

## Text of the keynote address

Ladies and Gentleman,

It is indeed a matter of great privilege to be in the midst of this illustrious gathering of my professional community. To deliver a keynote address on the aspect of **'Men's Health'** to the knowledgeable congregation is indeed a huge challenge and a tough task. But in all humility I take the onus of venturing in with whatever little at my disposal.

Health has been a matter of paramount importance for men and mankind ever since antiquity. The trends and transitions on the same have several 'benchmarks', which stand out as speaking monumental 'milestones'. One of the important aspects under the said rubric definitely pertains to 'Men's health'.

It is a matter of observed knowledge that Men use health services less frequently than women, visit a doctor later in the course of condition thus bearing poorer health outcomes. They die, on average, 4.9 years earlier than women and suicide, and Homicide four times as often as women. Men die in accidents about twice as often as women and mortality due to acquired immune deficiency syndrome (AIDS) is three times the rate of women. Men are likely to engage in more high-risk behaviors and work at more dangerous occupations which makes them more vulnerable. To top it all, Men are less informed about health issues, less likely to utilize preventive and healthcare services, suffer from the effects of substance abuse at a higher rate, have a greater tendency to engage in antisocial behavior, and more likely to be uninsured, lack a social support network and be homeless. There are a few findings which are eye openers in as much as that on average men live about 3-5 less years than women. 1 in 2 men, while 1 in 3 women, will be diagnosed with cancer in their lifetime. Men lead in 9 out of the top ten causes of death.

It is for these very reasons the gender specific health is deriving increasing attention in last three decades amongst the researchers, academic scholars and health professionals alike. The approaches that govern this arena do recognize that in addition to having different reproductive health needs, women and men have different risks for specific diseases and disabilities and they also differ in their health related beliefs and behaviours.

Gender specific health approaches go beyond physiology to explore how socio-cultural, psychological and behavioural factors influence the physical and mental health of men and boys, as well as how these factors interact with and mediate men's biological and genetic risks. The last decade has witnessed a substantial rise in the level of interest in the 'Men's health' amongst scholars and health scientists internationally. Despite this positive trend, frankly speaking very little is known about the subject. Till recently there has been no professional journal devoted to the gender specific physical and mental health concerns of men and boys. The 'International Journal of Men's Health' turns out to be a reflection of growing maturity in the said arena.

It has to be borne in mind that what we currently understand about Men's health is fragmented in several ways. It is fragmented by the individual disciplinary lenses through which we view men's health as epidemiologists, health educators, medical anthropologists, physicians, psychiatrists, ethnographers, psychologists, public health workers, social workers, and sociologists. The 'divergence' is huge and substantial and 'convergence' is virtually non-existing.

It is interesting to note that sociologists have much to teach about the male body, the meanings ascribed to and engendered in male bodies, how the body is itself regulated by institutional forces, how various populations of men embody

masculinity, and how the male body is used as a vehicle for negotiating the often perilous landscape of masculinity.

Men in most parts of the world are more likely than women to use their bodies in high risk activities such as physically dangerous sports and physical fighting. Decades of research have shown a strong link between high risk behaviours and low levels of mono-amine oxidase an enzyme involved in the metabolic breakdown and regulation of neurotransmitters in brain, which has a strong genetic determination.

In terms of brain functioning scientists have evolved a variety of differences between women and men. Blended with this is the material reality that the health related beliefs and behaviours that men and boys adopt are influenced and often determined by a wide variety of social and economic structures. They have a profound influence in shaping men's health and behaviour as well.

In defining men's health there is an ever present risk of normalizing men's experiences and universalising risk taking and poor physical or mental wellbeing as characteristics of all men. However, the health and behaviour of men who are economically, socially and politically disadvantaged can differ greatly from the health and behaviour of other men. While economically disadvantaged men are exposed to many of the underlying factors that contribute to poor health, their risks are compounded by additional social and other linked factors.

Men's poor health beliefs and behaviours were historically believed to reflect an underlying masculine personality. Recent theories, however suggest that cognitions and behaviours are not an effect of people's personality, on the contrary they are what personalities are made of. Women and men think and act in the gendered ways not because of their role identities, but they are

demonstrating cultural concepts of femininity and masculinity. Health beliefs and behaviours, such as dismissing the need for health or engaging in high risk behaviour are used by men as means to prove they are 'real men'.

Men's relative access to social power and resources and their positioning in relation to women and to other men, also contributes to shaping their health related beliefs and behaviours. Diseases and illness can alter relationships of social power between women and men and reduce men's status in hierarchy of masculinity. Men at times are reluctant to address their health needs for fear that other men will perceive about him as 'unmanly' or in any other manner.

As such, the imperative need is to understand and decipher various 'concerns' and 'considerations' with strategic initiatives to address to evolution of models of Men's health in the context of micro and macro health determinants, personal and societal interactions amongst complex intersections with other personal, social, economic, cultural and political health determinants.

Globalization creates new challenges and opportunities for an international field of men's health. The various healthcare delivery systems, the perceived 'limitations' there under and the 'inequities' that are wide and vivid in the context of available resources add to the problem. The net result is that a vital area, which needs to be tackled as a priority has not been extended the desired importance and remains unattended in a huge and substantial manner.

**Inspite of the concerns and challenges that confront the scenario as of now, the factual reality is that we have women clinics across the world but do not have any men's clinic which speaks volumes about the desired gap on this very count. It is true that most women patients will invariably choose a lady doctor to have their private discussions pertaining to their health. As**

**against this men often do not go in for any private discussion pertaining to their health problems and factually the concept of affording of private listening is far from desired.**

**This has resulted in the field being freely extended to Ayurveda doctor without any genuine remedial measure at their disposal. As such, it is imperative that men's clinics need to be started with core focus on prostate and erectile dysfunction. Moreover, Tadalafyl is now approved by the food and drugs departments for its medicinal usage.**

It is for this very reason a conference of this magnitude upholding the vital theme turns out to be a significant 'game changer', which would definitely invoke a desired 'paradigm shift', which is much needed and is keenly awaited.

I am sure that the expert deliberations on the vital aspects of this theme at this conference would definitely bring into an acute focus the 'concerns and challenges' that confront the 'core issues' and would indeed bring out the 'blue print' of the 'desired initiatives' on the said count including a 'translatory time bounded action plan' of consequence and relevance alike.

**This blue print should ensure that every general practitioner should have a weekly men's health clinic. Likewise, men's health executive package should be different that of women and it should be subjected to a substantial public gaze in the form of desired advertisements.**

**The Medical Council of India, should take necessary initiatives in incorporation of the core issues of men and women's health as separate inclusions in appropriate subjects at different levels so that it becomes a part of teaching and learning at under graduate as well as post graduate levels. In the fitness of things it would be appropriate if every branch of**

**Indian Medical Association takes recourse to having men's health as a theme covered under the Continuing Medical Updates so that practicing professionals get well versed on the said count.**

I record my compliments for the organizers of this notable conference and bringing to fore a wide ranging discussion and debate on the vital theme of 'Men's Health' in all its manifestations.

Thank you.

**Bibliography :**

*Editorial titled 'A Global perspective on the field of Men's Health' by Will Courtenay published in Volume 1. No. 1 January, 2002. Pp. 1-13 International Journal of Men's Health*