

Feedback Report:
Men's Health in Torbay and South Devon

March 2023

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About Us

Healthwatch in Devon, Plymouth, and Torbay (HWDPT) are the three local independent consumer champions for people using health and social care services across Devon.

The scope of HWDPT is to listen to what people say about their local health and social care services, to identify what works well and what could be improved, and to make those views known to those involved in the commissioning and scrutiny of health and social care services; ensuring the voice of the community is used to influence and improve services for local people.

Introduction

Torbay and South Devon NHS Trust approached Healthwatch in Torbay and Devon to support them in collecting feedback from men of all ages who access healthcare services in Torbay and South Devon, to help them to understand what matters to men and how they can be better informed about their health and wellbeing.

Torbay and South Devon NHS Foundation Trust provide joined up care across Torbay and South Devon, which includes:

- Coastal (Teignmouth and Dawlish)
- Moor to Sea (Totnes, Ashburton, Buckfastleigh, Dartmouth and Chillington)
- Newton Abbot (Chudleigh, Bovey Tracey and Newton Abbot)
- Torquay, Paignton and Brixham.

Their vision is for better health for all.

The Trust want to understand what matters to local people when it comes to improving their healthcare services, to help them to ensure services meet people's needs and are fit for the future. This report focuses on what men told us what matters to them in terms of their health and wellbeing.

This report forms part of a wider engagement project by Torbay and South Devon NHS Trust, who are looking at how local health services can be developed and improved to ensure men are better informed about the health issues that affect them now and in the future.

132 men responded to the survey, which ran from 5th December 2022 to 31st January 2023.

Men's Health in Numbers

To put this report into context, according to [The Office of National Statistics](#), in 2021 the leading cause of death for males was ischaemic heart diseases (37,095 deaths, accounting for 12.4% of all male deaths).

[Cancer Research UK](#) data states that Prostate cancer is the most common cancer in UK males, accounting for more than a quarter (27%) of male cases (2016–2018).^[1–4] The next most common cancers in UK males are lung cancer (13%) and bowel cancer (12%). Prostate, lung and bowel cancers together account for more than half (53%) of all new cases in males in the UK.

Females live an average of 3.7 years longer than males, according to research cited by [The Kings Fund](#). In Torbay, females can expect to live even longer than males – 4 years more, according to the [Joint Strategic Needs Assessment](#) for Torbay 2020–2021.

[A report by UK Parliament](#) states that Suicide in England and Wales is three times more common among men than among women. In Devon this is even higher, with male and female suicide rates 19.0 and 5.3 respectively – male rates are 3.6 times higher than the female rate (2018–20), according to the [2022–23 DCC Suicide Prevention Statement and Action Plan](#).

Locally, [Devon's Joint Health and Wellbeing Strategy, 2020 – 2025](#) recognises the need for “a clear emphasis on prevention and early intervention” in relation to *‘maintaining good health for all’* and this is particularly important in Devon because of:

- Health-related behaviours such as smoking, excess alcohol usage, physical inactivity, poor diet, obesity and risk-taking lead to ill health and premature death in Devon, with considerable variation in these risk factors between Devon's communities.

- The late detection of disease, influenced by the low take-up of screening, reluctance to seek help and other barriers to using health and care services in certain groups, contributes to poorer health outcomes and health inequalities in Devon.
- Over 1,300 premature deaths for causes considered preventable occur each year in Devon, with the highest rates in the most deprived areas, and preventable conditions greatly impacting on demand for health and care services.
- Over 80,000 people providing unpaid care, which can impact on their own health and wellbeing, quality of life and the balance between their caring responsibilities and other aspects of their life.¹

The strategy lists the main outcomes they want to achieve in Devon, in order to maintain good health for all, as:

1. Prevent ill health by enabling people to live healthier lives.
2. Detect the early signs of disease to reduce impact on health.
3. Support those living with long-term conditions to maintain a good quality of life.
4. Support carers to improve and maintain their own health and wellbeing.
5. Promote public health interventions to prevent the spread of infectious disease.

¹ ['Happy and Healthy Communities' Devon's Joint Health and Wellbeing Strategy, 2020 - 2025](#)

Key Headlines

Responses to our survey revealed:

- The top 4 topics that respondents indicated they would like to understand more about are:
 - Prostate Issues / Cancer – 81% of respondents
 - Malignant Melanoma (skin cancer) – 43% of respondents
 - Testicular Abnormalities – 39% of respondents
 - Mental Health – 39% of respondents
- The top 4 topics respondents find most difficult to talk about are:
 - Erectile Dysfunction – 65% of respondents
 - Mental Health – 48% of respondents
 - Testicular Abnormalities – 42% of respondents
 - Prostate Issues / Cancer – 39% of respondents
- 82% of respondents were aware that the leading cause of death for men aged 50–79 years was cardio-vascular (heart) disease.
- 89% of respondents were surprised to learn that only 53% of men provided with a bowel cancer screening test, completed & returned it.
- 86% of respondents were surprised to learn that more men than women are dying of Melanoma Skin Cancers.
- 77% of respondents have never been shown how to carry out a testicular examination and explained what to look for.

What we did

A survey was circulated online via Healthwatch Torbay and Devon social media platforms, through the Healthwatch E-news bulletin and through Torbay and South Devon NHS Trust communications. A link to the survey was also shared with the Healthwatch Assist Network, Healthwatch Champions and volunteers, and the wider voluntary sector network in Torbay.



Reach and engagement figures for the Healthwatch social media posts are available in **Appendix 2**.

The survey consisted of 15 questions seeking feedback from men about their own health and wellbeing knowledge and awareness and where they would like to see more information about health conditions that matter to them. A further 3 optional questions were used to collect demographic information.

132 men responded to the survey and the survey ran from 5th December 2022 to 31st January 2023.

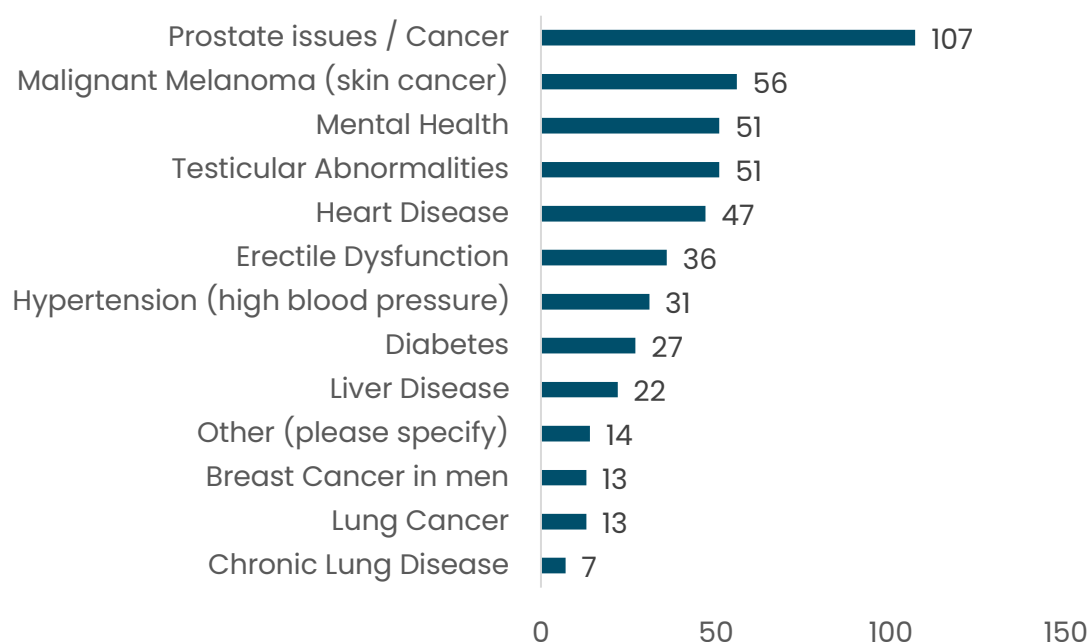
95 respondents (72%) live in Torbay and South Devon. A full breakdown of the locality, age group and ethnicity of respondents can be found at **Appendix 1**.

Detailed Findings

Question 1 – For Torbay and South Devon NHS Trust to be able to identify what men would like to know about their health, please select the topics you would like to understand more about.

131 men responded to this question as follows:

The topics that respondents would like to understand more about



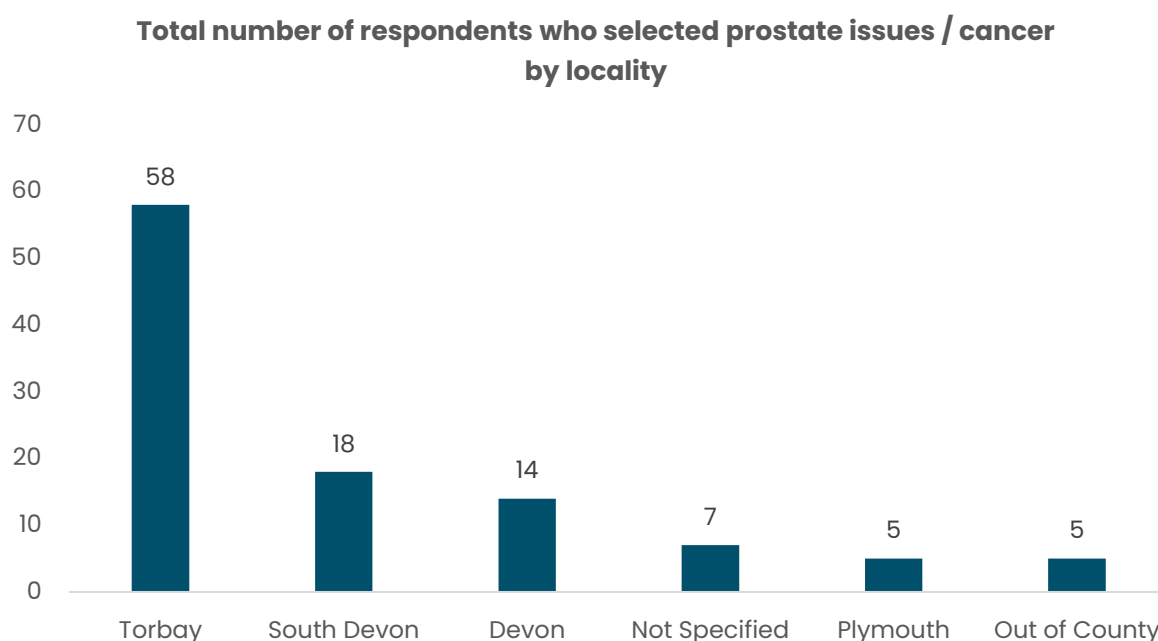
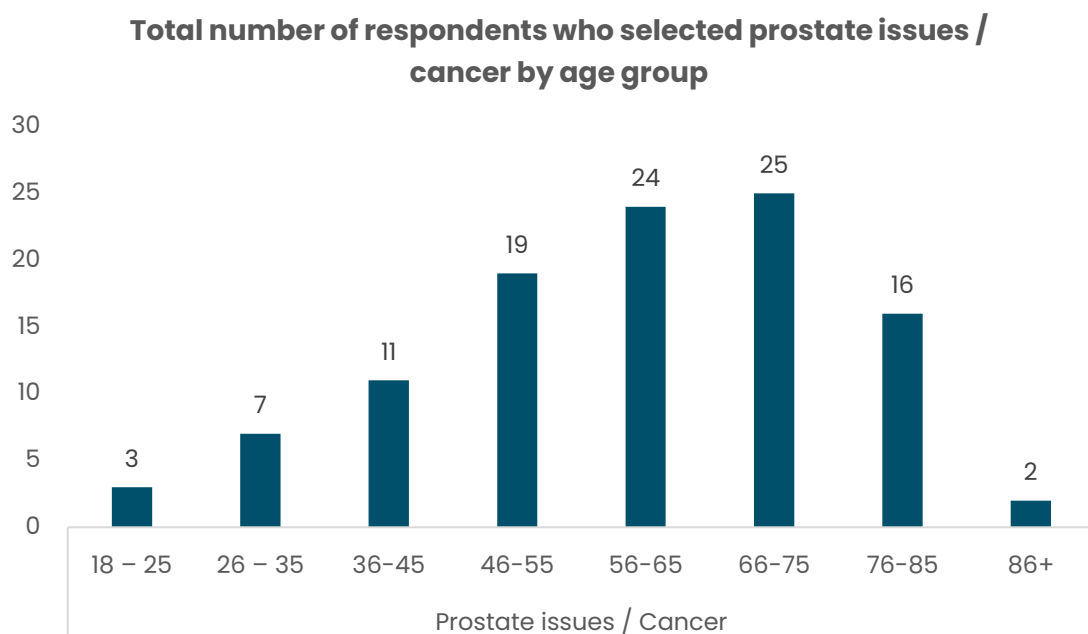
The top 5 topics that respondents indicated they want to understand more about are:

- Prostate Issues / Cancer – 81% of respondents
- Malignant Melanoma (skin cancer) – 43% of respondents
- Mental Health – 39% of respondents
- Testicular Abnormalities – 39% of respondents
- Heart Disease – 36% of respondents

The highest number of respondents 107 (81%) would like to understand more about prostate issues and cancer. Almost a quarter (23%) of those are aged 66 -75 years.

Given that [prostate cancer is currently the most common cancer in men in the UK](#), it is not surprising that prostate cancer is the topic that the highest number of respondents would like to know more about.

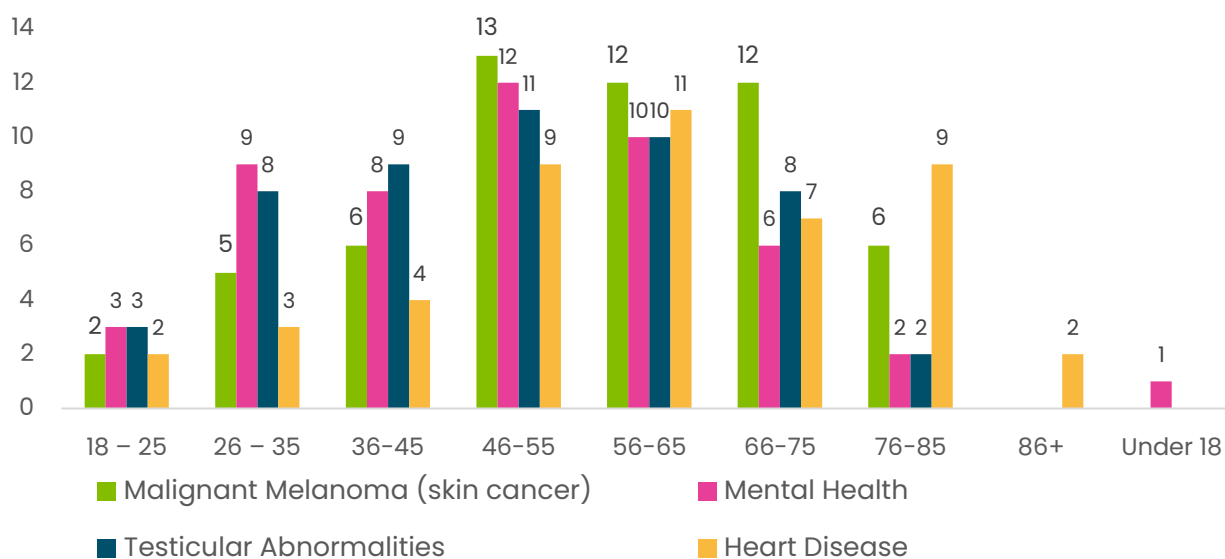
The charts below provide further breakdown as to the age groups and the localities of respondents who would like to understand more about prostate issues / cancer:



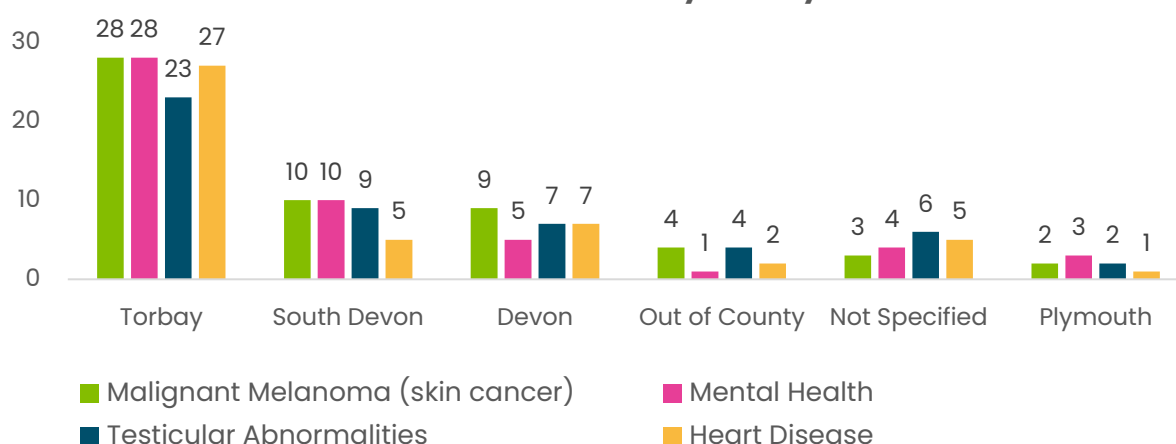
Almost half of respondents would also like to know more about malignant melanoma / skin cancer, mental health, testicular abnormalities and heart disease.

The following charts show a breakdown of the number of respondents that wanted to know more about these topics, by age and by locality:

Breakdown of topics (top 2 - 5) that respondents would like to know more about by age



Breakdown of topics (top 2-5) that respondents would like to know more about by locality



Malignant Melanoma, or skin cancer as it is commonly known, is a topic that most respondents would like to know more about within the 46 – 75 age group. Comparing this to the results in Question 11, a high number of respondents were surprised by the statistic that more men die of this disease than women and the comments in this section also reveal that there is concern as to the prevalence of malignant melanoma / skin cancer and some respondents suggest that more needs to be done to raise awareness of the dangers of the risks factors associated with this disease amongst men.

Testicular abnormalities is a topic that respondents particularly in the younger age groups would like to know more about. Comparing this to the results in Question 14, it shows that most respondents have never been shown how to examine themselves and do not know what to look for, therefore this is a topic that requires more information being made available to men to enable them to check themselves properly and know what to look for.

Mental health is topic that respondents across the age groups want to know more about and linking these results to the results in Question 7, most respondents are aware that the leading cause of death for men aged 20–49 years was suicide and are not surprised by the statistic. The comments show that there is considerable recognition that there is a need for more information, support and advice to be made available to men of all ages on this topic.

Despite lung cancer being the second most common cancer type in men, it was one of the topics that the least respondents wanted to understand more about, alongside chronic lung disease. We do not know why, but it would be interesting to know if the low number is linked to the fact that there may be a high number of respondents who are non-smokers. Breast cancer in men is also a topic that the least number of respondents would like to know more about and in linking that to the results in question 12 and some of the comments may suggest that respondents may not feel that it is a topic that is as important to them compared to other topics.

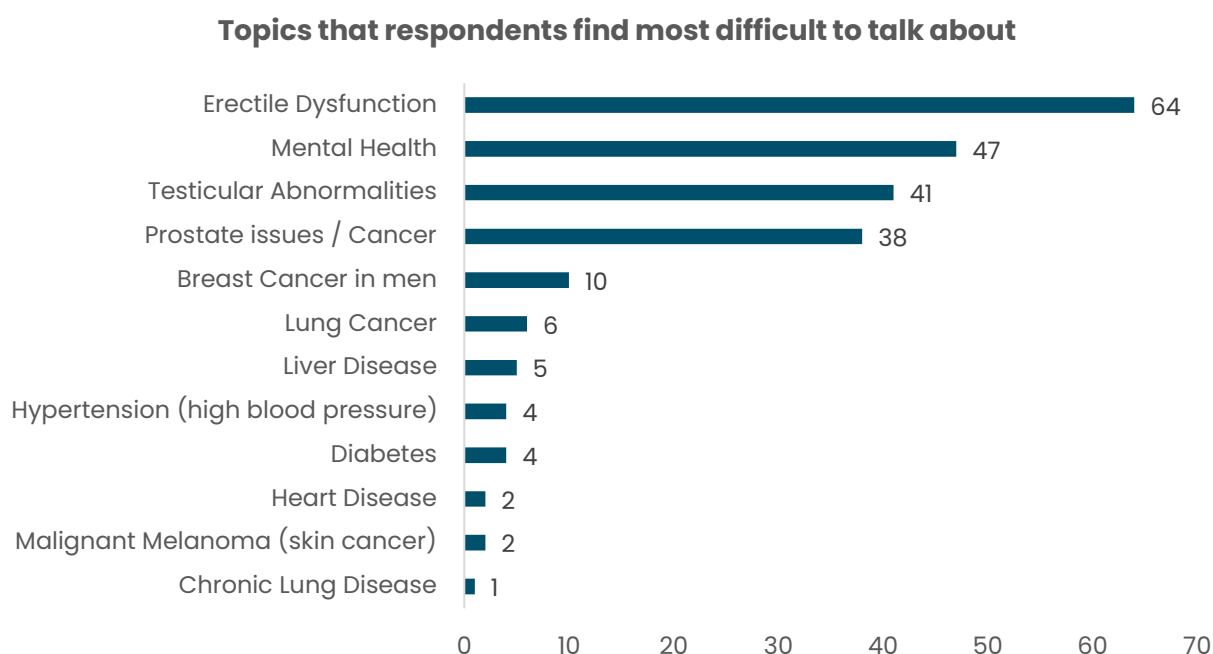
Of the 14 respondents who ticked 'Other', topics specified were:

- Intestine / Bowel Issues 2
- Kidney Disease / Failure 2
- Sexual Health / Fertility Issues 2
- Arthritis / Osteoarthritis 2

- Dementia 1
- Carer Information 1
- Weight issues 1
- Uncontrollable need to pee 1
- Cholesterol Checks 1
- Chronic obstructive pulmonary disease COPD 1

Question 2 – Please tick the topics which you would find most difficult to talk to someone about.

34 men skipped the question. 98 responded to this question as follows:



The topics respondents felt most difficult to talk about include erectile dysfunction (65%), mental health (48%), testicular abnormalities (42%) and prostate issues / cancer (39%)

54 men provided a response to the additional question in this section that asked respondents to explain why they would find it difficult to speak with someone. Of the 54 respondents,

- 12 said they would have no difficulties speaking to someone.
- 10 said they would feel embarrassed or awkward.
- 10 said they would find it difficult due to the private or personal nature of the topic(s)

- 3 said they would find it difficult due to the stigma attached to the topic(s).
- 3 said they thought it relates to a weakness or feeling inadequate.
- 2 said they would feel guilt or at fault.

Responses to this question include:

"It's a very personal matter, perhaps a sense of shame too".

"It's highly personal and means an examination of your private parts".

"Guilt at not having raised the matters sooner. Old-fashioned "grin & bear it" mentality".

"Mental health carries a stigma".

"The damage it can do to employment and the shame of it being on medical records".

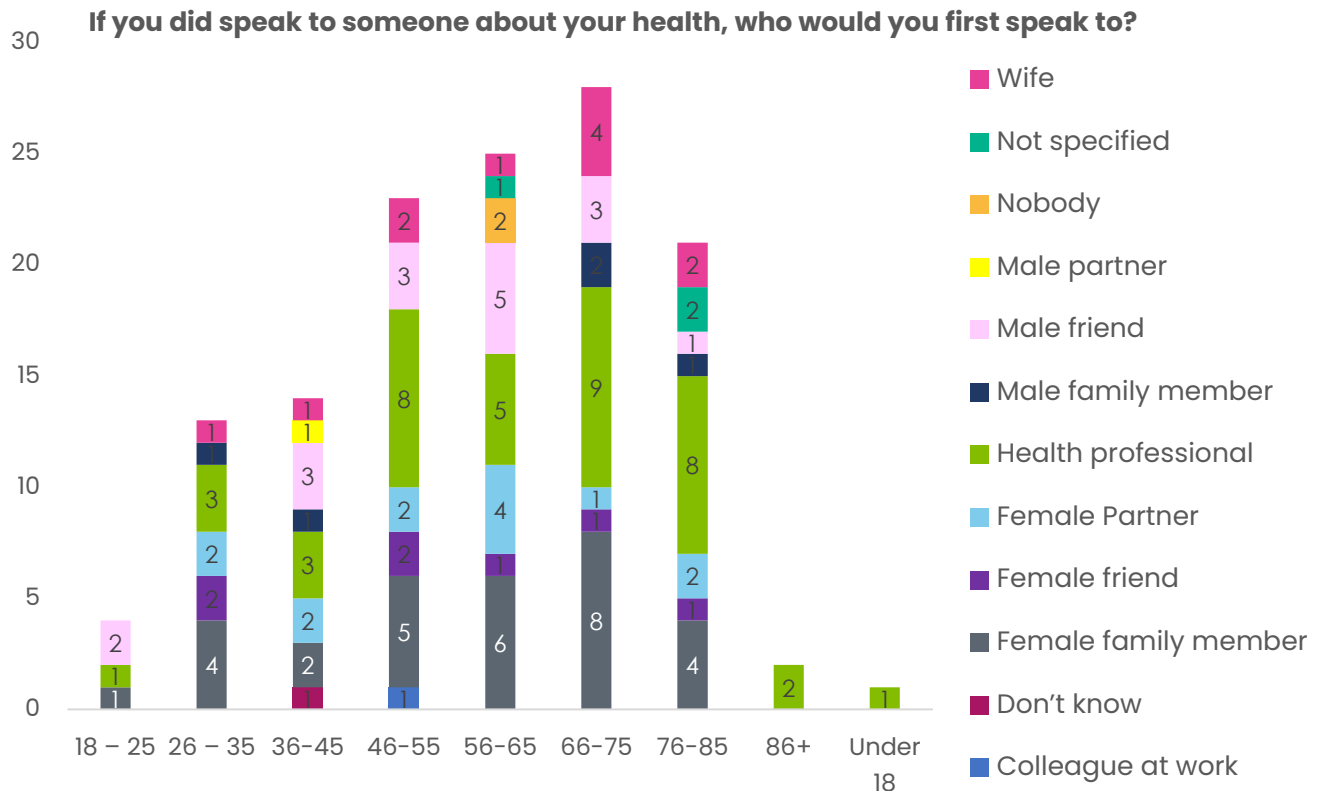
"Can be still seen as a weakness rather than a condition".

Question 3 – If you did speak to someone about your health, who would you first talk to?

131 men responded to this question. In the first instance:

- 40 respondents (31%) would speak to a health professional.
- 31 respondents (24%) would speak to a female family member.
- 24 respondents (18%) would speak to their wife or female partner.
- 17 respondents (13%) would speak to a male friend.
- 7 respondents (5%) would speak to a female friend.

The chart below illustrates shows a breakdown of responses within each age group:



According to the responses, speaking to a health professional is broadly the first choice for most men across the age groups. Less men in the 36–45 age group would speak to a female family member, compared to those in other age groups and there was a more varied response from men in the 36 – 45 age group.

Question 4 – Please explain why you made that choice if you wish.

87 men responded to this question. Reasons why respondents would seek help from a health professional include:

- Their knowledge and expertise on health issues and any potential risks
- It is confidential.
- They provide accurate information.
- Too personal to discuss with anyone else.

Commentary relating to speaking to health professionals includes:

“I would expect this professional to be the most knowledgeable on health problems, but I would hope I would be given adequate time to discuss them.”

"Don't wish to discuss my health with someone I know."

"My doctor is excellent, and she listens to me."

"Would know more about the problem and what needs to be done next."

"I feel a doctor is the most appropriate person."

"They are the best informed and understand the problems, risks and what to do going forward."

Reasons why they would **not** speak to a health professional first mainly relate to access to a GP and reluctance to waste a GP's time.

Comments include:

"Trying to access a professional to ask would be hard."

"I would speak to a male friend as I believe the possibility of having a one-to-one meeting with a health professional would be very difficult through one's local health practice."

"Too difficult to get hold of a GP."

Do not want to waste time of health professionals when they are so understaffed and underpaid."

"I am initially reluctant to try and speak with a health professional because of taking up their time when services are so stretched."

Reasons respondents gave as to why they would speak to a female family member (wife, partner) or female friend in the first instance include:

- They trust them the most.
- They discuss all personal issues with them first.
- They are health professionals.
- My wife is the person I am most likely to confide in.

Comments include:

"She would kill me if I didn't tell her lol."

"Feel less judgement and empathy from female friends."

"I prefer speaking to women about sensitive issues."

"I would ask the wife - she knows everything!"

Of those who either did not know who they would speak to first, or would not speak to anyone, comments include:

“Hard to talk.”

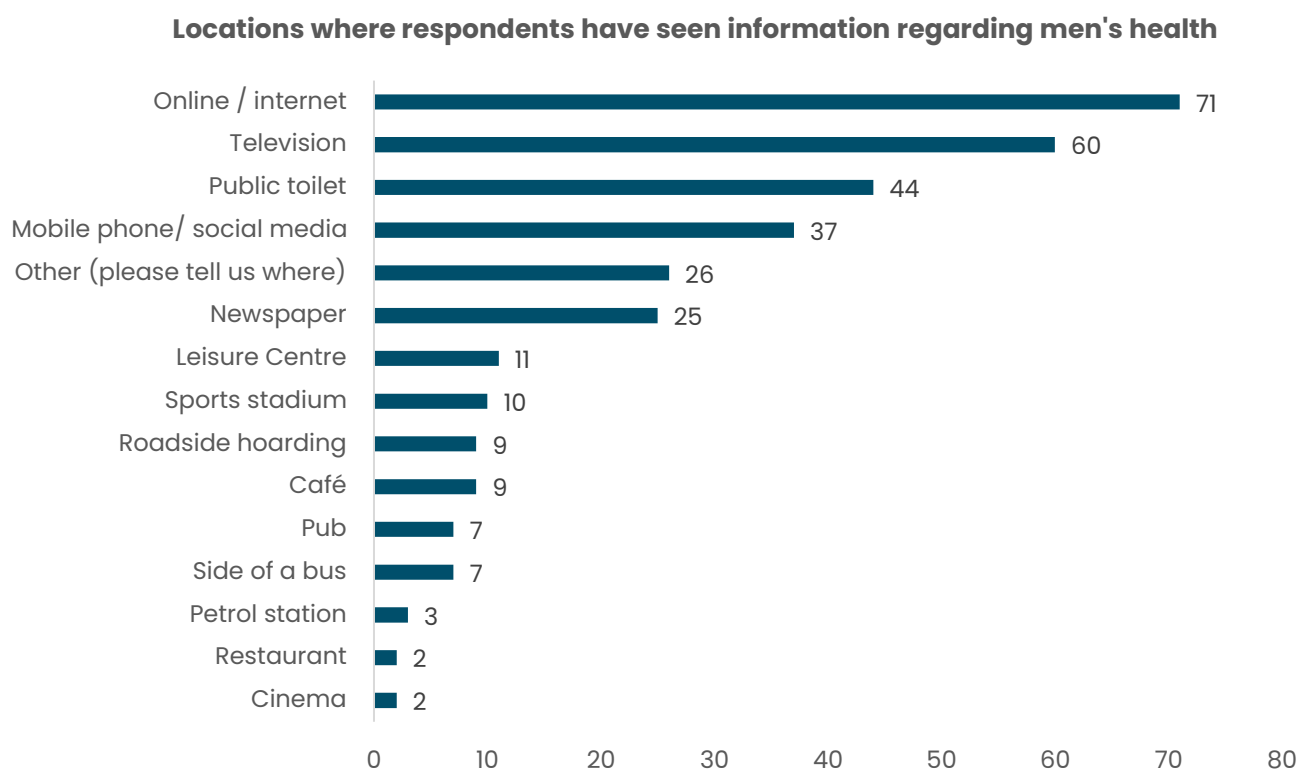
“My upbringing prevents me, a man, admitting to health issues.”

“No idea who would be the best person to first talk to.”

“Wouldn't want to be a nuisance or worry people, if I had to, I would talk to wife.”

Question 5 – Have you seen any information regarding men's health at these locations? (posters/leaflets etc.)

119 men responded to this question. The results are shown in the chart below:

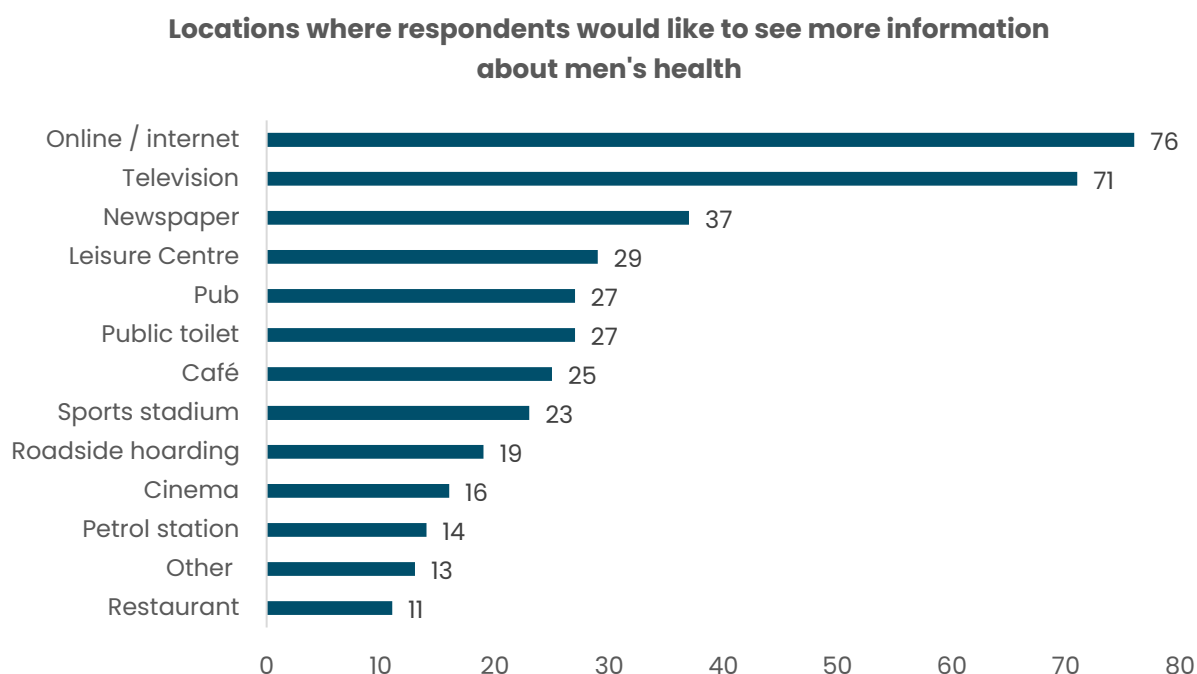


Where respondents ticked 'other' and provided details, the results are as follows:

- Nowhere 6
- GP Surgery 5
- Radio 3
- Hospital 2
- Service Station 2
- Library 1
- Gay Pub 1
- Friend 1
- Work 1
- Facebook 1
- Gym toilet 1

Question 6 – Where would you like to see more information about your health?

124 men responded to this question. The results are shown in the chart below:



Of the 13 men who responded 'Other', suggestions were made as follows:

- GP Surgeries
- Workplaces
- Work screen savers
- Mail shot
- Local radio
- Local beach hut magazine

Online and on television are the most popular places that respondents have seen and would like to see more information in relation to men's health. GP surgeries and workplaces were also mentioned by several respondents who would like to see more information in those places. Respondents would also like to see more information in newspapers, leisure centres, public toilets and pubs and cafes.

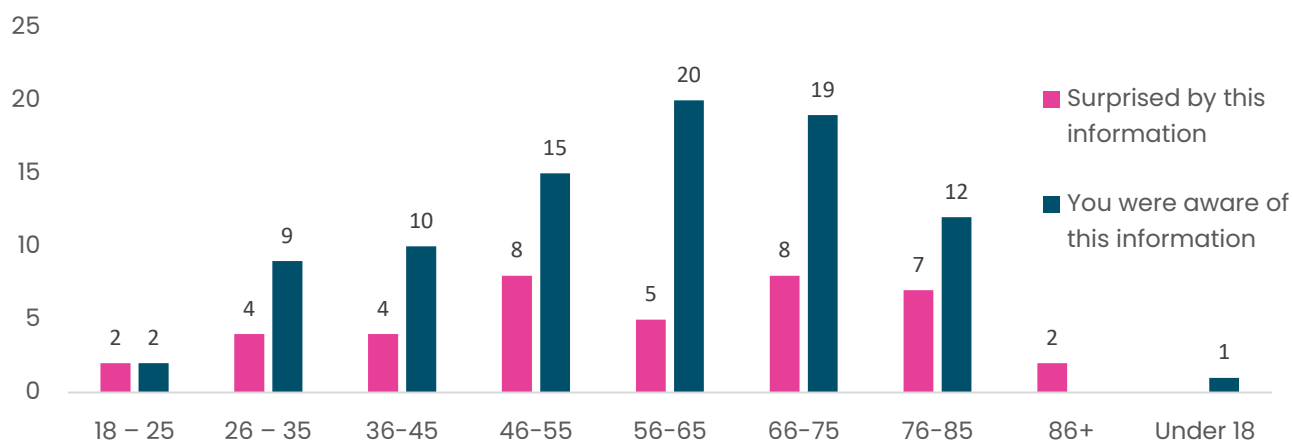
Questions 7 to 12 contain statements relating to men's health and the respondents were asked if they were either aware of the information or surprised by the information.

Question 7 - The leading cause of death for men aged 20-49 years was suicide or accidental poisoning.

128 men responded to this question. Overall, 89 (69%) respondents were aware of this information and 40 (31%) were surprised by this information.

Responses within each age group are presented in the chart below:

Respondents awareness of the statistic – The leading cause of death for men aged 20–49 years was suicide or accidental poisoning



27 respondents provided comments in relation to this question. Some shared their reflections on the statistic as follows:

“I am aware of this but also shocked by it. There needs to be more done for men in that age group.”

“I was aware of this, however, is still shocking when I hear it.”

“Only aware of this after from studying at university.”

“I was aware though am surprised of the range on age coverage.”

“I was aware of this but that does not make it any less shocking.”

“I live in Torbay which has 3rd highest rates in UK.”

“I knew that male suicide rates were high but did not realise it was the leading cause of death for this age bracket.”

“Such a sad statistic.”

5 respondents shared their own experiences relating to friends or family members who died by suicide. One man said: *“Mental health is a crisis that is only going to get worse as the economy tanks and the country goes to the dogs... please address suicide prevention as a priority”.*

Several men commented on possible reasons behind the statistic, such as:

“Pressure of work and responsibilities can distract men from looking after themselves and neglect the effect of any stress suffered until health suffers. This also applies to women.”

“Many young men have very limited opportunities and are very unhappy.”

“If we could see a GP more easily and more often the issues may be spoken about there, unless you are dead or dying you can’t get an appointment.”

Some respondents made suggestions as to what they felt was needed in tackling the situation. Comments include:

“I now have grandchildren and would like to have some real information on how to spot any signs and what to do if there were any.”

“More information should be shared more in our local area, toilets hospitals etc. Would be good for a local website of what services can be offered to men locally.”

“Greater awareness of this statistic and support available is needed”.

“More resources need to be applied to this appalling finding.”

A few respondents commented on the inclusion of accidental poisoning and were not sure what this meant. Comments include:

“Two very different causes, aren’t they? Or is accidental poisoning including drug and alcohol overdoses?”

I don’t think I was aware of the accidental poisoning bit. Is that death my misadventure in a suicide attempt? Or something else?

Is ‘accidental poisoning’ drug o.d?

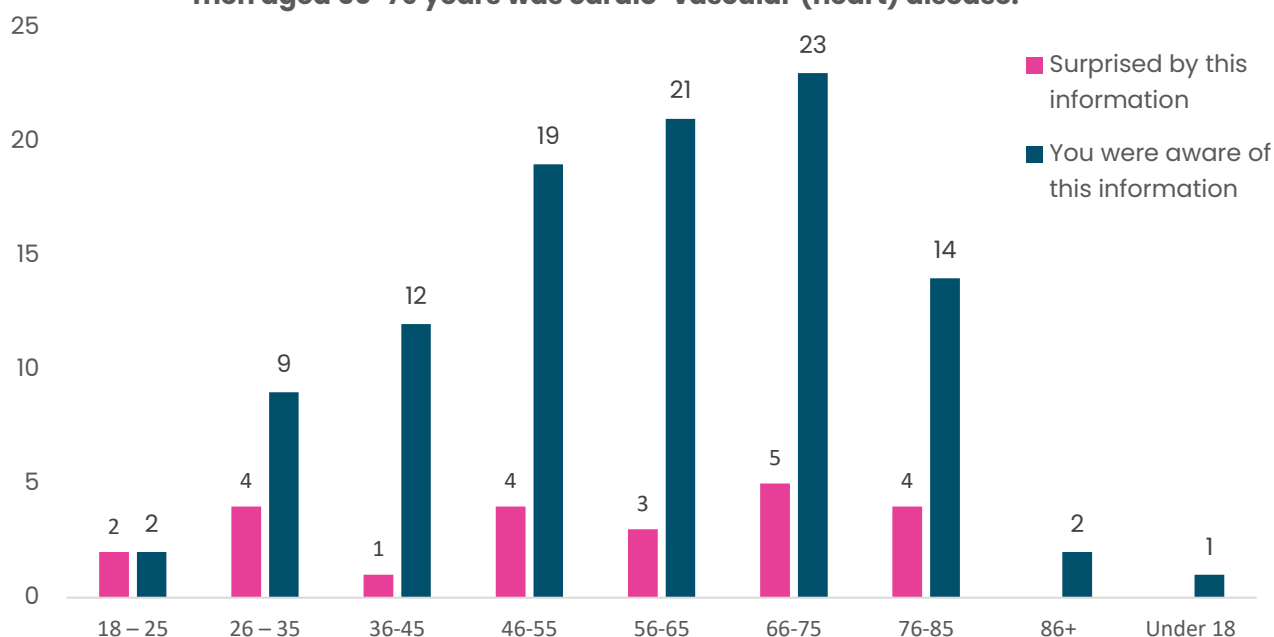
Overall, the comments reflect how concerned respondents are at the statistic and that there is overall recognition that more needs to be done to raise awareness and to improve support for men in relation to their mental health and wellbeing.

Question 8 – The leading cause of death for men aged 50–79 years was cardio-vascular (heart) disease.

127 men responded to this question. Overall, 104 (82%) respondents were aware of this information and 23 (18%) were surprised by this information.

Responses within each age group are presented in the chart below:

Respondents awareness of the statistic – The leading cause of death for men aged 50-79 years was cardio-vascular (heart) disease.



25 men provided comments in relation to this question. One respondent thought it would be stroke, another two suggested prostate cancer. Several respondents were unaware but not surprised by this statistic. One man said, *“I was not aware of this statement but, now I think about it, it doesn't surprise me as men are increasingly overweight and less active.”* Another said, *“Everyone I know seems very stressed.”* One man knew of several people who have had cardiac issues and another man who lives with CVD said he was *acutely aware of it* suggesting that there needs to be *“a hotline or something that we can access quickly to screen out symptoms that might, or might not, be heart related.”*

Several other respondents shared their thoughts and ideas on how the situation could be improved, which include:

“More information should be shared about prevention for this”.

“If people were aware of Blood pressure, cholesterol levels and blood sugar levels by regular health checks perhaps some could be avoided.”

“From the age of 40 men need to have much more awareness of the effect of their lifestyles on their future cardiovascular health.”

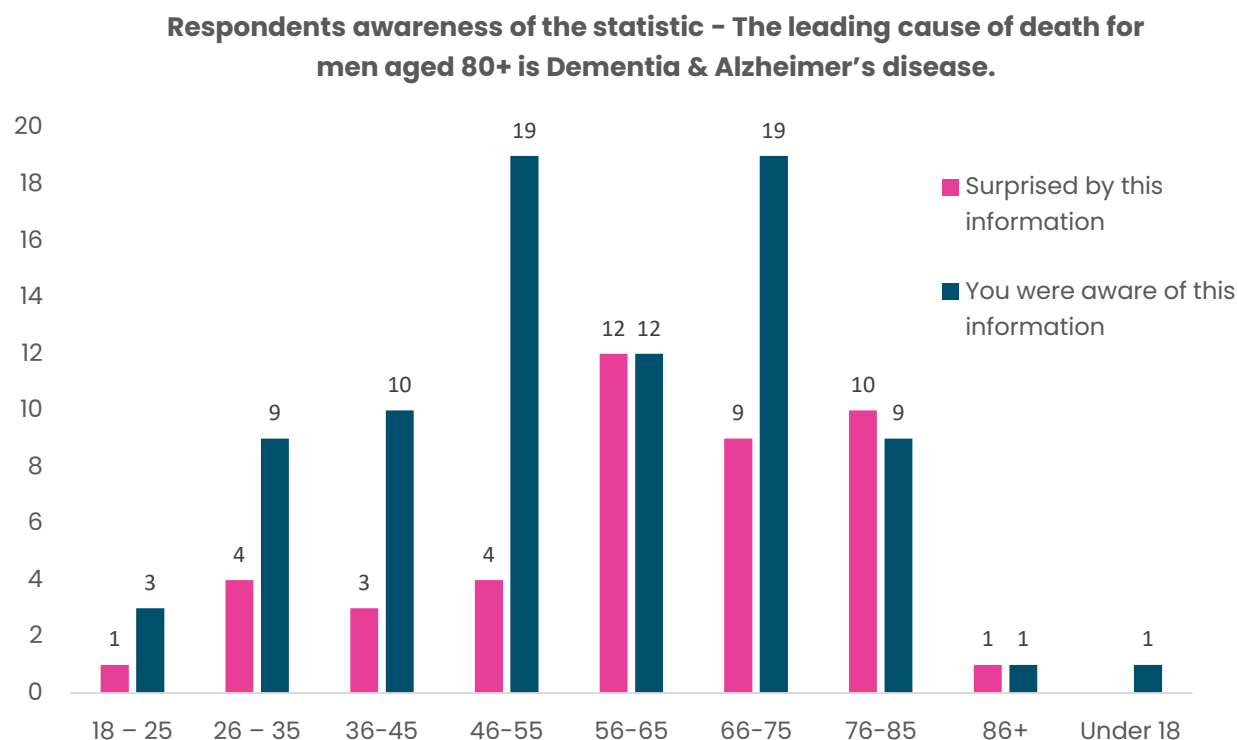
“Awareness campaigns need to be more focused and hard hitting geared towards preventative measures.”

Overall, the comments reflect that awareness of the statistic is high, but prevention is where the awareness may be lacking and that information needs to be made more widely available to men with regards to managing stress, blood pressure and other risk factors associated for cardiovascular disease.

Question 9 – The leading cause of death for men aged 80+ is Dementia & Alzheimer’s disease.

127 men responded to this question. Overall, 83 (65%) respondents were aware of this information and 44 (35%) were surprised by this information.

Responses within each age group are presented in the chart below:



20 men provided comments in relation to this question. Several respondents were unaware of the statistic but were not surprised. Some questioned whether Dementia / Alzheimer’s disease is the primary cause or a contributory factor. Given the age bracket some thought it was more likely to be physical frailties that would be the cause of death of those with Dementia / Alzheimer’s disease. Comments include:

“Thought: pneumonia”

“Do these mental health issues cause the death or is it a factor?”

“Would have guessed cancer.”

“Would've thought heart also at this age.”

“Assumed it was stroke or cardio vascular.”

Some respondents provided their views on what could be done to increase awareness of Dementia / Alzheimer's Disease as follows:

“I am aware of more discussion on the news etc. but would appreciate more in-depth documentaries and even events at community centres.”

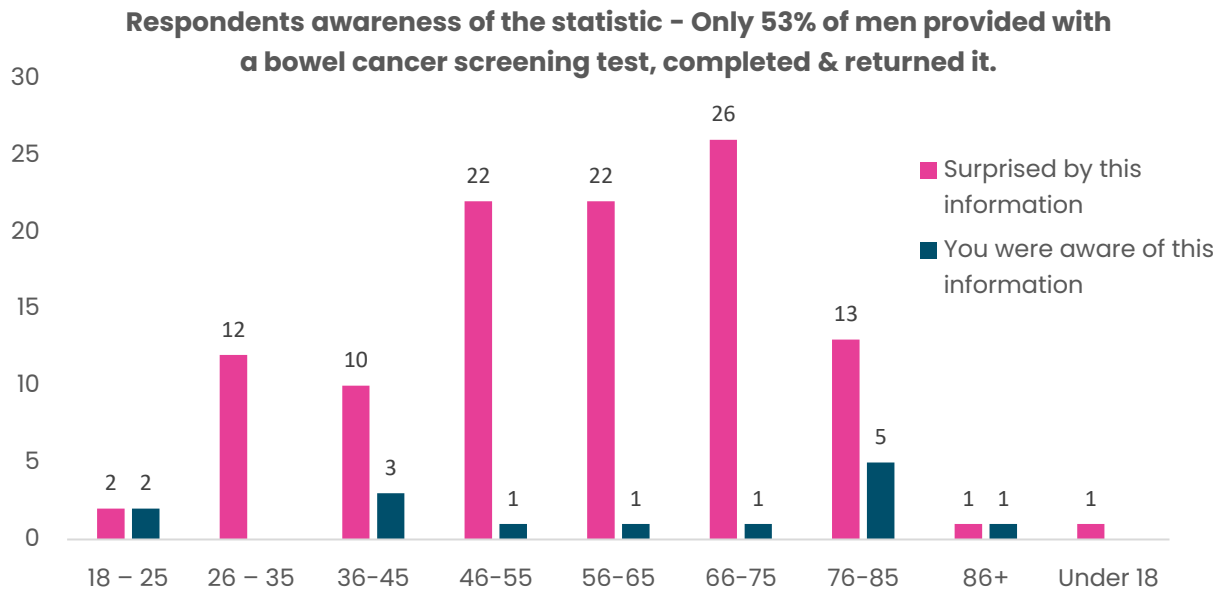
“More information on early signs of Alzheimer's would be useful, this conversation needs to be normalised so we can address it sooner.”

“More urgent research is needed to deal with this.”

To summarise, awareness of this statistic appears to be higher within the younger age groups and comments suggest that there is uncertainty as to whether Dementia is a leading cause of death, or a factor alongside other physical health conditions that contribute towards the deaths in men aged 80+.

Question 10 - Only 53% of men provided with a bowel cancer screening test, completed & returned it.

123 men responded to this question. Overall, 14 (11%) respondents were aware of this information and 109 (89%) were surprised by this information. Responses within each age group are presented in the chart below:



35 men provided comments in relation to this question.

A few were unaware but at the same time not surprised. One was “amazed” by the statistic, another was “shocked” another “did not realise the numbers were so low”. One man said he finds it “hard to believe that men can be so fatalist about screening that is there to help them”.

Several others commented on the low take up as follows:

“Men don’t deal with medical issues very well.”

“Why would anybody be so neglectful towards himself?”

“I thought it would be higher, but probably reflects it’s not a very pleasant thing to do.”

“Not sure why they wouldn’t”

“I’m surprised as the information provided with the test is very clear and concise and the test itself very straightforward.”

“Only shows what the public are like. Avoiding early detection places more strain on the NHS. Thank you to the 47%.”

“I was surprised and shocked as this doesn’t help new initiatives that may be similar, to be trialed possibly and for those keen for these systems of screening it may be disheartening.”

“I am 58 and have never been offered any cancer screening.”

Several men shared their experience of completing and returning the bowel screening tests, which include:

"When I was offered screening, I completed it."

"I have engaged with the screening process."

"I always return mine. Why wouldn't you? It's very easy."

"I do the test every time it is sent to me."

"Personally, I've no problem being offered and doing this test, I've done it twice now."

"It's easy and discreet. Results by post, so all men should do it. So important to pick up early signs."

Suggestions made by respondents to encourage men to complete and return their tests include:

"Regular reminders are necessary."

"How are they followed up post test? Does anyone chase them to return the test? Men are traditionally scared of illness so all should be done to encourage them to take/return tests."

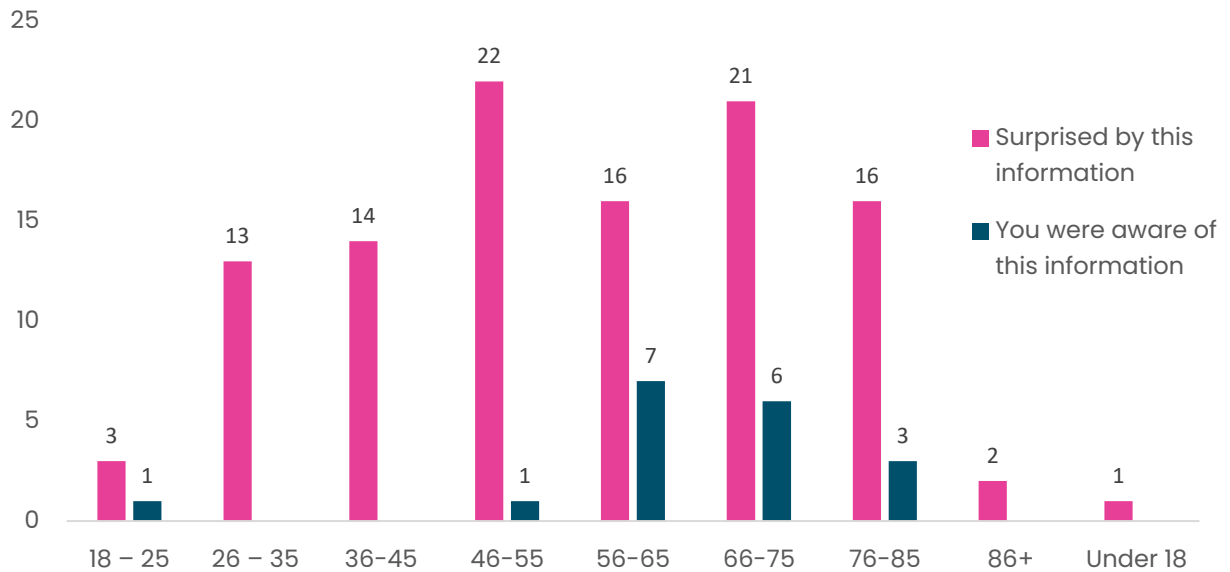
From the number of respondents who commented on this statistic it would suggest that many of them do complete and return the tests, however as the number who actually do is low then it would be useful to understand the reasons as to why so many men fail to complete and return the bowel screening tests. Healthwatch would welcome the opportunity to explore this further with Torbay and South Devon NHS Trust if this would be helpful.

Question 11 – More men than women are dying of Melanoma Skin Cancers. Statistically 1400 men per year compared to 980 women.

126 men responded to this question. Overall, 18 (14%) respondents were aware of this information and 108 (86%) were surprised by this information.

Responses within each age group are presented in the chart below:

Respondents awareness of this statistic – More men than women are dying of Melanoma Skin Cancers.



26 men provided comments in relation to this question.

Almost half of those who commented said they were unaware of this information but were not surprised by it, due to the high number of men who work outdoors.

One man said he was *“slightly surprised, but on reflection I reckon it’s occupational gardeners, builders, roofers etc. working outside in summer and not using sunscreen.”* Another said he was *“unaware of this risk and would be good to share, as many of us men like to catch the sun and do not protect our skin, unless partner is with them”* and another said, *“many more men do outside physical work than women, construction, agriculture, highway maintenance so get more exposure, and probably less willing to use sunblock.”*

Several suggestions were made in the comments in relation to raising awareness around melanomas and skin cancers. One man said, *“at school it needs a campaign to highlight the dangers, in my daughter’s school teachers are not allowed to help children apply sun cream.”*

Other comments include:

“Hard hitting advertising campaign highlighting the foolishness of over exposure to causes of the disease.”

“Men need to be educated that it is not pure vanity for them to be interested in lesions on their skin.”

“Far more publicity is needed about this disease.”

“Try including such information on holiday documents if possible.”

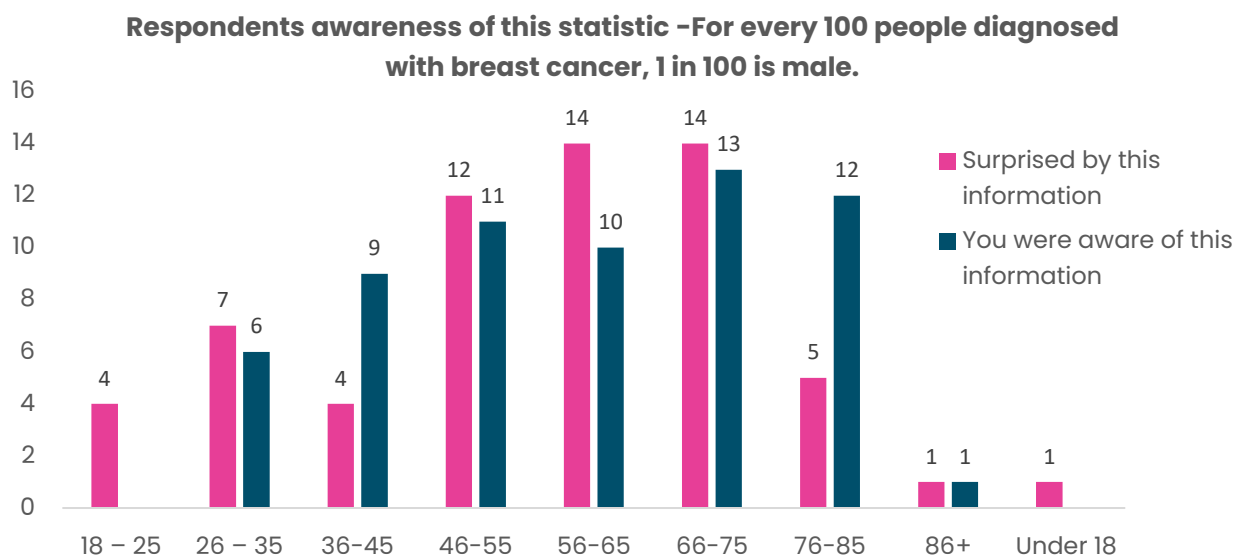
“We must all take more care in the sun.”

To summarise, most respondents to this question were surprised by the statistic and the comments reveal that there is a need for wider publicity around skin cancer awareness and prevention that targets the male population, particularly those who either work or spend a lot of time outdoors.

Question 12 – For every 100 people diagnosed with breast cancer, 1 in 100 is male.

125 men responded to this question. Overall, 62 (50%) respondents were aware of this information and 63 (50%) were surprised by this information.

Responses within each age group are presented in the chart below:



15 men provided comments in relation to this question. Most of those who commented said that they were neither aware nor surprised by this information.

One said, *“men are cavalier about this because they really don't think it actually happens and not to them.”*

Other comments include:

"Have no idea what male symptoms would be."

"Not surprised, as it is a low number but sad statistic."

"I was not aware that men could get breast cancer."

"Is the rate of male breast cancer increasing?"

"Obesity is a problem for many men."

"Only aware of this after from studying at university."

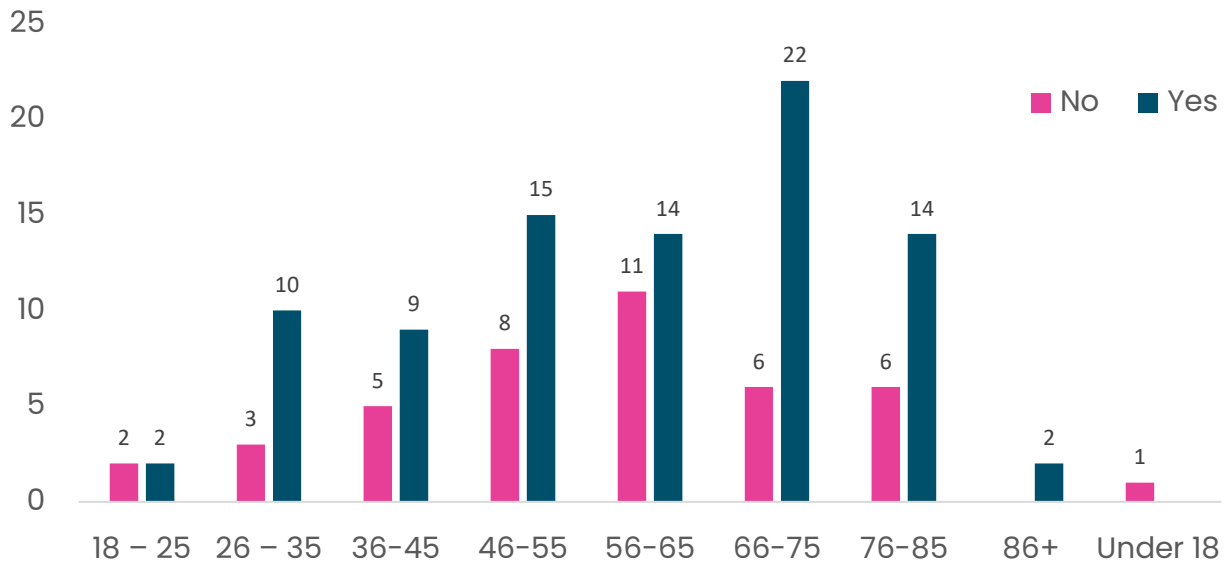
Overall, comparing the results to this question to the results in question 1, it suggests that male breast cancer is not a topic that many respondents were aware of or wanted to know more about, compared to other topics. The comments, although only a handful, suggest that there may be less awareness of this topic due to the perception that it is a topic that does not affect men as much as it does women.

Question 13 – Every year 2,400 men are diagnosed with testicular cancer. Do you undertake testicular self-examination (that is checking your testicles for lumps/abnormalities/changes)?

131 men responded to this question. Overall, 89 (68%) responded 'yes' and 42 (32%) responded 'no'.

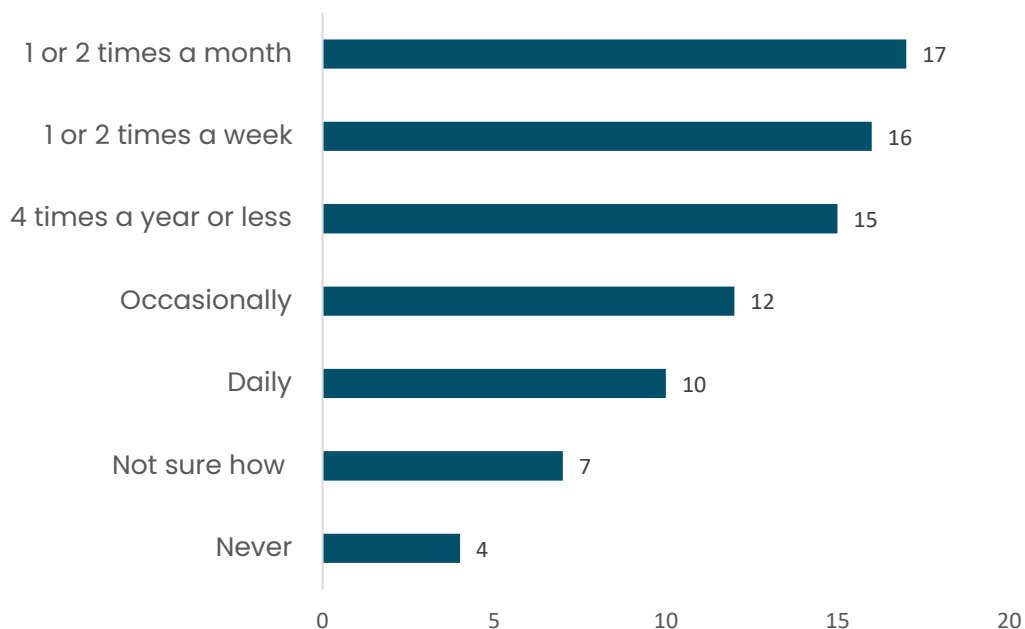
Responses within each age group are presented in the chart below:

Do you undertake testicular self-examination (that is checking your testicles for lumps/abnormalities/changes)?



A further question asked how regular they examine themselves; 89 men provided a response to this question.

Where men shared how frequently they examined themselves the results are set out below:



Some men commented in relation to their age, comments include:

“Probably less worried as younger (i.e., it won’t happen to me) but, as getting older, more conscious of age and increased risks of illness/diseases.”

“Did occasionally when I was younger and more at risk-not know I’m in my 60’s.”

“Not so much as age (53) as I understand more of a young man’s condition.”

Several men commented that they were unsure what they are looking for, these comments include:

“To be totally honest I’d be unsure how to as the guidance whilst it tries to be clear is very hard to confirm without knowing what a positive lump/change feels like.”

“I don’t really know what to look for, although if I noticed anything abnormal, I would seek help.”

“Don’t know what I am looking for.”

I’m not aware of how to check.

“Try to do it at least once a week but sometimes struggle with what I’m looking for.”

One man said he *“will do from this point forward”*.

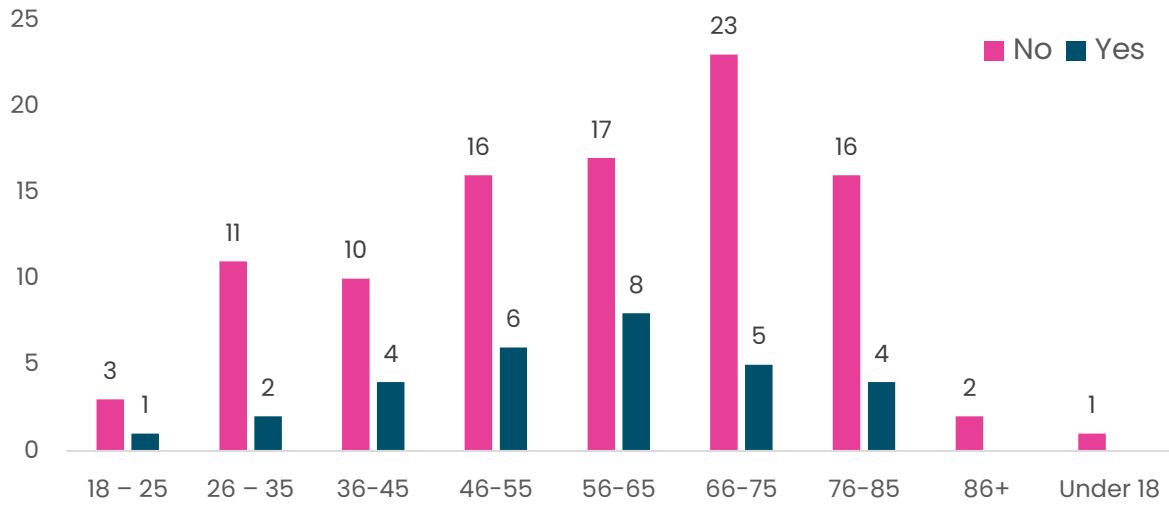
Overall, it would appear from the results that even though over two thirds of respondents do examine themselves regularly, just under a third of men do not and from the commentary the main reason for this appears to be due to a lack of knowledge around what signs they should look for and how to examine themselves properly.

Question 14 - Has anyone ever shown you how to carry out testicular self-examination and explained what to look out for?

129 men responded to this question. Overall, 30 (23%) responded ‘yes’ and 99 (77%) responded ‘no’.

Responses within each age group are presented in the chart below:

Has anyone ever shown you how to carry out testicular self-examination and explained what to look out for?

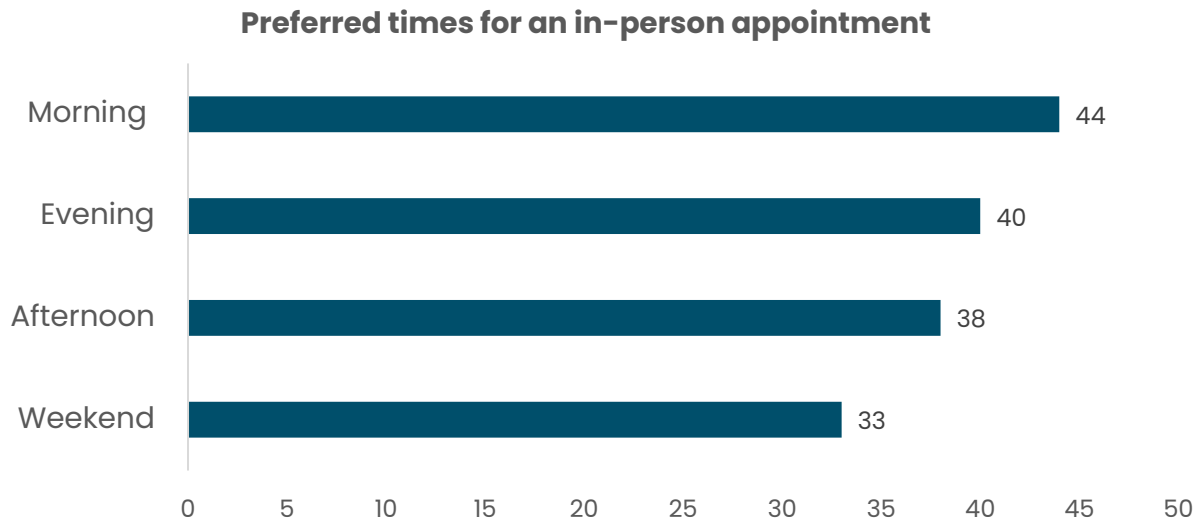


The results reveal that over three quarters of those who responded to this question had never been shown how to examine their testicles and had never been advised what to look for during a testicular self-examination.

Question 15 – Torbay and South Devon NHS Trust are looking at how they can support men to attend appointments for their health. What appointment times would work best for you?

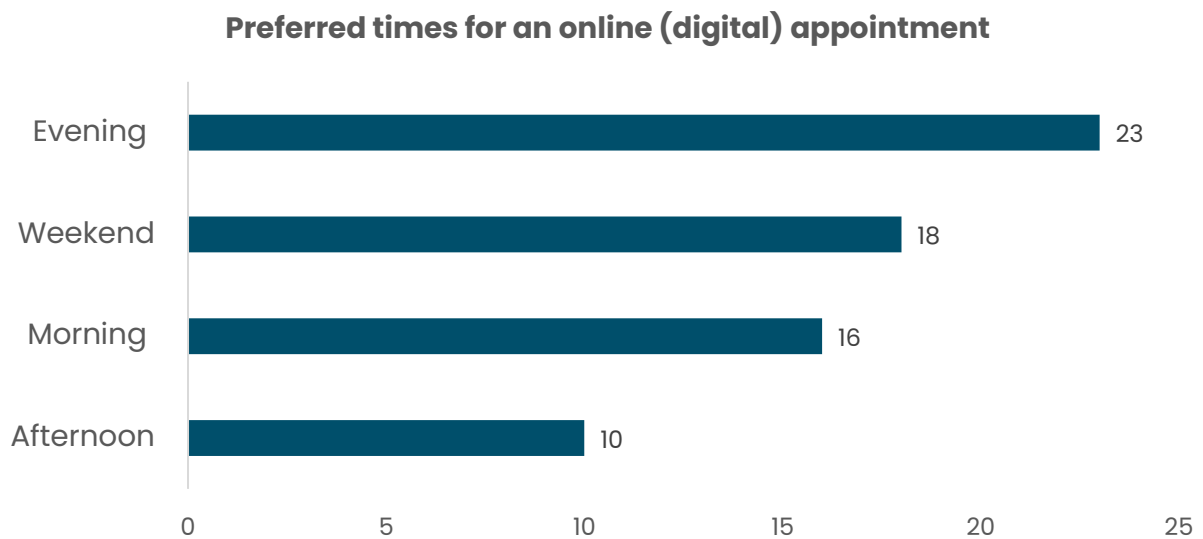
131 men responded to this question. 97 (74%) respondents would like an in-person appointment and 41 (31%) would like an online appointment. (7 respondents ticked both options).

Of those who ticked in-person appointments, the chart shows which time slots respondents preferred (some ticked more than one slot)



For in-person appointments, the chart shows that morning slots were preferable to more of the respondents. The least preferable time slot for in-person appointments were weekend slots.

Of those who ticked online appointments, the next chart shows which time slots respondents preferred (some ticked more than one slot)



The chart illustrates that evening slots are the most preferable if the appointments are online and afternoon slots are least preferable to respondents who would like an online appointment.

Healthwatch Observations

Whilst the number of responses to this survey is relatively small in relation to the male population of Torbay and South Devon, the findings do indicate that there are topics where knowledge and awareness could be improved, particularly around testicular self-examinations, bowel cancer screening and risks associated with prolonged sun exposure and poor mental health.

The report contains commentary throughout which illustrates where there is less knowledge and awareness on certain topics and where more information should be made available to men, in the places where they visit, whether that be online, on TV, or in the newspapers and in places like sports and leisure centres, pubs, public toilets and GP surgeries.

Considering the results, a summary of suggested campaigns include:

- A hard-hitting campaign to promote the dangers of excessive exposure to the sun and skin cancer prevention.
- A campaign that shows how to carry out a testicular self-examination which includes details of what to look / feel for.
- An awareness raising campaign around the importance of bowel cancer screening.
- Awareness raising around seeking help if men are experiencing low mood, stress or other issues affecting their mental health.

Finally, a point that was raised several times was that some respondents did not want to contact their GP due to either difficulties accessing an appointment or not wanting to waste their time, so there is some further work to do to ensure more men seek medical advice when they are experiencing any symptoms that they are concerned about.

Healthwatch in Torbay and Devon would welcome the opportunity to work with Torbay and South Devon to engage further with men across the area to look at specific themes and topics that have been identified within this report, for example why lung cancer / lung disease are topics that the least number of respondents would like to understand more about despite lung cancer being the second most common cancer type in males in the UK. Healthwatch in Torbay and Devon could also engage further to understand what men would find helpful so that they were better informed about testicular self-examinations, bowel cancer screening, risks associated with prolonged sun exposure, skin cancer awareness and mental health awareness and support.

Statement from Torbay and South Devon NHS Foundation Trust

We are very grateful to Healthwatch Devon, Plymouth and Torbay for carrying out this valuable men's health survey amongst our local people. The results give detailed insights into how men approach their health and what matters to them specifically. We are provided with a wide range of data which we will be taking into consideration as we focus on better health and care for all for the people of Torbay and South Devon.

The results cover a wide range of health issues and the action points which are described by Healthwatch make good sense. It will be important to work across our services to help men see that we want them to ask for help and to use the NHS, especially primary care, so that help or advice can be provided as early as possible. The NHS is very much open for business and we do not want people to think that they cannot access services or that we are too busy. We are here for them.

Mental health comes to the fore with the survey results and the suicide statistic is so stark, with men reporting that this area of health is difficult for them to talk about. There is clearly much to do to improve the situation here and this endorses the active focus on mental health in Devon, in particular on developing a suicide prevention plan. We will continue to support this work as strongly as we can and look forward to a time when our concerted, joined up efforts will make things much better for everyone.

Similarly, the light shone on areas such as testicular examination, bowel cancer screening and skin cancer awareness demonstrates that working together, we really can prevent ill health. The data from the survey shows us that concentrating efforts here will provide a very good return on investment for local people and help support people to live well.

Finally, a powerful aspect of this report is the voices of men themselves. Their words explain so much about men's health behaviours and concerns, and clearly show us how we can provide more (and better) support and guidance. We would like to thank the men who have taken the time to express their views when given this opportunity.

Liz Davenport, Chief Executive

Joanne Watson, Health and Care Strategy Director

Torbay and South Devon NHS Foundation Trust

Recognition

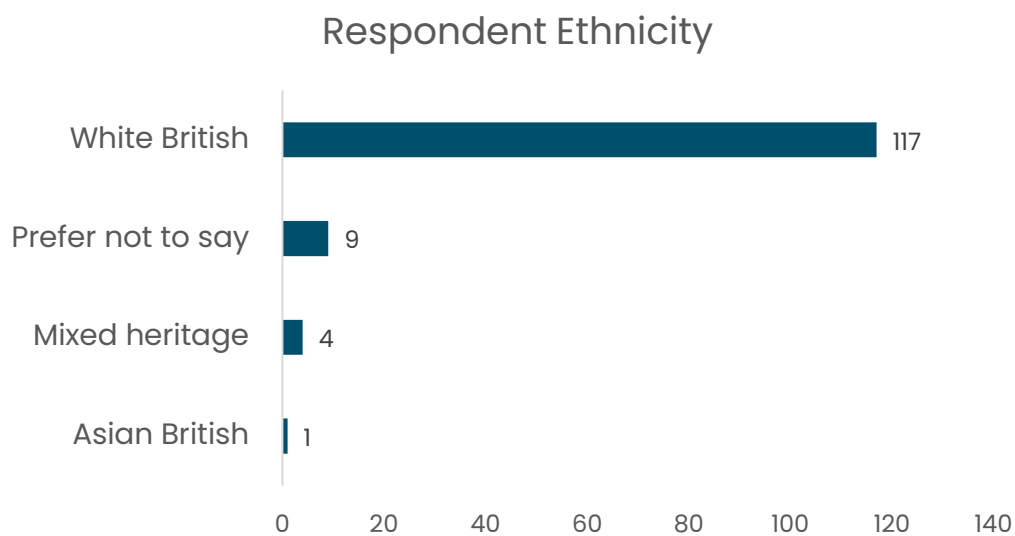
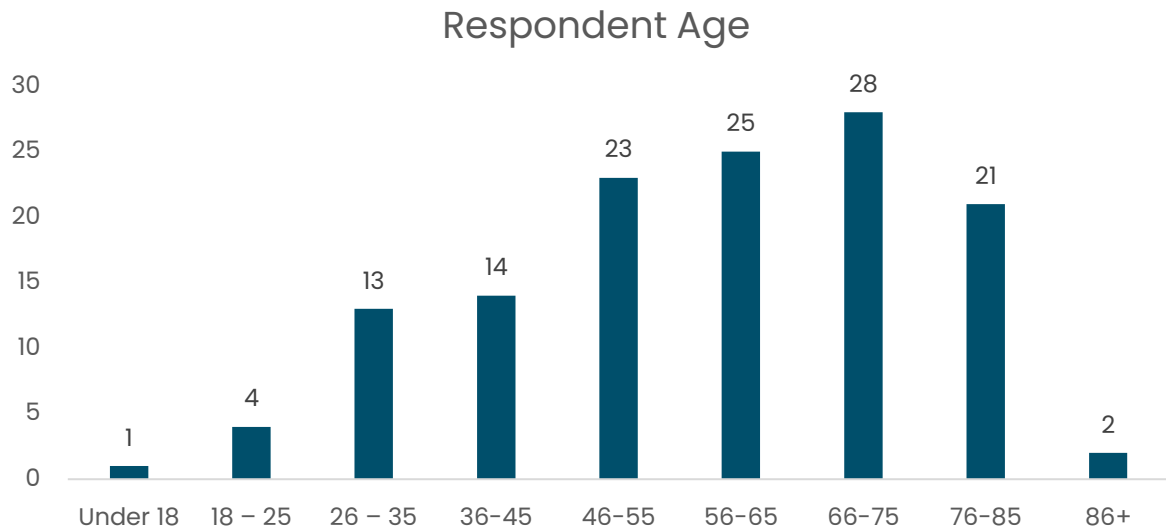
Healthwatch in Devon, Plymouth and Torbay would like to thank Torbay and South Devon NHS Foundation Trust for asking us to host this consultation and to all the men who shared their thoughts and feedback with us from Torbay and Devon.

Next Steps

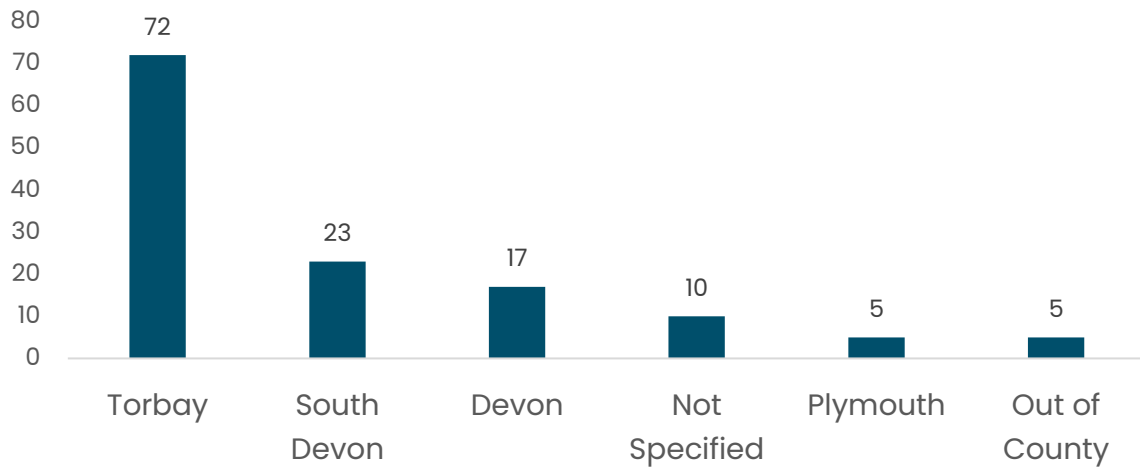
This report will be shared with Torbay and South Devon NHS Foundation Trust, NHS Devon and Torbay and Devon Public Health Intelligence Teams. Healthwatch in Torbay and Devon will continue to work with and support Torbay and South Devon NHS Foundation Trust work focussing on men's health to ensure the local voice is at the heart of any service change or development.

Appendix

Appendix 1 – Demographic breakdown of survey respondents



Respondent Locality



Appendix 2 – Social Media Reach and Engagement of posts

HW	Posts Made (Twitter/FB)	Reach	Engagement (Shares, likes, clicks)
Devon	8	926	59
Torbay	6	792	53
Total	14	1718	112



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