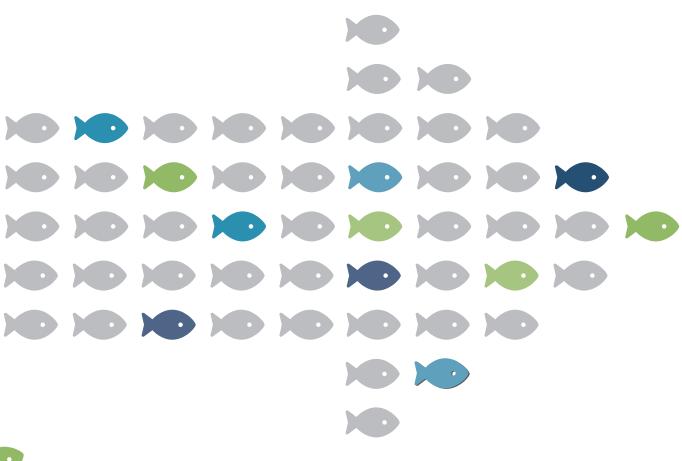


# FROM THE MARGINS TO THE MAINSTREAM: NEXT STEPS





Achieving the inclusion of men's health in policy.



### Introduction

Men's health has for years been largely overlooked by policymakers and service providers. The issue remains generally absent from policies and programmes at all levels. This is despite robust evidence that sex and gender affect everyone's health and that the health needs of men and women cannot be fully met unless both factors are taken into account.

There are some examples of policies that address men's health at the international, national and local levels. For example, the World Health Organisation (WHO) European Region published a men's health strategy for its 53 member states in 2018. National men's health policies have been introduced in Australia, Brazil, Iran and Ireland. At the local level, the Government of Quebec in Canada has in place a Ministerial Action Plan on Men's Health and Wellbeing.

But the overall position remains very disheartening and the consequences of this oversight are clear. Men currently die five years earlier than women, on average at the global level, according to the Global Burden of Disease Study 2019.. They are at much greater risk of dying prematurely from any of the four major non-communicable diseases (NCDs). Men are the main users of tobacco and alcohol, being about six times more likely than women to smoke and consuming over three times as much alcohol.

The poor state of men's health has been starkly revealed by the impact of the COVID-19 pandemic. By late October 2020, according to WHO data, at least 20 million men worldwide were infected with COVID-19 and over 650,000 had already died as a result. (These are confirmed cases and therefore under-estimates.) Globally, 58% of all deaths are male. In some countries, twice as many men as women have died from the disease.

A significant proportion of the excess male mortality is directly linked to men's higher risk of having an underlying condition such as heart disease, hypertension or diabetes. Smoking, drinking alcohol and late presentation to medical services are likely to be implicated. But we have not yet seen a male-targeted policy or programmatic response to men's excess mortality burden.

Global Action on Men's Health's report, From the Margins to the Mainstream (published in June 2020), aimed to identify the barriers to progress in men's health policy, the opportunities for advocacy work to advance men's health policy and, finally, how policymakers could be more effectively engaged.

GAMH discussed its findings at two webinars and invited its members and others to share their views. This report aims to summarise what we now know following this consultation and how the organisation will make the case for the essential change that is so urgently needed



### Why has been men's health been overlooked?

We know that progress on men's health has been inhibited because:

- Gender is not a significant issue for most global and national health organisations: many have formal strategies about gender but in practice few have prioritised the issue. When gender is addressed, it is often assumed to be synonymous with women.
- The overwhelmingly male leadership of global health organisations appears, paradoxically, to be inhibiting work on men's health. The reasons for this are complex but could be linked, at least in part, to many men's imperception of themselves as being 'gendered'.
- Health policymakers and practitioners have not been taught or trained to think about sex and gender and how these factors influence health behaviours and outcomes.
- Policymakers who may be interested or sympathetic can feel overwhelmed by the sheer breadth of the men's health issue. They can find it hard to know where to start.
- There is a general lack of sex-disaggregated data to inform and drive action on gender and health issues.
- There is some resistance, especially from gender and health advocates in countries where gender inequalities are greatest, to addressing men's health. This is because, in most areas of public and private life, men are the dominant sex and discrimination and violence against women is endemic. Men are also often perceived to behave recklessly and irresponsibly, bringing many of their health problems on themselves.
- The impact of poor men's health on women, children, communities, workplaces, health systems and economies generally is not yet widely understood.
- Men are seen as a homogenous group and, by failing to adopt an 'intersectional approach' (one that looks at how gender interacts with different dimensions of disadvantage, such as race, sexuality, disability and age), it can seem that all men are equally privileged and powerful and therefore not deserving of attention.
- The men's health sector is small. Men's health organisations exist in around 10 countries but they operate almost entirely at the national and local levels and lack a clearly-defined set of common advocacy goals. Many national and local men's health organisations also operate on a shoe-string and do not have the capacity for sustained advocacy work at an effective level.



## New opportunities for progress

There are now several significant opportunities for policy development, including:

- The existing men's health policy platform, including the international, national and local policies.
- Men's health is a more visible issue, helped by publications like Men's Health magazine, Movember, Men's Health Week and disease-specific awareness-raising campaigns, such as on prostate cancer. There are now a range of academic books and journals with a men's health focus.
- COVID-19 is focusing professional and public attention on men's health because men are much more likely to die following infection by the virus than women and are less likely to engage in disease prevention measures such as hand-washing and mask-wearing.
- Emerging evidence of the very significant cost of male morbidity and mortality. This is as yet limited but it does point to the cost-effectiveness of actions to improve men's health.
- Evidence of the impact of men's health interventions. Robust evidence about how to deliver health services, including health promotion, that meet men's needs effectively is now increasingly available. There is also evidence about the positive impact of men's health training programmes for health and health-related professionals.
- The Sustainable Development Goals (SDGs). It is increasingly well-understood by the WHO and others that the goal of reducing premature mortality from NCDs would be more quickly achieved if the disproportionate burden of many NCDS on men was reduced.
- Men's health is increasingly widely understood to be about much more than urology and other clinical issues. While conditions like prostate cancer and erectile dysfunction remain important areas of concern in men's health, the field now covers men's beliefs, attitudes and behaviours, which are linked to gender norms, as well as the way policies and services are configured. We also know more about the heterogeneity of men's health and the importance of intersectional and equity-based approaches.
- A growing maintream interest in the issue of gender and health which includes men and masculinities. The Lancet, one the world's leading medical journals, has taken a lead by recently publishing several papers on men's health and establishing the Gender and Health Commission in 2020. The Commission is due to report in 2022.
- Men's biological frailty. COVID-19 has focused attention on men's innate vulnerability to a number of serious health problems and,

- although other factors beside biology have a bigger impact on men's health, this could help to dispel the notion that their poor health is simply 'their fault'.
- Human rights-based approaches to health. There is increasing acceptance of the concept that each and every person has an innate right to optimal health.
- A greater understanding that improved men's health can result in better health for women and children. This is most evident in the field of sexual and reproductive health but actually applies much more widely.
- The establishment of GAMH has for the first time made it possible for men's organisations and advocates to speak with one voice and to raise issues at the global level.



### What are our policy goals?

### We are calling for:

- International, national and local men's health policies, with effective governance, funding, implementation and monitoring.
- Gender and health policies that include men.
- Men's health to be included in all appropriate health policies, in areas such as cancer, cardiovascular disease, mental health, sexual health and diabetes as well as COVID-19.
- Education and training programmes in gender generally and men's health specifically for health policymakers and practitioners.



# How can we make our advocacy work more effective?

### We will:

- Seek the publication of a definitive report which collates and analyses the state of men's heath at all levels. We would like to see this produced by a prestigious research organisation and published in a high-profile medical or health journal.
- Develop an approach based on 'proportionate universalism', equity and intersectionality. Health actions must be universal but with a

- scale and intensity that is proportionate to the needs of those groups of men that are particularly disadvantaged.
- Identify men's health policies that are focused and aligned with current health global policy priorities and therefore more likely to be understood and supported by policymakers and politicians. Our two priority policy areas for 2020/21 will therefore be:
  - COVID-19. We will primarily work to raise awareness of the extent of the excess mortality burden on men and to understand its causes, to urge the adoption of male-targeted prevention programmes, and to seek better support services for men affected by the pandemic, including in the field of mental health. We are also concerned about the impact of COVID-19 on men's use of primary and secondary care services for a wide range of other health conditions.
  - The SDGs. We will focus in particular on the targets to reduce premature mortality from NCDs, improve mental health and wellbeing, strengthen the prevention and treatment of substance abuse (including alcohol) and tackle the injuries and deaths caused by road traffic accidents.
- Support gender equality. We believe that greater gender equality is beneficial for the health of both men and women and that locating men's health within a policy framework that embraces a genuine commitment to gender equality is far more likely to achieve traction, especially at the global level. We will consistently make it clear that we do not view men's health and women's health as binary choices in a zero sum game it is both possible and desirable to improve the health of both men and women simultaneously.
- Support calls for more diverse leadership in global health policy, including having more women in senior roles. As well as being an important goal in itself, we believe that this could lead to more awareness of the need for a greater focus on gender, including men's health, in policy and programme development.
- Make the case that investing in men's health is cost-effective for health systems and the wider economy and has knock-on benefits for the health of women and children.
- Build alliances. The case for policy change must engage the widest possible group of stakeholders, including clinicians, public health experts, politicians, civil society organisations and policymakers. It is particularly important for GAMH to collaborate with organisations addressing other cross-cutting equality issues, including race, social class, sexual identity and orientation, age and disability. As a first step, we will seek to deepen our involvement with the Gender and COVID-19 Working Group and also the NCD Alliance.
- Work with the Lancet's Gender and Health Commission to ensure that it takes proper account of men's health and makes recommendations that are practical, achievable and aligned with GAMH's policy programme.
- Develop closer relationships with WHO officials globally and

regionally who are involved in work on gender, COVID-19 and the SDGs.

- Emphasise the significance of male gender norms as a means of understanding aspects of poor men's health as well as improving men's outcomes. At the same time, we will promote a positive view of men, highlighting men's strengths and how they can contribute to the better health of men and society generally.
- Develop practical guidance for policymakers, practitioners and service providers about how to engage men more effectively.
- Commit ourselves to becoming a more diverse and inclusive organisation with more actively involved members from all regions and many more countries including those which are defined as lowand middle-income and also non-English-speaking. We will also explore how we can listen more closely to the voices of the men we seek to represent.
- Secure the funding we need to develop the long-term advocacy work that is needed to bring about the changes in policy that we have identified.



### Conclusion

In the era of COVID-19, the need for a new global approach to men's health has never been clearer. This must, of course, include COVID-19 but also go far beyond it. When the pandemic at last recedes, the underlying problems in men's health will remain in place unless action is taken. One key driver of action has to be a new policy approach.

GAMH now has a viable new strategy for achieving the inclusion of men's health on the global policy agenda. We will start the work of implementing this strategy in late-2020 and deliver it through 2021 and beyond. We will regularly monitor and review the strategy and amend it as necessary in the light of our experience of what works (and what does not work) as well as changing external circumstances.

We welcome the support of our organisational and individual members; in fact, their active participation will be essential to our success. But we will also reach out and engage the widest possible range of other organisations in all sectors who support our goals.

Many people have said that our societies must 'build back better' as part of the recovery plan from the pandemic. This certainly applies to men's health. We must now seize the opportunity to achieve the long-overdue decisive leap forward in policy and practice that will make a real difference to the lives of men around the world.

### **GLOBAL ACTION ON MEN'S HEALTH**

Global Action on Men's Health (GAMH) was established in 2013, launched during International Men's Health Week in June 2014 and registered as a UK-based charity in May 2019. GAMH brings together organisations and others with an interest in men's health in a new global advocacy network.

GAMH's mission is to create a world where all men and boys have the opportunity to achieve the best possible health and wellbeing wherever they live and whatever their backgrounds.

Far too many men and boys suffer from health and wellbeing problems that can be prevented. Globally, male life expectancy at birth is just 71 years but poor male health is not recognised or tackled by global health organisations or most national governments.

#### GAMH wants to see:

- Global health organisations and national governments address the health and wellbeing needs of men and boys in all relevant policies
- Men and boys encouraged and supported to take better care of their own health as well as the health of their partners and children
- Health practitioners take greater account of the specific needs of men and boys in service delivery, health promotion and clinical practice
- Other agencies and organisations, such as schools and workplaces, helped to be more aware of their significant impact on the health of men and boys
- Sustained multi-disciplinary research into the health of men and boys
- An approach to health that fully recognises the needs of both sexes in policy, practice and funding and which promotes greater gender equality.

GAMH uniquely represents a wide range of organisations and individuals with experience of policy development, advocacy, research and service delivery. GAMH's focus is primarily on public health and the social determinants of health, it is concerned about a broad and cross-cutting range of men's health issues and has a strengths-based view of men and boys.

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