this statement, while 79% strongly disagreed. However, of the eight men who had tested positive, two agreed and only three (38%) strongly disagreed ( $p < .05$ ).

This suggests that while men who have not tested positive would not benefit from ‘negative’ men’s courses, some men who have tested positive would prefer the option of positive men’s courses. It

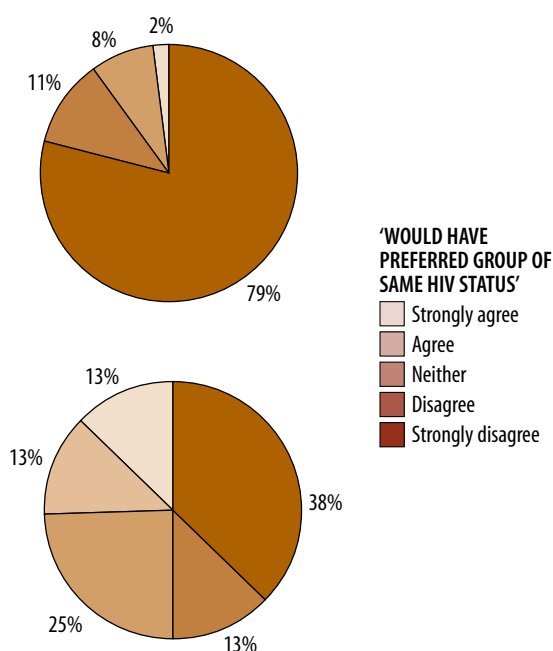


Figure 4.3.2c: Importance of same HIV status groups among men never tested negative (n=62, top) and those tested HIV positive (n=8, bottom, course completers)

would be wrong to assume that 'disclosure' is necessarily problematic for all men with diagnosed HIV infection.

**"During the course I didn't actually say anything about my status, I could have but there just didn't seem the need to, but had I chosen to it would have been fine."**

However, it is also the case that positive men in mixed courses often face the dilemma of avoiding mention of what may be an important aspect of their life, or being confronted by what this respondent recalls he used to be like.

**"I think there were a couple of guys who confessed to being HIV positive ... I think maybe I would have run away in the past from people [who were positive] ... at one time I was very fearful of HIV and if someone said to me 'Oh so-and-so is positive', I would have shunned them, not rung them up or not got in contact. Now I think I've got a bit more compassion, I liked those people so I don't see why I can't be social with them."**

While some men who are not positive may learn and benefit from being on a course with positive men, it is easy to see why some positive men may want to be on a course with other positive men only (try re-reading the above quote replacing 'HIV positive' with 'gay'). The gay specific nature of the course is important to its emotional safety for gay men. Some men who have been diagnosed HIV positive will value the emotional safety of positive only courses.

Men were asked to agree or disagree with "I enjoyed myself on the course". The vast majority agreed, with only five (7%) disagreeing. None of these five men had been on a personal development course before ( $p < .05$ ). One interviewee, when asked to sum up his experience of the course said:

**"It's a really good enjoyable memory but I've forgotten most of what I learnt."**

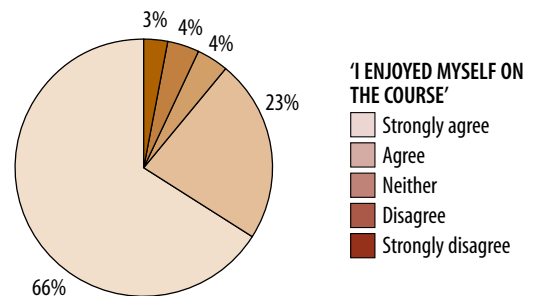


Figure 4.3.2d: Enjoyment of the course (N=75 course completers)

This illustrates why enjoyment on the course is an objective and not an aim. He enjoyed it although he thinks he learnt little. Obviously, men are more likely to stay on a course they are enjoying, especially in the early stages, but enjoying being on the course is not an indicator of success with regard to the aims. Asked to sum up his experience, another man identified enjoyment and positive change:

**"A practical and fascinating course that was enjoyable, and that has had a real impact on my life since."**

### 4.3.3 Elements and exercises

This section looks at some of the specific elements of the course listed in course description in section 2.4. In the telephone interviews, most men mentioned some specific elements unprompted. On the other hand, some elements were not remembered even when prompted for, especially after longer periods of time.

**"I suppose my difficulty is that a lot of them blur into each other."**

### Conceptual elements

These 'theoretical' elements included: Feelings, Thoughts and Behaviour; The Bill of Rights and The Sexual Bill of Rights; The Good Boy Trap; and the Anger profile. These conceptual or theoretical elements were, on the whole, less well remembered than the more practical role-plays. They were, however, valued by those who did remember them.

**"Quite interesting, more of a tool actually, explaining how they overlapped and impacted on each other."**

Men remembered descriptions of typical behaviours and responses when they recognised themselves. Of the Anger profile one man said:

**"That was interesting, I found it a little bit scary because I recognised characteristics of my own, like being sarcastic or sulky instead of saying 'No, I don't want to do this'; so yes, it was useful in recognising characteristics."**

Similarly, The Good Boy Trap was memorable and important to those men who recognised themselves being described.

**"It struck a chord because there were so many things on the list which I thought applied to me, but weren't necessarily inherent in me, but they were things I ought to do to gain acceptance. For much of my life I have done that and, therefore, I haven't really always got what I wanted because I was too busy trying to please others and give them what they wanted."**

An element was also often memorable because its inappropriateness to particular individuals.

**"There was all this stuff about the good boy syndrome or something, which just didn't make sense to me at all, well it kind of made sense but it just didn't resonate in my life at all ... I thought 'oh god, bollocks!'"**

The Bill of Rights and The Sexual Bill of Rights were often conflated by men in the interviews. After the course, men were asked to agree or disagree with "I found the idea of a Bill of Rights useful". Only five men (7%) disagreed. These five men were not found in any particular group.

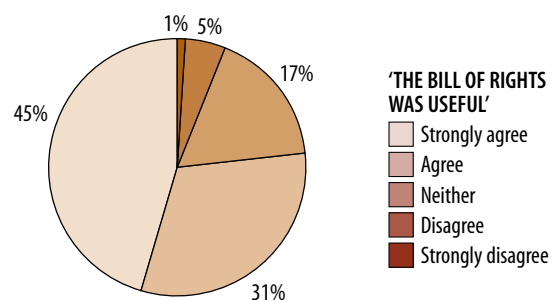


Figure 4.3.3a: Usefulness of Bill of Rights (N=75 course completers)

Although the majority of men rated this element as useful, it was also recognised as problematic by men in the interviews.

**"I thought it was interesting in theory but I also felt that it was a very difficult thing for it to work because it was everybody's Bill of Rights, and I think the problem is that if everybody doesn't co-operate then it doesn't hold up for anybody."**

This point was illustrated very well with the Sexual Bill of Rights, which emerged from the interviews as well remembered, but about two distinct and different topics. On some courses, it was remembered possibly because it was the element where there was least consensus among the groups.

**“So many people had these stupid ideas, I think the Bill of Sexual Rights was alright but people attempted to add something that was completely irrelevant to it, like having sex in public.”**

**“There were some overly strident statements that I couldn’t agree with ... I fundamentally disagree with somebody saying ‘I have the right to have sex anywhere, any time, with anybody I please.’”**

These men remembered the element primarily as being about rights to have sex (especially in public places). Whilst men disagreed with each other, some felt:

**“... it was useful because it put what I feel in perspective with what ten other guys feel, and it made me see myself fitting into a larger picture, and I think that’s very useful.”**

Other men recalled the element as being specifically about safer sex.

**“That was good for safer sex in particular, talking about that bit, and just realising that we do tend to leave ourselves open to getting ourselves into difficult situations, and its good to be in control of that.”**

These recollections suggest that the Sexual Bill of Rights in particular conveys different meanings on different courses.

### **The Personal Assertiveness Programme**

Many men saw the value of the Personal Assertiveness Programme as a tool for focussing their attention on practical, real life problems:

**“That gave me an opportunity to actually pin-point where my difficulties were and what challenges I wanted to face.”**

It also encouraged men to take it one-step-at-a-time.

**“It gave you a chance to put them all down and then to start solving some of the simple ones rather than thinking ‘Oh, this is the most important so that’s the one we have to practice on’ ... starting with the ones that appear solvable and then gradually moving onto the ones that don’t.”**

Few mentioned this element as problematic, although it may be for men who do not have a problem being assertive.

**“I found that very difficult ... I could not actually name ten situations, because I couldn’t think of the situations where I’d failed [to be assertive].”**

The Personal Assertiveness Programme is a central objective of the course, as it grounds the theory in men’s real life situations.

## Role plays

These included: Asking for what you want; Saying No; Workable Compromise; Assertive Challenges; Giving & Receiving Criticism; and Giving and Receiving Compliments.

Men were asked to agree or disagree with one statement about the role-plays as a whole: "I found doing the role play exercises useful." Again, the vast majority agreed, with only four men (5%) disagreeing, and these men were not found in any particular group. Many men recalled the role-plays as a fun part of the course.

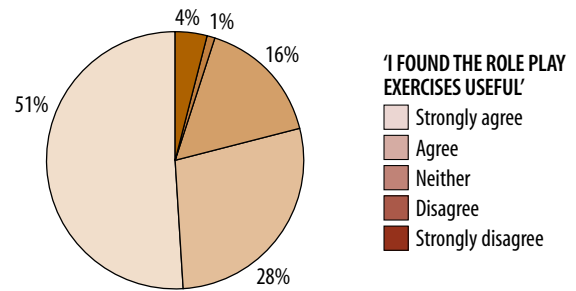


Figure 4.3.3b: Usefulness of role-play exercises (N=75 course completers)

**"Yes, 'I want my money back', that was great, I thought it was fun, it was hilarious ... all those role-play exercises were good."**

However, they also featured negatively in the interviews in several respects. Some men felt them to be somewhat monotonous. Others found them uncomfortable and particularly difficult to do.

**"Very embarrassing because it was very difficult to work out those compliments to give to people."**

**"... sitting there and listening was actually really horrible and really like cringe-making embarrassing. It was fun. It was a good learning experience, whether or not I would want to repeat it."**

Others found them difficult to imagine.

**"I thought all that stuff about shopping and taking stuff back to the shops was a bit of a waste of time .. its very unreal ... the role-play situations just didn't gel with me as situations."**

Role-plays were most memorable and useful for those men for whom the task being practised was previously difficult. The exercises give men practical ways of coping, as well as a safe environment for their practice.

**"I liked that because I've always found it difficult to say 'no' ... and I thought there were a few useful tips there where you can say 'Well, I understand what you said, but on this occasion I will have to say no', to soften it a bit, Saying bluntly 'No, I'm not going to' made me feel I was being perverse, selfish, unreasonable, and of course that's not so, and using these devices or phrases is useful."**

**"In these sort of situations people can be quite manipulative and it gives you an opportunity to face those manipulations in a supportive environment."**

## Personal & Collective Gay History

This element was not always implemented. When it was, although men enjoyed it, several did not see the point of it. While pleasant, it may be more effective to have a different 'filler'. (See also the self-assessments of change below.)



### **Follow-up**

This final element of the course involves the facilitators writing to participants one month after Day Four. This letter 'checks-in' with participants, encourages them to reflect on any changes they have experienced since the course, and asks them to communicate with the facilitators by letter about any changes. Approximately a third of course completers in the first six courses did write back. However, very few of those on the second set of six courses did so. We think this was almost certainly because they were also asked to complete the evaluation forms sent at the same time. This is a good example of where the process of evaluation interferes with the processes of an intervention. In this case, it appears that reflecting back to the evaluator replaces reflecting back to the course facilitators.

#### **4.3.5 Participants' suggestions for change in the course structure**

A specific feature of the courses that came up frequently in the telephone interviews, was the amount of material covered in the four days.

**"There is quite a lot of ground to cover in not a huge amount of time."**

Clearly, learning is a process whose effectiveness is partly dependent on timing and pace.

**"It could have been even more useful had we spent more time on one thing at a time before moving onto something new."**

This was not, however, the perception of all men.

**"I suspect everything that I have learnt from it could have been squeezed into one day rather than four."**

Many men suggested a 'top-up' course of some kind. An additional, shorter course to remind and encourage them in what they had learnt. This is not surprising, given that many had experienced considerable personal gain at little cost. The course itself generates interest. Asked to sum up his experience, one man focussed on the future.

**"The experience of the course was such that I would like to go a step further, to develop more fully the issues that were brought into my awareness and to my attention."**

## 4.4 AIMS – WAS THE INTERVENTION EFFECTIVE, DID THE INTENDED CHANGES OCCUR, WHO CHANGED MOST?

This final section of the outcome findings consider the extent to which the intervention increases men's assertiveness, and other impacts of attending the course. The evaluation gathered evidence from course participants only. The following includes what individual men themselves said in the interviews, what the group of men indicated on the forms about their experience of change, and differences in the indicators of need before and after the course. What we want to stress is that men bring as much (if not more) to the outcomes of the course than the facilitators do. What happens during and after the course is embedded in men's lives before the course, and can only be seen in that context. As one interviewee pointed out:

**"I think the danger you have in the feedback you are getting on the course, is to make a direct correlation between cause and effect, and what I'm trying to get across to you is that you catch people at certain moments in their lives and assertiveness courses act as the catalyst."**

Another recognised himself as the central 'factor':

**"Everything is obviously from me, but I think [the course] did help me a lot."**

Although men's lives are all individual and complex, it still makes sense to ask questions of the group of men who completed the course. We looked at three quantitative indicators of success among course completers: men's self-assessments after the course, change in the indicators of sexual negotiation need, and change in the RAS scores.

### 4.4.1 Self-assessment of change

Many of the changes men reported in the interviews concerned self-awareness rather than skills development. Asked to sum up his experience, one man said:

**"It was a learning experience and it was a great way for me to recognise what skills I have already."**

Men were asked whether they agreed or disagreed with three statements regarding the aims of the course. Whilst the majority of men positively endorsed all these statements, their collective endorsement was more equivocal than of the statements regarding the objectives of the course (see above).

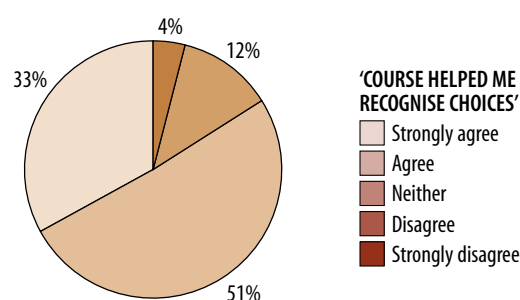


Figure 4.4.1a: Self-assessment of increased choice recognition (N=69 course completers)

The aim most strongly endorsed was "The course has helped me to recognise more clearly the choices I have in my everyday life" (Figure 4.4.1a). Among course completers, 84% agreed with this statement, and only three men (4%) disagreed. Increased choices were clearly a central outcome for some men.

**"What has been the main impact of the course since?  
Its been bloody brilliant ... in day to day life, relations with friends, sexual relations partly ...  
I've been a lot clearer about what I want, I've been able to make very clear choices, a lot**

**better at decision making, and it's improved my confidence ... I've recently had quite a difficult time and its enabled me to get through that in a very positive way."**

Regular sexual partnerships were a common area where men felt they benefited from greater clarity about choices. Several men interviewed had ended relationships (and identified the course as important in reaching that decision).

**"There was a hopeless relationship which I called a day on, and that was about my rights to what I want and the sort of relationship I want, and if I wasn't going to get that, which I wasn't, then to back out of it ... although I didn't get what I wanted at least I did come to the decision that I was better off without that relationship."**

**"It lead to me dumping my partner that was a real pain. Not as a result of the course but I mean obviously it helped me realise what it is that I really wanted."**

**"What do you think has been the main impact since you've done it?**

**Well, the relationship I was in ended.**

**Why was that?**

**It just gave me the courage, it gave me the courage to really surface without hurting the other person's feelings, as much as that is possible when you finish with someone."**

There was no significant difference, however, in the proportion of single men at T1 (before the course) compared with post-hoc (a different group of men after the course). What the course does seem to do was described by one interviewee when asked to sum up his experience:

**"It's introduced some clarity into my dealings with other people."**

Compared with the preceding item, fewer men endorsed "Saying 'no' has become easier for me due to the course", and a smaller proportion agreed strongly. Only three men (6%) disagreed with this statement (Figure 4.4.1b) while 72% agreed. However, about a quarter indicated neither agree nor disagree. The outcome of the course here is clearly an ability, not a particular behaviour:

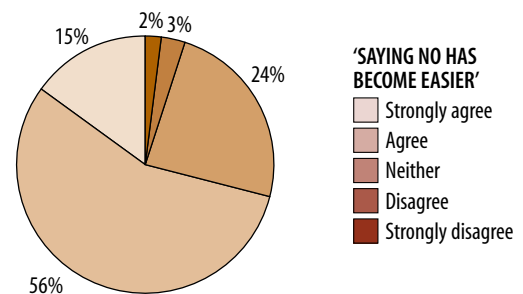


Figure 4.4.1b: Self-assessment of increased ability to say NO (N=68 course completers)

**"Yes, I think I'm better at stating my needs either way really in saying, 'No, I really want to use a condom', or 'No, I really don't want to use a condom.'"**

Clearly, the consequences of acquiring these abilities are as varied as men's lives.

The third aim-related statement was "I feel I'm more able to make everyday requests because of the course". The extent of endorsement of this statement was similar to the previous one, with only four men disagreeing.

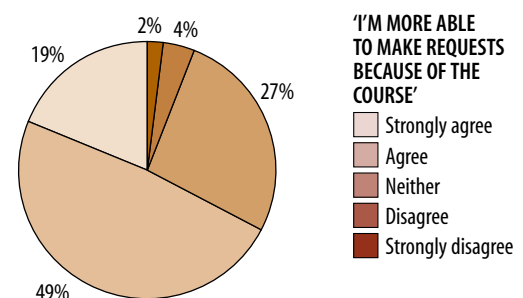


Figure 4.4.1c: Self-assessment of increased ability to make requests (N=68 course completers)

A large amount of the course content is about the concept of self-worth, and one interviewee summed up his experience of the course with:

**“I have learnt to value myself more highly.”**

The fourth statement about specific aims was “The course has increased the value I place on myself for being gay”. Again the majority of men agreed with this statement (63%). However, more disagreed here than with the previous four aim-related statements. We suspect this is because course participants already valued their being gay, or recognised it as a fact of life.

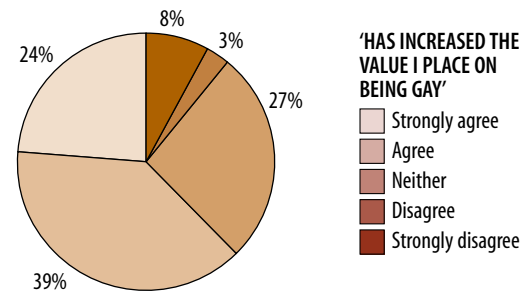


Figure 4.4.1d: Self-assessment of increased value on being gay (N=67 course completers)

**“We’ve all had ‘I’m gay and I can’t deal with it’, well okay, I’ve personally had ‘Oh my god I’m gay, what can I do about it, I can’t possibly be gay, not me’, and going into denial for years, and then I’ve had coming out of the closet. I’ve had euphoria, I’ve had ‘Oh wow, isn’t it great to be gay’, and then I’ve also gone into ‘Well actually, it’s not that great to be gay even though I certainly am.’”**

In the surveys, one man wrote by this item ‘This was not the purpose of the course for me’. This again acknowledges that participants have their own expectations of change due to the course. A general increase in self-worth was apparent in some of the telephone interviews.

**“I felt like a door mat before and I increasingly don’t feel like that.”**

Being gay was not, in itself, an issue for the men or the groups. Increases in feelings of self-worth were more generalised than simply the removal of negative feelings about being gay. Asked about the main impact on his life, one interviewee said:

**“It pointed out that I really needed to remember who I am and what I need, and what I want, and that those are good things and desirable things and positive things.”**

The final self-assessment of change statement was “I’m more able to assert myself because of the course” which almost three quarters of course completers agreed with (Figure 4.4.1e). Only four men disagreed, although a quarter (22%) indicated neither agree nor disagree.

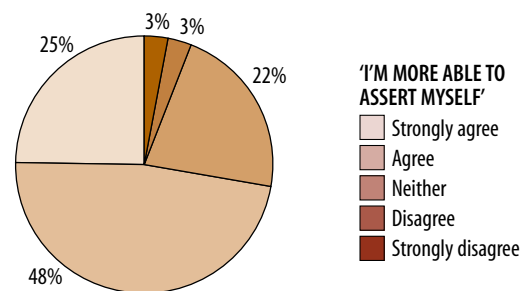


Figure 4.4.1e: Self-assessment of increased assertiveness (N=69 course completers)

Many men recognised becoming more assertive as an on-going process. Success here can only be relative, if at all. Asked to sum up his experience of the course, one man said:

**“I think it is a very well run, very interesting course, but I’m not sure you can really succeed in just two week-ends, but I think its a good attempt, but I’m not sure for me it worked.”**

### 4.4.2 Change in indicators of s/dUAI need

Men were asked to rate two statements about socio-sexual ability before and after the course (see section 4.1.2). Figure 4.4.2a gives the proportions of men agreeing and disagreeing with “I find it hard to say ‘no’ to sex I don’t want,” before and after the course. We recall that before the course 41% of men agreed. After the course 11% agreed ( $p < .05$ ).

In the interviews, most men said the course had little immediate impact on their sexual practice, but imparted them with more confidence in the future.

**“I think perhaps before this I was maybe sort of able to be persuaded to do a few things that maybe I wouldn’t have wanted to under certain situations, but now I will be able to say no definitely if I didn’t feel happy with it.”**

Similarly, more men agreed with “I can usually tell my partner/s what I like to do sexually” after the course than had done so beforehand (Figure 4.4.2b).

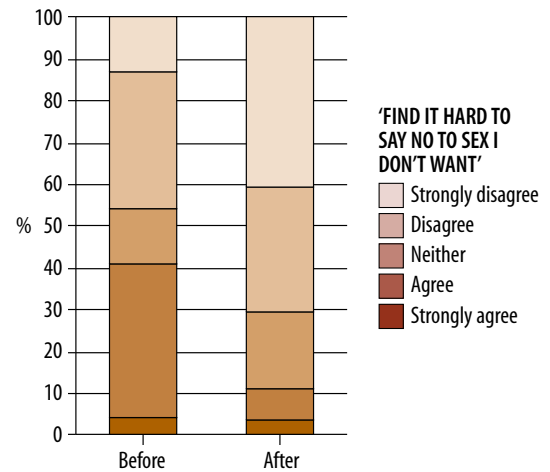


Figure 4.4.2a: Aggregate change in difficulty saying no to sex (course completers, before N=46, after N=36)

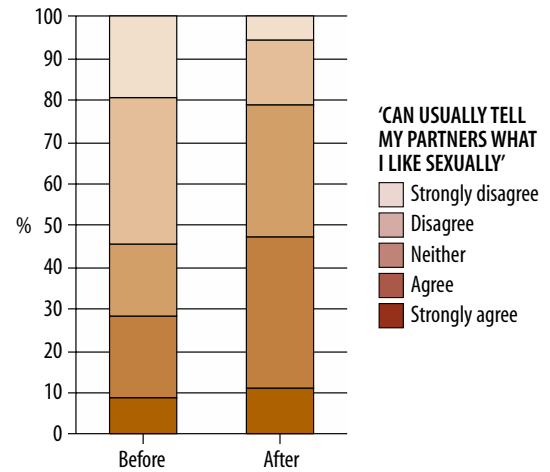


Figure 4.4.2b: Aggregate change in ability to convey sexual desires (course completers, before N=46, after N=36)

### 4.4.3 Change in RAS scores

Figure 4.4.3a shows the distribution of the RAS score after the course (of those returning T3), on top of those before the course (those returning T1). There was an overall shift in the scores, up the scale, a pattern we are unlikely to observe by chance.

The mean RAS score of course completers before the course was -20.3 (n=47). The mean score after completing the course was +9.3 (n=34). This suggests an average increase of 30 points on the RAS.

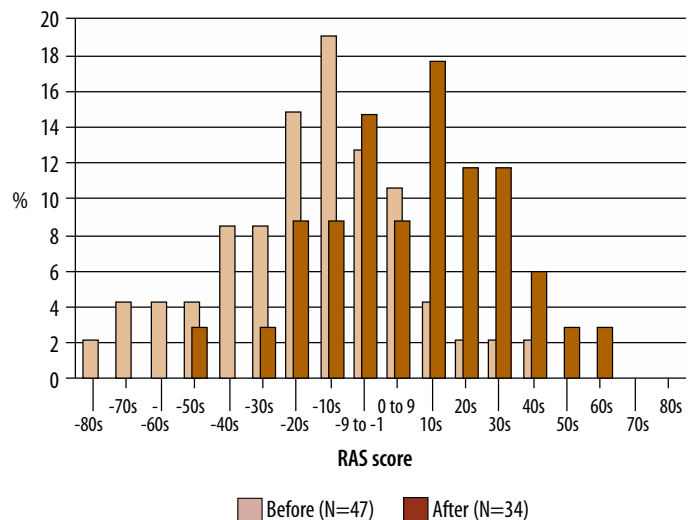
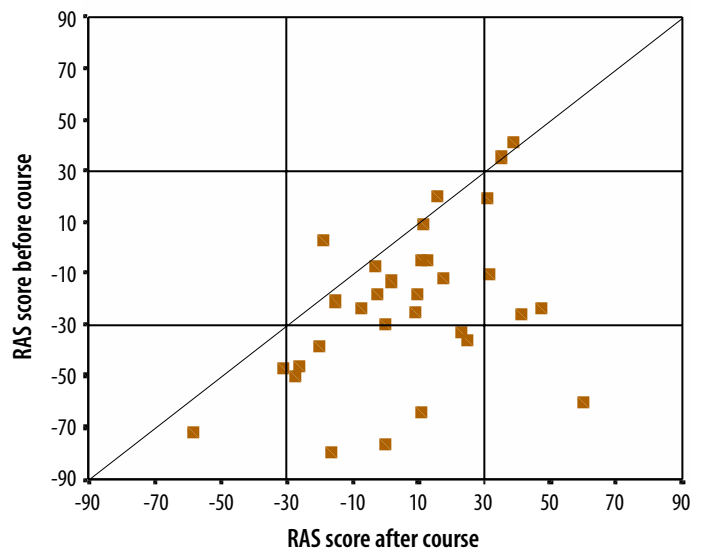


Figure 4.4.3a: Distribution of RAS scores before and after the course

Because we were able to link the before and after questionnaires for the same participants, we can look at change at the level of individual men. Figure 4.4.3b shows the RAS scores for the 31 course completers who returned both the T1 and T3 questionnaires. Each dot represents one man plotted by his pre-course score (up-down) and his post-course score (left-right). The horizontal and vertical lines show the boundaries between low-average-high scores. Men in the bottom third had a low pre-course score, the two in the left hand third still had a low score after the course.



**Figure 4.4.3b: Rathus Assertiveness Schedule (RAS) scores before and after course (N=31 course completers)**

Men who had identical scores before and after the course fall on a diagonal from bottom-left to top-right. Those whose score increased are on the bottom right of this diagonal, while those whose score decreased are on the top-left.

If the course had no impact, we would expect the figure to be symmetrical along the bottom-left to top-right diagonal. What we observe is that the majority of men lie to the bottom right of this diagonal. It is extremely unlikely we would observe this pattern by chance, suggesting the majority increased their assertiveness.

There are, obviously, questions about what happens after the point at which the third questionnaire was completed (about one month after Day Four). We may not simply assume that the gains decrease over time. One man, interviewed four months after the course, summed up his experience with:

**“A very challenging and rewarding course, and the benefits are not just as you see them at the time, they actually take a lot of physical time to work through you.”**

We found no evidence of an association between any of the demographics and changes in the RAS scores. However, the amount of change after the course was related to men’s score beforehand.

Figure 4.4.3c shows the mean RAS scores before and after the course for three groups, those with a low (<-29, n=12), average (-29 to 29, n=17) and high (>29, n=2) initial RAS score. Although the numbers involved are small, the figure clearly shows that the men who benefit most from the course are those who are least assertive when they start it.

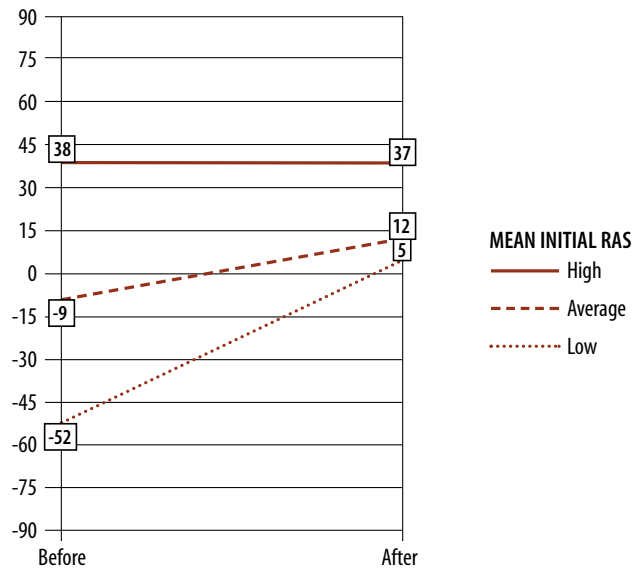


Figure 4.4.3c: Mean change in RAS score grouped by initial RAS score (N=31 course completers)

#### 4.4.4 Recommendation

The meaning of success for the course was that it increased men's assertiveness. The bulk of the preceding evidence suggests that it does. Men were asked to agree or disagree with "I'd recommend the *Assert Yourself* course to other gay men who wish to develop their assertive skills." Two men disagreed, and one indicated the neutral middle of the scale. The majority (96%) agreed, with 78% agreeing strongly. Asked to sum up his experience, one man said:

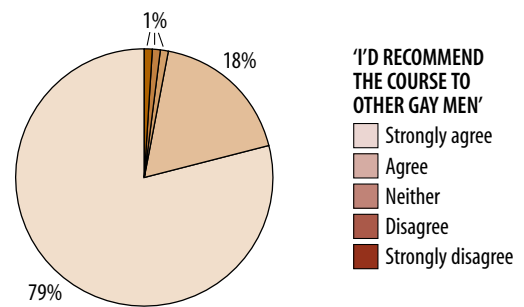


Figure 4.4.4: Recommendation to others (N=68 course completers)

**"It's been quite powerful and quite insightful about the kind of behaviour and feelings that have often made me stuck ... I've got strategies and techniques now to negotiate myself through situations, and I feel I've retained my self-esteem and pride ... it's feeling that I'm much more in control. I think that's quite important."**

## 4.5 RESOURCES – WAS THE INTERVENTION EFFICIENT?

### 4.5.1 Cost per participant & cost per change

The efficiency of an intervention at reducing need can be expressed as the amount of change in need divided by the resources required to bring about the change. The resources employed in recruiting to these twelve courses is considered in Section 4.2. Assuming an organisational structure from which to run the course, the following gives approximate expenditure on other necessary resources during these implementations, assuming thirteen attenders per intervention. Obviously, implementation could cost more or less than this dependent on local circumstance and other changes (eg. providing lunch).

approximate cost per 4 day course	£
Training space (£100x4)	400
Trainers (2x£350x4)	2800
Refreshments (15x£1x4)	60
Materials (13x£1x4)	52
Administration (round estimate)	100
<b>Total</b>	<b>3412</b>

With thirteen places per course, this is approximately £260 per place (plus recruitment costs). If we consider only those men who completed the course, this rises to £400 per completer. More importantly, since the extent of change in assertive knowledge and skills varied, this is not the same as the cost per unit of change that occurred. The cost per completer may be judged good value in regard to men who changed a lot, and poor value for men who changed little. If we judged only a third of men to have been in need, this figure trebles for cost per completer in need. Had the course retained more men to course completion, or recruited more men in greater need, then the cost per change would have been less.

Whether or not the course is efficient at increasing assertiveness is predominantly a matter of comparison. For example, what other interventions are available that bring about an increase in assertiveness? Can we bring about a greater increase for more men with fewer resources by employing a different intervention? While it is true that the same amount of resources as used in this course could be employed to give a much larger number of men, say a book about assertiveness (if not a small library), there is no evidence that solitary reading is an effective method for increasing assertiveness. The foregoing, on the other hand, does provide rigorous evidence of the effectiveness of the *Assert Yourself* course.



# 5 Conclusions & recommendations

*Ford Hickson & Richard Boxford*

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## 5.1 CONCLUSIONS FROM THE EVALUATION RESEARCH

Although all course completers were probably within the target group, at least a quarter of course completers may not have been in need of what the course has to offer. The course did not disproportionately benefit groups thought to be most likely to be involved in sero-discordant unprotected anal intercourse in terms of age (younger men), education level (lower education) or HIV testing history (tested HIV positive). Course attenders were more likely to be single than most research samples of gay men.

Most men heard about the course through adverts in the gay press, and a third of those attending the course would have liked to know more about the course before attending. Earlier attrition appears to be due to a mismatch between need and what the course offers. Later attrition appears to be due to unforeseen circumstances (eg. illness).

These implementations of the course were administered and delivered to a very high quality. Most men experienced the course as enjoyable, and it provides a safe and supportive environment for the majority of men. The course being specifically for gay men and bisexual men is central to its performance, and for similar reasons a 'positive gay men's' course may be of increased value to some men with diagnosed HIV infection.

The majority of men identified change in themselves as a result of the course, this included increased self-awareness, understanding of personal rights and acquisition of skills and techniques for everyday living. On a standardised measure of assertiveness, men were more assertive one month after the course than before it. Men who were least assertive before the course, gained more from the course than those who were more assertive.

## 5.2 RECOMMENDATIONS FOR FUTURE IMPLEMENTATIONS

### *5.2.1 Increasing the effectiveness of the intervention by altering the objectives*

Clearly, the course would probably be more effective if it were longer (or even on-going). However, this cannot be done within the same resources. If additional resources are available, a follow-up day would probably increase effectiveness and be used by many course completers.

The effectiveness of the course may be increased without additional resources by spacing the four days over a four week-ends, or if this is expected to have an adverse effect on attrition, splitting the second weekend. This may give men more time to practice skills in real life situations, and a longer period over which to learn skills.

Several men felt the course tried to cover too many elements in too short a time. Merging some of the elements and appearing to have fewer individual units with separate names may be more effective.

### ***5.2.2 Increasing the efficiency of the intervention by altering the setting***

The efficiency of the course may be increased by targeting it more precisely to men who need it. This would probably require a pre-entry assessment of assertiveness and a willingness to refuse entry to men who were already of above average assertiveness.

Increasing the amount of information given to prospective course attenders about the content of the course, its intended audience, and its intended outcomes may allow men to self-select with more accuracy.

### ***5.2.3 Increasing the contribution the intervention makes to reducing HIV incidence by expanding the aims (and consequently the objectives)***

Many men attending the course undoubtedly have other unmet HIV-prevention needs. Over four days, it would be possible for the course to ensure men leave with fewer unmet. This does not mean putting HIV or sex at the centre of the course, as its obvious centre is assertiveness. It could mean considering what those unmet needs are and adapting or introducing elements accordingly. Distribution of an information and referral pack for gay men's health promotion services would be another, more simple way to contribute to a reduction in men's other needs (clearly such a resource needs to exist first).

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# Appendix: the Rathus Assertiveness Schedule (RAS)

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Instructions: Indicate how characteristic or descriptive each of the following statements is of you by giving each one a number from -3 to +3, using the code given below:

- 3 very **un**characteristic of me, extremely **non**-descriptive.
- 2 rather **un**characteristic of me, quite **non**-descriptive.
- 1 somewhat **un**characteristic of me, slightly **non**-descriptive.
- +1 somewhat characteristic of me, slightly descriptive.
- +2 rather characteristic of me, quite descriptive.
- +3 very characteristic of me, extremely descriptive.

1. Most people seem to be more assertive than I am.
2. I have hesitated to make or accept dates or chat-ups because of shyness.
3. When the food served in a restaurant is not done to my satisfaction, I complain about it to the waiter or waitress.
4. I am careful to avoid hurting other people's feelings, even when I feel that I have been injured.
5. If a salesperson has gone to considerable trouble to show me goods or merchandise that are not quite suitable, I have a difficult time saying no.
6. When I am asked to do something, I insist upon knowing why.
7. There are times when I look for a really good argument.
8. I strive to get ahead as well as most people in my position.
9. To be honest, people often take advantage of me.
10. I enjoy starting conversations with new acquaintances and strangers.
11. I often don't know what to say to men I find attractive.
12. I will hesitate to make phone calls to business establishments and institutions.
13. I would rather apply for a job or for admission to a college by writing letters than by going through with personal interviews.
14. I find it embarrassing to return things I've bought to a shop.
15. If a close and respected relative were annoying me, I would smother my feelings rather than express my annoyance.
16. I have avoided asking questions for fear of sounding stupid.
17. During an argument I am sometimes afraid that I will get so upset that I will shake all over.
18. If someone I didn't know very well made a homophobic or anti-gay comment in front of me, I'd let them know that kind of talk is unacceptable.
19. I avoid arguing over prices with shop assistants and sales people.
20. When I have done something important or worthwhile, I manage to let others know about it.
21. I am open and frank about my feelings.
22. If someone has been spreading false stories or gossip about me, I see that person as soon as possible to have a talk about it.
23. I often have a hard time saying no.
24. I tend to bottle up my emotions rather than make a scene.
25. I complain about poor service in a restaurant or elsewhere.
26. When I am given a compliment, I sometimes just don't know what to say.
27. If a couple near me in a theatre or cinema were talking rather loudly, I would ask them to be quiet or to take their conversation elsewhere.
28. Anyone attempting to push ahead of me in a queue is in for a good battle.
29. I am quick to express an opinion.
30. There are times when I just can't say anything.

To score: First reverse the sign (eg. make +3 into -3, and -1 into +1) on the following items: 1, 2, 4, 5, 9, 11, 12, 13, 14, 15, 16, 17, 19, 23, 24, 26 and 30. Then add up all 30 scores to give a total between -90 and +90.