

# Assessing the health needs of men in a Municipality of Crete: A qualitative approach

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## Abstract:

*The social, economic, and cultural environment of men affects their health through both internal and external health factors. Gender also has a significant impact on health conditions. The aim of this study is to investigate the health needs of males in relation to their socioeconomic factors and gender. It was a qualitative research through semi-structured interviews. The sample consisted of 10 key-persons (elected officials and health professionals). The key findings suggested that men's health difficulties are associated with their regional, social, and educational status. Their health needs are not satisfactorily covered by the current services. Also, men were reluctant themselves to address their health needs. There have been suggestions for services that would provide comprehensive coverage of men's health at both the preventative and treatment levels.*

**Key words:** Men's health, social determinants of men's health, men's health need assessment, men and health, Health needs

## Introduction:

Health, a fundamental human right, can be defined as a person's state of physical, mental and social well-being (Karagounis, 2018). In recent years, the social model of health has been used by an increasing number of health professionals to understand people's health needs (Malamou, 2015).

Social determinants of health are internal and external. External determinants are components of the external environment including income, academic achievement, socioeconomic status, and employment (Nettleton, 2002) or unemployment (Eurostat, 2011). A person's perception of self-worth, subjective social support, and crisis management are considered internal determinants of health (WHO, 2012).

Gender is a social construct entangled with the societal values and norms. It refers to the array of socially and culturally constructed roles, relationships, attitudes, personality traits, behaviors, values and relative power and influence that society ascribes to men and women on a differential basis (Moudatsou et al. 2018). Gender is considered a social determinant of health since gender roles, identities, norms and relations can serve both as protective and/or risk factors for health. Evidence shows that gender norms – i.e., social expectations of appropriate roles and behaviors for males and females – influence overall a person's health and well-being (Delphy, 2008).

The societal norms of the male breadwinner in Southern Europe (Litwin, 2010) have an effect on men's perceptions in terms of health education, their roles in the household and society, as well as their capacity to identify and manage their emotions and behavior (Belegirinos et al. 2014, Pallikarona, 2014).

Because of social standards, men are more likely than women to participate in risky activities that are harmful to their health, such as excessive drinking, reckless driving, and smoking (Pelekis & Skordilakis, 2012). Also, they tend to seek treatment less frequently and use medical services later than women, despite the fact that they suffer more often from major chronic diseases that typically result in mortality (Eurostat, 2015). It seems that societal factors including the previously indicated social determinants of health (social

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roles, gender, and social status) have an impact on the ways males utilize health services (OOSA,2019; Pallikarona, 2014).

Although the Welfare State may have an impact on health through a comprehensive approach to services' provision of services (Moudatsou et al. 2018), the question that arises is if there exist the structures and/or services that will address the psychosocial needs of males, and whether or not men request them as a consequence of their social roles.

### **Aim of the study:**

This study's objective was to evaluate the health needs of males living in a Cretan municipality. The island of Crete is a place with a varied topography including mountainous and lowland areas, and where tourism is one of the main professional activities of its inhabitants. Specifically, the health needs of men were investigated in connection to socioeconomic variables and gender roles using a qualitative approach. Moreover, the existing social policy to address these needs was also examined.

### **Methodology:**

The current study employed the qualitative research methodology. This method is used to analyze behaviors, beliefs, and experiences more deeply without attempting to generalize the results (Kyriazi, 2011). In particular, the semi-structured interview approach was selected because it is adaptable and allows the researcher to ask more questions to further investigate the subject, reformulate or rearrange the order of questions, and extend the closing time as needed (Bryman, 2017).

The population of the study consisted of individuals who held significant positions in local government and health organizations in a municipality on the Greek island of Crete. The particular municipality displays notable differences with lowland, hilly, and tourist districts, resulting in notable differences in perceptions about men's social status and social roles. Ten key-persons who deal and interact with men through the health and social services—either because they hold positions of authority or as providers of these services—participated in the current study. In order to be able to go deeper into the subject at hand, another selection criterion was the extent of their professional expertise and association with men's health problems. Individuals with the most professional experience were chosen.

In terms of socioeconomic status, the majority were healthcare professionals (three physicians, one psychologist, and three social workers), along with three elected officials (one Municipal Council president and two deputy mayors). Three of them had completed the secondary education and seven were university graduates (two of them were Ph.D.

holders). Six participants were permanent government servants, one was a public servant with a fixed period of employment, and three were elected officials. All interviews took place from August to October 2021. The interviews were conducted in person while taking precautions to prevent the spread of Covid-19. Those who wanted could also participate through Skype.

All interviews were tape-recorded with the participants' permission and each one lasted around an hour. The transcription was completed by the researchers (Dimotaki and Michala), and the framework analysis approach was used to analyze the findings (Gale et al. 2013).

### **Results:**

From data analysis derived the following themes: men's needs according to social determinants (internal and external), men's health needs in relation to gender, current social policy regarding men's needs and recommendations for the future.

## **1. Men's needs according to social determinants**

### **1a) External social determinants**

According to the participants' views, men with high or moderate incomes appear to be more concerned about their health, while men with low incomes appeared to place a higher priority on providing for their families' most basic material needs than on caring for their own health. According to the second group, men's poor educational attainment prevents them from having awareness of health education concerns, and as a result, they steer clear of using health and social care facilities.

Regarding the association of men's educational level with their health needs professionals and elected officials responded differently. The former assume that those with lower educational level avoid going to the doctor due to distance, cost, or lack of trust in the public health system. The second ones report that the low educational level of men prevents them from having awareness of health education issues, and, as a result, they don't seek out health and social care services.

Men's needs appear to be influenced by social position as well. According to the respondents, men with high social standing and demanding employment had limited time for taking care of their health issues. However, they are more willing to use health and social care services, if a need arises.

### **1b) Internal social determinants**

According to the respondents, men's self-esteem

was reported to be lower based on their age, social support, and psychological support. Also, men handle differently their psycho-emotional state depending on where they live. In mountainous areas, they find it difficult to regulate their emotions, particularly their anger. In the municipality's tourist and urban areas, men appear to be more emotionally aware, but they are also more stressed out because of their demanding working environments.

In terms of social and psychological support in the mountainous parts of the municipality, extended social and friendly relations seem to develop in entertainment places, such as coffee shops, with relative support and conversation in the case of a crisis. Instead of the quick, spontaneous assistance that tends to exist in more remote areas, men in cities focus primarily on building professional relationships.

The wife's role is often crucial since she acts as the couple's primary health coordinator, as the mediator for any preventative exams, or the manager of their particular diet.

The wife's role is frequently central since she manages their diet, serves as the couple's primary health coordinator, and mediates any preventative checkups.

## 2) Men's health needs by gender

Males' health needs are impacted by existing patriarchal norms, which demand that men be the head of the home and manage the finances. They consequently feel more anxiety, tension, and mental strain to live up to the expectations of their families and the rest of their environment.

Men are urged every day to live up to the ideal of the strong, self-reliant man from the Mediterranean who looks out for others. Men, especially those living in the municipality's hilly areas, are often reluctant to express their needs or their feelings. It is well known that suppressed emotions can lead to a number of psychosomatic illnesses. In parallel, in such settings, it can be quite challenging for males to seek help for their social, psychological, or medical issues.

## 3) Current social policy for men's needs

Professionals and elected officials refer to services provided by the T.O.M.Y. (Primary Health Care Teams), the public Healthcare Centers, the Help at Home program designed to provide assistance to elderly people and disabled, and many private medical centers. Although the elected officials who participated in the study appear to be aware of the dearth of specialized services for men, they feel that the ones that are now available are sufficient to address their demands. In contrast, the municipality's health professional's stated that due to the lack of specialized facilities and services for males, men's needs remain unmet.

The findings suggest that the males in the municipal-

ity do not communicate their health requirements to a significant level, with visits to the appropriate services occurring mostly in an emergency. Even though they are aware that they should travel to the nearest metropolitan center for medical tests or hospital care, they nonetheless voice their opinions whenever they can at the social service.

The results indicate that visits to the necessary services are typically reserved for emergencies and that males in the municipality do not disclose their health needs on a major scale. They express them whenever they can at the social service.

## 4) Suggestions for the future

According to their recommendations for the future, it is required to design and implement new services and programs that are more focused on addressing the preventative and therapeutic needs of men, and are based on the social model of health.

## Discussion:

The results of this qualitative study suggest that men's health is influenced by external social determinants like work and income. These findings are consistent with earlier studies showing that social, cultural, and environmental factors influence men's health (Bruce et al. 2015, Griffith et al. 2011).

Although leisure time (an external determinant) was generally quite limited for men in the municipality, as they work six months a year under pressure in tourism businesses, those with high or moderate incomes (an external determinant) were more likely to be concerned with health issues compared to those with low incomes, who put health second. Similar findings are also reported by Kyriopoulos' (2017) study, who found that those who had high monthly incomes were less likely to experience psychosomatic health problems. These results indicate that people's geographic, economic, social, educational and cultural context affects their health (Marmot & Allen, 2014).

Our research indicates that men's emotional health is influenced by their social networks, living environment, and capacity for emotion management (internal determinants). According to Thorpe et al. (2013), one's geographic location has an impact on their health, either by presenting opportunities or by posing challenges. Thus, it was discovered that people who live in hilly locations make friends in social settings (cafés), but they are unable to control and express their emotions because of a fear of being judged as weak. This outcome is in line with the findings of Kafetsios & Petratou (2005), who discuss how difficult it is for males to convey their emotions during social interactions. A perspective that is corroborated by the Mediterranean man's desire to be powerful

without yielding or showing signs of weakness (Griffith et al. 2011).

According to our results, the environment men live in has an impact on how they manage their emotions and their social interactions (internal determinants). According to Thorpe et al. (2013), one's geographic location influences their health either by providing possibilities for a better life or by creating obstacles. Thus, it was found that although people who live in mountainous locations develop friendly relationships in places of entertainment (cafes), at the same time, they are unable to manage and express their feelings, for fear of being considered weak. This finding is in line with that of Kafetsios & Petratou (2005), who referred to the difficulty of men to communicate their emotions in their social interactions. These characteristics correspond to the Mediterranean model of man as a person who appears strong without weaknesses (Griffith et al. 2011).

In the study area, males are more susceptible to stress than women, which has an adverse effect on their health. The summer months are extremely stressful for those who work in the tourism sector. However, due to improper emotion regulation, those who live in the mountains also suffer from extreme anxiety. Both situations cause stress which increases the likelihood of abusing alcohol or using other harmful substances, adopting a poor diet or other behaviors that worsen pre-existing health conditions and raise the risk of developing chronic and cardiovascular diseases (Malamou, 2015). Gender is one of the most significant factors affecting the health of males since it plays an important role in the mechanism that generates stress (Bruce et al. 2015).

According to participants' perceptions, the men in our study are not particularly interested in their physical and mental health. Although there are essentially no specialized services dealing exclusively with men's health issues, most of them do not turn to those already available to the general population for help. A possible interpretation is related to social gender expectations: men are expected to be strong members of their families and members of society, and because of this, they have a lot of responsibilities and are subject to a lot of demands from others. As a result, they often put the needs of others and those of society before their own (Griffith et al. 2011). Although males are in a better position economically and socially, they also have a shorter life expectancy, which can be partially attributed to these social expectations of gender (Griffith et al. 2011; Lohan, 2007).

In addition, one's social and economic environment has an impact on preventive and routine medical checkups. Therefore, persons from lower social and economic backgrounds neglect their health, either because they lack the necessary information or because of their financial hardship. Studies show that higher education graduates lead healthier lives and handle preventative and therapeutic issues better than non-graduates (Malamou, 2015).

The recommendations for the future focus on devel-

oping services that address the needs of males through comprehensive programs that take social determinants of health into account at both the preventive and treatment levels. A recommendation that has received support from numerous health researchers (Krumeich & Meershoek, 2014, Mehri et al., 2016)

The study has its drawbacks. Given that the sample was selected and the data was gathered in a particular town in Crete, one of the key limitations is the study's geographic breadth. As a result, it is impossible to generalize our findings to other areas. Furthermore, if there had been a larger participant pool, the results might have been different. Similarly, the same study would provide different results if it were conducted in a different location with different geographical and cultural traits. Finally, in order to have a more thorough approach to men's health needs, it would be essential to acquire their subjective perspectives through both quantitative and qualitative research. Our study might also be applicable to other locations with comparable social, cultural, and geographic features to the current municipality.

## Conclusions

This qualitative study suggests that men's health needs are influenced by their gender as well as by internal and external social factors. They have not yet been fully incorporated into the current health care system and accepted as recipients of the services it offers. Designing interventions to increase men's awareness of issues related to education and health promotion is suggested, with a focus on the challenges they experience in terms of resistance and hurdles. A political will-driven initiative that calls for the necessary financial resources should be supported.

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