Men’s Health Dialogue

To Raise Awareness of Health Issues Affecting Marginalised and Disadvantaged Men

June 2013
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BHI

BHI is a Community Engagement Organisation in Leeds working within communities for equal access to Education, Health and Social Care provision.

Within the last three years, BHI has developed bespoke programmes to ensure that the profile of health and wellbeing issues that disproportionately affect disadvantaged and marginalised communities in Leeds are raised.

National Perspective

A gender equity approach recognises the different challenges that women and men face in managing their health, including their different health requirements and the different barriers they face in accessing services.

In 2002, the World Health Organisation (WHO) released the Madrid Statement, saying:

"To achieve the highest standard of health, health policies have to recognize that women and men, owing to their biological differences and their gender roles, have different needs, obstacles and opportunities."

The underlying causes of gender inequality are related to social and economic structure, which is based on informal and formal norms, and practices

There is little doubt that men’s health is poor throughout the UK and Europe with reduced life expectancy, high rates of cancer and cardiovascular disease and an increased risk of depression and/or suicide. Socio economic factors are now seen to be contributing factors e.g. income, occupation and education. Therefore, with men from minority communities being at higher risk of employment, on average lower level of education health inequalities are higher amongst them.

Excessive alcohol intake, smoking of tobacco and other substances, poor diet and lack of physical activity can also aggravate health issues also.

‘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’ UK Minister for Public Health Yvette Cooper

The adoption of western diets and lifestyles and changed environments can accelerate the development of diabetes and associated conditions in some groups. Particular cultural practices and beliefs can also increase risk.
**Event Aim**

The Conference focused on key health issues confronting men, including Lung cancer, Prostate cancer, Mental Health within the Diaspora and other related topics.

**Event Rationale**

- To link the voice of men from marginalised and disadvantaged communities to the health care ‘system’. Influencing policy change and targeted inclusivity to ensure equality of service, from a grassroots perspective.

- To encourage men to make their health a priority; influence lifestyle choices and support behavioural changes.

The day pulled together men from the diverse communities not just from Leeds but from Bradford and Huddersfield also. Stallholders consisted of health agencies, charity organisations, local health businesses and the NHS to stimulate men’s health, who also contributed to the day.

To encourage and empower men to access health services by:

- Visiting a health care professional to receive regular check-ups and preventive screenings
- Improving physical activity
- Advising on healthier eating variants
- Increasing awareness of emotional health and wellbeing, mental health, including getting enough sleep and managing stress.
- Avoid unhealthy behaviours such as smoking and large amounts of alcohol consumption
- Raise awareness of main health issues which disproportionately affect sections of the community

This conference was an open assembly to members of the local communities citywide and was attended by over 60 men. BHI aimed for the men to have a greater understanding, and to be empowered around the signs and symptoms of Lung and Prostate Cancer and improved access to services and support agencies concerning Mental Health.
Methodology

1. Outreach

BHI Men’s Health and Wellbeing members used the ‘Peer Support’ method. This method galvanised the relationship between the men, providing support and encouraging each other.

The men that attended the event found out about it through the following methods of outreach:

- Targeted advertising and publicity
- Distribution of promotional literature
- Use of social media
- Announcements at BHI drop in and activities

2. Venue

A community venue was used as BHI’s working experience evidences that a venue in the community and an informal room layout is conducive to the target audience.

3. Transport

Provided to ensure those who wished to attend were included

4. Food

This is a major part of our process for ensuring attendance- as part of the engagement model. An assortment from a healthy culturally appropriate food with fresh fruit was available. This proved to evidence of preparation and cooking of such foods which supports the addressing of Obesity. The eating together provided opportunities for networking and visiting the various organisational/service stalls. These stall supported the emerging needs for the men who required information around additional health issues as reflected within the previous year’s conference.
Men’s Health Dialogue 2013

Programme

11.00am – Registration

11.30am – **Active Lifestyle**
Sam Coupland
Leeds City Council – Let’s Get Active

11.45am – Heather Nelson JP
Chief Executive Officer- BHI

12.00 pm – **Mental Health**
Divine Charura
Leeds Metropolitan University Senior Lecturer in Counselling & Psychotherapy

12.30pm – **Lung cancer**
John White – Lead Macmillan Lung Nurse Specialist
Richard Milton - Consultant Thoracic Surgeon

1.00pm – **Prostate Cancer**
Steve Rowntree Prostate Cancer UK,

**Personal Testimonies**
BHI Health Ambassador - Pastor George Crawford
BHI Health Ambassador - Philip ‘Blacka’ Brown

1.45pm – Panel; Questions and Answers

2.15pm – LUNCH

3.00pm – Close
Key focuses

1. Raise and heighten awareness of the importance of understanding the signs and symptoms of:
   - Prostate cancer
   - Lung Cancer
   - Mental Health

2. There are some risk factors that we know about

Learn your family history, and pass it on to other family members.

Knowing your family health history can help you take steps to lower your risk for developing health problems. Being aware of your family health history is an important part of a lifelong wellness plan.

Further Risk Factors

- Have a family history of Prostate, Breast Cancer or any other cancer, any experience or diagnosis of Mental Health
- Are black (of African or Caribbean ancestry) or from a minority group
- Gender may determine the level of your risk factor for developing one or more of these health issues
- Age: May play a large part depending on the ailment, but risk increases as they get older
- Smoking or passive smoking environment
- Alcohol consumption – try to drink sensibly
- Poor diet – reduce you weight incorporate more fruit and vegetable less fat, salt and sugar
- Lack of physical activity – physically active adults can achieve
  1. 30 to 50% lower risk of colon cancer
  2. 35-50% lower risk of type 2 diabetes
  3. 20-35% lower risk of CVD, CHD and stroke
Prostate Cancer –

Signs and Symptoms

There are no warning signs or symptoms of early prostate cancer. Once a malignant tumor causes the prostate gland to swell significantly, or once cancer spreads beyond the prostate, the following symptoms may be present:

- A frequent need to urinate, especially at night
- Difficulty starting or stopping a stream of urine
- A weak or interrupted urinary stream
- Inability to urinate standing up
- A painful or burning sensation during urination or ejaculation
- Blood in urine or semen

These are no symptoms of the cancer itself. Instead, they are the symptoms of the blockage from the cancer growth within the prostate and surrounding tissues = Prostate Health

Symptoms of advanced prostate cancer include:

- Dull, incessant deep pain or stiffness in the pelvis, lower back, ribs or upper thighs; arthritic pain in the bones of those areas
- Loss of weight and appetite, fatigue, nausea or vomiting
- Swelling of the lower extremities
- Weakness or paralysis in the lower limbs
Call your doctor about prostate cancer if:

• You have difficulty urinating or find that urination is painful or otherwise abnormal. Your doctor will examine your prostate gland to determine whether it is enlarged, inflamed with an infection or may have cancer.
Lung Cancer

Signs and symptoms

Many symptoms of lung cancer affect the chest and air passages. The signs and symptoms of lung cancer can be difficult to distinguish from other diseases; these include:

- Persistent or intense coughing
- Pain in the chest, shoulder, or back from coughing
- Changes in color of the mucus that is coughed up from the lower airways (sputum)
- Difficulty breathing and swallowing
- Hoarseness of the voice
- Harsh sounds while breathing (stridor)
- Chronic bronchitis or pneumonia
- Coughing up blood, or blood in the sputum

Ask your doctor for a CT Scan lung (a CT scan is a Computerised Tomography scan. It uses X-rays and a computer to create detailed images of the inside of your body).

or PET Scan (PET stands for Positron Emission Tomography. This type of scan can show how body tissues are working, as well as what they look like)

As lung cancer cells spread and use more of the body's energy, it is possible to present symptoms that may also be associated with many other ailments. These include:
• Fever
• Fatigue
• Unexplained weight loss
• Pain in joints or bones
• Problems with brain function and memory
• Swelling in the neck or face
• General weakness
• Bleeding and blood clots

Risk Factors

Some risk factors can be controlled, for instance, by quitting smoking other factors can’t be controlled, such as your family history. Risk factors for lung cancer include:

• **Smoking.** Smoking remains the greatest risk factor for lung cancer.

• **Exposure to second hand smoke.** Even if you don’t smoke, your risk of lung cancer increases if you’re exposed to second hand smoke.

• **Exposure to radon gas.** Radon is produced by the natural breakdown of uranium in soil, rock and water that eventually becomes part of the air you breathe. Unsafe levels of radon can accumulate in any building, including homes.

• **Exposure to asbestos and other chemicals.** Workplace exposure to asbestos and other substances known to cause cancer — such as arsenic, chromium and nickel — also can increase your risk of developing lung cancer, especially if you’re a smoker.

• **Family history of lung cancer.** People with a parent, sibling or child with lung cancer have an increased risk of the disease.

• **Excessive alcohol use.** Drinking more than a moderate amount of alcohol — no more than one drink a day for women or two drinks a day for men — may increase your risk of lung cancer.

• **Certain smoking-related lung diseases.** Smokers with certain lung diseases, such as emphysema, may have an increased risk of lung cancer.

**You can request a chest X-ray walk in clinic St. Georges Centre Middleton**
Mental Health

Signs and symptoms

All of the signs can vary in several ways and severity. Often they can be relatively minor, or pass quickly. However, if they are particularly severe or distressing, or continue for more than a short while, you may want to seek support.

Some common early signs of mental disorders vary depending on the type and severity of the condition. Some general symptoms that may suggest a mental illness include:

• Confused thinking
• Long-lasting sadness or irritability
• Extremely high and low moods
• Excessive fear, worry, or anxiety
• Social withdrawal
• Dramatic changes in eating or sleeping habits
• Strong feelings of anger
• Delusions or hallucinations (seeing or hearing things that are not really there)
• Increasing inability to cope with daily problems and activities
• Thoughts of suicide
• Denial of obvious problems
• Many unexplained physical problems
• Abuse of drugs and/or alcohol

At the very least, the affected person should:

• Have a diagnostic evaluation by a trained professional
• Be educated about mental ill health and signs and symptoms to be aware of
• Receive supportive counselling about daily life and strategies for stress management
• Be monitored closely for conditions requiring more intensive care
Keynote Speakers

Devine Charura – Leeds Metropolitan University Senior Lecturer in Counselling & Psychotherapy

The presentation discussed the following:

- Beliefs about Mental Health: inappropriate assumptions and stereotypes
- Discussing Mental Health issues in a non-stigmatising way
- Support and information for patients and families within hospital and community settings

There was opportunity for the delegates to respond during the presentation and the following were highlighted as concerns / issues to be addressed or to be explored further:

- The heightened awareness of race and discrimination within mental health diagnosis / service provision and aftercare
- The understanding of who defines good or bad mental health, and currently for BME communities it comes from a Eurocentric perspective, which may not be culturally aware nor competent
- The necessity of understanding the ethos and cultures of men from other minority groups and move from the one size fits all approach
• The need for discussions and dissemination of minority population and the diaspora experience
  
  o What does it mean to be a man
  o What is associated with it
  o Bi/Tri cultural identity
  o Counter the view of ‘black’ men as problem and not the solution

Research and reliable data evidence was discussed at length with the delegates acknowledging the disproportionate number of minority men being diagnosed and medicated with mental ill health. The following questions and concerns were raised, the men looked at a longer term intervention from services and professionals to answer these specific questions.

• Which minority group has the highest mental health statistics

• Numbers can be changed to meet political agendas so how will the truth be recorded and disseminated

• Review and evaluate the strengths and short-comings of service, in relation to be providing for diaspora members

• Is Britain driving blacks out of their minds? Political and social agendas

• Research – should be both qualitative and quantitative to ensure our voices are heard and exact number are recorded

• Determine who does the research and that it sits within a culturally competent model

• Men do access services in the UK we need to own our research and use evidence to make change

The echoing voice from the delegates was for the service providers to think outside the box where mental health is concerned and begin to pilot and develop a transculturally sensitive service provision for the community, which is enabled to treat the individual.
Richard Milton Consultant Thoracic Surgeon/ John White - Lead Macmillan Lung Nurse Specialist

Presented information on:

- Signs and symptoms, risk factors of Lung Cancer
- Statistics medical and surgical care
- Stages treatments and challenges

The foundation for the presentation was laid with the following facts:

- 34,500 die from Lung Cancer
- Lung cancer biggest killer in the world, UK biggest cancer killer of men and women
- 1 in 14 (7%) of all deaths due to lung cancer
- No difference in incidences of all types of lung cancer
- USA 1999 – 2009 Black men highest incidence rates of lung cancer
- Deprivation lung cancer incidences mortality rate raised in Leeds
• Survival (5yrs) by country 1995 – 2007 England worse than Canada, Australia, Sweden, Norway and Denmark

The presentation expanded on the defined stages of which lung cancer is diagnosed:

Stage 1 – 21% early stage contain small part of lung best chance of cure
Stage 2 – 7% spread advanced in lung lymph nodes best chance of cure
Stage 3 – 23% outside the lung bone
Stage 4 – 49% incurable

The presentation concluded with following suggested ways to increase awareness, aid the prevention of lung cancer, and increase intervention in the community by:

• Increasing and developing public awareness of the signs and symptoms
• Campaigning for national and local awareness sessions within localities
• Areas of high incidences to be flagged up, outreach work initiated with follow-up support work
• Community engagement and evaluation for continual progress
Steven Rowntree - Regional Community Development Manager North East England
Prostate Cancer UK

Steven Rowntree spoke on the signs and symptoms and risk factors of Prostate Cancer and his presentation encouraged men to:

• Register with a GP and take the PSA blood test
• Take the time to get regular health checks
• Encourage other male family members and friends to do the same
• Listen to partners who may notice the signs and symptoms
• Do something other than repeating the record not presenting until it is too late

The delegates fed back that dependant on their age some GP’s were reluctant to give test for prostate cancer unless they had reached the specified medical age.

The feedback during the presentation from the delegates present stated the following:

• BME men need to take their head out of the sand where their health is concerned
• We should be addressing our health issues with our children
• When our culture and our background is misunderstood that impacts on the health care received

The presentation and feedback from the delegates supported the need for greater awareness raising within communities and community based clinics.
Personal Testimonies

**Pastor George Crawford** – Prostate Cancer Survivor /**Philip ‘Blacka’ Brown** – Prostate Cancer Survivor

Presented information on:

- Family history
- Personal accounts of accessing services
- Anecdotal evidence of their personal journeys thus far

Each presentation was 30 minutes in delivery with questions and discussions from the delegates.

A common theme highlighted from each keynote speaker was the need for better engagement and dialogue with GP’s as the initial contact into the referral pathway.

The keynote speakers provided the platform that enabled open and frank discussions from the delegates of their personal journeys within the health system within the context each presentation of the keynote speaker. The information shared included, addressing cultural myths, awareness of sign and symptoms and available treatments.
Feedback Summary

Presentations and testimonies

Delegates were to evaluate the presentations and the personal testimonies. The results ranged from satisfactory to excellent.

Shown below are the results:

‘Hugely impressed with the content and delivery of this event, it has really opened my eyes and I now take further action in relation to myself and family members’  Black Caribbean 30yrs
Prostate Cancer

‘Personal testimonies were fantastic, excellent discussions’ — White British 23yrs

**Sign and Symptoms**

Based on the presentations we asked delegates if the event has increased their awareness of the following:

- **Signs and symptoms of mental ill health** —
  - Yes 75%
  - No 17%
  - Unsure 8%

- **Signs and symptoms of lung cancer** —
  - Yes 96%

- **Signs and symptoms of prostate cancer** —
  - Yes 82%

- **Sources of available support** —
  - Yes 91%
Impact on Lifestyle Changes

The delegates were asked to evaluate impact of the event in relation to the delegate’s self-awareness regarding their health and lifestyles.

**Question 1**

**Will you make changes to your lifestyle and eating habits?**

The results show the delegates are highly likely to make positive changes to their diets and adopt healthier lifestyles.

**Question 2**

**Will you conduct regular self-examinations to check for early signs of cancer?**

All the men who attended stated they would actively perform self-examinations and check for early signs.

**Question 3**

**Will you seriously look at ways to increase your physical activity?**

Most of the delegates agreed they will look at ways to exercise and increase their activity levels.

*Keep up the good work I will try to have a better communications with today’s panel and BHI on a regular basis*’ Black 53yrs
**Age Range**

Based on the completed questionnaires received age categories of attendees as

![Age Range Chart]

**Ethnic Monitoring**

The delegates attending identified themselves

![Ethnic Monitoring Chart]
Venue Catering and Event Management

Delegates were asked to evaluate the venue, catering and overall organisation of the event. They had a choice between poor, satisfactory, good and excellent.

- **Venue**
  - Excellent: 39%
  - Good: 61%

- **Catering**
  - Excellent: 41%
  - Good: 54%

- **Event Management**
  - Excellent: 46%
  - Good: 59%

‘A very well organised informative day all speakers were clear and informed. Dialogues like these are extremely important for our community. It would be beneficial to hold some of them on an evening so it would allow people from our community that work full time to attend. Thanks for the invite’

Black British 37yrs
**Emerging Needs**

- Readily available information at different stages of consultation
- Patients to be seen as individuals and treated as such rather than groups
- Clear effective referral pathways to be developed for all service providers
- A need for a designated worker/officer/co-ordinator who will target the men from marginalised disadvantaged communities who will continue the momentum of working with the men who are now engaging and learning about health issues and taking on the responsibility for their health
- Opening up of the ‘Men’s Health Forum’s’ to be welcoming to ‘all’ men within the city

**Needs based Recommendations**

- Information in a clear format both written verbal and pictorial thus accommodating all literacy skills informing of health issues which affect men
- Sign posting needs to be appropriate for the individuals in all aspects of social, practical and cultural needs
- Integration of the emerging needs into the local, national health agendas
Appendix 1

Men’s Health Questionnaires Pre/Post - Please circle your answer

Is it normal to feel?

- Stressed
- confused
- Depressed
- All of the above

Do you think it’s important to speak with someone if you...

- Feel tired or low
- Feel irritable, short-tempered or anxious
- Find life hard to cope with life
- All of the above

The prostate gland is about the size of a...

- Peach
- Pea
- Walnut

What are the signs and symptoms of possible prostate problems?

- Needing to urinate more often, especially at night or every 2 hours
- Pain or difficulty passing urine or weak flow
- Problems with erections; pain when ejaculating blood in urine or semen
- All of the above

What are the signs and symptoms of possible lung problem?

- Coughing up blood or a cough for more than three weeks
- Repeat infections such as Bronchitis or Pneumonia
- A hoarse voice
- All of the above

Which one of these would be a risk factor for lung cancer?

- Smoking
- Asbestos
- Diet and alcohol
- Family history of cancer
- All the above
Reference

International Journal on Men’s Health

1993 MIND Publication

European Men’s Health Forum

Cancer Research UK (2012)

Mental Health First Aid Training Curriculum

Mental Health Network

NHS Choices

www.standard.net
ESE NE TEKREMA

The Teeth and the Tongue

A Symbol of Friendship and Interdependence

The teeth and the tongue play interdependent roles in the mouth. They may come into conflict, but they need to work together.