

**Report to:** East Sussex Health and Wellbeing Board

**Date of meeting:** 5 March 2024

**By:** Director of Public Health

**Title:** Focus on Men's Mental Health in East Sussex

**Purpose:** To update the Board on the development and implementation of work focused on men's mental health in East Sussex

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**RECOMMENDATIONS:** The East Sussex Health & Wellbeing Board is recommended to:

1) To note the recent and ongoing work commissioned by Public Health to support men's mental health in East Sussex.

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## 1 Background

1.1 The aim of this paper is to update the Health and Wellbeing Board on the actions that Public Health are taking to address the higher rates of mental health problems and risk of suicide in men, particularly those of middle age in East Sussex.

1.2 In 2021 just under half of the East Sussex population were male. Table 1 below shows the age profile of males by 20year age bands. The numbers of men in their 40s and 50s living in Eastbourne, Hastings and Lewes is very similar (12,000-13,000), whereas there are slightly fewer in Rother (11,000) and many more in Wealden (21,000).

**Table 1 – Age profile of men living in East Sussex 2021**

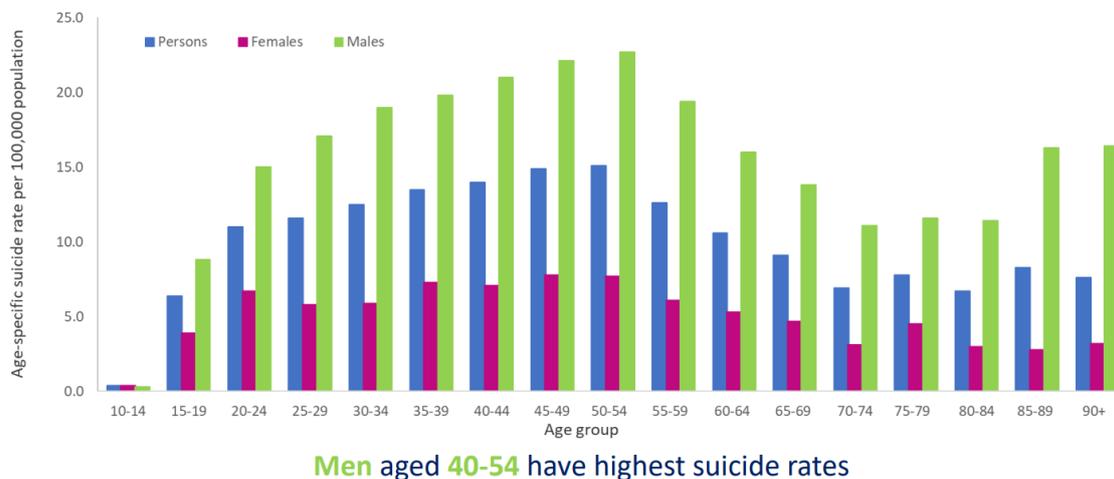
Age Band	%*	
0-19	22%	57,800
20-39	20%	53,200
40-59	26%	69,300
60-79	25%	65,800
80+	6%	16,300
		262,400

**Source: East Sussex in Figures**

1.3 Nationally over three quarters of all suicides are by men and this has been the case since the mid-1990s, with the highest age-specific suicide rate amongst males aged 40-54 years (ONS, 2021)<sup>1</sup>. The new 5 year suicide prevention strategy for England 2023-8<sup>2</sup> highlights middle-aged men as one of seven priority groups for tailored and targeted action at a national level.

1.4 Chart 1 shows that suicide rates rise steadily for men until ages 45-54, before declining. There is a second peak in men aged 85 years and older, and whilst small in number this demonstrates that men continue to face mental health challenges well into old age. According to our Sussex Real Time Surveillance data, there were 7 suspected suicides in males aged 65-75 during 2023, but none older than this. This accounted for 8% of all suspected suicides that year.

**Chart 1. Age-specific suicide rates, 2021, England and Wales.**



Source: ONS Suicides in England and Wales: 2021 registrations

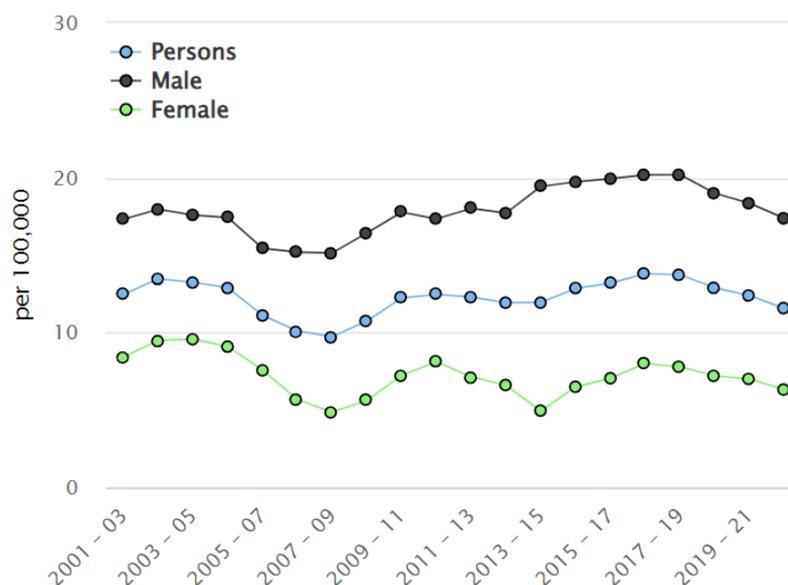
1.5 In East Sussex the suicide rate has been higher than the England average for a number of years (OHID, Fingertips, 2022)<sup>3</sup>, and like England as a whole the highest risk group are in males aged between 30-59 years (ESCC Suicide Prevention Plan, 2023-27)\*.

1.6 Chart 2 shows that the male suicide rate in East Sussex (17.40), far exceeds the female rate (6.3) for 2020-22, and is broadly similar to its value in 2001-2003 (17.3). This trend is the same for national rates. Whilst on a downward trend, the latest rate for men still exceeds the national rate (15.8).

1.7 National rates were at an all-time low for the period 2007-2009, however the 2008 recession then triggered an upward trend. The COVID pandemic has not had the anticipated negative impact on suicide rates nationally, but the subsequent cost of living crisis may still do so, and the full effects are often delayed.

\* The number of East Sussex resident male deaths by suicide at Beachy Head was 7 (12% of all deaths by suicide in males in East Sussex) between January 2023 – December 2023 inclusive.

**Chart 2. East Sussex suicide rate – persons, male, & female 2001-2022. Directly standardised rate – per 100,000**



## 2 Risk Factors for Men’s Mental Health

2.1 Research indicates numerous common underlying risk factors contribute to the incidence of suicide, substance misuse and depression in men. A study commissioned by the charity Samaritans in 2012 found that middle aged men of lower socio-economic position who die by suicide are often facing a complex bundle of interacting circumstances: financial, employment or housing difficulties, social disconnection, relationship breakdown, substance misuse and mental health problems<sup>4</sup>.

2.2 In 2021 as part of the National Confidential Inquiry into Suicide and Safety in Mental Health (NCISH) the University of Manchester examined a sample of middle aged men who died by suicide in 2017<sup>5</sup>. They found high rates of key risk factors in the sample group compared to their incidence in the general population.

**Table 2. Comparison of key risk factors, by available general population figures**

Variable	Sampled middle-aged men (%)	General population figure (%)
Unemployment	30%	4.5%
Deprivation	25%	20%
Divorced/separated	21%	5%
Alcohol misuse	36%	20%
Drug misuse	31%	7%
Physical health condition	52%	34%
Mental health diagnosis	66%	15%

2.3 The inquiry report also made reference to the likely impact of future economic downturn following the coronavirus (COVID-19) pandemic and how this will particularly affect men. This prediction is supported by studies which indicate that employment and occupational issues are a key risk factor for men's mental health, with unemployment considered a chronic stressor and being made redundant or becoming unemployed an acute stressor<sup>6</sup>.

2.4 The new National Suicide Prevention strategy reiterates the strong association that socioeconomic disadvantage has on suicide in middle aged men and emphasises the need for interventions and initiatives that address those experiencing unemployment and financial difficulties (including debt and housing difficulties).

### **3 Men's engagement with mental health support**

3.1 A number of research studies over the years have highlighted the unique challenges to men's mental health promotion including gender-related barriers and stigma<sup>6</sup>. The perceived threat to their traditional views of what it is to be a man, the "masculine norms" has been shown to be an influencing factor on men's willingness to engage with mental health and wellbeing interventions<sup>7</sup>. The research by Samaritans in 2012 into suicide in disadvantaged middle age men found that "*traditional masculinity continues strongly to inform the identities of this group of men*" and highlights the importance of recognising how men's behaviour is constrained by constructions of masculinity, and social and cultural contexts.

3.2 Research by organisations such as the Men's Health Forum suggests that men may also lack knowledge and awareness of what supports good mental health and are unable to recognise and take action on warning signs<sup>8</sup>.

3.3 The research by NCISH showed that almost all (91%) of middle-aged men who died by suicide in 2017 had been in contact with at least one frontline service or agency, most often primary care services (82%). Half had been in contact with mental health services and 30% with the justice system. They suggest therefore that it's too simplistic to say men do not seek help. However, the mental health problem may not be made explicit and so we should focus on how services can improve the recognition of risk and respond to men's needs, and how services might work better together.

3.4 A recent study of GP consultation before suicide in middle-aged men found that 43% had their last GP consultation within 3 months of suicide; with a third of these males unemployed and nearly half were living alone. Having a current major physical illness, recent self-harm, presenting with a mental health problem, and recent work-related issues were associated with having a last GP consultation close to suicide.<sup>9</sup>

3.5 In 2019 Mind repeated their 2009 "Get it off your chest" survey to explore the challenges around men's mental health. The original survey in 2009 showed men were considerably less likely than women to seek support when they were worried or feeling low. Although this gap between the genders had disappeared in 2019, still only 35% of men said they would be likely to consult their GP and just 17% would talk to a counsellor or therapist vs 22% of women (Mind, 2020)<sup>10</sup>.

3.6 The Annual Report on the use of IAPT (talking therapy) services in England 2021-22<sup>11</sup> indicates that the highest gender imbalance in referrals occurred in the South of England. Data for Sussex Healthcare Partnership for the same period shows almost twice as many referrals for women aged 26 to 64 compared to the same age group of men.

#### **4 Evidence of what works to improve men's mental health**

4.1 Addressing gender-related barriers and stigma is a recognised challenge which requires the use of novel approaches. Although research is still quite limited there is growing evidence of how to successfully engage with men to improve/promote their mental health and wellbeing<sup>12</sup> including:

- delivering interventions in spaces that men feel safe in – seen as 'male friendly' and culturally sensitive to the specific requirements of different groups of men and boys
- being community based allows interventions to remain close to the men and boys they are working with and assists in promoting social inclusion
- using male oriented terms (language) that makes projects more familiar and less off-putting
- being empathetic and non-judgmental, to create the right type of environment and supportive approach, to encourage peer support and shared experience
- interventions focused on activities familiar and appealing, that give the chance to work towards common goals

#### **5. Local Public Health led activity to support better men's mental health**

5.1 In line with the National suicide prevention strategy, the East Sussex Public Health team have identified men's mental health as a priority work area, with a particular focus on middle-aged men.

5.2 A number of projects have already been commissioned with plans to undertake further work as part of a county-wide programme collectively entitled 'Men in Mind'. Some of the projects have focused specifically on men of Hastings and St Leonards in recognition of the challenges identified in a report for the Chief Medical Officer in 2021 and their significantly lower life expectancy than the national average. Additionally in 2021 there were some deaths by suicide in young to middle aged men in the area who had shared social connections, which raised concerns around the short and long term impact of these cases within their peer groups.

##### **5.3 Hastings Men's Mental Health Community Development Project**

5.3.1 This project which commenced in April 2021 and concluded in December 2023 was led and delivered by Mind in Brighton and Hove. The project aims were to co-produce and co-deliver a community based men's mental health project in Hastings, reflecting the

identified needs of men and enabling them to take the lead in the delivery of their own mental health programme of support.

5.3.2 A community development fund was introduced as part of the project with individual grants up to maximum of £1500 made available to individuals, groups and communities in Hastings. The grants were to be used to grow ideas, introduce activities, develop new projects or strengthen existing ones focused on supporting men's mental health and wellbeing.

5.3.3 A total of 20 separate local groups received grant funding which they have used to successfully engage with over 250 men living and/or working in some of the most deprived wards in Hastings. The majority of men who participated in the grant funded projects were middle-aged with some lived experience of mental health problems or poor mental wellbeing.

5.3.4 The funding supported a wide variety of projects which offered the opportunity for men to get involved in physical and creative activities. All were designed to promote the '5 Ways to Wellbeing' – to connect, be active, learn, give and take notice as well as to build and strengthen the men's confidence and self-efficacy to manage their mental health and wellbeing. *Please see Appendix 1 for the full report of all the funded projects and activities supported by the community development fund between 2021-23.*

#### [Example 1: The Men's Network](#)

Receiving two separate grants in 2021 and 2022, The Men's Network built a network of over 150 men who attended a total of 41 organised events. The men, mostly in their 40s, ranged from those with diagnosed mental health issues, alcoholism, some who were unemployed, new fathers, recently retired and those in work looking to create new connections.

The events included walks; online groups with a focus on themes including relationships, parenting and work; films; fitness for fella's session; photography classes; sea swimming; Potluck community meals; community gardening, chutney making and food preserving.

Events were carried out in all parts of Hastings including: Hollington, Ore and Central St Leonards. They allowed men to connect with other men in the area to discuss topics of healthy masculinity and connecting with nature, as well as learning new skills and undertaking different activities to exercise and improve their mental health. They also connected men to other funded projects such as the Arts on Prescription project.

Key successes were:

- 2 participants are now actively leading walks
- 2 participants became involved with volunteering improving their confidence and social skills with others.
- 1 participant started cycling again for the first time in 15 years.
- 1 participant became a co-facilitator of the online group
- The Men's Network have secured funding to continue the project for another 12 months.

## Example 2: Project Rewild – Take Action Man

Project Rewild delivered their 'Take Action Man' project which got 25 local men outside enjoying the benefits of nature and its effects on their mental health and wellbeing. Across 3 activity days the men learnt new skills including fishing, bushcraft, woodcraft, conservation, foraging, hiking and navigation.

The project supported the local men to talk openly about their mental health in safe and secure environments, creating a space for them to spend time together and create new relationships and support networks. The project has since received funding from Making it Happen and has continued to grow. Additionally, an individual from the group was supported by the community development fund to create a sea swimming group as part of the 'Take Action Man Programme.'

### 5.4 Men in Mind - men's mental health training and support programme

5.4.1 Delivered by Mind in Brighton and Hove in partnership with Grassroots, this project's long term aims are to contribute to a reduction in the suicide rate and prevalence of mental health conditions in men of East Sussex, particularly those of working age.



5.4.2 The programme will run initially from January 2023 – December 2024 with a suite of training and networking opportunities created to deliver the following objectives:

- To equip public facing staff in settings that men frequent for work and/or leisure to have supportive conversations with their clients and customers about mental health and wellbeing
- Develop ways to support local men to gain or expand their knowledge and awareness of mental health and how to maintain and safeguard their own mental wellbeing
- Enable men to have supportive interactions with their peers who may be at risk of, or experiencing, mental health problems, including knowledge of where and how to signpost and access local mental health support services as appropriate

5.4.3 To date over 70 local businesses within Eastbourne and Hailsham (the initial prioritised areas for the programme) have signed up to receive information on the programme and over 100 people have booked onto training courses. Those undertaking training include employers and employees in settings that men frequently attend for work and/or leisure e.g. barbers and tattoo shops, sports clubs, Eastbourne Job Centre and Brewers Decorator Centres.

5.4.4 The training is predominantly focused on increasing participants knowledge and confidence to discuss matters around mental health and suicide prevention, but each is adapted and specifically tailored to meet the needs of the participants and what they consider will be most useful and applicable in their settings.

5.4.5 In 2024/5 we hope to increase the reach of this programme by funding an additional project support officer to focus on settings in other areas of the county e.g. the Havens and to explore how to reach men in some of the more rural areas of the county.

## 5.5 Parents in Mind – Fathers and Non Birthing Partners programme

5.5.1 In June 2023, utilising funding from the national Family Hubs programme, Public Health introduced another strand to the Parents in Mind programme commissioned from the National Childbirth Trust (NCT).

5.5.2 The Parents in Mind (PiM) programme provides evidence-based, safe and effective mental health peer support. The service supports parents experiencing mental health issues during pregnancy and up to two years after a baby is born. The model is to recruit and train volunteers with lived experience to provide peer support in groups or one to one.

5.5.3 The initial programme focused on women and birthing people experiencing mild to moderate perinatal mental health difficulties. The programme for fathers and non-birthing partners (FNBP) has now started and will operate in a similar way by providing group and individual support to FNBP during the perinatal period while their partner is pregnant and/or with a child under 2 years old.

5.5.4 The service seeks to address the current gaps in provision of support to new FNBP as highlighted by independent research commissioned by East Sussex County Council (ESCC) Public Health in 2021/22.

## 5.6 Mr Hastings and St Leonards

5.6.1 In 2020 ESCC Public Health led a system-wide application to the Local Government Association and Health Foundation's Shaping Places for Healthier Lives (SPHL) Programme (SPHL), focusing on men's health and wellbeing in Hastings. This arose from evidence that;

- life expectancy for men in Hastings and St Leonards was significantly lower than the national average<sup>13</sup>
- there were three main contributory factors leading to the gap in life expectancy for men: heart disease; accidental poisoning (drug-related); cirrhosis and liver disease.

5.6.2 During the discovery phase for the final SPHL application some insight generation work was undertaken with men living in Hastings. The aim was to find out more about their strengths and needs in terms of their health and the wider determinants of it; their help seeking behaviours; and their experiences of accessing support services. The findings showed that mental health and wellbeing, and social life were the parts of life that respondents were most likely to feel that they could do with some help with.

5.6.3 Although the final submission for the SPHL programme was unsuccessful there was a strong appetite and commitment from all partners to proceed with the work that had been planned. This was compounded by the high levels of health inequality in Hastings and St Leonards, highlighted in the Chief Medical Officers Annual Report 2021<sup>14</sup>. As a result the Hastings and St Leonards Men's Health and Wellbeing Project (Mr Hastings and St

Leonards) was set up, hosted by Hastings Voluntary Action (HVA) with funding for three years (until June 2025) by ESCC Public Health.

5.6.4 The vision for the project is that: *Men living in the most deprived communities in Hastings and St Leonards are living happier, healthier, and longer lives. They are at the heart of decision making about their lives and thrive in strong, supportive, and well-connected communities, where they can fulfil their potential.*

5.6.5 Mr Hastings and St Leonards uses an Asset Based Community Development (ABCD) approach which aims to maximise and build on the wealth of assets that already exist in Hastings and St Leonards. Using this type of approach emphasises the importance of building relationships and networks within a community and mobilises individuals, groups and institutions to come together to realise and develop their strengths.

5.6.6 Throughout its first year of delivery the project has undertaken extensive stakeholder engagement, to gather further in-depth insight and a deeper understanding of what matters to men locally regarding their health and wellbeing and sharing learning with wider stakeholders and decision makers.

5.6.7 Within the cross cutting theme around men’s mental health and wellbeing, the insight work identified challenges with self-esteem and motivation particularly for those aged 30-40. The Mr Hastings and St Leonards Team established strong links with the Hastings Men’s Mental Health Community Development Project and since that project ended they are providing guidance and direction to the funded groups that have successfully engaged with and support this age group of men.

5.6.8 The Mr Hastings and St Leonards year 2 delivery plan builds on the learning from the first year and will include the actions below:

<p><b>1. Development of a Men’s Movement</b></p> <p>I. Community engagement &amp; awareness raising</p> <p>II. Actions and collaborations identified, designed and led by local men .</p> <p>III. Legacy and Sustainability of ‘what works’ that can be continued beyond the life of this project.</p> <p><b>2. Influencing Systems Change</b></p> <p>I. Stakeholder engagement, and awareness raising across the system.</p> <p>II. Embedding collaboration across voluntary, community and public sectors to improve men’s health and wellbeing.</p> <p>III. Encouraging conversations, and men’s champions, within organisations</p> <p>IV. Enable sharing of learning between local men and the system that impacts on their lives.</p>	<p><b>Actions are underpinned by key themes from local insight</b></p> <ul style="list-style-type: none"> <li>• Men and masculinity.</li> <li>• Men and seeking help.</li> <li>• Men, mental health &amp; wellbeing.</li> <li>• Community connections, social life, and relationships.</li> <li>• Building on community strengths and what works for local men.</li> <li>• Service delivery and collaboration across the system.</li> </ul> <p><b>Actions identified will be led by</b></p> <ul style="list-style-type: none"> <li>• Local men (Men’s Movement)</li> <li>• Project Team (Community Development Worker and Project Manager)</li> </ul>
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<p><b>3.Enhancing Project Impact and Learning</b></p> <p>I. Oversight and Governance</p> <p>II. Communication (with local men and across the system)</p> <p>III. Evaluation and Learning (insight)</p>	<ul style="list-style-type: none"> <li>• Wider stakeholders/partners (Learning Partners, Steering Group etc.)</li> </ul>
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## 6. Future Plans

### 6.1 Supporting the VSCE Sector

6.1.1 Working with the Voluntary, Community & Social Enterprise (VCSE) Mental Health Network, hosted by Southdown Housing, Public Health have been seeking to understand what would enable further community focused projects aimed at improving men's mental health and wellbeing.

6.1.2 Following a survey of all network members in October 2023 a workshop is planned for February 2024 to bring VSCE organisations together to explore what is currently available to help support men with their mental health, what the gaps and opportunities are and aspirations for the future. The workshop will highlight some of the provision currently available across the county and provide a space for participants to share information, ideas and consider how best to work collaboratively to support men to improve and maintain their mental health and wellbeing. Following the workshop Public Health will work with the VCSE network and partners to explore the opportunities to take forward suggested ideas and projects.

### 6.2 Peer support programme in colleges

6.2.1 In 2024/5 Public Health plan to extend the Men in Mind programme of work to include a focus on younger men aged 16+ as they start the transition into working age. Focusing on this age group provides an opportunity to challenge some of the stereotypes and preconceptions that may start to develop from this age that potentially influence how they will approach and manage their mental health and wellbeing in their employment and as they progress through life.

6.2.2 College is a time of profound transition for young people when they may encounter multiple challenges including feeling overwhelmed, socially isolated and lonely, face academic pressures and financial concerns – each recognised as a contributing risk factor to problems with mental health and suicide. The intention is to commission a programme that delivers peer to peer support for young men in college settings, focusing the offer to those undertaking courses that predominantly attract male students. The programme will aim to give them the skills and confidence to address stigma, talk openly about their mental wellbeing and offer reciprocal support to their fellow students.

### 6.3 Men's Sheds

6.3.1 There are already around 10 men's sheds in areas of the county which provide an opportunity for mostly older retired men to meet together over a shared interest/purpose. A recent survey of 133 Shedders by the UK Men's Sheds Association reported that as a result of their involvement in their local shed;

- 76% of shedders say their physical health has improved.
- 79% of shedders say their mental health has improved.

6.3.2 Public Health wish to explore how to extend the number of men's sheds in the county, particularly focusing on areas of deprivation and areas in Wealden where there are more older men who may be experiencing social isolation and loneliness.

6.3.3 Our initial research suggests that the key barrier to establishing new sheds are land/premises, but that once obtained can be equipped and run at very low cost.

## **7. Conclusion and reasons for recommendations**

7.1 The Public Health team will continue to directly commission work, as well as engage with and support partners to enable implementation of evidence-based approaches to maintain and improve men's mental health and wellbeing.

7.2 The Board is asked to note the recent and ongoing work to develop and implement support around men's mental health suicide prevention in East Sussex.

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### LOCAL MEMBERS

All divisions are covered by this report.