



# Men's Health

July 2025



## What we did

Following the government's announcement of [plans for a men's health strategy](#) in November 2024, and its call for evidence in April 2025, we decided to ask men in Buckinghamshire (Bucks), about when, how and why they seek help for their health and wellbeing.

We collected feedback via an online survey, in person using a short 'Just Five Questions' survey, and at one discussion group. 655 people, who live in Bucks or are registered with a Bucks GP, gave us feedback. 384 completed the online survey, 262 completed the 'Just Five Questions' survey and 9 attended a discussion group. All responses were collected between 1 May and 12 June 2025.

## Key Findings

### Overall health

- More men were concerned about their physical health than their mental health.
- Men said that good health to them means staying active, feeling good both physically and mentally, and enjoying a good quality of life.
- The top three responses when asked what men did to look after their mental or physical health were exercise, healthy eating and spending time with friends and family.

When we looked at the Just Five Questions data in detail, we found some evidence of a difference in how men responded to 'What do you do to look after your health?'

- We found some evidence of a difference in responses based on if they had a long-term health condition.
  - A lower proportion of men with long-term health conditions mentioned that they kept themselves healthy via exercise, compared to those without a long-term health condition.

- **A lower proportion of men with long-term health conditions mentioned that they looked after themselves by eating healthily, compared to those without a long-term health condition.**
- **We found some evidence of a difference in responses based on age. A higher proportion of men under 56 said they did nothing to look after their health, compared to those aged 56 and over.**

## **Mental health**

- **35% of those answering the online health survey said they were concerned about their mental health now or in the past.**
- **Several men told us they use therapy, volunteering and hobbies to maintain their mental health.**
- **Several felt they had not been listened to by health professionals.**
- **Several said that any short term mental health support, they had received, was insufficient.**

## **Looking for help and / or information about health**

- **While most men sought medical help when they needed it, 35% of those answering the Just Five Questions survey told us they never seek medical help or only do so when it's absolutely necessary.**
- **Men looked for health advice and information not only from their doctors and loved ones but also from the internet, social media, health apps, and even Artificial Intelligence (AI) tools.**
- **The top four areas which interested the online survey respondents the most were prostate cancer, weight, heart disease and exercise.**

## **Reasons for not seeking help**

**While 30% of survey respondents said nothing would prevent them from getting help for a health problem, the most common reasons which would stop the rest (70%) were:**

- **They couldn't get an appointment/what they needed because they couldn't get through on the phone or all appointments have gone when they do. Else, they couldn't get one at a time to fit around work or caring commitments. This, and waiting times for referrals, put some men off seeking medical help.**

- They wouldn't think to go or don't make the time to go. Some men would ignore symptoms which, if treated, might have prevented a bigger health problem e.g. a heart attack. Many didn't believe they were ill enough to seek help or did not make health a priority.
- They were embarrassed or put off going as they don't like talking about medical matters.
- They don't know what services are on offer. This was particularly an issue for those who told us they lived alone or away from family.
- Some are afraid of what the health professional might say if they go to seek help.
- A few felt they were not listened to, couldn't get to where the health service was being offered due to transport or caring responsibilities or didn't trust the NHS.
- A few men told us digitalised services might be a barrier to them seeking help for a medical issue. This was because of an accessibility issue, the limitations of the NHS App or the patient's lack of knowledge or confidence in using technology.

#### Satisfaction with local services

- 78% of online survey respondents, who had used local health and care services in the last year, were satisfied or very satisfied with these.
- Most of the comments from those who were dissatisfied (60) related to being unable to get a GP appointment, long waiting lists and referrals which were often postponed.

#### NHS health checks and screening

- Over 61% of survey respondents said they had been invited to an NHS health check or screening (bowel, abdominal aortic aneurysm or diabetic eye). Of those who said they had not been invited, over 44% were over 45 years of age.

When we looked at the Just Five Questions data in detail, we found some evidence of a difference in how men responded to 'Have you been invited to an NHS health check or screening?'

- We found strong evidence of a difference when it came to being invited for an NHS health check or screening based on:
  - Ethnicity – a higher proportion of respondents from a White British background said they had been invited, compared to those from other backgrounds.

- **Home address – a higher proportion of respondents from an Opportunity Bucks ward, said they had not been invited, compared to those living in other Buckinghamshire wards.**

**Opportunity Bucks is Buckinghamshire Council's local response to the government's Levelling Up White Paper published in February 2022 which sets out 12 national missions designed to spread opportunity across the whole UK and improve everyday life and life chances for people in underperforming places.**

- **We also found very strong evidence of difference based on long-term conditions. A higher proportion of respondents with a long-term health condition said they had been invited, compared to those without a long-term health condition.**
- **A few men didn't attend NHS health checks or screening when invited. They told us this was because they didn't think it was important, forgot or had issues with the time of the appointment.**
- **Most people found NHS health checks and / or screening they undertook helpful or very helpful. Negative feedback often related to not getting enough information before or after the check or not knowing how to use any information to change their personal circumstances.**
- **84% online survey respondents had checked their blood pressure in the last year.**
- **Most online respondents said the easiest location for them to get an NHS Health Check was their GP surgery.**

### **Suggestions to improve men's access to health support**

- **Better access to GP services including more appointments at weekends, evenings and drop in clinics. For many this included an increase in digital access for patients e.g. make appointment bookings online. Men also wanted professionals to share data across NHS systems. However, technology was an issue for many over 76 years of age.**
- **More men's support groups where men can share their concerns and / or undertake physical exercise. More health checks, especially regarding prostate cancer. Not everyone knew who to ask, or when, to get a PSA test.**
- **More education and information about men's health, including mental health, provided where men spent time e.g. men's groups, sport locations, online. Increasing knowledge around prostate cancer and mental health were**

mentioned particularly amongst those identifying ethnically as not from a White British ethnic background.

- Ensure health professionals take time to listen to men's concerns.
- More localised services and a reduction in waiting lists at secondary care level.

## Our recommendations

We have made the following recommendations to Buckinghamshire Council.

### Communication

- ✓ More targeted publicity about the importance of checks and screening, and where these can be obtained, e.g. using social media and videos. This could include more information about topics men are interested in e.g. prostate/testicular cancer and screening.
- ✓ Provide links to online mental health information i.e. [Buckinghamshire Council's Men in Mind](#) on social media platforms.
- ✓ Increase the promotion of suitable exercise and healthy eating opportunities to those with long-term health conditions in community and educational settings.
- ✓ Continue to promote free or subsidised exercise and sports opportunities to promote the benefits of exercise in all its forms, through opportunities such as [BetterPoints Bucks](#) particularly to younger men who may undertake less or no exercise.
- ✓ Continue to promote the reasons why everyone should be having regular blood pressure checks once they reach 40 years of age.

### Service Delivery

- ✓ Support more local groups designed for men to improve physical health and mental wellbeing e.g. Men in Sheds, Men Walking & Talking, MenSnap.
- ✓ Involve people with lived experiences of mental health challenges in planning community and cultural activities.

### Research and Engagement

- ✓ Collaborate with community researchers and Buckinghamshire Integrated Neighbourhood Teams (INTs), review ways to find out why some men with long-term health conditions do no or little exercise and/or might not eat healthily.

**We have made the following recommendations to Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB).**

### **Communication**

- ☒ **More publicity amongst those over 60 about their entitlement to free eye checks every two years.**
- ☒ **Promote men's right to request a PSA test if they are over 50 or earlier if there's a history of prostate cancer in the family or if the man has Afro-Caribbean heritage.**

### **Service Delivery**

- ☒ **Deliver health services at times and places suited to the needs of men e.g. more weekend and evening GP appointments as well as drop-in clinics for those working shifts, having caring responsibilities etc.**

### **Integrated Neighbourhood Teams (INTs)**

**Work with Buckinghamshire INTs to promote men's health by:**

- ☒ **raising the profile of the available support for travel to NHS venues e.g. the [Healthcare Travel Cost Scheme](#)**
- ☒ **reaching men who may not typically engage with healthcare services e.g. due to work commitments**
- ☒ **providing men with information to access local mental health support and improve their knowledge about cancers such as prostate and testicular.**
- ☒ **promoting peer support activity groups e.g. Wycombe Wanders Men's Walking Football.**

# What the project was about

## Background

In November 2024, the Secretary of State confirmed [plans for a men's health strategy](#).

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**"The strategy will consider how to prevent and tackle the biggest health problems affecting men of all ages, which could include cardiovascular disease, prostate cancer and testicular cancer, as well as mental health and suicide prevention. It will form a key part of the government's 10 Year Health Plan to fix the NHS."**

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The BOB ICB Joint Forward Plan aims to prioritise prevention, (to maintain good health) and reduce health inequalities. Heart disease is the leading cause of death for men in England; significantly more men die early from cardiovascular disease compared to women. Men also die earlier than women and are disproportionately affected by a number of health conditions, including heart disease and type 2 diabetes. Men also tend to seek help for their mental health less than women and are more likely to die by suicide; men account for three quarters of all suicides. Those living in the most deprived areas in England are also expected to live almost 10 years less than those in the least deprived.

On 24 April 2025, [the government launched a call for evidence on men's health](#). The call for evidence will seek responses on how the government's [Plan for Change](#) can work across the board to improve the health and wellbeing of men, through prevention, diagnosis and treatment and encouragement to come forward.

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**"Our Plan for Change means we will tackle these issues head on through a men's health strategy, and today's call for evidence is the crucial next step in understanding what works, what doesn't, and how we can design services men will actually use. I urge people to come forward to share their views."** (Wes Streeting, Health and Social Care Secretary)

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## Our Aims

**We wanted to find out what men think is important when it comes to their health and what is difficult when looking for help when they might need it. We wanted to talk to men, a group we hear from less than women, to encourage them to share their views. This is especially important in the light of the government's call for evidence.**

**We expected to hear that men:**

- **would like to know more about how to help themselves and where to get more information about how to have good wellbeing and health**
- **do not seek medical help when they might benefit from it and do not always take up NHS health checks and screening when invited**
- **find there are barriers to accessing services which get in the way.**

## Methodology and Limitations

**The 'Just Five Questions' survey was taken by staff and volunteers out into Buckinghamshire streets and community spaces in mainly Opportunity Bucks wards. We went to locations where we believed men would be prepared to stop and talk to us. About half of those we stopped to ask these questions, agreed to answer them. We recognise that the locations we chose to collect this data influenced what we heard. This short survey was designed to involve as many men as possible by keeping it simple and quick to complete. All responses were collected between 1 - 31 May 2025.**

**Usually, Healthwatch Bucks finds that men are reluctant to take part in online surveys. This online survey was promoted to men's groups, in our newsletter and on social media. We recognise that online surveys tend to only attract a certain demographic. This again influenced what we heard and reported. Those answering the online survey were asked more questions. All responses were collected between 1 May and 12 June 2025.**

**Where we invited people to leave a comment, we analysed, and have summarised, these by theme. Many people commented on more than one theme, so the number of comments is greater than the number people who responded.**

**Detailed statistical analysis was undertaken on the numerical data gathered through the Just Five Questions survey where individual data was collected. This was not done for the data collected in the discussion group or the online survey. However,**



we have highlighted any differences between the feedback. Full details of the statistical analysis can be found in Appendix 5.

## Who talked to us

We collected feedback from 655 people – 384 completed the online survey, 262 completed the ‘Just Five Questions’ survey and 9 attended a discussion group. Full details about who talked to us can be found in Appendix 3. We found the following:

For those completing the ‘Just Five Questions’ survey

- 51% (130/253) identified as White: British. 21% (52/253) identified as Asian / Asian British: Pakistani. 7% (17/253) identified as Asian / Asian British: Indian
- The median age of 256 respondents was 54.
- Of the 262 people that gave full postcodes, 47% lived in [Opportunity Bucks](#) wards.

For those completing the online survey

- 78% (283/364) identified as White: British.
- The median age of 365 respondents was 62.
- Of the 333 people that gave full postcodes, less than 1% (9) lived in [Opportunity Bucks](#) wards.

For those attending the discussion group

- 88% (8/9) identified as Asian / Asian British: Pakistani.
- The median age of 9 respondents was 72.
- Of the 9 people that gave full postcodes, 67% lived in [Opportunity Bucks](#) wards.

## What we heard

This report reflects the views of the 655 people who talked to us. Full details about how people answered our questions can be found in Appendix 4.

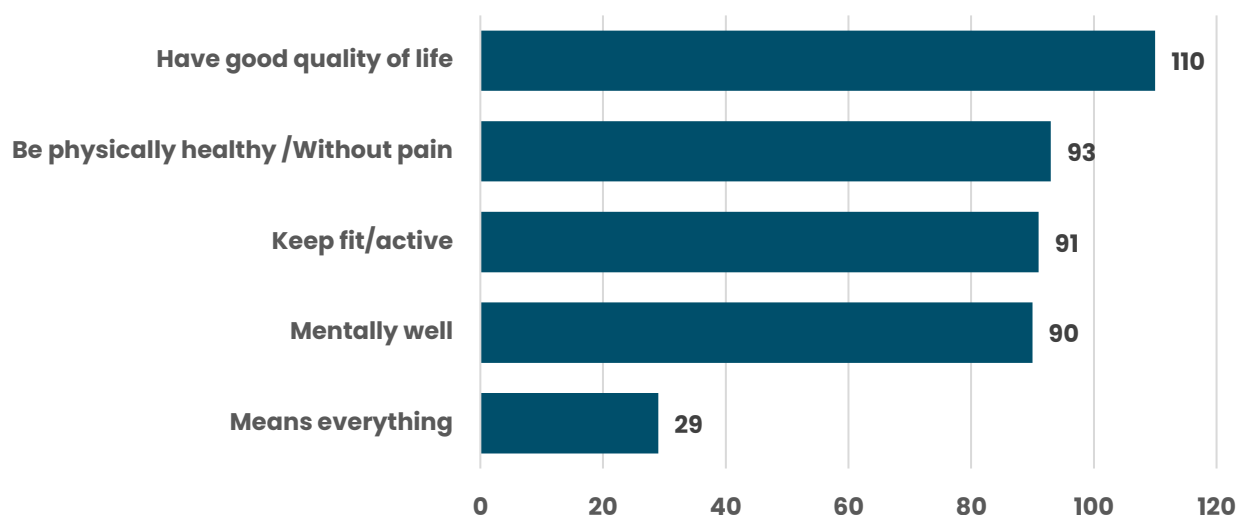
## Men’s thoughts on good health

32% (124/384) of online survey respondents said they had been worried about their physical health in the past. 46% were worried about it now. Whereas 63% (241/382) of online survey respondents said they had never worried about their mental health.

Figure 1 shows what 310 people, who took our online survey, think good health and wellbeing means to them.

**“Good health and wellbeing are a major factor for a long and happy life.”**

**“[It’s] The ability to participate actively in life without worry and confidence that when I need help it is available to me.”**



**Figure 1 – What does good health and wellbeing mean to you? (Online survey only)**

**29 men did not give us any details but said it meant everything to them.**

**“A lot, it is essentially the main balance / barometer for a healthy life for not just yourself, but those around you.”**

**A third (110) of the comments linked good health and wellbeing to having a good quality of life. For most, this involved not being reliant on others, being able to do what they’d always done (within reason) and having choice.**

**“It means being able to do the daily activity I need to do and the sports I want to play when I want to play them, not being dependent on anyone to help me cook, clean or wash.”**

**“Being able to live, work and play in the knowledge that I am healthy and can manage my health as needed.”**

**A few also mentioned that they wanted to be healthy enough to work but also maintain a balance between earning an income and family time.**

**“Being content, having a routine and good work-life balance”**

Men wanted to live an active life (91). For many this revolved around being able to play sport, participate in their chosen hobbies, keep up with children or grandchildren and have an active social life too.

**“The ability to go for walks and enjoying the countryside. Meeting friends and going to our church.”**

Many linked keeping fit with feeling happy and healthy. Men also wanted to be physically healthy and live without pain (93).

**“Ability to face each day with optimism. Adequate mobility and freedom from persistent pain.”**

While some accepted that old age may not be without deteriorating health they wanted to keep as physically able for as long as possible. This included receiving medical help quickly and feeling sure that they could find support to take care of their health.

**“Physically able to do the things I want to do, and able to get medical advice & treatment easily.”**

**“Being aware of any issues, knowing that they are being addressed and what the long-term consequences are.”**

## **Mental health**

Across both surveys, 144 men told us they had either concerns about their mental health either in the past or now.

**“[I was] reluctant to seek help for mental health; I’d over worry about things...”**

Many people (90) talked about needing to be mentally healthy. They wanted to feel comfortable in their own skin and not be anxious or stressed.

**“Feeling happy/positive about what I eat, what I think and what I feel.”**

**“Not being continually preoccupied with worry about life changing conditions; being able to carry out daily life without health being a constant concern”**

**“I come from an age when men don’t talk about mental health. It’s a big thing nowadays for men to admit they have a problem.”**

**One person told us about how having trust in the NHS affects their mental health.**

**“It means one less thing to worry about. Confidence in my own health is hugely important because I’m anxious and possibly a hypochondriac. Early diagnosis and a belief in the healthcare systems’ ability to treat me means a lot.”**

**Many men also told us how feeling mentally well is interlinked with their physical health.**

**“[Good health is] A balance in physical and mental health not merely the absence of disease.”**

**Some saw having one without the other had an impact on their life and health.**

**“[You need to be] Physically and mentally fit to lead a good lifestyle enjoying activities that stimulate you as a person.”**

## **Keeping healthy**

**“I walk quite a lot, have a balanced diet and monitor my blood pressure.”**

**641 survey respondents told us what they did to look after their mental or physical health. We summarised these by theme. Exercise (495), healthy eating (402) and spending time with friends and family (272) were the top three responses for those answering either survey as well as those in the discussion group. Full details of the survey responses can be seen in Figure 2.**

**Exercise was, unsurprisingly, the top answer for both groups. However, the type of exercise people undertook varied. Men in the discussion group told us they walked, read, gardened, cycled, tried to keep active, and attended an exercise class.**

**“Good for mental and physical health; it’s good to have a chit chat.”**

Many respondents of both surveys said that they played a wide range of team sports from football to cricket as well as individual pursuits like cycling or swimming. More men over 56 years of age than younger men mentioned gardening and walking as forms of exercise. More younger men than those over 56 years of age told us they went to the gym.

When we looked at the Just Five Questions data in detail, we found some evidence of a difference in how men responded to this question if they had a long-term health condition. A lower proportion of men with long-term health conditions mentioned that they kept themselves healthy via exercise (71%), compared to those without a long-term health condition (80%).

Healthy eating was also a popular answer for how men stay fit and healthy. A few people said they ate only plant-based or vegetarian foods, while others mentioned they tried to eat less fast food or takeout meals.

**“I try to eat less salty food. Have fruit, salad and juices every day.”**

When we a looked at the Just Five Questions data in detail, we found some evidence of a difference in responses based on the presence of a long-term health condition. A lower proportion of men with long-term health conditions mentioned that they looked after themselves by eating healthily (38%), compared to those without a long-term health condition (50%).

Several men, answering the Just Five Questions survey, said they did **nothing (29)** or very little to look after their health.

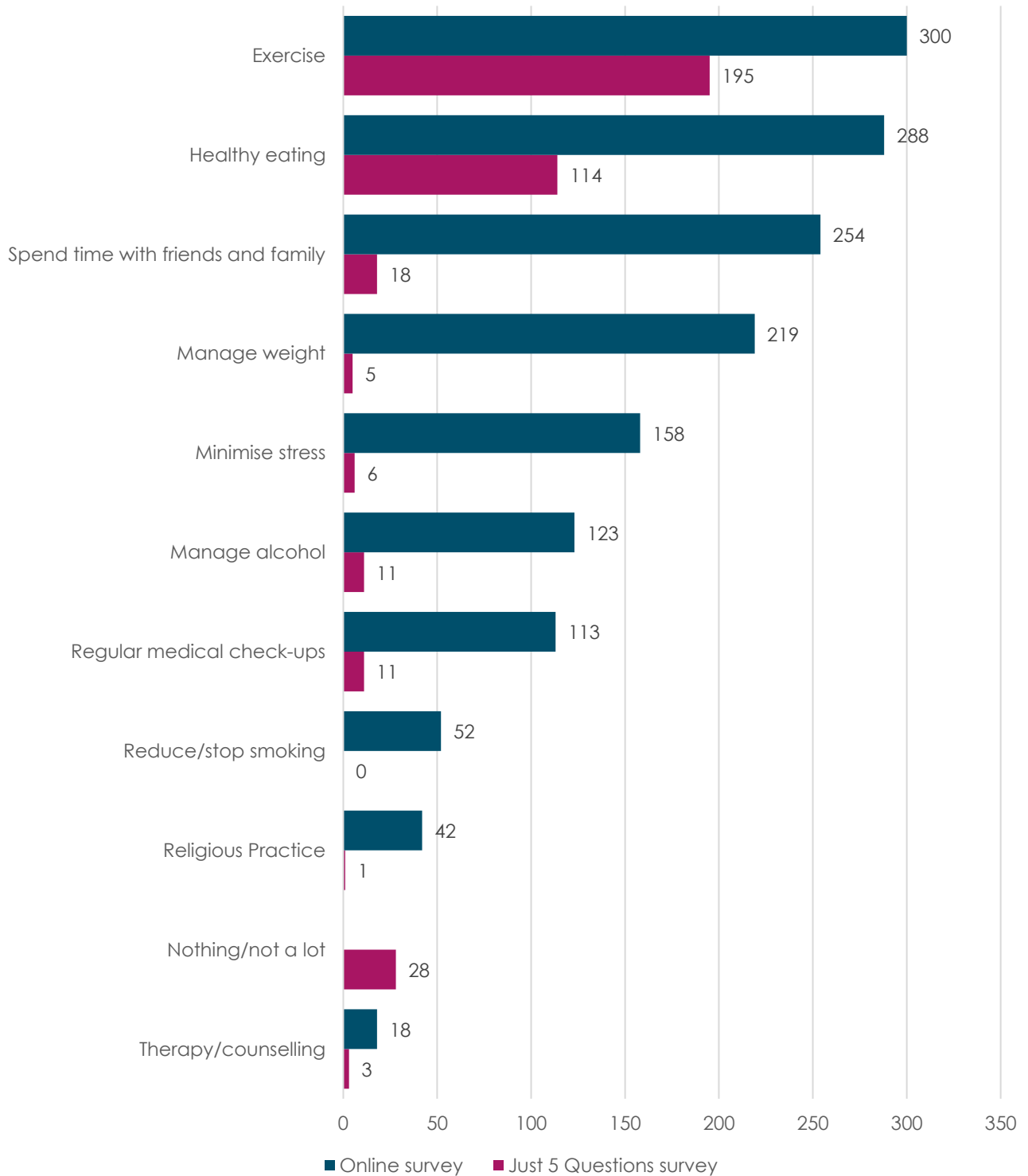
**“[I’m] working 7 days a week so I’ve no time to look after my health.”**

We found some evidence of a difference in responses based on age. A higher proportion of men under 56 said they did nothing to look after their health (15%), compared to those aged 56 and over (7%).

**“Nothing really – I look in the mirror in the morning and see I’m doing fine – that’s about it.”**

Although one respondent did tell us how they were trying to become healthy.

**“Not much at the moment. In the process of leading a healthier lifestyle. Try to walk often, need to change my diet. Have high cholesterol. Did a 10 week Be Healthy course.”**



**Figure 2 – What do you do to look after your physical and mental health?**

## Mental Health

Spending time with friends and family was seen by many as a good way to keep themselves happy and mentally in a good place.

**“Sports and walking....a pint with friends for mental health.”**

When we a looked at the Just Five Questions data in detail, we found strong evidence of a difference in responses based on **IMD2019 mappings**. A higher proportion of men living in the least deprived areas mentioned that they looked after themselves by spending time with friends and family (11%), compared to those living in the more deprived areas (3%).

21 men told us they benefited from therapy or counselling. People also told us about other ways they maintained their health. These have also been summarised by theme. 31 felt their wellbeing benefitted from their hobbies or listening to music. 24 people told us that work or volunteering kept them physically and/or mentally healthy.

**“Lots of volunteering – Lindengate – gardening and physical work – it helps my mental health as well as the physical.”**

And for another 25 people, getting enough sleep or taking prescribed medication helped them maintain their health.

**“Eat well, sleep well, keep out of trouble ”**

Another five people told us that attending a support group, staying away from drugs or alcohol, or keeping busy, kept them healthy.

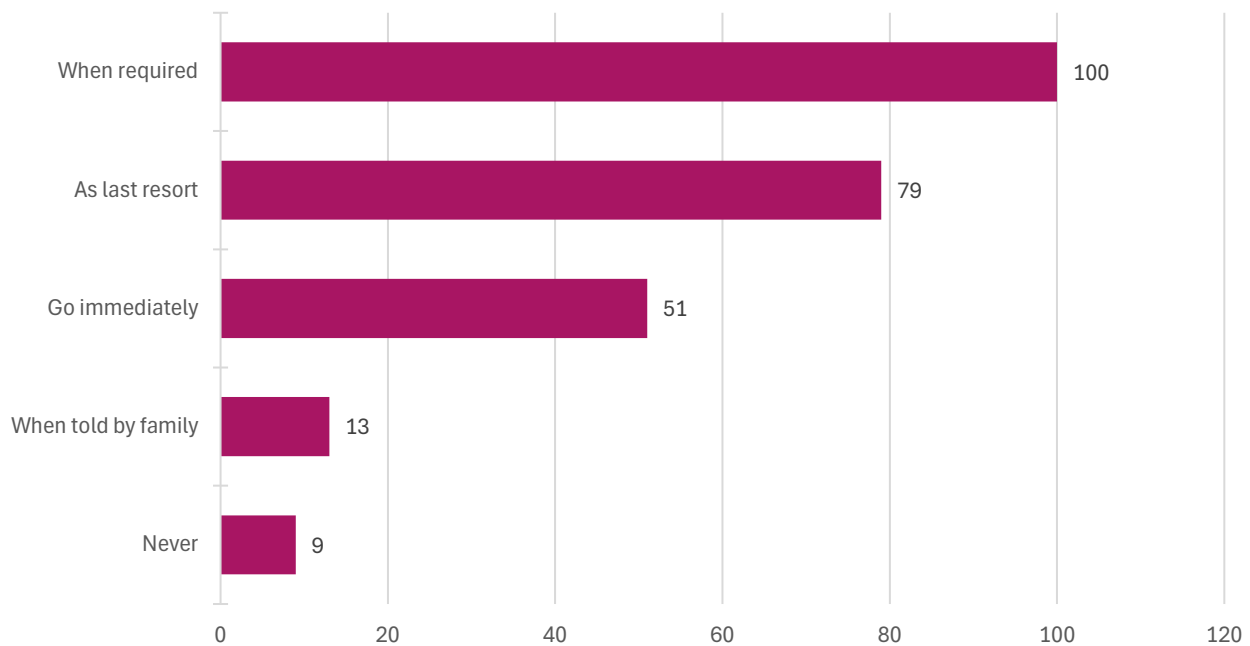
## Asking for help

252 people, answering the Just Five Questions survey, told us about when they would seek help for any health issues. Full details of the survey responses can be seen in Figure 3.

35% (88/252) of these respondents implied that they did not make going to a doctor or seeking medical help a priority.

**“Never and that's a problem. [You'd] have to force me to go.”**

**"I don't like doctors, and I'm petrified of needles"**



**Figure 3 – When do you seek help for a health issue? (Just 5 Questions survey only)**

**While less than 4% said they never seek medical help, 31% told us they only seek it as a last resort. For some that was because they were self-employed and felt work has a higher priority than health.**

**"I leave it a long time. Being a builder, I sort the next job first."**

**For others, they preferred being in denial.**

**"I delay – tend to think it's going to get better on its own..."**

**"I have to be nearly dying for me to do something."**

**And some didn't feel they were ever ill enough to seek help or didn't like to seek help.**

**"Only go when I have to, otherwise I avoid it."**

**A few men said that when they were younger, they would have hesitated to ask for help. But now that they're older, they no longer feel that way.**

**"When I was younger I'd have put it off. If there's an issue I'll sort it straight way now."**



However, mistaking their illness for a less serious problem resulted in a medical emergency for more than one respondent aged over 56 years.

**"Had a heart attack, ignored it for five hours. Thought it was indigestion and booked GP for the following day."**

**"[I go] right at the last minute; I waited too long when I had a heart attack"**

5% said they would go when told by someone else, often a female family member.

**"Usually my wife will force me. She has done in the past. My take is 'it's nothing serious'.."**

40% said they would go when they felt it was appropriate; not immediately but they wouldn't leave it too long either.

**"If I felt ill. It depends on how ill; I'd call the doctor."**

And 20% would go straight away. Of the latter, half (29/51) had long-term health conditions (e.g. Parkinsons) so were already regularly in contact with the NHS.

**"As soon as I spot something as I've already had cancer"**

**"I have diabetes so it's important to keep it under control - if something is wrong I'll contact the doctor, and I see them regularly anyway."**

## Mental Health

Those who indicated they had experience of mental health difficulties, told us they went when appropriate, or quickly, to seek help.

**"Whenever something feels different in a bad way, when my mental health drops."**

**“Important to seek help straight away when you need it. I’ve used Healthy Minds, and they were excellent. Did not delay, did an online course with them and though I was doubtful at first it was beneficial.”**

During an in-person interview, one man told us more about his personal experience of mental health challenges and how seeking help had changed his life.

### **Case Study: Greg’s Story**

Greg is from Eastern Europe and living in Buckinghamshire. He is under 40 years old.

#### **Keeping healthy**

Greg enjoys various hobbies and likes to keep healthy by doing physical exercise. This keeps him active and engaged, it also helps with his mental health.

**“I like doing something that makes me happy. I used to struggle with my mental health.”**

#### **Barriers to seeking help**

He said that men are at greater risk of suicide in the country where he grew up. However, in his culture there is a stigma around mental health.

**“As a man, it’s hard to go to therapy especially from my country.”**

#### **Getting support**

Greg has anxiety and a history of addictions. He got to a point in his life where he knew he needed support, so he reached out for counselling services online.

**“For me it was life changing going for therapy. Everyone is different. For me its fear, not going back to my old life of drug addiction and alcohol. I found a counselling website, it helped.”**

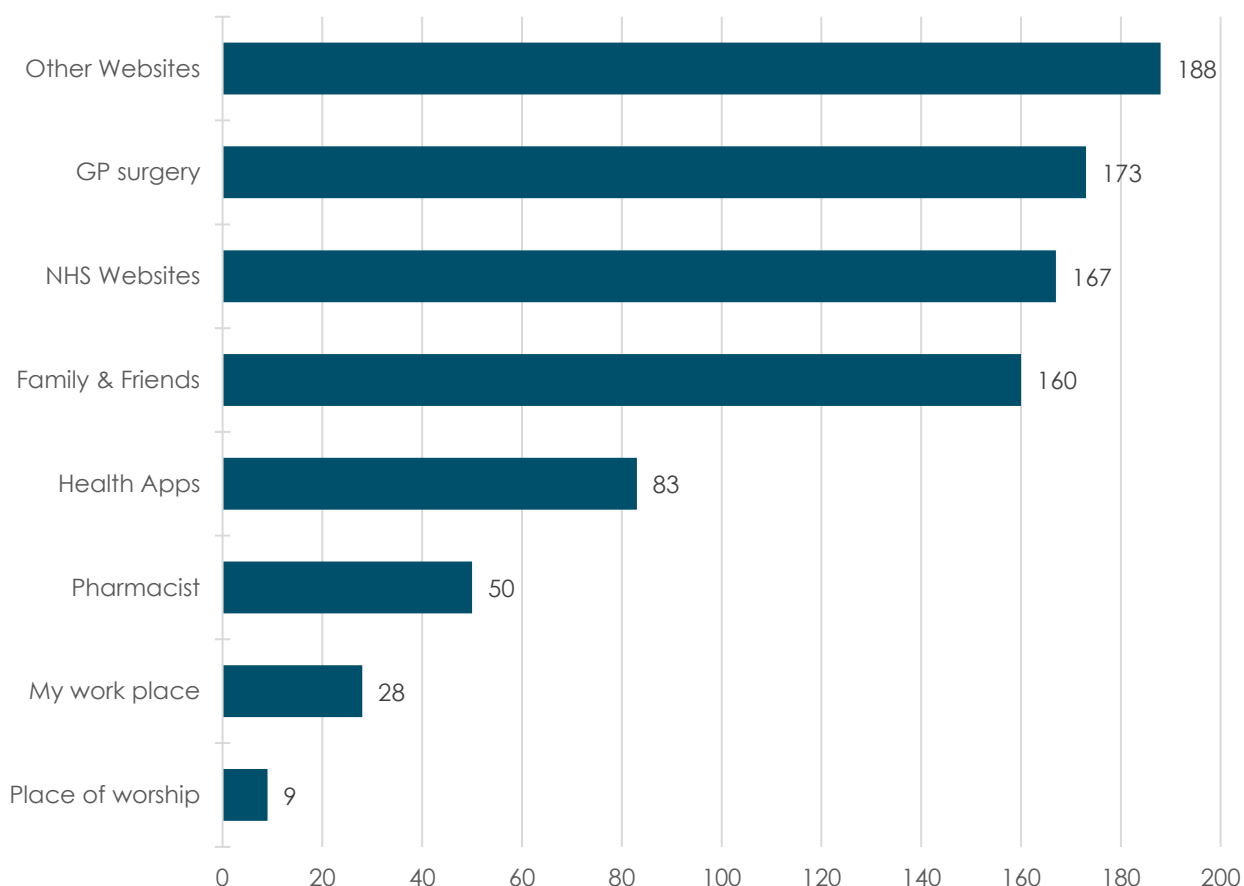
#### **Looking to the future**

Greg feels that counselling saved him as his life was spiralling out of control due to addictions. He now wants support people struggling with their mental health like he did.

**“If anything is bad you deserve to get help. It doesn’t matter how much work [employment] you do. Nothing would stop me now. I’m starting a course to become a counsellor.”**

## Information about health

**377 online survey respondents shared where they got information about taking care of their health. The top three answers were online from NHS or other websites and from their GP surgery. 64 people also told us about other sources of information. Full details of the survey responses can be seen in Figure 4.**



**Figure 4 – Where do you find information about taking care of your health? (Online survey only)**

**In addition to Health Apps being a popular answer, 12 people told us they find information from social media and five used AI.**

**“YouTube, following physios and PTs [personal trainers] on social media”**

**“I have been using ChatGPT from time to time, particularly to gain insight into the results of medical checkups for me and other family members. I have found that very useful.”**

A further 21 people sought information from traditional media (print, radio, television) and 7 others from private health specialists or NHS hospital units.

The main source of information for the men in the discussion group was the GP, then the pharmacist. They wanted more people to talk locally to community groups about specific health issues. They felt that most people don't pick up leaflets especially in religious buildings.

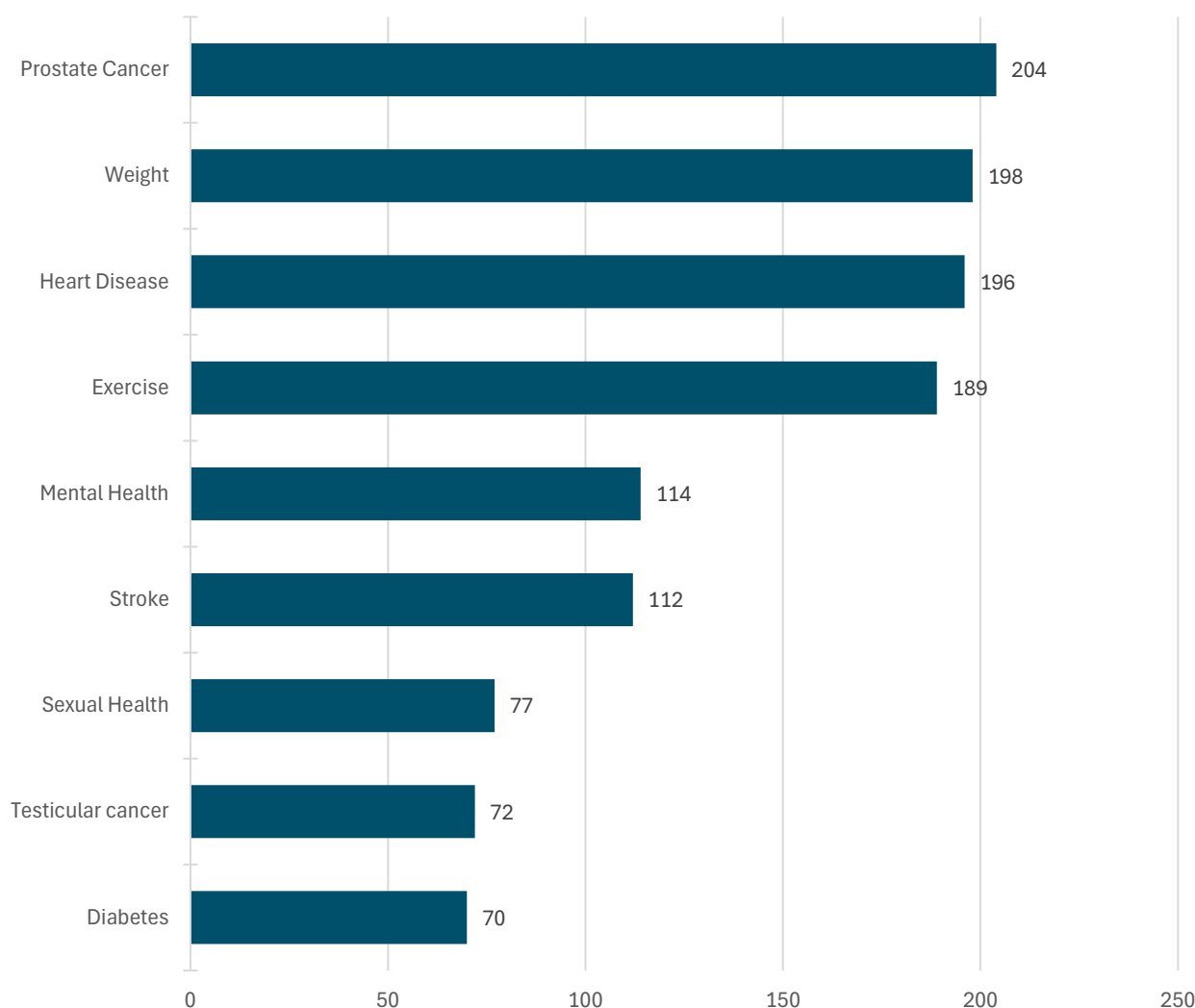
#### What areas of health interest you most?

Full details of which areas of their health interest the 376 online survey respondents most can be seen in Figure 5. The top four most popular responses were:

- prostate cancer (204)
- weight (198)
- heart disease (196)
- exercise (186)

Additionally, 56 men shared that they were interested in learning about many other health issues. The topics they mentioned most often included different types of cancer, dementia, multiple sclerosis (MS), healthy eating, and arthritis.

**"Dementia. Health issues linked to different Black and minority ethnic groups in different communities in the UK. "**



**Figure 5 – What area(s) of your health interests you the most? (Online survey only)**

The discussion group were also interested in cancer, diabetes, asthma and heart conditions.

**“Prostate cancer is a very scary thing and there is a lack of information and knowledge; we’re scared of that word.”**

## Not asking for help

545 survey respondents told us what might stop them from getting help with a health issue. We summarised these by theme. Full details of the survey responses can be seen in Figure 6. Many men told us more than one reason which might stop them getting help for a health issue.

**“Generally ok with going to the GP, however not always promptly, and not clear what range of services could be available”**

**“GP's (certainly mine!) do not provide enough time to deal with men's health, and the range of services provided to deal with men's health is very limited.”**

Two out of the top three responses were the same for respondents of the online survey and the Just Five Questions survey.

- I can't get an appointment at the right time.
- I wouldn't think to go or don't make the time to go.

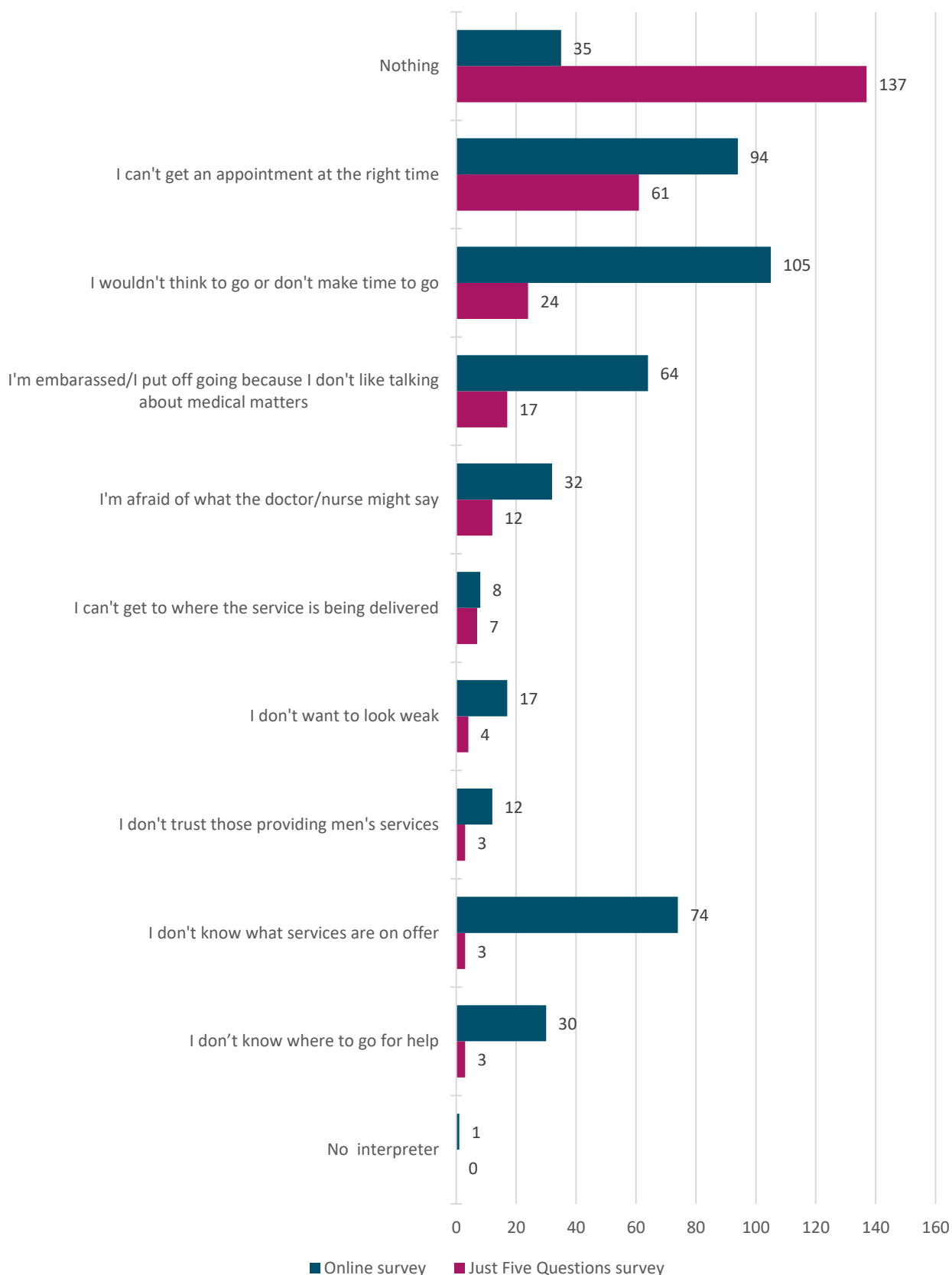
However, the most popular response, for those answering the Just Five Questions survey, was 'Nothing' (137).

**“Nothing – health is important, without your health you have nothing.”**

**“nothing... eventually I'd go to the doctors”**

However, only 35 men who answered the online survey said that nothing would prevent them from getting help for a health problem.

**“I have no hesitation in seeking an opinion or health advice or services and no difficulty discussing anything of concern.”**



**Figure 6 - What might stop you getting help for a health issue?**

**Access to services was the most common reason men told us prevented them getting help for any health issue.**

**“Just the access, know that there's long waits and it's hard to get an appointment, so it puts me off”**

**Many (155) told us they can't get a GP appointment at the right time. Some were frustrated about the process and time needed to book an appointment.**

**“Services are very difficult to access with long waits for appointments. ”**

**“Daunting to try and get an appointment at the GP – big queues, phone runs out of battery waiting to get through then when you get there you see a nurse so it's pointless.”**

**“Getting a GP appointment is a nightmare, more than once I have given up and hoped my concerns become less concerning because that's easier and less stressful than sorting out an appointment.”**

**Many men told us they had trouble getting an appointment quickly or at a time that worked for them. Some said they couldn't get time off work.**

**“Hard to get appointment after working hours.”**

**“For me, it's all about time in the day...”**

**Men also frequently commented that the waiting times for referrals discouraged them seeking help.**

**“I was waiting for 18 months for eye appointment”**

**Two people, with hospital appointments, also told us about how poor communication with patients can also stop medical advice being sought or treatment delivered.**



**"I had a referral for a 24 hour ECG DIY check ... on XXX 2025. It proved impossible to speak to anyone at Stoke Mandeville re receiving the kit I needed ...Voice repeating 'try later' due to excessive weight of calls. ... at the end of XXX [2 month later] I learned that I would receive a call on XX June. All I needed was for the kit to be posted to me !!"**

**"Hour and ten minutes trying unsuccessfully to get onto cardiology appointments? Email no reply. PALS email up to 10 days for a reply. Your communications strategy is XXXXXX."**

**Access to services was also linked by a few to cost. This might be the cost of transport or losing income.**

**"Prioritising work - I don't get sick pay as self-employed"**

**"Hospital moved to Aylesbury makes it expensive and difficult to attend appointments."**

**For several others this was the waiting times to see a consultant or obtain a procedure which meant they chose to pay for private health care.**

**"Lack of quality healthcare - Have gone private once because I couldn't get an appointment - its £100 per time though. I shouldn't have to do that"**

**"Last year went to see a consultant in urinary medicine for something and the NHS wait for what I needed was 65 weeks. To see the same consultant for the same procedure privately was 2 weeks. I went private"**

**A few also told us that they wanted more preventative checks than the NHS would provide for them, so felt they had to pay for private health to achieve this.**

**"For many years I had a full medical annually. This was employer provided....This year I asked for similar from my GP who was amused at the request. He told me I had one when I turned 65..."**

**Men's attitude to health was another reason some did not seek help appropriately.**

**"I would make an appointment but then decide not to go. [I'd] put it off unless it was desperate."**

**"I can put off going to doctors."**

**129 men said they just didn't make the time to go to seek help. Some said they were too busy because of their work or family.**

**"Busy lifestyle. Typically wait until something is really bad before doing anything about it."**

**Some acknowledged that they were choosing not to go. Others said they were too stubborn or couldn't be bothered.**

**"I'll give priority to my work and family - I'll hide things because I don't want to make the family stressed."**

**"Everything revolves around work, so I'll prioritise that - I am self-employed - so work comes first."**

**"It's a psychological thing - you deny it and think you can fix it yourself."**

**Many people felt they were never unwell enough to deserve or need help.**

**"I don't like taking up appointments for something minor and I feel like I am taking appointments away from other people that really need them."**

**"I was invited to well man check but didn't go because I feel ok."**

**81 men told us they might put off going because they were embarrassed or because they don't like talking about medical matters. More men gave us this information when completing the online survey than when we collected feedback face to face.**

**"I gave my wife a right scare when I told her I had had a problem for 4 days which ended up in a hospital admission. But it's just not the kind of thing you talk to women about - even if you are married to them... Maybe I'd talk to another man but even then, I'm just not very good at talking about things like that."**

**"Often put things off because I can't be bothered or because I am a little embarrassed."**

**This discomfort in talking about health issues was reiterated in the discussion group.**

**"Men don't tend to talk about health issues even in these sorts of groups. They're embarrassed too."**

**This might also be linked to not wanting to appear weak (21) or out of control.**

**"Sometimes feel there is an expectation of men to be strong and not complain."**

**"Pride - I don't like needing help or asking for it.."**

**A few men told us they felt that they were put off going to see a doctor because sometimes they didn't feel listened to or felt they were making a big deal out of an issue.**

**"Men's health issues can be marginalized or reduced e.g. man flu, 'man up' etc."**

**"I find when I've tried to ask for help there's a lack of understanding and the advice is overly simplistic and quite patronising in nature."**

**"I'm not always able to advocate my needs."**

A few said they couldn't get to where the service was being offered (15). For one person it was the distance to a secondary care appointment. Another told us that it was their caring responsibilities that might stop them accessing care.

**"I have no-one to look after my wife"**

44 men told us they were afraid of what the nurse or doctor might tell them so chose not to seek help. Some were concerned about receiving bad news while others didn't want to undergo what might be difficult treatment.

**"Fear - don't want to be told something I don't want to hear."**

**"If I thought it was life threatening - I don't want to know."**

**"I try and hope things go away... However, I am concerned about my abdominal pains which haven't gone away since February and I'm bracing myself to make an appointment..."**

This was often linked to previous experience but not always.

**"I find prostate checks physically and mentally uncomfortable"**

A few men (15) said they didn't fully trust the NHS, and this influenced how soon, or often, they decided to seek help.

**"[I] don't trust the GP; [they] dismiss symptoms without listening."**

**"Would like to check for prostate issues but not confident of accuracy of testing."**

**"It's literally impossible to get a GP appointment. All my GP offers is an online form that asks for a whole load of irrelevant details, gives all that data to various tech firms and then offers generic advice that can be found on the Internet anyway."**

Many told us they didn't know where to go for help (33). Others said they didn't know what services are on offer (77). For those answering the online survey, this was the third most reported response.

**"I can't get help from services that I don't know about."**

**"For an organisation with a strong brand the NHS is terrible at leveraging it to make sure people understand the services available to them"**

**"Where do I find details of the services on offer?"**

Some had very specific information they wanted to know more about.

**"I would appreciate a list of available services and how to access them. I.e. What regular health tests are recommended for over 60 year old men?"**

And for those living alone or without support, a lack of knowledge about what to do can be a barrier.

**"I have been in UK since 2015 and despite having a lot of health concerns and things that bother me on a daily basis I can never find time or even know how to approach this subject. I'm here alone and I don't have family or anyone that would be concerned with my health to ask for advice or encourage me to go. Also I hear that the NHS is always busy, and the lines are long which is also discouraging."**

Some people also told us they were unsure about the frequency of NHS checks/screenings specific to their age and risks.

**“I would like to have regular health checks / blood test to see how I am doing and alter my lifestyle if needed for better health. I have had these in the past, but I seem to no longer get notifications ”**

**14 men (mostly over 46 years of age) told us digitalised services might be a barrier to them seeking help for a medical issue. This was because of an accessibility issue, limitations of the NHS App or the patient’s lack of knowledge or confidence in using technology.**

**“[It’s] a faff now, going through the portal. Being able to phone up and make an appointment was much easier. Especially for my aging parents who aren’t exactly Bill Gates.”**

**“The online system gets shut down when they’re not open (GP) - not live after 4pm, online system doesn’t work.”**

**“Poor eyesight makes on-line booking difficult - I have to have help with this.”**

**For some, having phone or remote appointments also put them off seeking help.**

**“Getting face to face appointments is impossible these days. Appalling.”**

**Only one person said that the absence of an interpreter would stop them seeking help for a health issue. They identified as Asian / Asian British: Chinese.**

**For those in the discussion group, not being able to get a GP appointment and a lack of public transport e.g. between home and Stoke Mandeville Hospital were the main issues.**

## **Mental health**

**Individuals with health concerns may face additional challenges if they are unaware of available resources or support options.**

**“When feeling low with anxiety and depression it is very hard to get yourself motivated.”**

**A few men told us they didn't get access to the services they expected, or they didn't know where to go for more support.**

**"I've seen specialists regarding mental health... and when you do [get an appointment], you are only offered six sessions."**

**"I've mental health issues that usually lead to heavy drinking and its very, very hard to stop without going to rehab and getting medication."**

**Or they didn't have enough support to enable them to recognise a problem.**

**"My mental health was bad previously it took me a while to acknowledge this."**

**Or they didn't feel they would be listened to.**

**"I am always fearful of not being believed when I talk about health or mental health."**

**"Far too easy to put you on pills than get to the bottom of the symptoms."**

**"I have erectile issues - mental health affected as result. Don't feel supported by NHS."**

## **Satisfaction with local services**

**380 online survey respondents told us how satisfied they had been using local health and care services in the last year. Of these, 199 people also shared their thoughts in more detail. 78% (296/380) had been satisfied or very satisfied with the service and treatment they received from their GP or local hospital. People also told us they could access appointments quickly and found staff to be caring.**

**"My GP is extremely proactive and all my interactions on referrals have been informed and efficient."**

**"I was diagnosed with prostate cancer, and the whole system diagnosing and treating me has been exceptional."**

**"I have had no trouble gaining appointments at ... audiology and the macular suite at Amersham Hospital."**

**As well as being satisfied with access to local services for their physical health, we heard that access to mental health support was getting better for some.**

**"It's becoming easier to get advice and support for my mental health."**

**Most of the comments from those who were dissatisfied (60) related to being unable to get a GP appointment, long waiting lists and referrals which were often postponed.**

**"Services are disjointed and chaotic. Hospital based services are overwhelmed and losing records. Joint care is not functioning between GP and specialist services."**

**"The change of my hospital appointment to discuss my heart was put back several months."**

**"ADHD services [are] closed"**

**Some also have experience of staff who don't seem to care, listen or who have insufficient resources.**

**"Some professionals don't listen, seems like they don't believe you or that they know better."**

**We also heard that, following assessment, men felt that the amount of mental health support provided wasn't sufficient.**

**"MH [mental health] support often short term sticking plaster not long-term support"**



**24 respondents had not accessed health services in the last year.**

## **Health Checks and Screening**

**61% (152/249) people who answered our Just Five Questions survey also told us they had been invited to an NHS check or screening. Most, when asked, said they had undertaken the screening or NHS health check, but some had not.**

**“I don't always do bowel screening”**

**“[I was] Invited to a well man check but didn't go because I feel ok.”**

**As NHS health checks and most screening is offered to men over 40 years of age it was not surprising to find that it was mainly younger men who said they had not been invited for these checks. However, 44% (43/97) of those who said they had not been invited to any check, were over 45 years of age.**

**We found strong evidence of a difference when it came to being invited for an NHS health check or screening based on:**

- **Ethnicity – a higher proportion of respondents from a White British background said they had been invited (69%), compared to those from other backgrounds (55%).**
- **Home address – a higher proportion of respondents from an Opportunity Bucks ward (44%), said they had not been invited, compared to those living in other Buckinghamshire wards (27%).**

**In addition to the differences based on age mentioned above, we also found very strong evidence of difference based on long-term conditions. A higher proportion of respondents with a long-term health condition said they had been invited (73%), compared to those without a long-term health condition (52%). Again, this is a difference we would expect to see based on how long-term health conditions are monitored.**

**Of those who participated in the discussion groups, none said they had received an invite to an NHS health check although many had attended a diabetic eye health check. However, they didn't understand why this check – once every 6 months – was now once every 2 years. One person told us they think people don't know enough about why it's important to get any health check-ups they are offered.**

**70% (258/369) of those responding to the online survey said they had been invited to an NHS health check or screening. 64% (71/111) of those who said they had not been invited to any check, were over 45 years old.**

**While 83% (203/246) of online survey respondents said they had attended the NHS check or screening, 18 men said they hadn't. Four said they had not attended because they did not think the appointment was important. Two of these told us they had been put off by the booking process.**

**"I was sent a link from the GP which required me to log in and no way to easily get access, so I put it off."**

**"I would prefer it booked, and I will come, [rather than] if it was left to me to make appointments which is a less than easy process."**

**Another person mentioned they didn't go because it was too hard to make the appointment. Three others said they didn't go because the appointment time they were given didn't suit them. One person said they were 'convinced they were fine' and three others had forgotten to book the appointment.**

**"Was abroad when phoned to book appointment, then slipped my mind."**

**201 online survey respondents who told us they had attended the NHS check or screening told us more about how helpful they found them. Most found the checks helpful.**

**"As it was my first screening they thoroughly explained and made me at ease."**

**Over 80% of respondents told us they found the advice they were given about cholesterol (125/154) and/or blood pressure (130/156) helpful or very helpful.**

**"It is good to know the state of your health and the areas of risk. "**

**Over 70% of respondents told us they found the advice they were given about weight (100/133) or diet and exercise (96/136) helpful or very helpful.**

**"Followed advice and lost weight while engaging in more exercise resulting in vastly improved health and vitality."**

**"Healthy eating and related advice to manage cholesterol has altered my lifestyle."**

**"I was diagnosed as being pre-diabetic ... I was put on a multi-session course in High Wycombe ... I found the course exceptionally useful...."**

**Over 80% (131/158) of respondents told us they found the bowel screening helpful or very helpful.**

**"It was a positive experience. I lost my father to bowel cancer and my concerns felt slightly minimised..."**

**63% (48/76) of respondents told us they found abdominal aortic aneurysm (AAA) screening helpful or very helpful. However, only 48% (23/48) of respondents told us they found the diabetic eye screening helpful or very helpful.**

**But not everyone found the screening or NHS health checks helpful.**

**"I thought that the GP practice health check was much more about ticking boxes than really looking at what could aid my health and wellbeing."**

**12% told us they found the advice about cholesterol (19/154) and / or blood pressure (18/156) unhelpful.**

**"I don't understand the cholesterol blood scores. I was offered statins but didn't trust or get explained my score."**

**"Advice was very generalised. It was not personal to me and my habits."**

**8% (12/158) did not find the bowel screening they undertook helpful.**

**"They did the test but didn't give any feedback."**

**24% (32/136) told us they found the advice about diet or exercise unhelpful. 18% (25/133) said the same about the advice they received on weight management.**

**"I exercise regularly and since I have been put on a Beta Blocker I have put weight on and it is very difficult to lose weight even when dieting. I have been trying to get some nutrition help but it's hard to get the information or an appointment."**

**12% (9/76) said an abdominal aortic aneurysm (AAA) screening was not helpful.**

**"I did not take the original AAA screening. So they said, "you had your chance" and never heard again. My fault but not constructive."**

**"The AAA was very quick and easy. It was a shame it did not analyse more and produce actionable results. It seemed it was not designed to be preventative."**

**8% (4/48) said a diabetic eye screening was not helpful.**

**374 online survey respondents also told us where they would find it easiest for them to get an NHS Health Check. The top three answers were:**

- **At a GP surgery (361)**
- **At a community pharmacy (61)**
- **At a local community centre / building (47).**

**Many in the discussion group didn't feel that a library was the best place for an NHS check to be done. They wanted a more clinical setting for such checks. Some were also sceptical about their value.**

**"The GP is the best place...more people feel secure... give them a room in the GP surgery."**

**However, for others distance from home or convenience was the most important factor.**

**"I travel by bus, and you don't seem to recognise the difficulties involved in that mode of transport."**

**"Anywhere without waiting years in the queue."**

## Blood pressure

We asked online respondents when they last had their blood pressure checked.

- 84% (313/374) of them had had their blood pressure checked in the last year.
- Three quarters of those (35/45) who had last had a blood pressure check between 1–5 years ago, were between 46–85 years of age.
- Two thirds of those (6/9) who had not had a blood pressure check in the last 5 years were between 46–65 years of age.
- Most of those (4/5) who had never had their blood pressure checked were between 36–45 years of age.

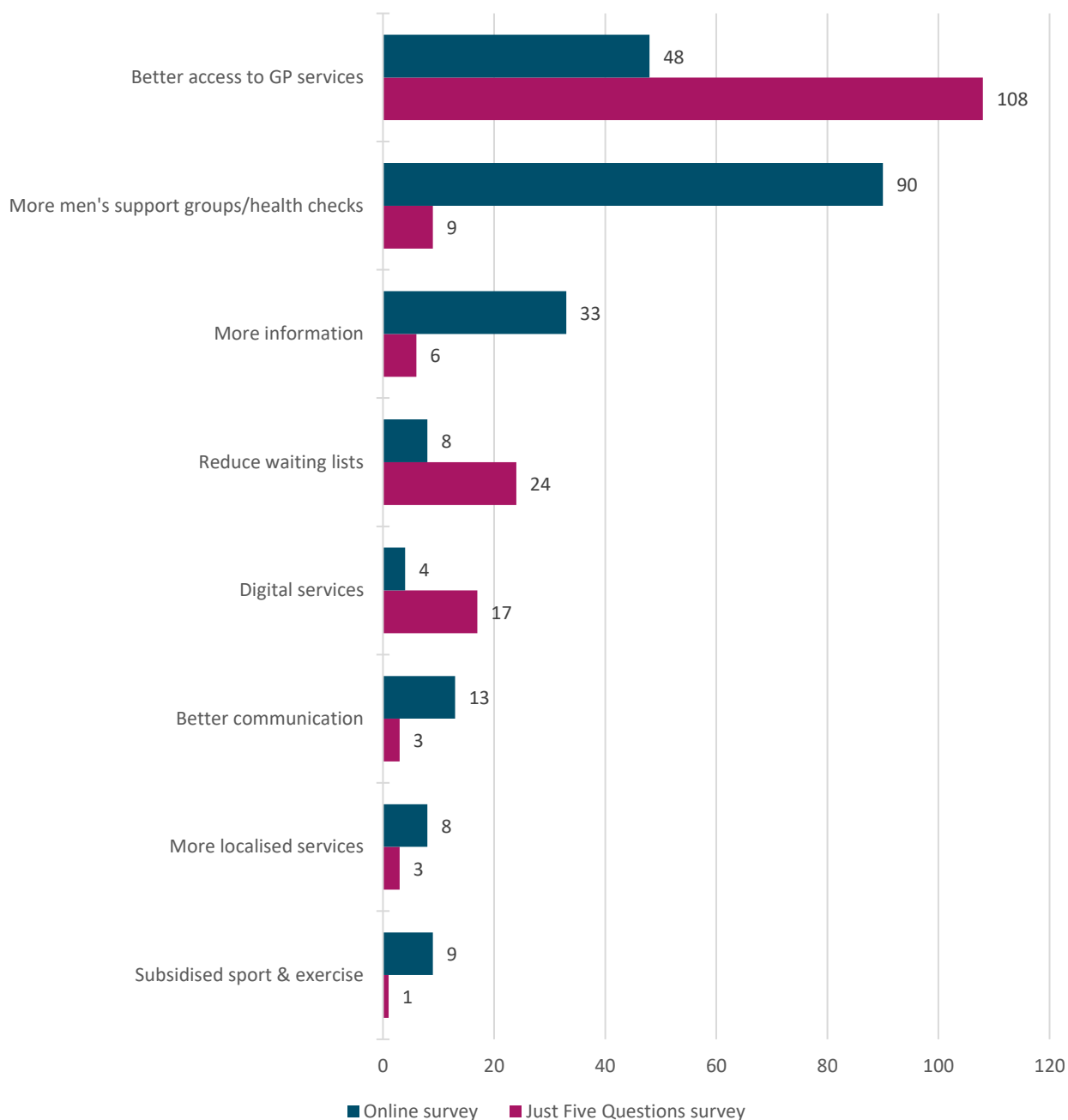
368 respondents told us about the locations where they knew they could get their blood pressure checked. The top three answers were

- At a GP surgery (350)
- At a pharmacy (237)
- At home using a monitor (229)

33 were aware that they could have their blood pressure checked at certain libraries and community spaces. Only 2 men told us they were aware they this could also be checked at certain churches or mosques. Not everyone knew that they could have a blood test done somewhere other than a GP surgery, pharmacy or hospital.

## Changes to improve men's health

30 men said they were happy with current health services and couldn't think of ways to make things better. However, 395 respondents from our online and Just Five Questions surveys provided ideas about what local changes could help them (and other men) take better care of their health and wellbeing. We summarised these by theme. Full details of the top eight survey responses can be seen in Figure 7.



**Figure 7 – What local changes could help you, and other men, take better care of their health and wellbeing?**

**Based on what men had already told us, unsurprisingly the most popular response (156) was a request to improve access to GP appointments.**

**“Accessibility – less phone queues and appointments available at a good time for me.”**

**Many told us that the time it takes to actually book an appointment needs to improve, including the time it takes for the GP surgery to answer the phone. Some said that if the process was quicker, they might be more likely to ask for help instead of giving up or going straight to A&E, even when that wasn’t the right place to go.**

**“Getting any kind of non-urgent appointment takes a prohibitively long time. Easier and more immediate access to care would help me and I think other men.”**

**“It takes too long to give appointments, getting though is 45 mins to an hour on the phone and then sometimes appointments are unavailable. ...Make it quicker and I'll go more”**

**“Better GP access – though I do think good GP access is a thing of the past – it's why I just go to A&E.”**

**Some men said that when they called the GP surgery, no one answered, or they didn't get a call back.**

**For some men, it was important to be able to get an appointment at a time that works for them. Several said there should be more options for appointments in the evenings and on weekends. Walk-in clinics and / or clinics specifically for men were also a popular choice.**

**“Shift patterns mean it's difficult to get appointment. A drop in centre would make it easier to access services.”**

**“A drop in option at a Men's Health Clinic – or by appointment. Make it as easy as getting a haircut.”**

**A few also wanted GPs to have enough time to listen to their concerns.**

**“Easier appointments with a GP/generalist who can ask the right questions and afford the time to push into issues/questions a bit to get the right diagnosis.”**

**“Giving people time to explain their feelings and concerns and reacting accordingly.”**

Some men (32) also wanted waiting times for referrals and results from secondary care to be shortened.

**"I'm currently on a waiting list for a procedure and have no idea what's going on or the timescales involved."**

The second most popular response was the suggestion that there should be more men's support groups and more regular invitation for health checks (99).

Most of the people who said there should be more health check-ups were between 56 and 85 years old. Some of them felt disappointed because they believed the NHS didn't focus enough on preventing illnesses.

**"I want to prevent any problems from occurring but that's not a priority to my [GP] practice ... We're told all the time that prevention is better than trying to cure but that would never happen."**

21 men suggested there should be more prostate cancer screening.

**"Great bugbear that women have smears and breast scans but for men prostate screening doesn't seem to be on the agenda."**

For some, their call for more health checks were linked to a genetic predisposition of developing a particular disease or condition.

**"Give me a PSA [prostate specific antigen] test as I'm Black 49 year old male."**

Many suggested there should be more general health checks for men so that any health problems can be treated early. This included requests from several for the restoration of "Well Man health checks".

**"Health check for men earlier. [You] don't know what you don't know."**

**"Periodic health checks e.g. Health MOT. Men that don't appear to have any health issues / symptoms, may unknowingly have them, but appear not to be a priority to the Health Service."**

Several men made suggestions for services which already exist such as regular bowel screening, NHS health checks and different roles in a GP surgery.



**“[Should have a] regular 5 year health check once you reach 40”**

**“Perhaps a kind of triage service with a health professional below GP level for informal chats about issues that may concern but not necessarily something you might want to bother a doctor with.”**

**“Someone at the clinic dedicated to mental health only.”**

**As well as increased health checks, some men suggested that their health would benefit from being able to join men only groups. These would give them a comfortable space to discuss their worries.**

**“Create more safe spaces for men to be able to articulate their problems without feeling stigmatised e.g. Talking Café, Men's Shed.”**

**“More funding for community groups to support men in an informal setting. Projects focussing on stigma associated with health conditions, both mental, and physical.”**

**This was often linked with creating sports opportunities for men.**

**“Getting local men together for exercise. I think a lot of men don't exercise enough because they don't have anyone to do it with. I think this is the case especially when people get older...”**

**“Men's groups with a walk or an activity but with health input from other men.”**

**Ten respondents suggested that the cost of sport and exercise should be subsidised to encourage men to be more active.**

**“Cheaper access to leisure like swimming and gym.”**

**“Joining the local ‘Couch to 5k’ group has been life-changing for me, helping me to recover from my cardiac arrest and to lose weight. I am fitter now than I have been at any time in the last 20 years.”**

However, some people said there needed to be a range of opportunities for men, and that promoting the idea of staying healthy needed to be personalised. This would make men more likely to get involved.

**“Wellbeing sessions for men need to be put forward in a manner that doesn’t put off those with a macho mindset.”**

The third most popular response was the request for more information (39) so men could better understand how to take care of their health.

**“Education. Making men’s health as prominent in terms of awareness as female menopause.”**

**“More awareness of things men should look out for with respect to their health and what services are on offer.”**

Several men were interested in finding out what kinds of tests were available and when they could ask for them.

**“Clarity on what and when we should expect to either be offered or to seek screening for known common issues such as prostate problems.”**

A few people suggested ways to share information more effectively with men. These ideas included locally via sports clubs, gyms, pop-up stalls as well as online.

**“Easier access to information specifically targeted for men relating to health and especially mental wellbeing.”**

**“Perhaps a ‘chart’ of wellbeing checks by age availability/ recommended and how to access them/ request them.”**

**"A push notification or personalised [sex and age] list of available health tests on the NHS App."**

**16 men told us they wanted better communication in the NHS. This could mean letting people know what services they can access or simply giving better updates from GP surgeries or hospital departments, so everyone understands what's going on and when.**

**"More communication of what is offered and proactively offering it to men."**

**"More men getting tested for STI's [sexually transmitted infections] would be fantastic, that's more of a societal issue than a practitioner thing but alas."**

**"Sometimes when you have an appointment you expect to get results, and they don't always arrive – there's not much follow up. Improving communication would make things better."**

**Two men, who had already taken a PSA test, were both unsure about what steps to take next.**

**"I took a prostate check test some time ago and I don't have any symptoms that I'm aware of but when should I have my next one?"**

**Out of the 21 people who talked about digital services, some liked them while others did not. For some, needing to use more technology to get healthcare made them unsure or unwilling to seek assistance for a health matter, often needing to ask someone else for help. Most of these individuals were 76 years old or older.**

**"Not so much online, I can't do it, I have to wait for my son to help"**

**"It used to be very easy going to the doctor – now it's all online, it's inconvenient and I'd like it to be simpler."**

However, there are many who would like more services online. These respondents were mainly aged 18–65 years of age.

**“Would be very nice if you could book an appointment online instead of waiting 30 minutes. Can't book online at my GP.”**

Some found digital services enabled them to access care more easily, and around other responsibilities such as work or family.

**“More online – 111 is great, the NHS ask first app has been very helpful and online consultations work well for me.”**

Many people wanted the NHS App to have more features, especially the ability to book appointments online, as this service wasn't available to everyone.

**“NHS App is clunky at times and could be improved.”**

Two more people mentioned that they would like the IT systems across different parts of the NHS to be better integrated, so that information can be shared between professionals more easily.

11 respondents asked for services to be made more local and better integrated into the community and the workplace. One person told us about having to go almost every other day to Stoke Mandeville Hospital to have a dressing change.

**“[ because the] GP practise nurse only operates two days a week, very limited appointments...”**

Two wanted to be able to go to their local hospital for an appointment rather than one at the other end of the county. For some people, getting to places that are far away can be hard because they don't have easy access to transport.

**“... Driving for other services is difficult – had a skin issue and had to travel all the way to Milton Keynes – would have been easier if it was closer. ”**

**“More help in the area where I live as travelling is hit or miss.”**

Men in the discussion group wanted the return of free eye tests. Not everyone knew that people over 60 can get a free eye test every two years. They also wanted more

**NHS dentists and investment in local community groups which promoted exercise and wellbeing.**

**“Anyone on a pension can’t afford this [a private dentist]; it’s frightening.”**

**The men in the discussion group shared that they would like more help with using digital services and the NHS App. They also said they prefer talking to health providers in person rather than using the phone or online options.**

**“We’re a generation who’ve always done everything face to face. We’re anxious with modern technology; not everyone is computer literate.”**

**They also said the NHS should spend more on preventative health education to save spending more on people once they were ill. To target young men, they suggested making educational videos that could be shown in schools and colleges.**

**“You need to invest more money in health education – the importance of staying active, sleep, good diet.”**

**They too wanted better access to health care.**

**“Improve the NHS; it gets worse and worse every day....It takes 2 weeks to get an appointment.”**

## **Mental Health**

**In addition to more men’s support groups, four men wanted better access to mental health services.**

**“Better access to mental health support for men generally, but especially those over 40 who have experienced a life changing event – loss of work, divorce/separation etc.”**

**Others wanted more information about mental health.**

**“More education about mental health in the Asian communities...”**

## **Any other comments**

**50 people, who took the online survey, also shared additional comments, which mainly reiterated previous points.**

**"It is really hard to fit health checks into a busy working life."**

**One person said men who live on their own, who may need more support than others.**

**"I... see the difficulties that some members have who do not have partners to help them navigate the NHS."**

**A few requested more work to be done on the prevention of illnesses which included encouraging men to speak up and get help sooner.**

**"I would prefer if the NHS addressed the causes of ill health, not the symptoms. Catch problems earlier when they do not cost so much to treat."**

**"Prevention always better than cure, although I don't believe in the nanny state. Men need to be encouraged to self-help, not made to feel guilty."**

**"I know I don't take care of my own health as well as I do my children's health. It's not about being weak, asking for help, or being seen to be macho, it's just the whole process of making an appointment, talking to someone, being sent for tests etc that I find stressful. The NHS advert with the man waiting for the jack-in-the-box to pop up was very good, i.e. a lot of the time we worry about something and it's usually OK."**

## **Acknowledgements**

**We thank all the people who talked with us about their experiences and the volunteers who helped us with this project.**

## **Disclaimer**

**Please note this report summarises what we heard. It does not necessarily reflect the experiences of all men living in Bucks, or registered with a GP in Bucks.**

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