

Briefing for:	Scrutiny Review Panel – Men's Health: Getting to the heart of the matter
Title:	NHS Haringey AGM and review launch consultation feedback
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The NHS AGM was attended by a range of different people and organisations. This included:

- Whittington Health
- Haringey Council
- Local Councillors
- Local men
- Health trainers
- GPs
- Clinical Commissioning Group Consortia
- Local Involvement network

Each table had a facilitator and note taker and discussed the areas as below.

How do we get men to go to health services when they have early symptoms? What is it that prevents them from going early enough?

General comments

- Wait until at deaths door before going to the Doctor.
- GP pointed out that when people register at the Dr they get a lifestyle check which is a good way to pick up anyone which may need intervention.
- Men will do anything to hide what is wrong with them.



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Women are use to going to the Dr/medical places and talking about their health e.g. birth control pregnancy, birth, taking children, health visitors etc. (however it was noted that men are increasingly playing a bigger role in the health of their children.

Men as providers

- Men as the providers/bread winners
- A lot of men have their own hierarchy of need and what they need to do – primarily this means that going to work and providing is more important in their minds than going to the Dr.
- Education of women and other family members that men may be frightened of not being able to provide.

Work constraints

- "Don't have time/can't take time off work"
- Would like to not have to take time off work

Pyschological barriers

- Fear of own mortality/what might happen not to do with actual treatment.
- Going to the GP is a sign of weakness.
- Try and hide symptoms that they have
- "Peter Pan" syndrome invincible/won't get ill/won't get old.
- Psychological barriers for men expectation of role in society. Men would rather not know until it is inevitable.
- Fear of someone telling you how to change your life.
- Fear of showing 'private areas' to female practitioners
- Men think if they complain there are women
- Men suffer secretly
- No sense that it is their responsibility
- By going to the GP they are admitting they have an illness
- Frightened of the outcome if you are sick.



Environmental/physical barriers

- Don't want to sit in a waiting room full of women and children feels like a women's environment.
- Gender specific staff and clinics ask for a male doctor? Feel uncomfortable talking to a female about some things.
- More comfortable when more men are around.
- Don't like having someone 'poking and prodding' them.
- Hours of GP practice make it difficult to attend.

How do we encourage men to keep themselves well?

- Men's clinic day?
- Need to target adolescent boys to 'normalise' GP visits.
- Mother's of boys = health educators.
- Need to dispel the idea of frequent users as hypochondriacs.
- Advice on where to seek help if ill. E.g. A&E or GP
- Mobile units/Take screening 'on the road' like they do for Breast Screening – somewhere on the High Road?
- Having an event at the Spurs ground with added incentive of tour of the grounds
- Walk in health check would take half an hour at supermarket, car parks, religious centres.
- Think about men's health days in the pub/social club
- Have mobile access use famous people to draw crowds
- Breakfast meeting at surgery drop in like session
- Incentive for men to come.
- Tendency to not want to be seen to be making a fuss establish and publicise what isn't a fuss and should be taken seriously.
- Raise awareness of signs and symptoms of illness e.g. Diabetes through:
 - 1. Advertising campaigns



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- 2. health champions
- 3. through their wives
- 4. internet

N.B. Would be interesting to know if access time/later opening are accessed by those who need those slots e.g. because of their hours of work