

Barriers to better health – why men’s health is so poor

EMHF Background Information

There is a growing understanding that achieving health for all depends as much on tackling the health problems faced by men as it does on those affecting women and children. Among many other activities, the European Men’s Health Forum (EMHF) aims to highlight the health inequalities that men face throughout Europe.

Poverty of men’s health

There can be little doubt that men’s health is poor throughout Europe. Reduced life expectancy, high rates of cancer and cardiovascular disease, an increased risk of succumbing to depression or suicide and a greater likelihood of being involved in a fatal accident – these are just some of the obstacles to health that men must navigate during their lives.

Add to this the fact that geography can have a huge impact on men’s chances of a healthy life. Although life expectancy for men in Europe as a whole is almost 70 years, and is 74 years in the UK, the average Hungarian male can expect to live for only around 66 years. One particularly unwelcome statistic for men from Scotland and Northern Ireland is that these areas have the highest rates of heart disease in the European Union.

Income, occupation and education also play a role in a man’s chances of suffering a serious illness or premature death. In some parts of the UK, mortality rates among unskilled manual labourers are no better now than they were in the 1940’s.

These health problems are often made worse by poor insight and risk-taking behaviour. Excessive alcohol intake, smoking, illegal drug usage and sunbathing without protection are all common among men, especially those from younger age groups. And even when men do recognise they have a health- or behaviour-related problem, they often delay visiting a doctor or other professional. This can often have tragic consequences. It may explain, for example, the fact that although men are only half as likely as women to develop malignant melanoma (skin cancer) they are twice as likely to die from the disease.

Poor use of health services

Generally, men are infrequent users of health services – especially their GPs and primary care generally. Research in the UK also indicates that men are unlikely to use preventative services, such as well man clinics, and sexual health screening clinics. There may be several reasons for these findings, including:

- A belief that primary care is not for men, but for women and children; this belief may be reinforced by all-female reception staff or wholly female magazines in the waiting room, and by the fact that many married men leave their health care to their spouses.
- The difficulty that men who often work full time – and often some distance from their GP – have in attending clinics in normal hours.
- Gender socialisation that not only encourages men to perform risk-taking behaviours but also make it harder for them to ask for help.
- Lack of confidence, or embarrassment.

- Lack of language to discuss their concerns. For example, many doctors find that men often use the word *impotence* (now usually reserved to mean erectile dysfunction) to describe a range of conditions such as infertility and premature ejaculation.
- Perceived racism or homophobia in health services.

Improving men's health: a lack of will?

Male health problems are compounded by a lack of research into, and with some notable exceptions by a lack of political will to tackle, men's health issues. In the UK, Minister for Public Health Yvette Cooper has summarised the particular difficulties that men face:

'Men die 5 years younger than women on average – it is one of the starkest inequalities we face. Traditional health promotion campaigns have often not been a great success when it comes to men's health, and NHS services are often perceived as being geared towards women rather than men.'

Despite statements such as this, men's health remains neglected across Europe. Part of the reason is that men themselves have not effectively argued, campaigned or lobbied for improvement. Collectively, as well as individually, it seems that men are reluctant to ask for help with their health.

Male risk-taking behaviour and apparent unwillingness to take better care of their own health has led many in health services throughout Europe to assume that any attempt to help is doomed to failure. From this viewpoint, it's easy to believe that the scarce resources that exist for health should be allocated to other initiatives that are more likely to succeed. Health providers and policymakers also often view men in a negative light. This is not only because they take risks with their health. Men in general are viewed as unreliable, irresponsible and difficult. Young men and black men are seen as aggressive, while gay men are held responsible for their own health problems. It is unusual for men to be seen positively as a group worth taking time and trouble over.

It is perhaps for some of these reasons that current provision of health information does not address men's specific needs, experiences and concerns. Health professionals simply do not routinely consider masculinity or gender in their approach to the design and delivery of health services or messages.

EMHF: tackling inequalities in men's health across Europe

The EMHF is an independent, non-profit-making, non-governmental organisation that aims to raise the profile of men's health at both a pan-European level and within individual countries. It encourages Europe-wide national, local and regional organisations (both governmental and non-governmental) to include men's issues in their health policies and practices. It also aims to improve delivery of health services to men and to influence men's health-related behaviours.

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