

STATE OF MEN'S HEALTH

January 21, 2020 – CPG on Health Inequalities

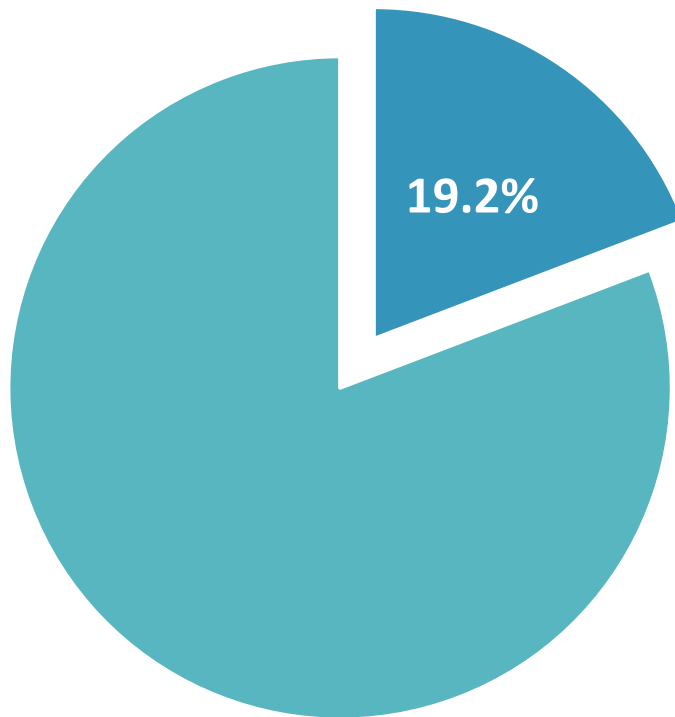
ABOUT THE MEN'S HEALTH FORUM



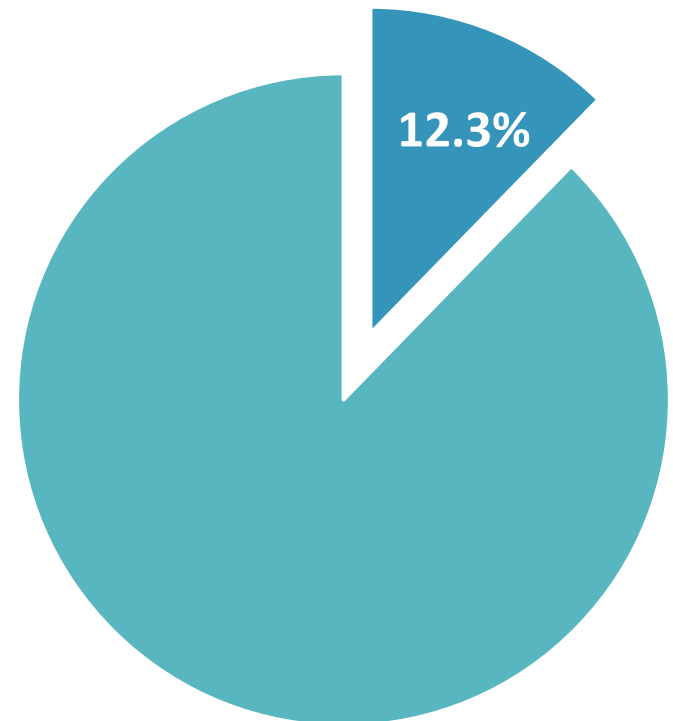
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- **Our mission:**
To improve the health of men and boys
 - **Our ambition:**
All men and boys - particularly those in the most disadvantaged areas and communities - will have the information, services and treatments they need to live healthier, longer and more fulfilling lives.
 - **Founded in 1995 by the Royal College of Nursing**
 - **Expanded remit to include Scotland in 2016**
 - **Current and recent partners include:**
 - University of Stirling
 - University of Aberdeen
 - NHS Grampian
 - NHS Orkney

NEARLY 1 UK MAN IN 5 DIES UNDER 65

Male deaths – under 65



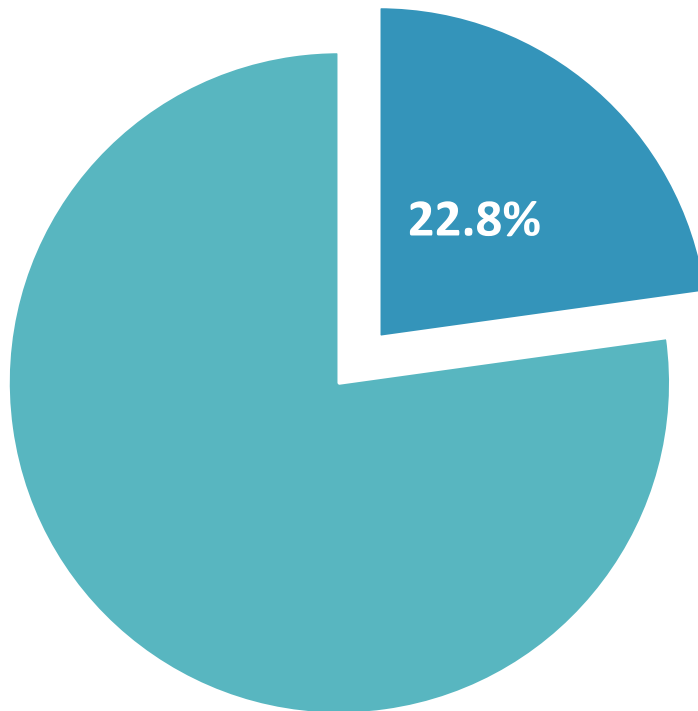
Female deaths – under 65



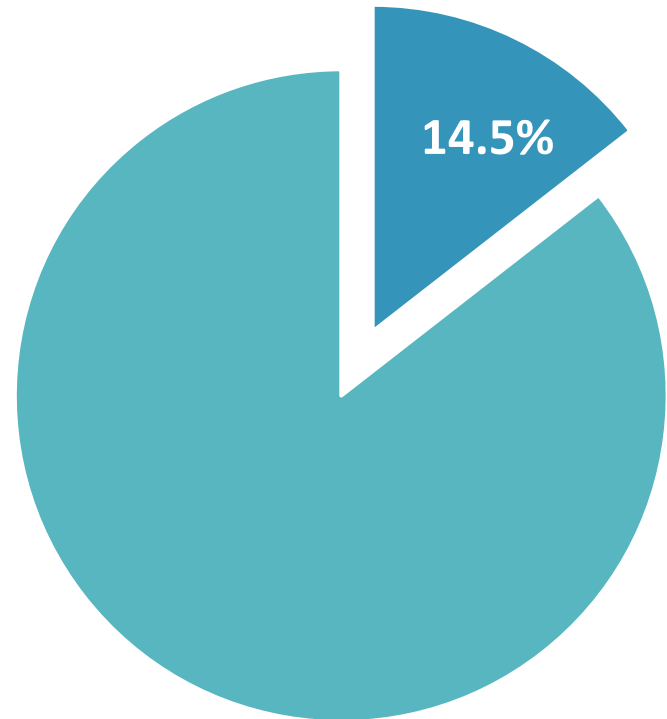
Source: ONS 2018

IN SCOTLAND, NEARLY 1 IN 4

Male deaths – under 65



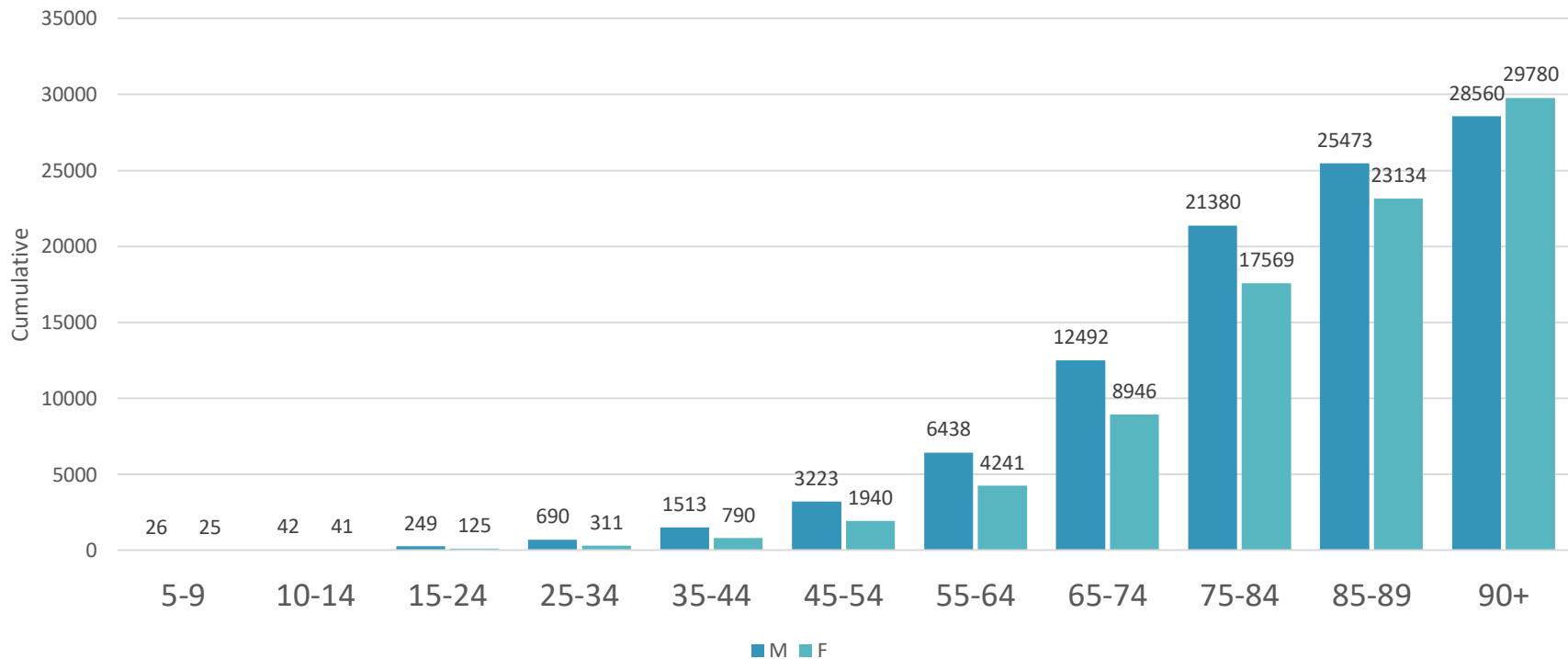
Female deaths – under 65



Source: NRS 2018

WHY MEN'S HEALTH?

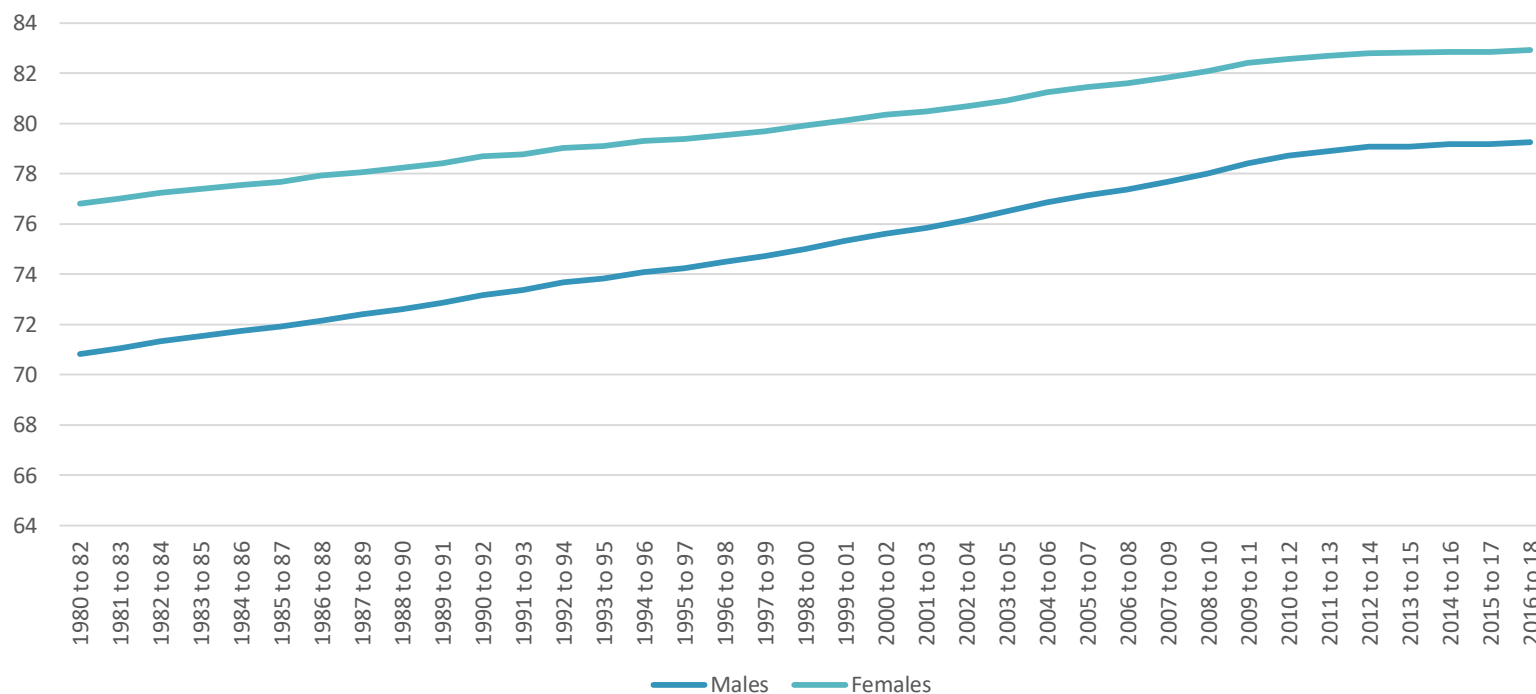
Male and female deaths by age, Scotland, 2018



Source: National Records of Scotland (NRS), 2018

GAP CLOSING... IMPROVEMENT SLOWING...

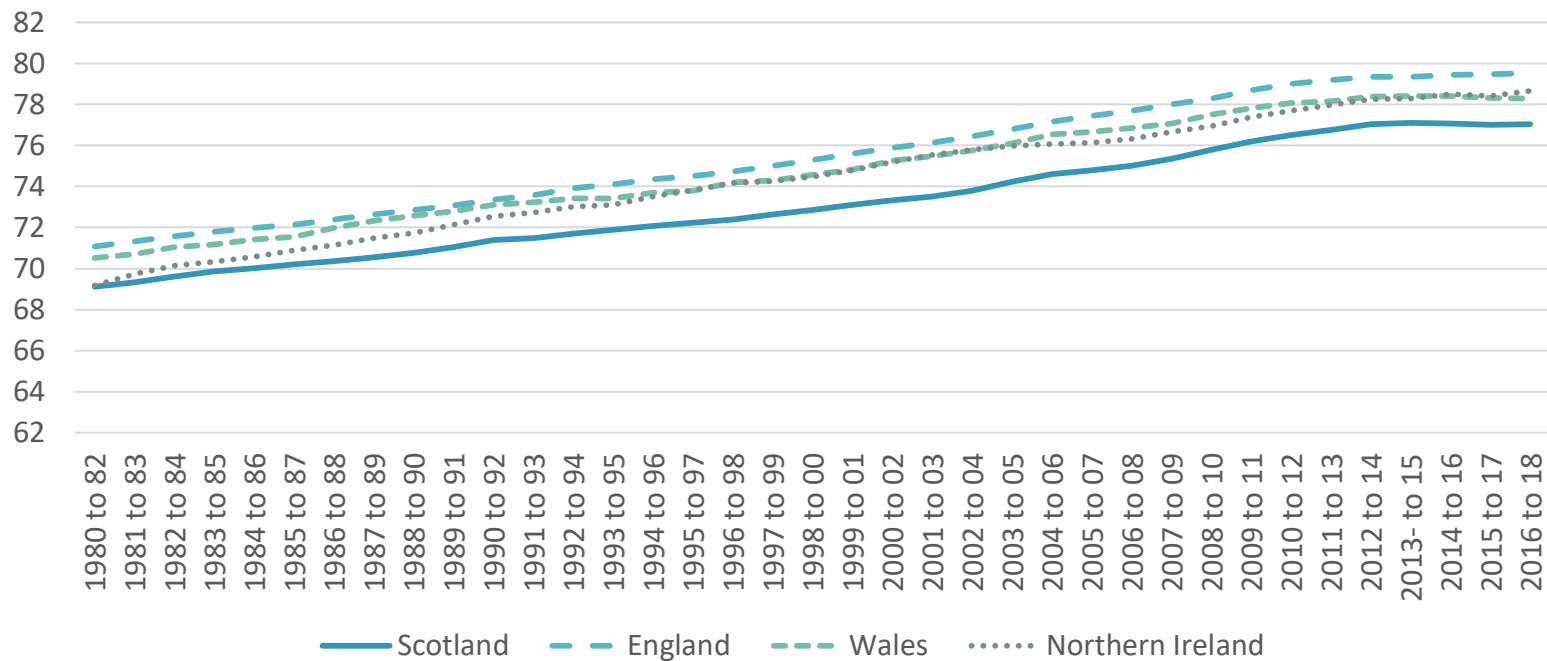
Life expectancy at birth for males and females, UK,
between 1980 to 1982 and 2016 to 2018



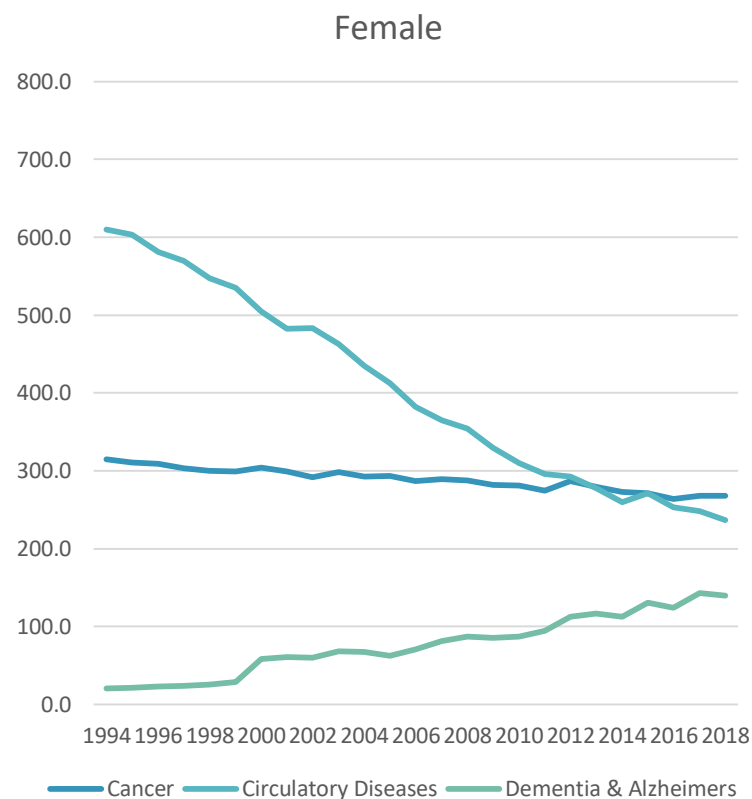
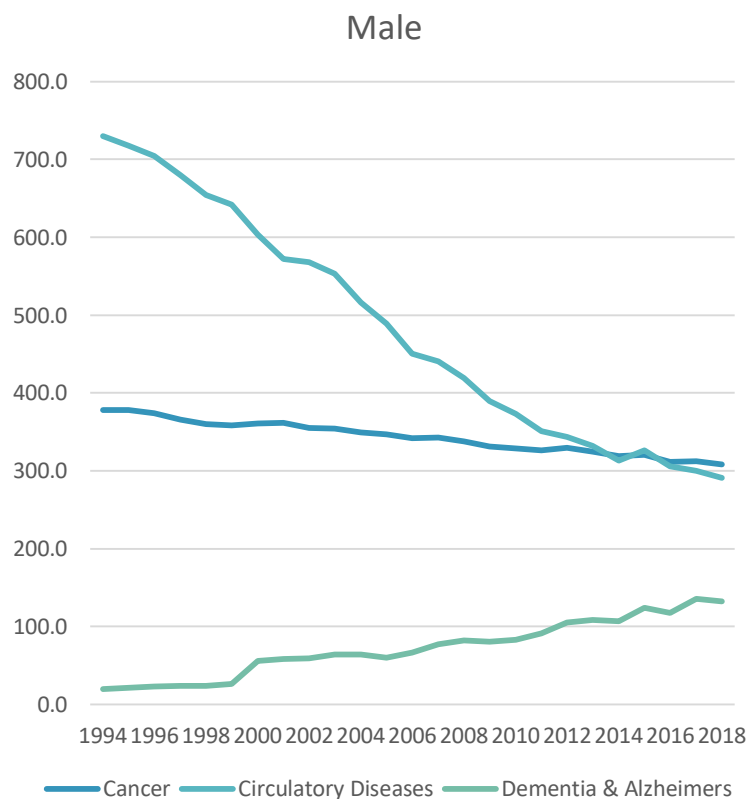
Source: ONS 2019

ACROSS ALL COUNTRIES

Life expectancy at birth, males, UK countries, between 1980 to 1982 and 2016 to 2018



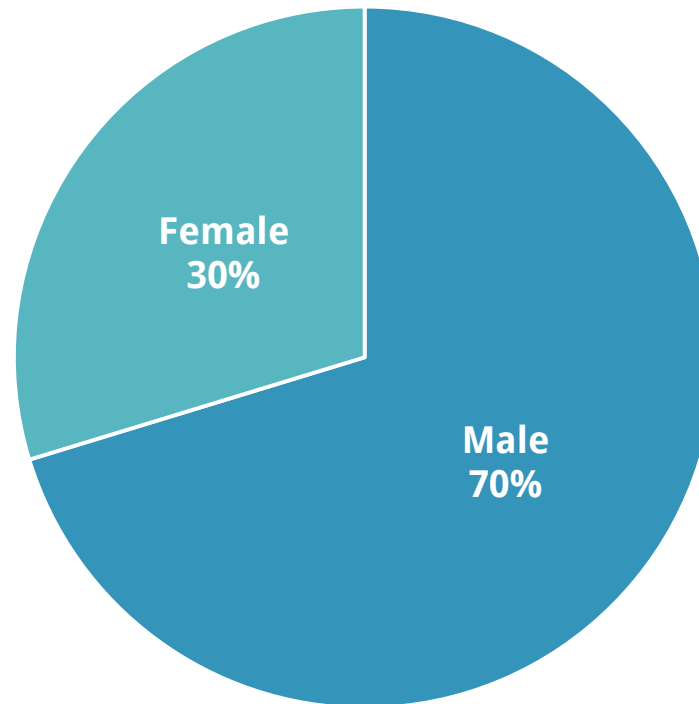
IMPROVEMENT IN THE BIGGEST KILLERS



Source: Age-standardised mortality rates (ASMRs) per million population,
NRS Scotland

CARDIOVASCULAR DISEASE

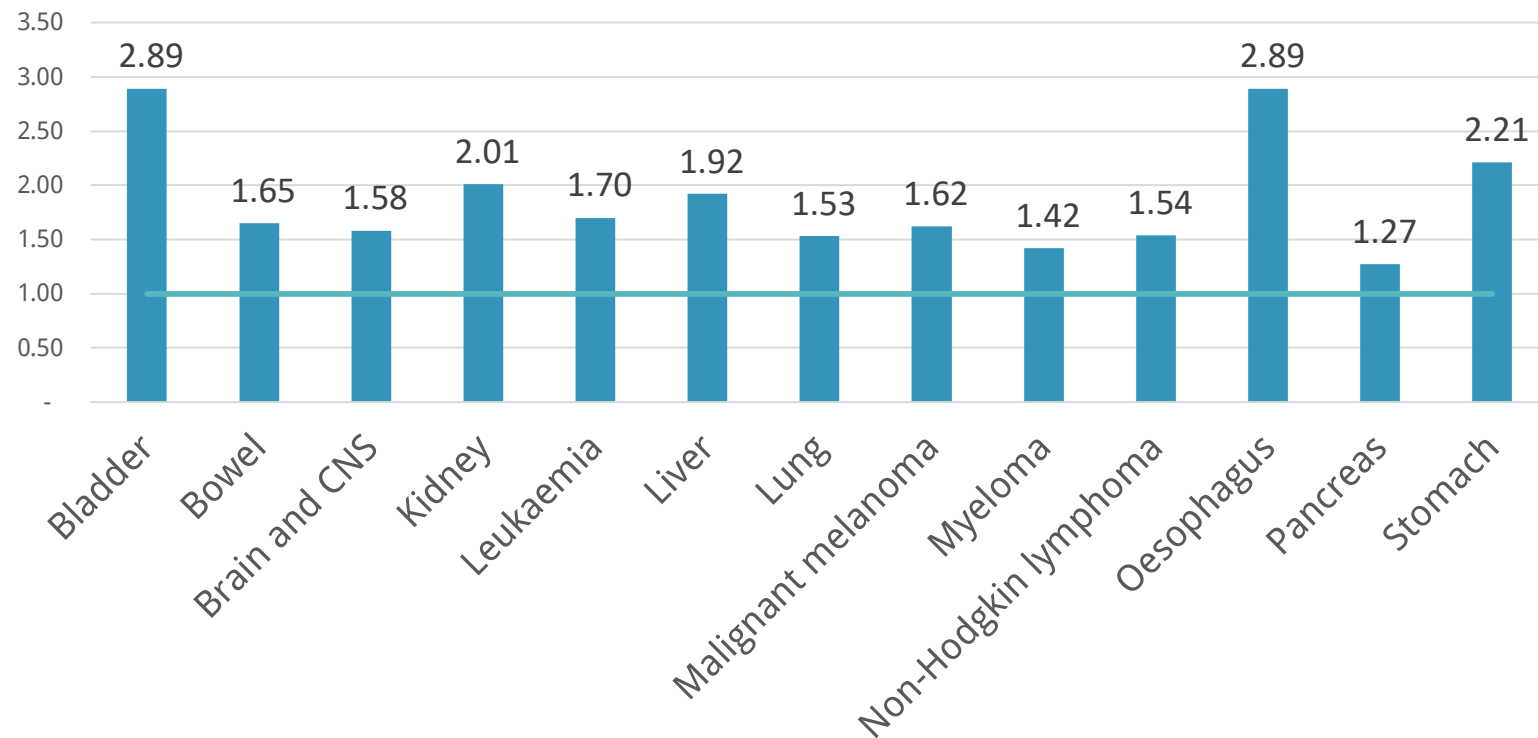
CVD deaths under 65



Source: National Records of Scotland (NRS), 2018

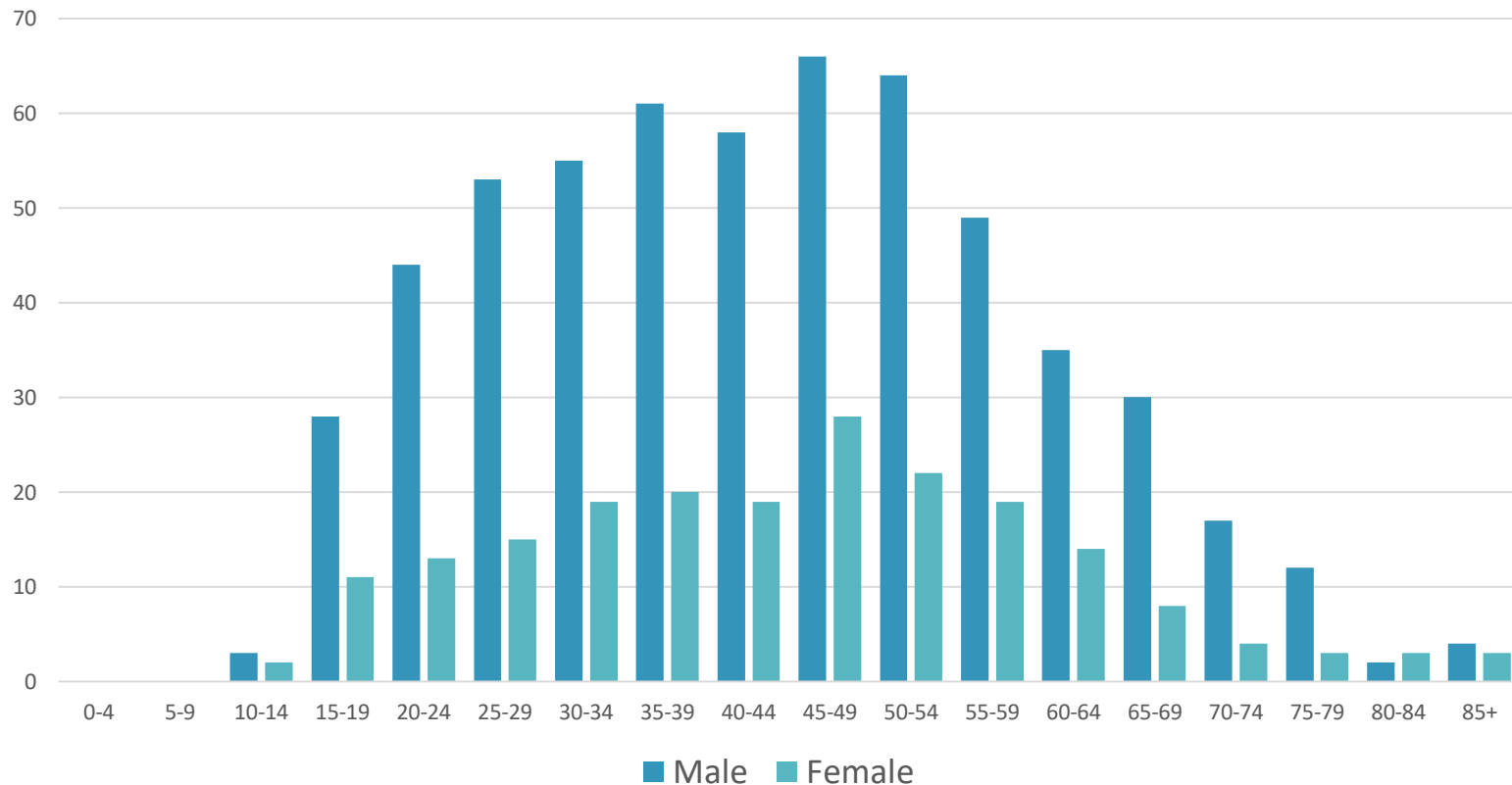
CANCER MORTALITY

Male to female cancer mortality ratio (all ages)



Source: CRUK, Mortality rate ratios are European age-standardised, of male to female cancer mortality (excluding NMSC), UK, 2010.

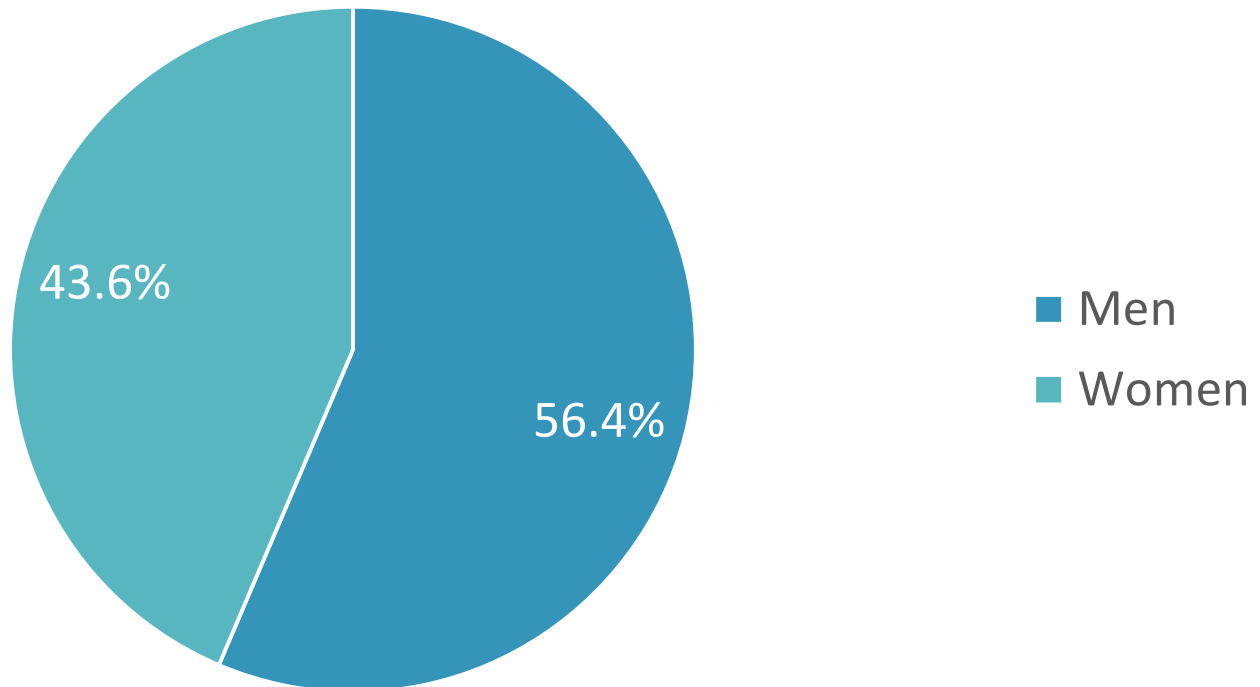
3 IN 4 SUICIDES



Source: National Records of Scotland (NRS), 2018

GENDER AND DIABETES

Diabetes Population – Type 2



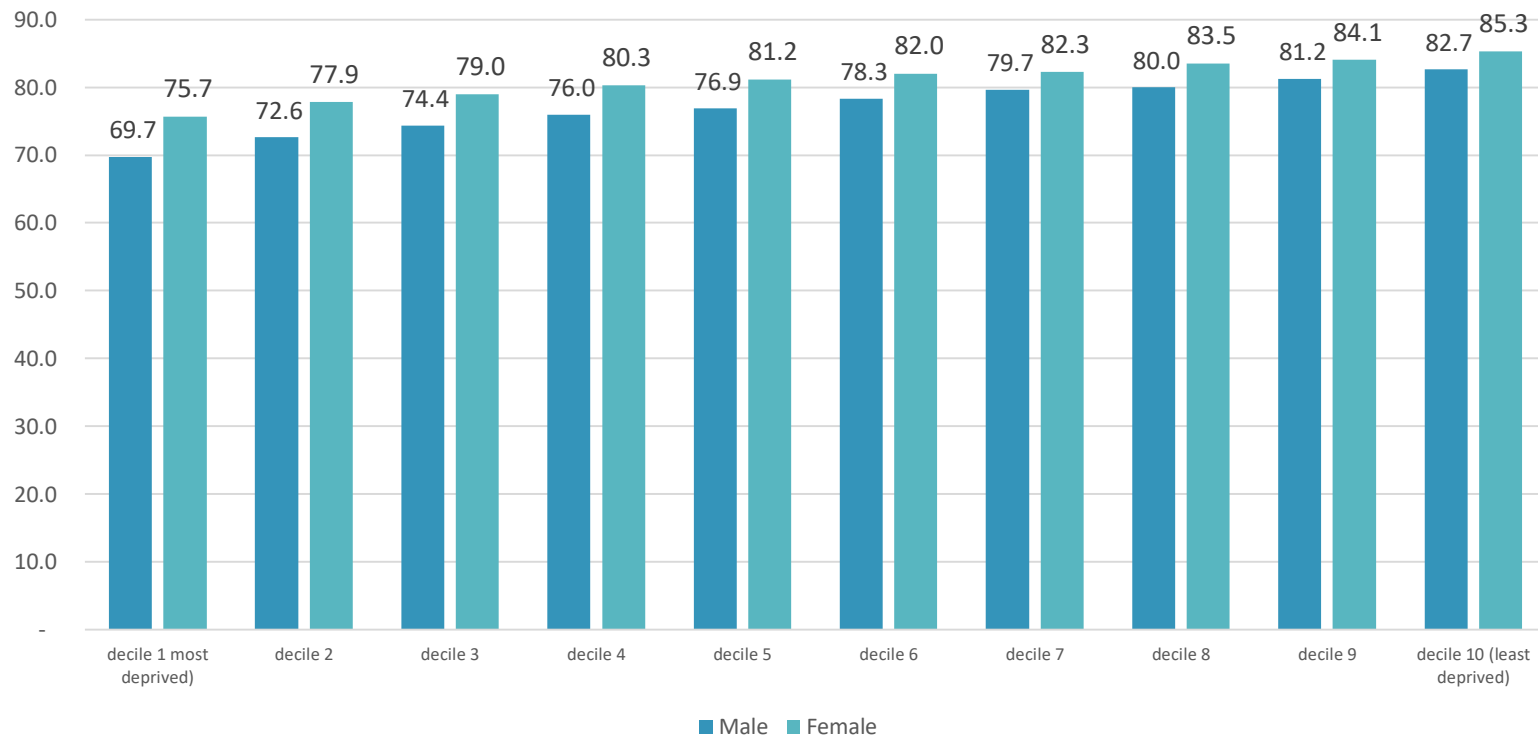
Source: Scottish Diabetes Survey 2018, NHS Scotland

IS IT 'ALL MEN'?



INEQUALITIES BY DECILE

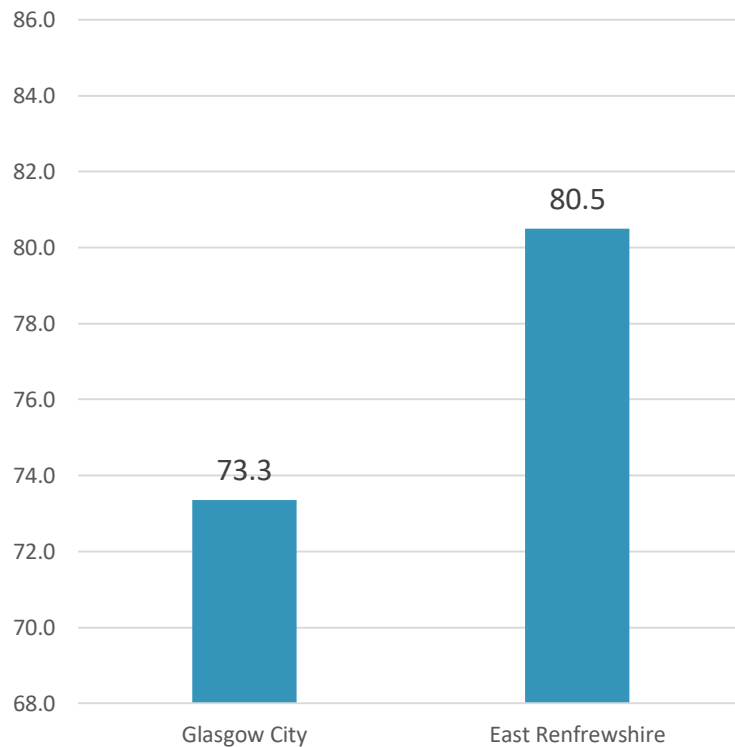
Life expectancy at birth by national deprivation deciles (Scotland, 2015-17)



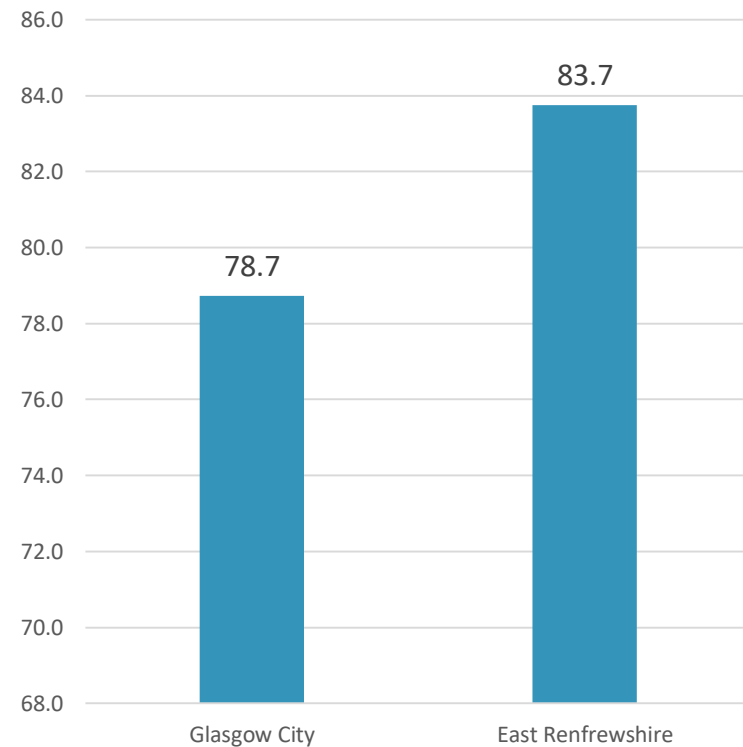
Source: National Records of Scotland (NRS), 2018

INEQUALITIES BY AREA

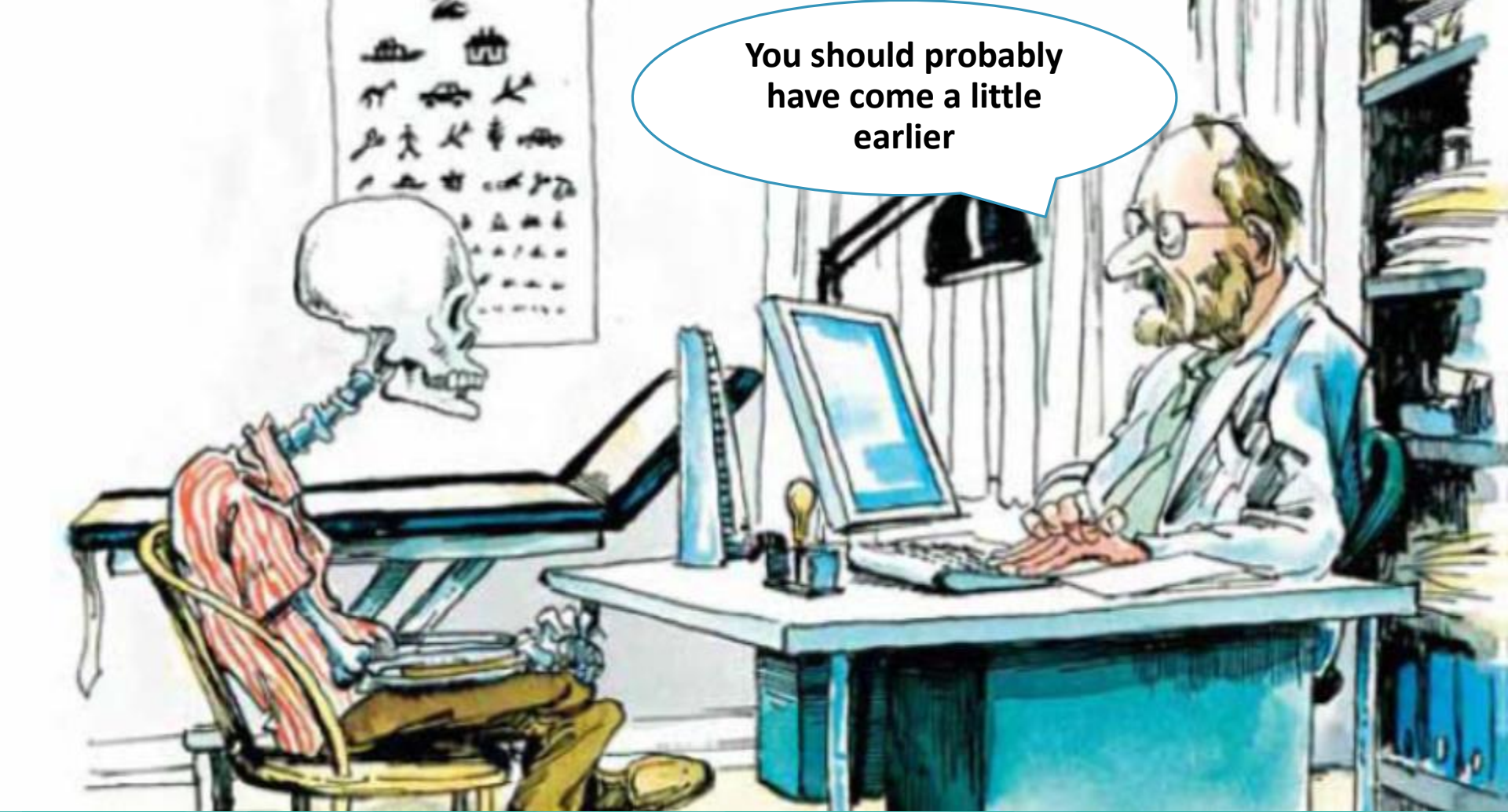
Male Life Expectancy by Council Area



Female Life Expectancy by Council Area



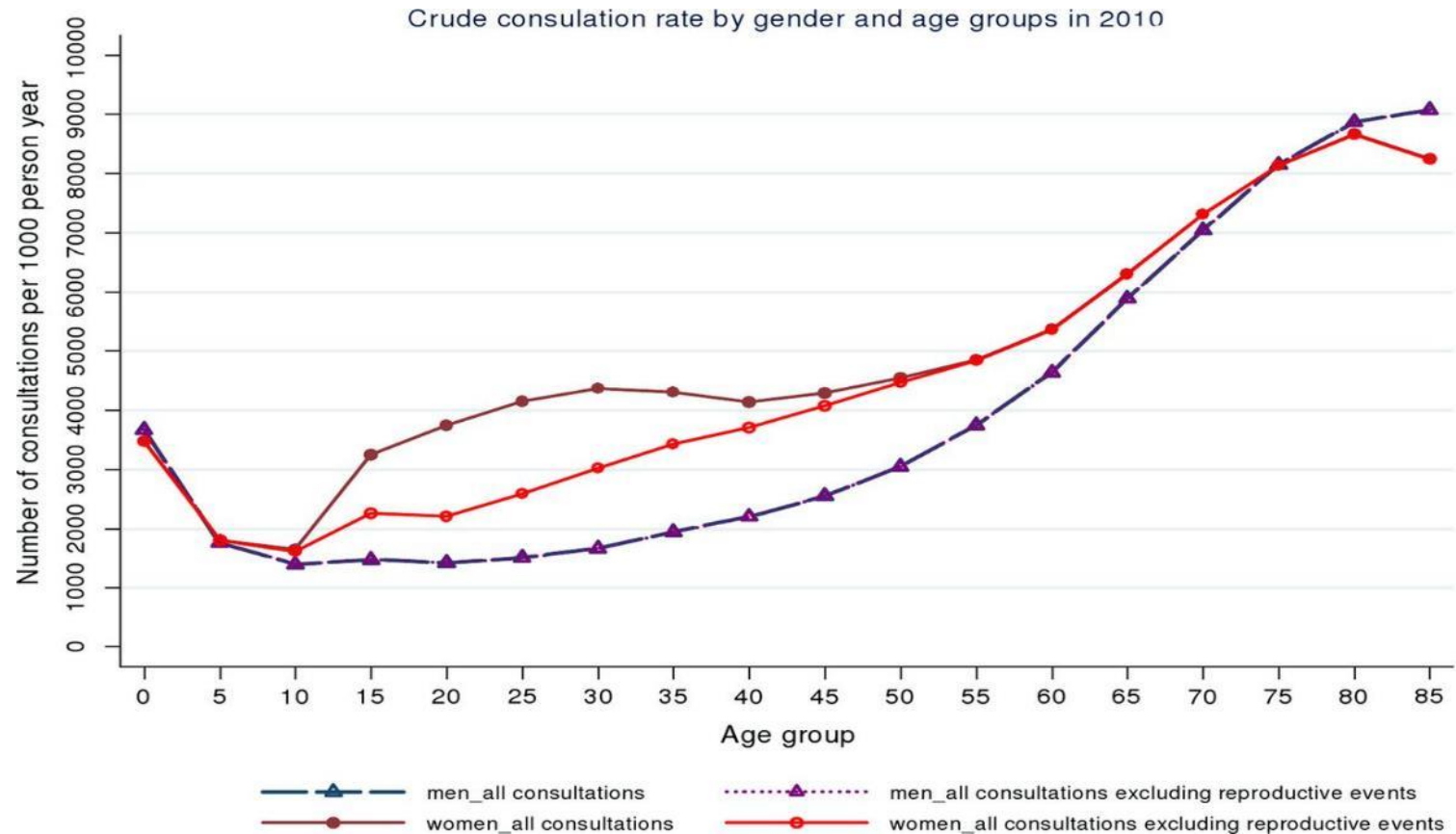
Source: National Records of Scotland (NRS), 2018

A cartoon illustration of a doctor's office. A doctor with a beard and glasses, wearing a white lab coat, sits at a desk with a computer monitor and keyboard. He is looking at a skeleton patient who is sitting in a chair. The skeleton is wearing a red and white striped shirt and brown pants. A speech bubble from the doctor says, "You should probably have come a little earlier". On the wall behind the skeleton is a poster with various anatomical diagrams. To the right of the doctor is a bookshelf filled with books and papers.

You should probably
have come a little
earlier

**IS IT BECAUSE MEN DON'T GO TO
THE DOCTOR?**

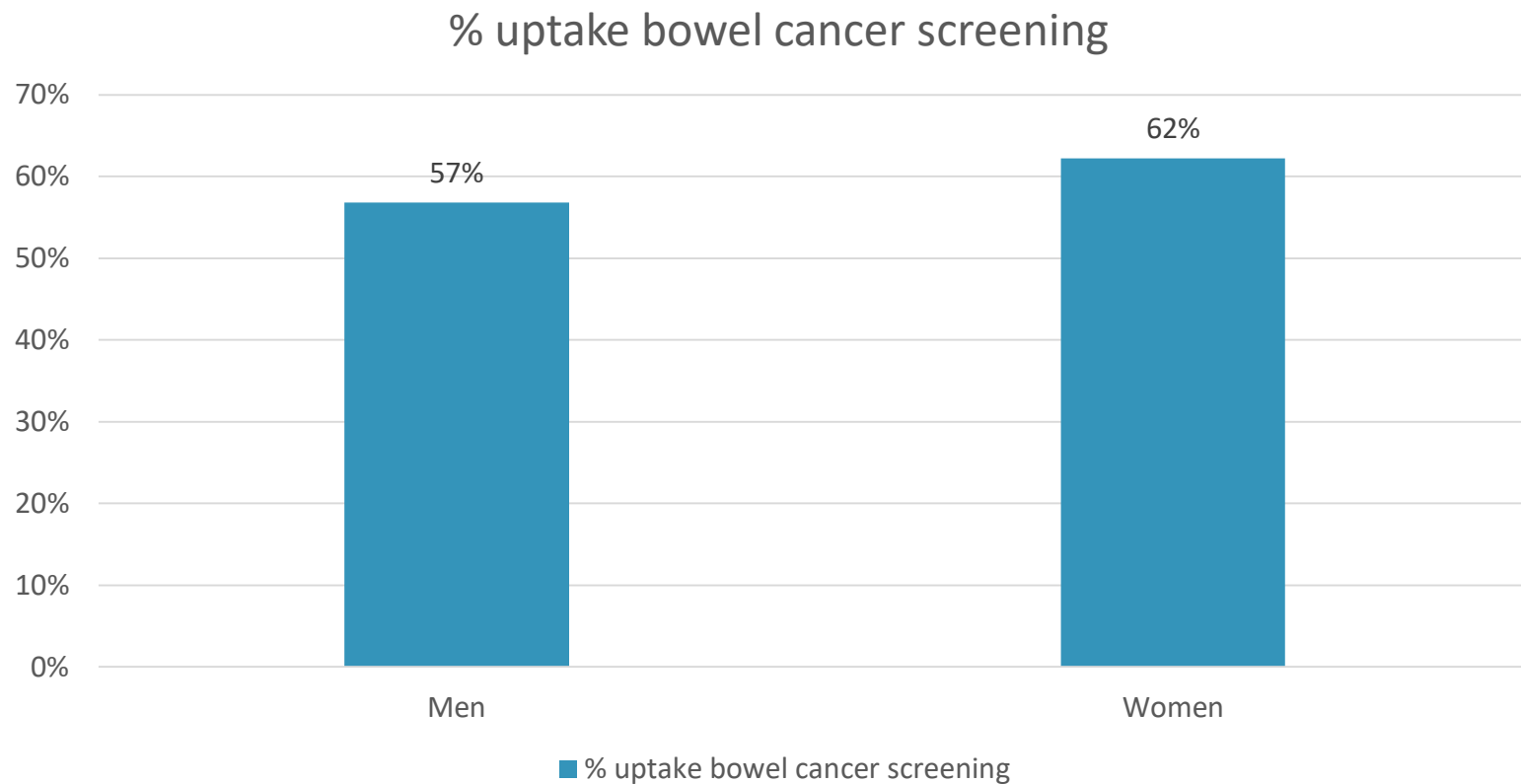
MEN ARE LESS LIKELY TO CONSULT GPs THAN WOMEN



Wang Y et al. BMJ Open 2013;3:e003320

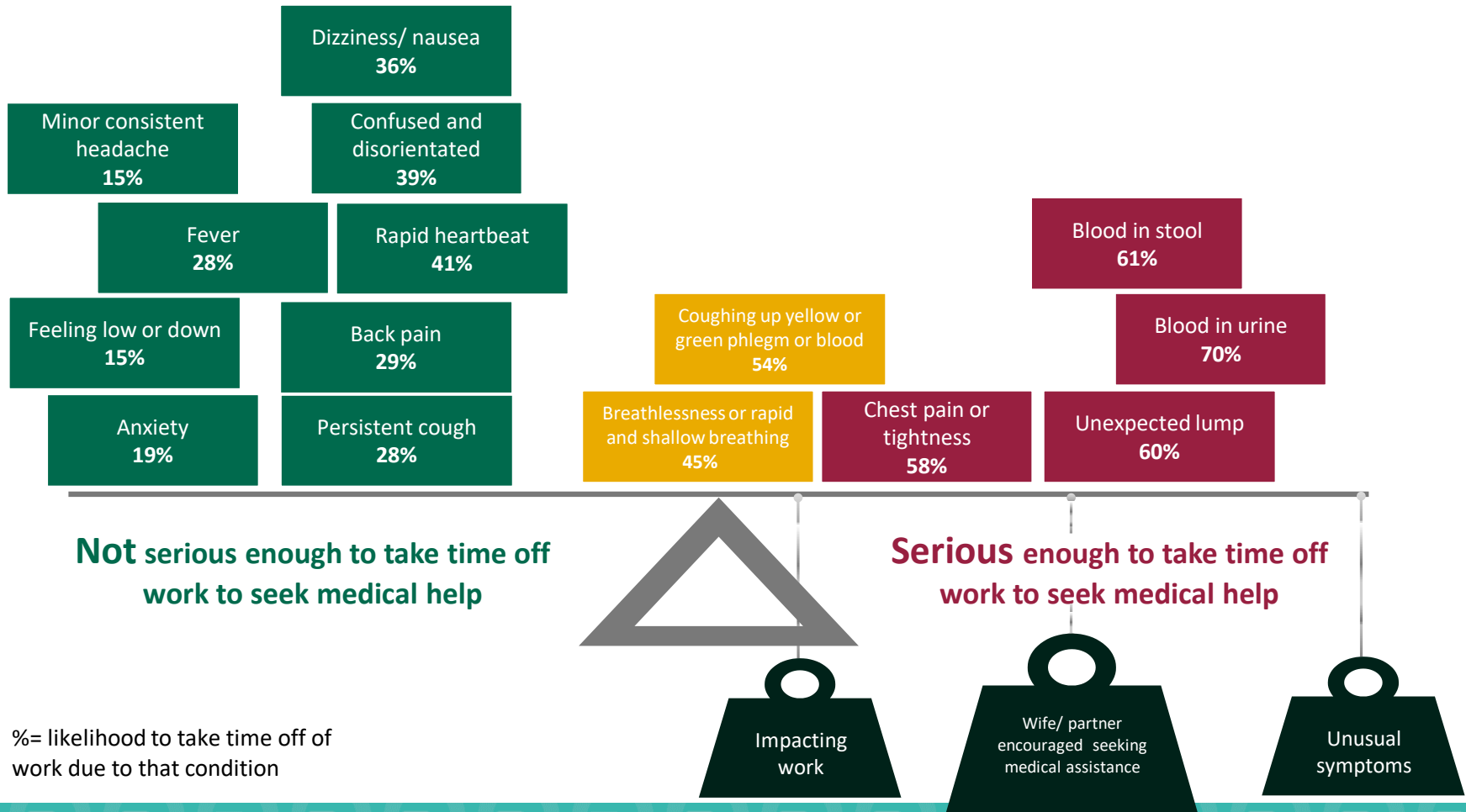
©2013 by British Medical Journal Publishing Group

LESS LIKELY TO COMPLETE BOWEL CANCER SCREENING



Source: Scottish Bowel Screening Programme Statistics,
NHS National Services Scotland, 2019

WHAT MAKES MEN TAKE TIME OFF WORK?



DRIVERS AND BARRIERS: TAKING TIME OFF WORK

- White, low income men are least likely to take time off work to see a GP. Perceptions of masculinity, importance of work in life and hours worked per week are also barriers.



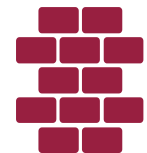
Drivers

Self-employed

Ability to confide in
colleagues about
health

Ethnicity, white: Profile

- 55-65 years old
- Occupation: Construction, Manufacturing and Public Administration and Defence



Barriers

Masculinity
(Conflicts
between work
and leisure)

Importance of work
in life

Ethnicity: White

Annual income
<£20,000

More influential

Less influential

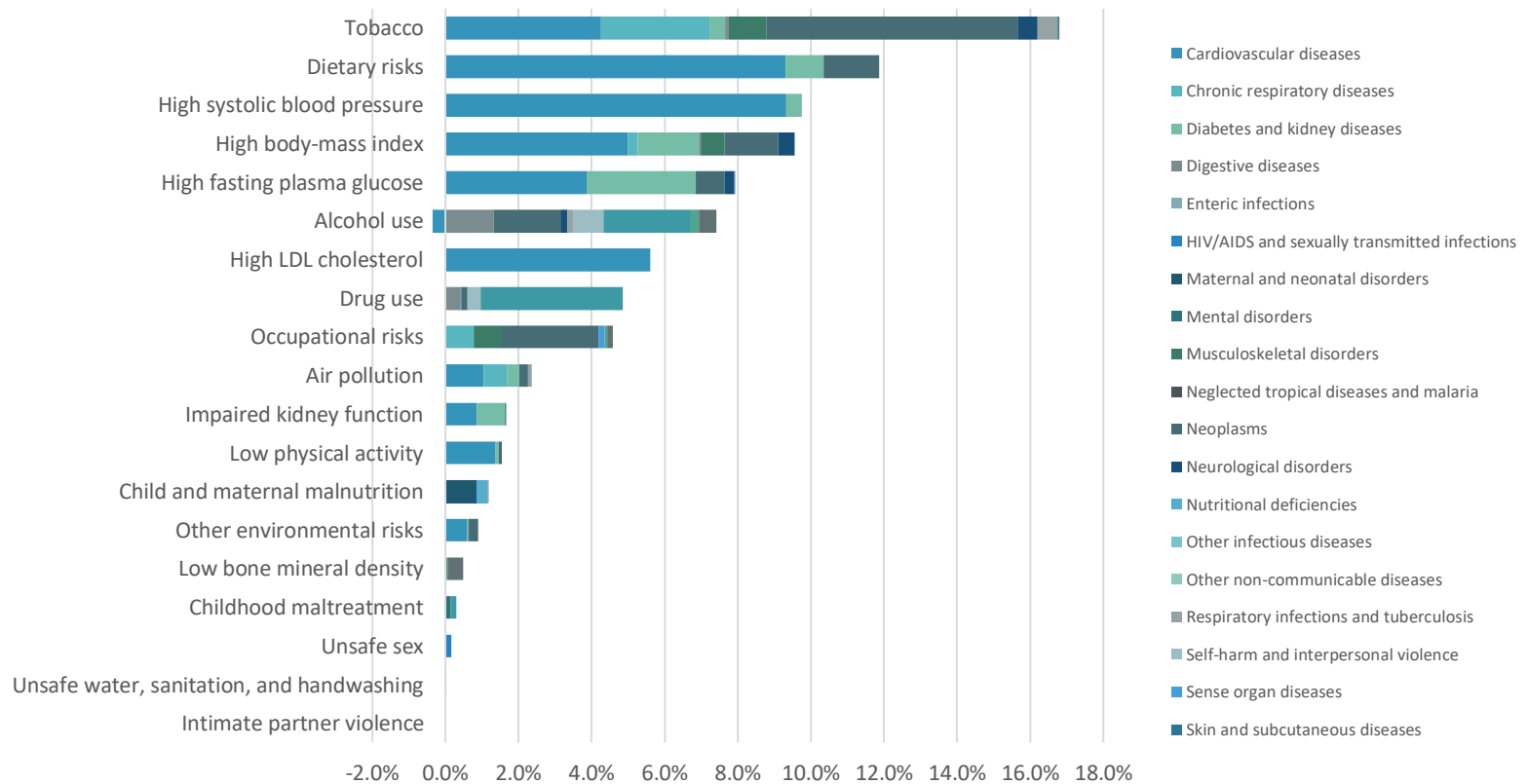
This analysis was conducted using a linear regression, with all drivers and barriers tested for significance.



"SR 520 Eastside project night work, August 2011" by Washington State Department of Transportation censed under CC BY-NC-ND 2.0

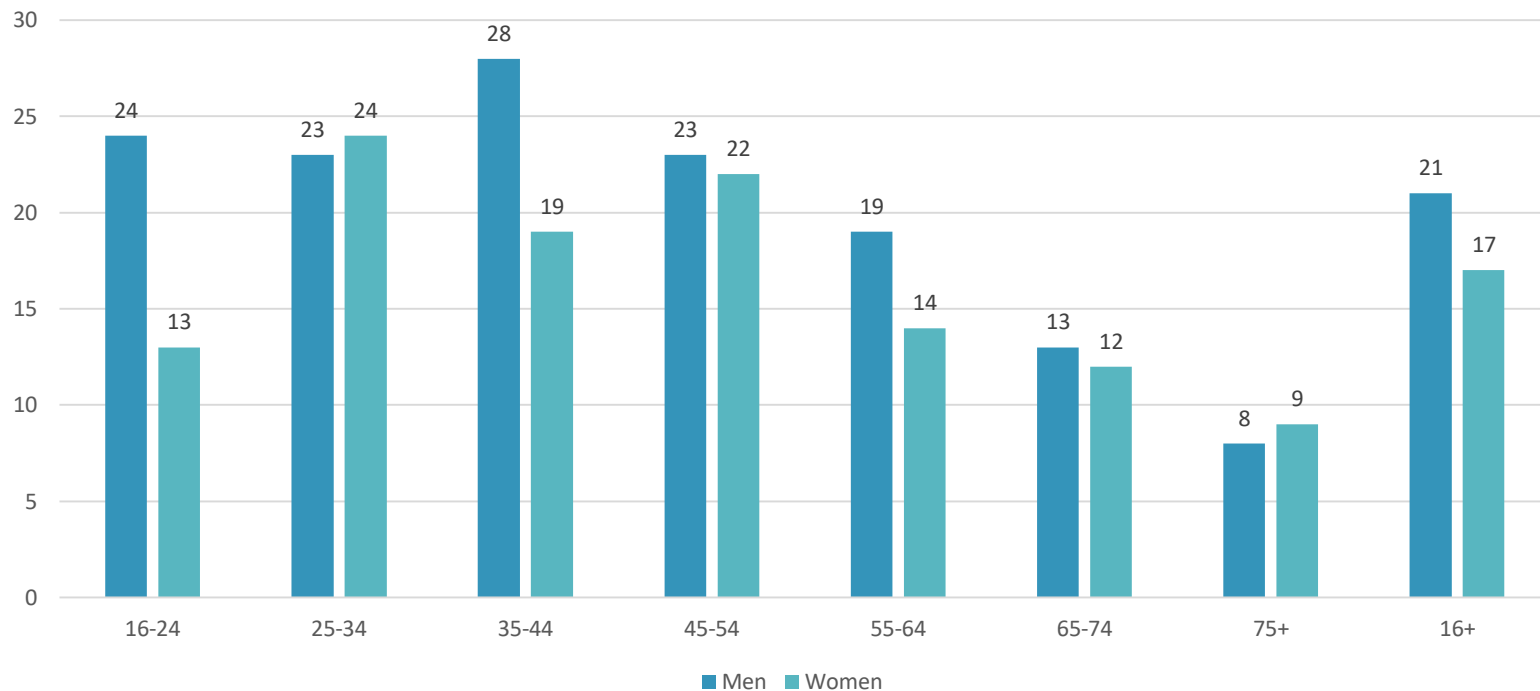
**DO WE JUST NEED TO
REMOVE THE BARRIERS?**

BURDEN OF DISEASE – SCOTTISH MEN - % DALYS



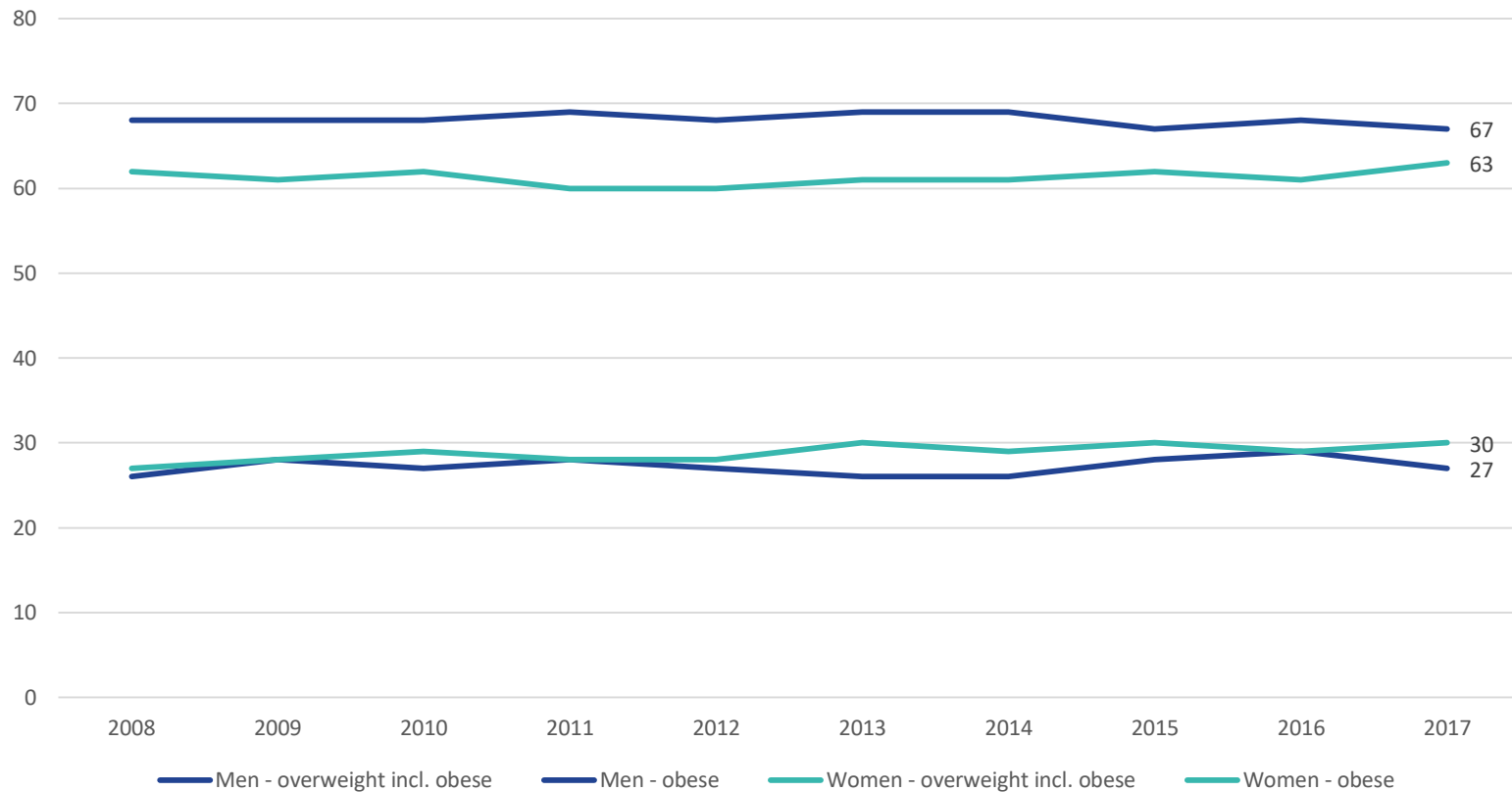
MEN MORE LIKELY TO SMOKE

Smoking prevalence among adults (aged 16 years and over) in Scotland, by age and sex, 2018



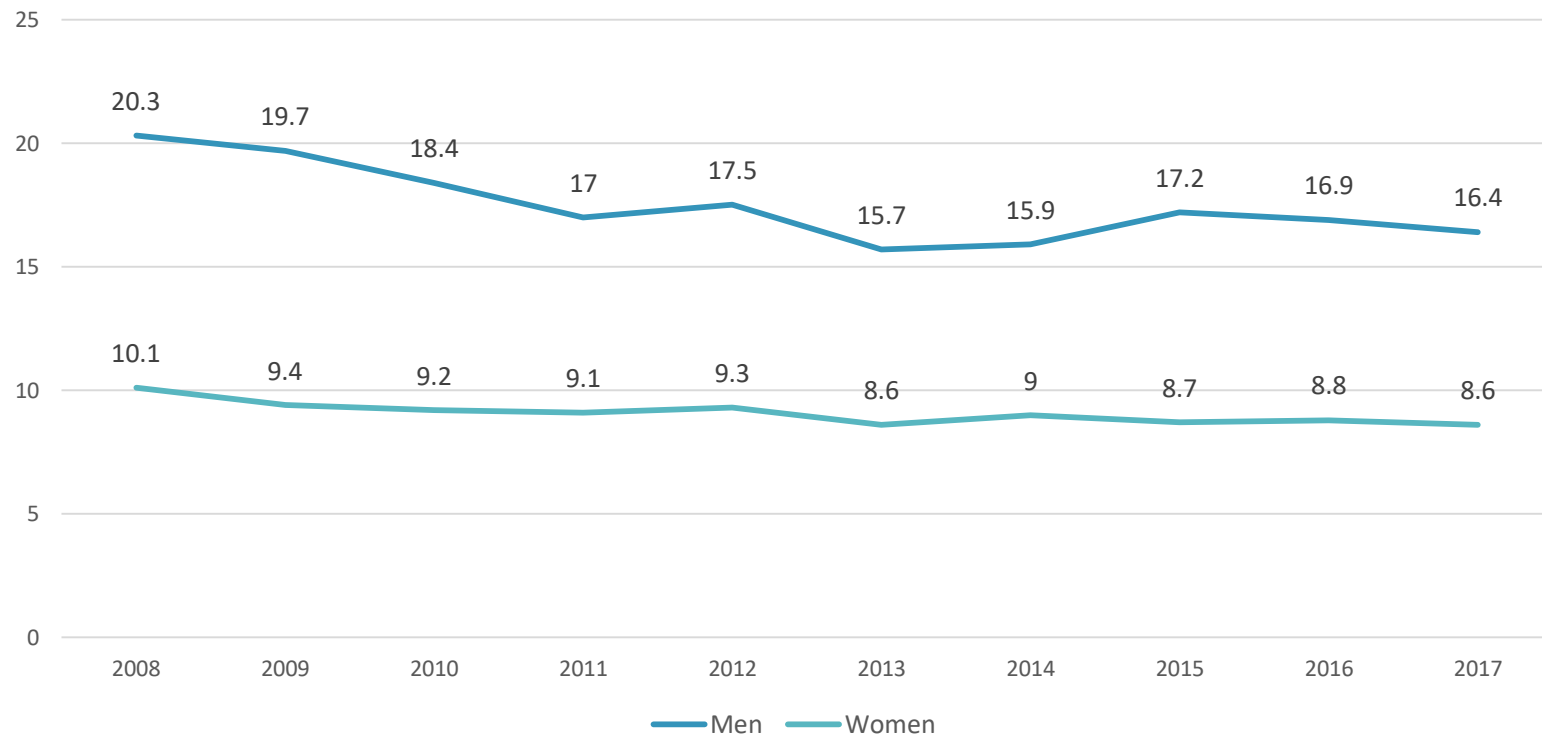
Scottish Health Survey, 2018 - ScotPHO

MEN ARE MORE LIKELY TO BE OVERWEIGHT



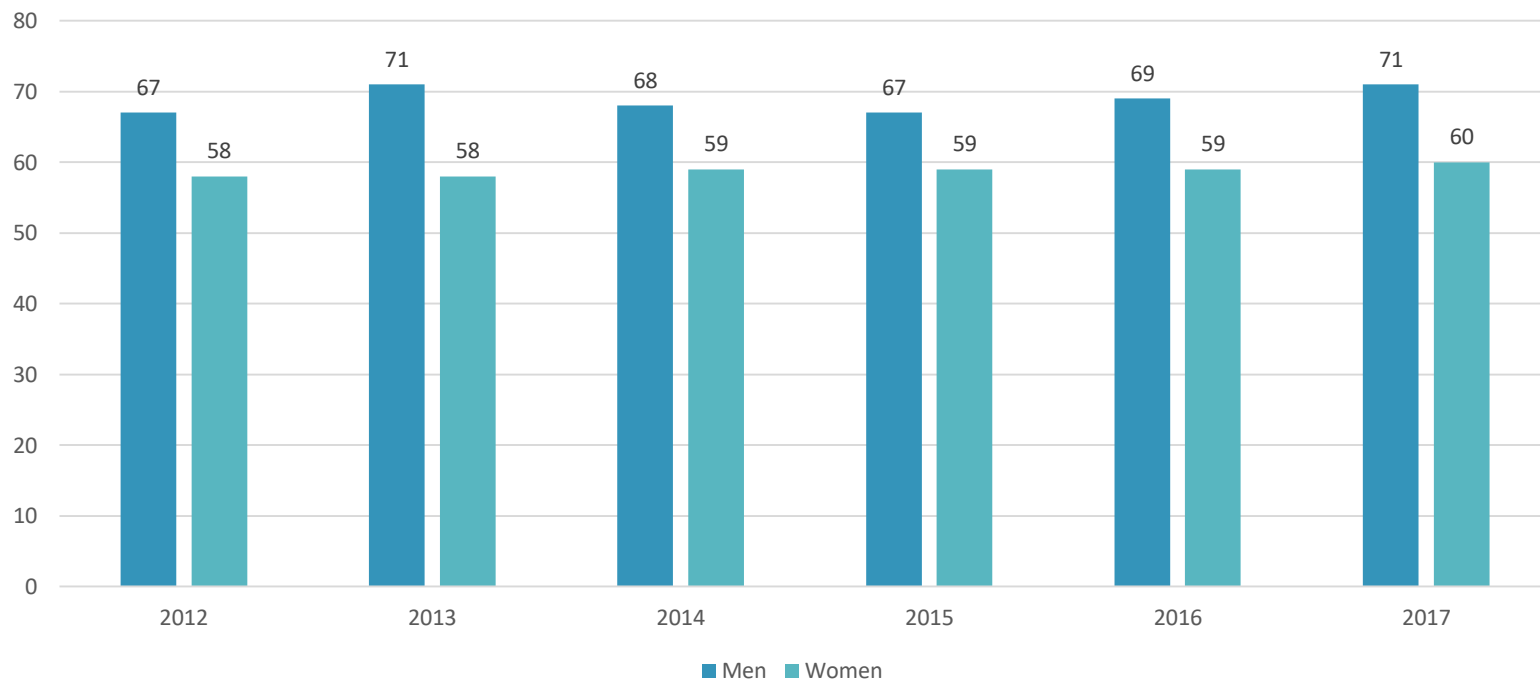
AND DRINK...

Mean number of units of alcohol consumed per week amongst adults, by sex



BUT ON AVERAGE MORE PHYSICALLY ACTIVE

Meets Moderate Vigorous Physical Activity guidelines



Source: Scottish Government 2018

WHAT'S THE WAY FORWARD?



2014 MEN'S HEALTH MANIFESTO

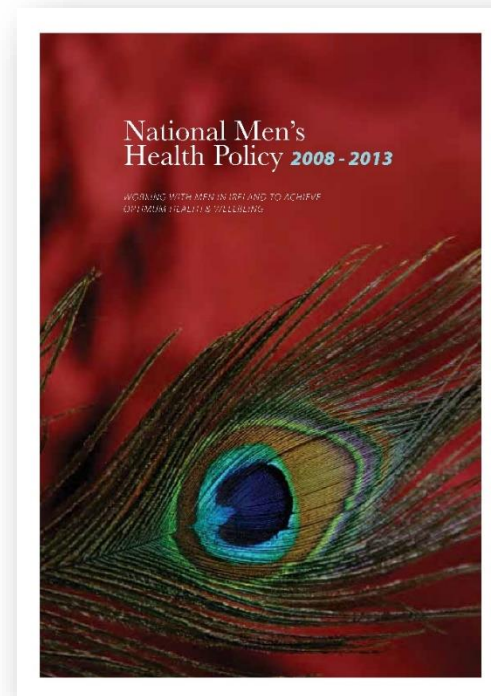
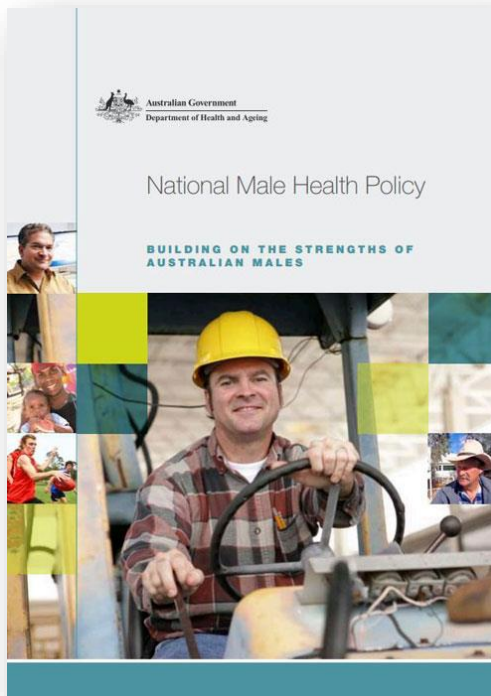


-
- **Face up to the reality**
 - Measure and report against inequalities
 - **Invest in research**
 - **Focus on prevention**
 - Recognise that interventions may need to change
 - **Don't wait for men to engage – especially on mental health**
 - Remove the barriers to using health care, mental health and preventative care – especially for men of working age
 - Reach out proactively – go to where men are
 - **Design targeted programmes around the needs and attitudes of the highest risk men & boys**
 - **Tailored health awareness and literacy, especially amongst boys**
 - **Organisational focus across the whole health system**

WAY FORWARD:

Men's Health Policy for Scotland

Currently: Ireland, Australia, Iran, Brazil & WHO Europe



WAY FORWARD:

- **Men's Health Forum for Scotland?**

MEN'S 
HEALTH
FORUM
SCOTLAND



One man in five dies before 65.
Together we can change that

CONTACT DETAILS

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