

INTEGRATING MENTAL HEALTH SCREENING, BASIC SUPPORT, AND REFERRAL TO SEXUAL HEALTH SERVICE DELIVERY AT A ONE-STOP-SHOP COMMUNITY-LED CLINIC: RECOMMENDATIONS FOR UNDERRESOURCED ASIAN COUNTRIES

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Background/Purpose:

Our past research suggests a high prevalence of mental health needs among Vietnamese men who have sex with men (MSM). However, very few one-stop-shop community-led clinics in Vietnam offer mental health support in tandem with their diverse sexual health services. Our pilot program aimed to examine the uptake rate for mental health support among MSM sexual health service users at our clinic and identify challenges to the acceptability of our integration.

Approach:

Our clinicians received a 2-day intensive training on mental health screening, basic support, and referral. They then initiated integrating screening to our online service request form and our sexual health service protocols. And they provided emotional support, support plans, and referrals to those with elevated needs.

Outcomes/Impact:

From May 1st to June 1st, 79 of all 114 MSM sexual health service clients (69%) consented to being screened for mental health needs at the basic level. Of 17 clients recommended for advanced screening, 13 utilized the service and 9 were identified with mild and above levels of depression and/or anxiety. While all 9 were provided with basic mental health support and introduced to referral services, none were interested in initiating referrals. Given clients' feedback, the main reason for opting out of further screening was their restricted time planned for clinic visit. Given clinicians' feedback, key challenges to providing quality mental health support were their own lack of appreciation of mental health as a health need and their poor confidence in related knowledge and skills.

Innovation and Significance:

Our findings demonstrate the potential of integrating basic mental health support to sexual health service delivery for community-led clinics in underresourced Asian countries. Other clinics should consider assigning a specific case worker preferably with a psychology background to effectively address clients' concerns. Alternatively, they should provide existing clinicians with comprehensive training on mental health literacy and basic support.

Disclosure of Interest Statement:

None to be declared