



Global Action on Men's Health
c/o Australian Men's Health Forum
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Australia

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Dr. Margaret Chan
Director-General
World Health Organization
Avenue Appia 20
1211 Geneva 27
Switzerland

Dear Dr Chan

Global Men's Health

I am writing to introduce you to a new global public health initiative, Global Action on Men's Health (GAMH). This is being publicly launched today, the first day of International Men's Health Week 2014.

GAMH is a worldwide network of organisations which are concerned about the unnecessarily poor state of the health of men and boys. GAMH currently represents eight organisations across four continents¹ and is, from today, actively reaching out to engage a wider range of stakeholders. We are especially concerned to involve organisations in lower-income countries where the problems for men and boys are particularly serious.

Our 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. We believe that GAMH has an important and distinct contribution to make to the future of global public health because we:

- Uniquely represent a wide range of men's health and related organisations each of which has experience of policy development, advocacy, research and service delivery.
- Are concerned about a broad and cross-cutting range of men's health issues (e.g. health literacy, risk-taking behaviours, use of services, etc.).
- Focus primarily on public health and the social determinants of health.
- Are committed to working in partnership with other organisations, not in competition with them.
- Support an approach to health that takes full account of sex and gender in order to improve the health of both men and women.

Far too many men and boys suffer from health and wellbeing problems that can be prevented. Globally, male life expectancy at birth is just 68; men die five years earlier than women and are 50% more likely to die between the ages of 15 and 60.² In countries classified as 'least developed' and 'less developed' by the United Nations, adult mortality fell faster among women than among men between 1992 and 2012.³

In every part of the world, many health outcomes are substantially worse for men than women. Yet this inequality has to date received little national, regional or global attention from health policymakers or healthcare providers.⁴ They have failed to tackle the social determinants of male health, including men's greater exposure to occupational hazards, their lower health literacy levels and behaviours associated with risk-taking (e.g. excessive alcohol consumption and illegal drug use).

Health services, particularly at the primary care level, are often difficult for men to access. Male mental health problems are also significantly under-diagnosed, contributing to a global male suicide rate that is double that of the female rate. Men who are particularly disadvantaged, such as men who are unemployed, gay, homeless, migrants or from certain ethnic minorities, are often at greater risk of poor health.

GAMH would therefore like 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.

This work should sit alongside continuing action to improve the health of women and girls and must not be undertaken at their expense. GAMH does not believe that resources currently allocated to women's health should be transferred to men's health.

The WHO Bulletin will soon be publishing a very welcome and important article on men's health.⁵ We hope that this will mark the start of a new approach by WHO to this issue. To facilitate this, we are keen to work with your staff to develop a work programme on gender that takes the needs of both men and women fully into account. As a first step, we suggest that WHO convenes an expert symposium on men's health followed by a report analysing the problems and recommending a range of solutions at the global as well as the national levels.

I very much look forward to hearing from you and to working with you and your staff on this important inequality issue.

Yours sincerely



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¹ Australian Men's Health Forum, Canadian Men's Health Foundation, Danish Men's Health Society, European Men's Health Forum, Men's Health Forum England and Wales, Men's Health Forum Ireland, Prostate Cancer Education Council/Men's Health Alliance (USA), Sonke Gender Justice (South Africa).

² WHO. *World Health Statistics 2014*.

³ Jamison DT, Summers LH, Alleyne G, Arrow KJ, Berkley S, et al. Global Health 2035: A world converging within a generation. *Lancet* 2013;382:1898-955.

<http://globalhealth2035.org/sites/default/files/report/global-health-2035.pdf>

⁴ Hawkes S, Buse K. Gender and global health: evidence, policy, and inconvenient truths. *Lancet* 2013;381:1783-87. http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2813%2960253-6/fulltext#article_upsell

⁵ Baker P, Dworkin SL, Tong S, Banks I, Shand T, Yamey G. The men's health gap: Men must be included in the global health equity agenda. *Bulletin of the World Health Organization* (forthcoming).

http://www.who.int/bulletin/online_first/BLT.13.132795.pdf?ua=1