





Community

MEN'S

HEALTH

CLINIC

REPORT APRIL

2014 - MARCH 2015

Provision of booked appointments for 'men only' outside normal GP Surgery hours

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INTRODUCTION

Inequalities in health are unjust. Inequalities impact on all aspect of life, not just health. It is the responsibility of all sectors to work together to address inequalities, not just health.

Belfast has the highest level of deprivation in Northern Ireland, with 40% of the most deprived local areas being within Belfast Local Government District. This deprivation translates not only into lower life expectancy, but a greater burden of disease and consequently a greater dependence on health and social care services. While health has improved in the last decade, inequalities in life expectancy between Belfast and more affluent areas are widening. Belfast was ranked 422nd in the UK for male life expectancy in 2006 with a life expectancy of 73.7 years, ten years less than Kensington and Chelsea, which was ranked the healthiest area in the UK with a life expectancy of 83.1 years, and close to Glasgow City, ranked 432nd, at the bottom with male life expectancy of 70.5 years.

BACKGROUND

Following a period of research and site visits to Scotland an initiative was set up in 2011 through the East Belfast Healthy Living Centre and East Belfast Community Development Agency in partnership with district nurses from Belfast Trust to deliver a men's evening health clinic in The Arches Health Centre.

Over 250 men participated, completing 30 minute medical check-ups plus consultations on lifestyle risks.

At the end of 2013, the clinic moved to the newly renovated East Belfast Network Centre. Each check-up offered the following:

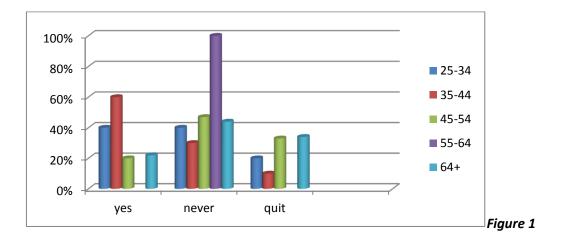
- advice on lifestyle, including diet, exercise, alcohol and smoking
- medical history including mental health
- weight and height
- blood pressure
- cholesterol
- a urine test for diabetes or kidney infection

FINDINGS

Smoking



During the period April 2014 to March 2015, 55 men attended the fortnightly clinics. Completed questionnaires revealed that 19 (34%) were regular smokers. Figure 1 shows a breakdown of these figures. Smoking prevalence in Belfast remains around 30% (compared to the Northern Ireland average of 26%) and the gap in smoking rates between people in manual and non-manual groups has increased. However, analysis shows that smoking rates in those areas of highest deprivation are greater than in the most affluent areas. A large number of Northern Ireland's most deprived Ward areas are in Belfast, therefore it is imperative that we act to reduce health inequalities and potentially save lives by providing the conditions to assist people to stop smoking. The recognition that smoking and breathing other peoples' smoke (second hand smoke) presents a health hazard is now reflected in smoking legislation which came into effect in April 2007.



Alcohol



Many people in Northern Ireland drink alcohol without experiencing any problems. A couple of drinks can help us relax and meet new people or make a party or celebration more enjoyable. While people may think alcohol helps them to cope with difficult situations and emotions, to reduce stress or relieve anxiety, alcohol is in fact associated with a range of mental health problems, including **depression**. Alcohol has also been linked to **suicide**. The Mental Health Foundation reports that:

- 65% of suicides have been linked to excessive drinking;
- 70% of men who kill themselves have drunk alcohol before doing so;
- almost one third of suicides among young people take place while the person is intoxicated.

Excessive drinking can also disrupt normal sleeping patterns resulting in insomnia and a lack of restful sleep which can contribute to stress. Daily alcohol limits are recommended by government in order to avoid the health and social risks of excessive and binge drinking in any one session. It is recommended that men drink no more than three to four units of alcohol a day and no more than 21 units over the course of the week. A man drinking ten or more units of alcohol in one session (as little as five pints of normal strength beer) is considered "binge drinking". Figure 2 shows a breakdown of men who consumed alcohol. The figures, however, could be misleading, as those who said they rarely drink alcohol, could in fact be binge drinking one night per week.

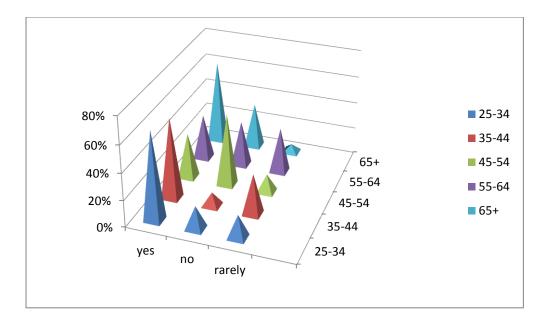


Figure 2

Heart Disease



Heart disease remains one of the main killers in Northern Ireland despite huge improvements in its treatment over many years. In 2010 it was estimated that more than 107,000 adults had been diagnosed with coronary heart disease, with almost a quarter of pensioners affected. Rates of diagnosis are higher among men than women. By 2020 the number of diagnosed adults is expected to rise to almost 132,000, a 23% increase over ten years from 2010. Researchers said the implications could be even greater than the statistics suggested because they did not include people with undiagnosed heart disease. Therefore, it is clear we have to do more to prevent and treat it so that people here have a better chance to remain healthy and live independently in their communities as they grow up and old.

Figure 3 shows the number of men attending the clinics who have already been diagnosed with heart disease. What is more alarming is the number of males with predisposing factors such as high blood pressure and high cholesterol.

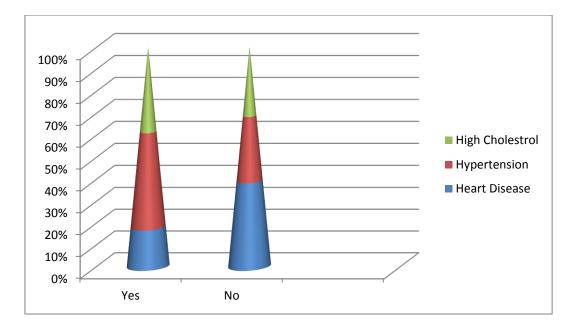


Figure 3

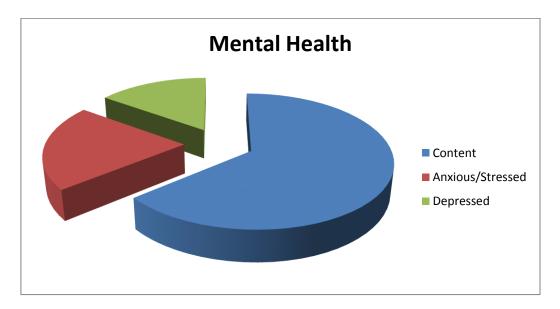
Mental Health



Northern Ireland has one of the highest incidences of mental illness in the developed world, it has emerged. (Belfast Telegraph 2011). One of the main findings was that in any 12month period in Northern Ireland one in four people displayed symptoms of mental health conditions. Levels of mental illness were 25% higher here than in Britain, while funding was 25% less.

Since 2000 there has been an average of approximately 1,400 hospital admissions for self-harm each year. This is an indicator of mental distress and the Standardised Admissions Rate for self-harm is consistently above the Northern Ireland average for all Belfast wards. In recent years there have been an increasing number of suicides in Northern Ireland, particularly amongst young men. However, East Belfast has recurrently had a lower number of reported suicides compared to other parts of the city, especially north Belfast. However suicide prevention remains a key concern in East Belfast, as one suicide is one too many. Figure 4 shows that 21% of men who attended clinics between April 2014 and March 2015 reported feelings of stress or anxiety. More alarmingly, 15% were receiving treatment for symptoms of clinical depression.

The Public Health Agency introduced the campaign to promote Lifeline, the free helpline for those in distress or despair. The campaign aimed to encourage young men to open up and talk about their feelings. The next phase of the PHA campaign will include a focus on issues that can have a negative impact on the mental health and wellbeing of individuals, families and communities, including the economic downturn.





CONCLUSION

Over the past four years, the men's health clinic has been offering advice, support and onward referral to the relevant professionals, to the men of East Belfast. However, over the past few months, there has been a significant drop in the number of men attending the clinics. Therefore, it has been decided to suspend the clinics temporarily to evaluate their strengths and weaknesses, our success, as well as our failings and identify where we go from here.

