Within the BME community people living with HIV, and who also have poor mental health, face many challenges:

- Isolation
- Stigma and self-stigma
- Lack of mental health support services
- Long waiting lists to access psychological care
- Lack of BME peer support and mentors
- Poor signposting for professional help
- Cultural & religious constraints
- Immigration issues
- Poverty – and that includes the homelessness that poverty brings about

And poor mental health can have an impact on a person’s adherence to their HIV meds. This in turn can bring about HIV rebound with the need to try new ARVs to avoid opportunistic infections.

As a person living with HIV in Leicester for the last three years I have accessed the three main charities that support people living with HIV:

- Faith in People with HIV – for all people of all faiths and none
- TRADE – free health advice for gay, lesbian, bisexual & trans communities
- LASS. Leicester AIDS support services

These three charities offer free optional counselling.

Leicester is a multicultural city. It is also a Home Office refugee dispersal area, which has seen a slight increase in number of BME HIV positive people.

There is an LGBT centre for the BME LGBT community, which also provides counselling, free information, advice and guidance for people living with HIV. Sexual health charity TRADE has quite a number of South Asian LGBT community, although they are not HIV positive but seek advice and support with their sexuality and counselling.

I spoke to the LGBT & TRADE charities. They have very few HIV positive LGBT people from the BME community service users. Although the LGBT centre is making efforts to encourage this group to access their services, their efforts have not been very successful.

There are no specific black minority mental health support services in Leicester for people with HIV. And we all know the relation between mental health and HIV, mainly during first diagnosis.

However there used to be a mental health support charity specifically for BME groups called AKWAABA open to all, including HIV positive people. But it was closed due to lack of funding.
There are two other mental health charities: MIND (for all the UK) and LAMP (Mental Health in Leicester), these are open to everyone. In my past three years experience of volunteering in Leicester I’ve never known anyone who is HIV positive and accesses, or would like to access, MIND or LAMP due to lack of signposting and referral. For even when the person is referred, the majority tend to decline due to self stigma and unwillingness to share their HIV status with a non-HIV charity.

I personally have a mental health condition. From the point of diagnosis, in 2013, it took four months to get access to psychological therapy. I had two years of psychological therapy, once a month. It was less regular towards the end of the second year, when I used to see my psychologist every three months.

I gave the hospital permission to share my diagnosis with my GP, who talked me through my mental health condition and prescribed anti-depressants. Other people living with HIV in the BME community also find this a hard topic to discuss with their GPs and are reluctant to accept psychology services. The reason why I chose to disclose to my GP is because I was concerned about drug-drug interactions. I was glad I accepted shared information between primary care and hospital because I was informed by my consultant that some ARV drugs could raise drug levels of some antidepressants.

The health care professionals who have been valuable to the BME HIV positive community are the HIV specialist nurses. Unfortunately they are very stretched in Leicester – we only have three nurses.

Other valuable health care professionals for HIV positive people are the psychologists at the Leicester Royal Infirmary. But we only have two that are funded to work in HIV, and each works 18.5 hours per week. According to the medical psychology department at the Leicester Royal Infirmary they see a high number of people from the BME HIV community with a good number of them completing therapy with good outcomes.

The psychology department in Leicester have been trying to make contact with all people who are newly diagnosed. At least to inform them about their services should they need them at any time now or in the future. They respond very quickly to urgent referrals that are currently seen within a week on average.

The psychology department in Leicester Royal Infirmary is working really closely with HIV specialist nurses and the two main HIV charities, Faith in People and LASS. They also are planning to be dropping in to the HIV charities to talk to people who are too anxious to attend psychological therapy. They hope to give them the opportunity to meet informally and have an introduction to their therapy services. The psychologists also visit the HIV clinic to introduce themselves to new-diagnosed patients in case they decide to access psychological therapy during their journey with HIV.

There is a lot of anxiety amongst the BME HIV community in Leicester, and across the UK, because of the lack of HIV and mental health services.
Now, especially because of the impending Brexit, we are encouraging HIV positive people in Leicester to join the “Stop the HIV cuts” campaign. We hope they will speak to their local MPs about the further diminishing HIV and mental health services.

To conclude I would like to pay a tribute of thanks to “Positively UK” for bringing Project 100 Peer mentoring training to Leicester. This is going to be an uplifting start to empower all people living with HIV including BME community to be mentors to the newly diagnosed.