

Written evidence from Men's Health Forum (MHM0008)

Further to your request, please find below comments on

- 3) Consideration of a new National Men's Health Strategy, like those implemented in the Republic of Ireland and Australia;
- 4) Easy to access, male-friendly mental health services, with improved signposting;

Consideration of a National Men's Health Strategy

Since the letter to ministers at the end of your previous inquiry, we have seen the commitment of a women's health strategy – but also the November 2021 launch by the Men's Health Forum and a range of partner organisations of a [campaign for a men's health strategy](#). This is supported by a diverse range of organisations including:

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| o Men's Health Forum | o Rugby League Cares |
| o Patients Association | o The Fatherhood Institute |
| o UK Men's Sheds Association | o Black Men's Consortium |
| o Prostate Cancer UK | o The ManKind Initiative. |
| o Orchid (fighting male cancer) | o Men & Boys Coalition |
| o British Society of Sexual Medicine | o CHAPS |

as well as a range of leading experts in men's health and public health – and the All-Party Parliamentary Group on issues affected men and boys.

The cross-cutting nature of many men's health issues – relating to service access – health behaviours etc. doesn't lend itself to a 'condition-specific' approach – and we continue to believe that men's health – including men's mental health – will only improved with the kind of systematic change that a men's health strategy could enable.

The impact of COVID19 – with the disproportionate mortality rate amongst men – but also the gender differences in mental health impact, vaccination rates, testing rates, survival rates, general changes in health behaviours including service usage – and behavioural factors leading to COVID19 infection – reinforces the need for a cross-cutting approach.

We attach a copy of the case for a men's health strategy – highlighting the latest figures on male suicide as well as the benefits of gendered health strategies for both men and women.

The impact of COVID on men's use of services

We had great hopes that the move towards remote access to GPs would potentially improve men's access to services – and through GPs, improved signposting to mental health services – however we are not seeing this in the reported statistics.

What evidence we have suggests a disproportionate drop in men's use of health services during the pandemic.

The latest [NHS England GP Patient Survey](#) (2021) shows a disproportionate drop in men's GP attendance during the pandemic compared to women – with male attendance at GPs in the previous 6 months dropping from 65% to 45% in 2021 (a 30% drop) – compared to a decline amongst women from 76% to 59% (a 24% drop). While we have not been able to access figures on the impact of these changes on access to mental health services broken down by equality group, figures for prostate cancer (for example) have shown [a significant drop in diagnosis](#).

It remains the case that the health system does not report by inequality group by default, so it is not straightforward to understand any gendered impact on service usage during the pandemic period.

We FOIed NHS England to understand what work they had done to understand these changes – including their impact on different conditions and any particular inequality groups that were especially affected – as well as any plans developed in response – and they responded that they had done nothing.

April 2022