



Response to Our health, our care, our say: a new direction for community services

The Men's Health Forum broadly welcomes *Our health, our care, our say* and believes the move to more community based easily accessible services will, on the whole, benefit the health of men.

Our two main concerns are:

- that despite the government's implementation of the duty on gender equality the proposals are not gender sensitive to ensure that they succeed for both men and women
- that the life check health 'MOTs', even if promoted at and designed with men in mind, are extremely basic and for some time yet only be available to small groups of the population.

This document is based on the responses to a survey of men views on community and primary care conducted by the Men's Health Forum as part of the consultation on the white paper and on the Men's Health Forum's experience of working with health and community professionals involved in successful innovative work to improve men's health.

The gender duty

That *Our health, our care, our say* is ignorant of the government's own duty on public services to promote gender equality is surprising. *Our health, our care, our say* includes proposals for new services and highlights the best of what is already being done. However, the opportunity should have been taken to create health services that cater effectively for the needs of both men and women as will be the requirement from 2007.

Life check health 'MOTs'

We welcome the introduction of the opportunity for people to have a health check, however, in line with many others we feel the self completed online questionnaire suggested in *Our health, our care, our say* is not only too basic but will not work with those most in need. Whilst men are relatively more likely to use online health information than to visit their GP these online services need to be designed and promoted in a way that will appeal to men. However, men are not a

homogenous group, older less well off men are less likely than other men to use the internet.

The most effective way of delivering health checks and information to men is through initiatives that properly target groups of men and take services to men. Examples of such work include projects that take services to men in pubs, workplaces and youth centres.

GP registration

The choice to register with a GP near to your place of work instead of near to home is a step in the right direction. However, sticking with the model of single registration merely moves the impracticality, a man working permanent full time may be able to get to a GP near his place of work, but in many cases would have difficulties if he is already ill. This will probably continue the trend of men not seeking professional help when they should or alternatively will lead to an increase in demands on GP home visits.

Neither does workplace registration relieve the situation for those working casually in temporary jobs whose workplace would change often and who may have greater difficulty getting out of work to see the GP without losing pay.

Walk in centres/commuter clinics

In general the expansion of walk in centres should be welcomed as it meets the needs of men in being so flexible.

The development of more accessible mental health and sexual health services is also welcome, however in creating these services steps must be taken to ensure they too meet not only the letter of, but also the spirit of, the public duty on gender equality.

Outreach

We welcome the focus on outreach initiatives to reach groups less likely to use health services such as black and minority ethnic people and travellers. In designing these services it should be remembered that within these groups men often have worse health and are even less likely to access conventional health services than average within those groups.

Again, outreach services focusing on mental or sexual health are welcome. These should build on the experience of existing projects that have worked with men in the community.