

Campaigning to improve men's health

Men's health is in a poor state. Next week sees the start of "Pop down your local", a Developing Patient Partnerships campaign to encourage men to make better use of pharmacies. **Clare Bellingham** finds out what pharmacists can do to help improve men's health

Men, on the whole, are reluctant users of health services. Look around any pharmacy or GP surgery waiting room and men are usually in the minority. Most men's approach to health is based upon ignoring symptoms until they become so severe that they interfere with everyday life. And at this point, a visit to a health professional is deemed acceptable. Research shows that, on average, a man waits 14 weeks between spotting a symptom of testicular cancer and consulting a doctor.

Yet the reason for this is not that men are healthier than women. Indeed, men have a lower life expectancy than women. Men's reluctance to use health services stems from a number of complex, inter-related reasons that are only just beginning to be understood.

Why does this reluctance to consult a health professional exist among men? According to Men's Health Forum, there are three important factors:

- **Access** Health services tend to be open only during working hours which can make access difficult
- **Cultural norms** Men believe that there is an expectation for them to cope with illness and not admit to "weakness". Men are also concerned about not wasting doctors' time
- **False perceptions** Men see the health service as something primarily for women and children

The bad news does not end there. These factors are coupled with behaviour differences between men and women. Masculinity is associated with increased risk-taking and this includes taking risks with health. Two in five men drink too much, over a quarter of men smoke and one in three young men use illegal drugs. The data on obesity are alarming: 47 per cent of men are overweight and 21 per cent are obese.

In some respects, men's health is getting worse. Over the past 10 years, diagnoses of testicular cancer and prostate cancer have increased. Rates of malignant melanoma among men have also gone up and deaths from chronic liver disease, largely due to alcohol misuse, have increased five-fold.

While women's health issues, particularly female-specific cancers, have gained a high profile, little attention has been paid to male health. The Men's Health Forum suggests that one of the reasons that men's health has not been tackled is because of a "mistaken belief that differences in health status between the sexes are mostly the result of biology and are therefore inevitable".

The poor state of men's health is reflected in life expectancy figures. The UK average life expectancy for a man at birth is 75.6 years compared with 80.4 years in women. These figures are just the average, male life expectancies vary according to social class and around the UK. For example, men living in East Dorset can expect to reach their 80th year, but those in the most deprived areas of Glasgow have a life expectancy of only 63 years. Affluence is known to increase life expectancy but even comparing the life expectancy of women in the lowest social class with men in the highest social class, women come out on top.

Projected figures suggest that this pattern will continue unless something is done to change the state of men's health. One thing is for certain: old habits die hard and men are not going to change overnight. So health service providers need to ensure that services match men's needs and that they are the types of services that men will use. A prevailing assumption in primary care is that "the services are there and men can use them" but this is not enough. The challenge is to help men interact with services proactively.

Improving services

Men's Health Forum recognises that community pharmacies have potential to meet some of the gap in the men's health market. It suggests that pharmacies could offer more information, advice and guidance for self-treatment to men. However, pharmacies remain significantly under-used by men. This is now being tackled by health education charity Developing Patient Partnerships. Through its new campaign, starting next week, it aims to encourage more men into pharmacies.

Why men do not like using pharmacies is a mystery. "It is quite surprising considering the organisation barriers that prevent access at GP surgeries do not apply to pharmacies," says Peter Baker, director of Men's Health Forum. After all, pharmacies are often open beyond working hours and at weekends, there is no need for an appointment and men can access any pharmacy they choose, including one near to their workplace.

So what is the problem? Mr Baker has two suggestions. "First, it is the way pharmacies are marketed. They appear to be a service for women and children and the vast majority of products on display are for women. Men's products just aren't prominent and so the pharmacy does not appear to be male-friendly," he explains. The second reason is understanding. "Men do not understand that the pharmacy is a source of help and information. Pharmacies have not been promoted in this way."



Mr Baker suggests that a first step to improving this situation is a media campaign specifically aimed at men to raise their awareness of using pharmacies. "Pharmacists also need to address how the pharmacy is presented, looking at factors such as the design of the store, the products on display, and posters and leaflets. They need to ensure that men realise that their needs will be met in the pharmacy," he explains.

One way to attract men into the pharmacy in the first place is to offer a basic health check, marketed as an "MOT", says Mr Baker. "Men like lists of numbers so they can assess how they are doing. So include tests like a cholesterol check and blood pressure measurement." Once the man has been enticed into the pharmacy, the pharmacist then has an opportunity to talk about other health issues.

Pharmacies do face a particular problem and that is privacy. "The service has to be confidential," says Mr Baker. "Men won't want to talk about intimate problems in front of other people." Experience with other services has shown that confidential and particularly anonymous services, such as telephone helplines and websites, are a real hit with men. This is thought to be because they allow men access to health information without having to admit a weakness in public. Ensuring that men know they can ask to speak to a pharmacist in private, including by telephone, is essential. Another possibility is for pharmacies to stock more leaflets about male-specific health issues: men need to feel that information is directed at them.

Men want services that are quick and convenient, which is exactly what pharmacy can offer. It is just that until now men have not realised it — something that the DPP campaign looks set to change.

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