



Haringey Council

Scrutiny - Men's Health: Getting to the heart of the matter

THURSDAY, 8TH DECEMBER, 2011 at 17:30 HRS - .

MEMBERS: Councillors Winskill (Chair), Waters, Hare and Rice

AGENDA

1. APOLOGIES FOR ABSENCE

2. URGENT BUSINESS

The Chair will consider the admission of any late items of urgent business. (Late items will be considered under the agenda item which they appear. New items will be dealt with at item 11 below).

3. DECLARATIONS OF INTEREST

A member with a personal interest in a matter who attends a meeting of the authority at which the matter is being considered must disclose to that meeting the existence and nature of that interest at the commencement of that consideration, or when the interest becomes apparent.

A member with a personal interest in a matter also has a prejudicial interest in that matter if the interest is one which a member of the public with knowledge of the relevant facts would reasonably regard as so significant that it is likely to prejudice the member's judgement of the public interest and if this interest affects their financial position or the financial of a person or body as described in paragraph 8 of the Code of Conduct and/or it is related to the determining of any approval, consent, license, permission or registration in relation to them or any person or body described in paragraph 8 of the Code of Conduct.

4. MEN'S HEALTH FORUM

To hear from Peter Baker, Chief Executive of the Men's Health Forum.

5. LOCAL PHARMACEUTICAL COMMITTEE

To hear from representatives of the Local Pharmaceutical Committee.

6. WHITTINGTON HEALTH

To hear from Adam Smith, Deputy Director Strategy & Engagement and Fiona Yung, Head of Long Term Conditions

7. HEALTH TRAINERS

To hear from Vanessa Bogle, Senior Public Health Commissioning Strategist on the Health Trainer programme and other preventative programmes.

8. REVIEW IMPACT STATEMENTS

To agree the Impact Statements as part of the Centre for Public Scrutiny Pilot.

9. MINUTES (PAGES 1 - 10)

To follow.

10. DATES OF FUTURE MEETINGS

15th December, 6.15-7pm (Reflection session run by the Centre of Public Scrutiny)

11. NEW ITEMS OF URGENT BUSINESS

To consider any items submitted under Item 2 above.

David McNulty
Head of Local Democracy
and Member Services
Level 5
River Park House
225 High Road
Wood Green
London N22 8HQ

Melanie Ponomarenko
Senior Policy Officer
Level 7
River Park House
225 High Road
Wood Green
London N22 8HQ

Tel: 0208 489 2933
Email:
Melanie.Ponomarenko@Haringey.gov.uk

This page is intentionally left blank

Men & Health



Haringey breakdown

- Most diverse in Europe.
- Many 35 plus men have experiences outside of the UK.
- Haringey is part of a larger picture within North-East London, of constantly flowing migration within the Capital.
- Similar migration occurs within Hackney, Stoke Newington, Edmonton & some parts of Islington

Haringey breakdown

- ♦ The West of the borough Amongst the Affluent in Europe – especially Crouch hill, Muswell Hill and parts of Highgate.
- ♦ The east of the Borough in the top 10% of the most deprived in the UK.
- ♦ David Lammy is quoted as stating that the park lane ward has “the highest level of unemployment in the Capital”

Reasons for not accessing health

- ◆ High number of female medical professionals.
- ◆ Not speaking English – coming from non-commonwealth countries.
- ◆ Ego & personality – a feeling inferiority when discussing health with women.
- ◆ Cultural barriers related to exposing their health issues to non-male health professionals.

Reasons for not accessing health

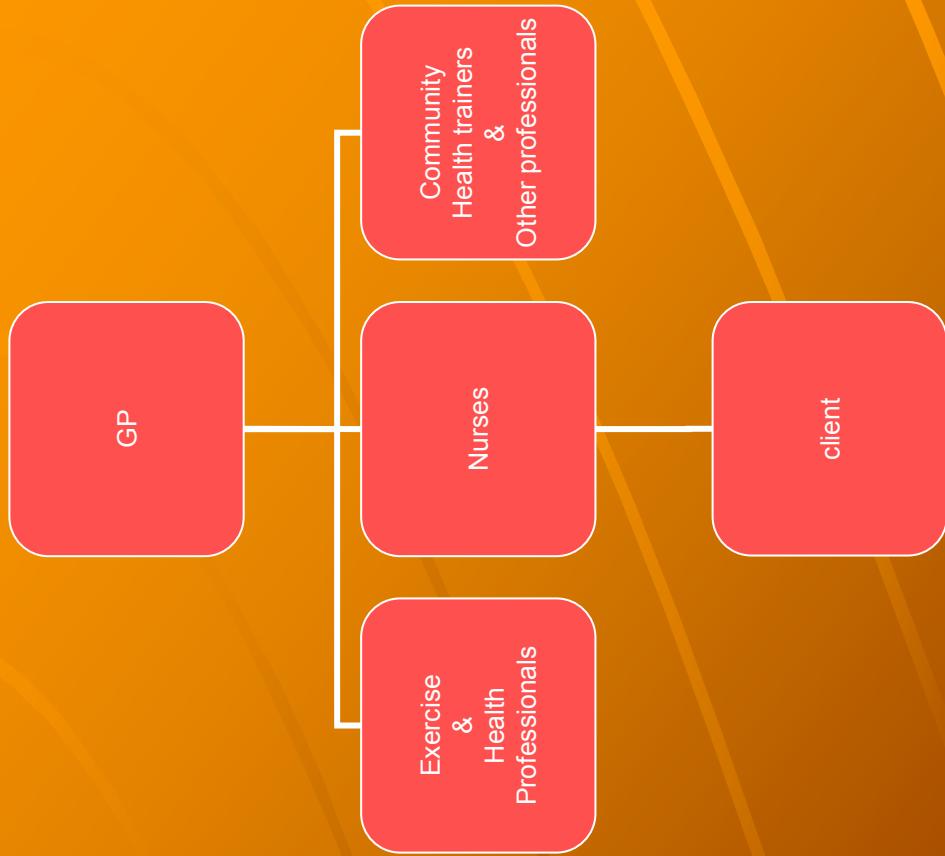
- A greater social shift within the male-female dynamic in the UK.
- Non professional working class males – irrespective of race are increasingly having to access services delivered by females.
- Older men are finding this adjustment difficult.
- Male chauvinism – too simplistic a reason.

Reasons for not accessing health

- So.....
- The Average white working class male has issues related to accessing health services.
- Men from other non white UK backgrounds have additional barriers.
 - Culture
 - Language
 - Tradition

Solutions.....

- Find more male GPs.
- Develop a more integrated/fluid system.
- Create a 2nd line of professionals to engage male patients.



Solutions.....

- This may include employing/using as volunteers Like:
 - ♦ Fitness related professionals to give health MOT's.
 - ♦ Male healthcare professionals to run screening sessions.

Solutions.....

- ◆ Roving Health Bus (Similar to the 4YP concept).
- ◆ Try to identify male "hangouts" to engage men.
 - Like:
 - ◆ Pubs & night spots
 - ◆ Barber shops
 - ◆ Caribbean/African take-away's

Solutions.....

- Start introducing female style male screening at secondary school in order to breakdown negative perceptions.

