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# Getting Men's Health onto a Policy Agenda - Charting the Development of a National Men's Health Policy in the Republic of Ireland

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## Introduction

The upsurge of interest and activity around men's health on the island of Ireland in recent years mirrors an international trend that has seen men's health move from the margins to the centre of health discourse. The field of men's health has been greatly strengthened in that time by research, advocacy work, and by a variety of grass-roots work in both the statutory and community / voluntary sectors. What has arguably been the most significant development in the relatively short evolution of men's health in the Republic of Ireland, has been the commitment, as set out in the National Health Strategy<sup>[1]</sup>, to develop a 'national policy for men's health and health promotion'. An increased focus, during the late 1990s, on the statistics for men in relation to life expectancy, mortality and morbidity, provided a strong impetus and mandate for men to be identified, for the first time, as a specific population group for the strategic planning of health<sup>[2-4]</sup>. Whilst other countries (notably Australia) have been to the forefront of men's health, in terms of developing gender-specific programmes and a wider range of practical initiatives in men's health, the Republic of Ireland becomes the first country in the world to develop a national policy for men's health. In this respect, the forthcoming publication of the policy marks uncharted territory but, it is to be hoped, will serve as a blueprint for the development of men's health policy in other countries.

This paper will present an overview of the evolution of men's health onto a policy agenda, with a specific focus on the Republic of Ireland. It will describe the methodologies and key principles used for policy development, and will reflect on some of the opportunities and challenges in terms of making the policy succeed.

## Focusing the spotlight on men and men's health

There has been a growing concern in western countries in recent years about the burden of ill-health experienced by men. In Ireland, men die, on average, approximately five years younger than women do, and have higher death rates than women for most of the leading causes of death and at all ages<sup>[5-6]</sup>. The gap in life expectancy is particularly striking between young men and young women. A more careful examination of aggregated data also reveals substantial differences between different categories of men, particularly in relation to socio-economic status<sup>[2,7]</sup>. For example, compared to men in the highest occupational classes, men from the lower occupational classes have poorer health outcomes and experience significantly higher mortality rates<sup>[2,7]</sup>. Indeed, despite unprecedented economic prosperity during the 1990s, men in Ireland are living only marginally longer (0.3 years) than the average man in the EU25<sup>[8]</sup>. It is also well recognised internationally that men are often reluctant to seek help and continue to present (too) late in the course of an illness<sup>[9-10]</sup>.

In more recent years, there has been an increased focus on gender in the context of men's health. Whilst in the past, the focus on gender and health in Ireland has tended to be synonymous with women's health<sup>[11]</sup>, the significance of gendered health practices (particularly gendered patterns of help-seeking) have, more recently, come to the forefront in the context of men<sup>[4,12]</sup>. This reflects more deep-rooted and widespread changes that have occurred in gender relations. In Ireland, as in other developed countries, the challenge to the position of men in gender relations has resulted in important changes in work practices, more 'democratic family structures'<sup>[13]</sup> and the continued blurring between more traditional male and female roles. With the recent downturn in the economy in Ireland, labour market vulnerability and lack of security of job tenure are increasingly associated with poverty and social exclusion, and are issues that are now beginning to have a much greater bearing on men's health than before<sup>[14]</sup>. The disintegration of rural communities has resulted in isolation, difficulties with access to services, and specific adverse consequences for the mental health of rural men<sup>[15]</sup>. Such changes have occurred against a backdrop in Ireland of an increasing shift towards secularisation and individualism<sup>[16]</sup>.

There has been much debate and publicity, in particular about men's changing roles, the notion of the 'new man', and the degree to which men are choosing to embrace or resist change. For example, whilst men are often considered 'hard work' by health service providers by not caring for their health<sup>[17]</sup>, society continues to reward and honour aspects of male identity associated with risk, daring and foregoing safety through gendered systems within politics, work and sport. In some aspects, we know that men want to change. For example, while women continue to have overall responsibility for managing and caring for children<sup>[18]</sup>, the vast majority of fathers would prefer to work less in order to spend more time with their children, citing inflexible work practices and inadequate provision of paternal / paternity leave as barriers to achieving this<sup>[4]</sup>. Of course, many men are already embracing change and re-defining their roles. Indeed, the changing attitudes and practices of some men have been crucial to paving the way for potentially greater choice for all men (and women) in their work and family lives. By challenging traditional notions of masculinity, many more men can now, for example, fulfil their capacity to be active, involved and nurturing participants in family life. Whilst there is evidence, therefore, that old stereotypes of masculinity are being broken down, this is often not without concerted effort against financial, workplace and cultural barriers.

In summary, the increased attention on men's ill-health, together with significant changes and challenges to more traditional male roles and to men's sense of place in Irish society, provide an important backdrop to the development of men's health at a policy level in Ireland.

## **Factors that created a momentum around men's health in Ireland**

It is also important to chart the key developments, both national and international, that have resulted in a raised profile surrounding men's health in recent years. At an international level, the first World Congress on Men's Health was held in Vienna in 2001, and there have been a number of national and international conferences on men's health in Australia, the United States, Asia and Europe (including Ireland). Other international initiatives in recent years include the launch of the International Society for Men's Health, the commencement of an international Men's Health Week, the launch of the European Men's Health Forum (EMHF; [www.emhf.org](http://www.emhf.org)), and the introduction of three academic

journals devoted to men's health (The International Journal of Men's Health, The Journal of Men's Health and Gender, and The American Journal of Men's Health). In 2004, the EMHF launched a report that provided, for the first time, a comprehensive overview of statistics on men's health across Europe<sup>[7]</sup>. There has also been an increased focus by the World Health Organisation (WHO) on gender mainstreaming in relation to health<sup>[19]</sup>, although, to date, this has had more of a focus on women's health than on men's health. Health Canada's Gender-based Analysis Policy<sup>[20]</sup> and the Gender Equality Duty Code of Practice for England and Wales<sup>[21]</sup> also represent important examples of attempts by individual countries to gender mainstream health.

The upsurge of interest and activity around men's health at an international level has also been mirrored in Ireland. Men's health in Ireland has been greatly strengthened in recent years by research, advocacy work and by a variety of grass-roots work in both the statutory and community / voluntary sectors. The Health Service Executive has funded two men's health research initiatives<sup>[4,12]</sup>, has developed a number of regional men's health strategies, and has funded a number of community development related health projects throughout the country. It also funds both the Men's Development Network (MDN) to support men affected by marginalisation via community based initiatives, and the Gay Men's Health Project in Dublin, which provides a wide range of clinical, outreach and counselling services for gay and bisexual men.

The Irish Cancer Society has conducted innovative campaigns directed at increasing awareness and early detection of cancers among men. The Crisis Pregnancy Agency has funded a number of research initiatives with a focus on men, including, barriers relating to men's use of sexual health services<sup>[22]</sup>, and men's experience of sex, contraception and crisis pregnancy<sup>[23]</sup>. The Family Support Agency at the Department of Social and Family Affairs has also funded research on policy and practice issues in relation to vulnerable fathers<sup>[24]</sup>. The Men's Health Forum in Ireland ([www.mhfi.org](http://www.mhfi.org)) has been engaged in men's health work at an advocacy level since 2002, and, in January 2004, launched a comprehensive report on men's health statistics in Ireland<sup>[3]</sup>. The Institute of Public Health's recent publication of an 'All-Ireland Men's Health Directory'<sup>[25]</sup> provides a very worthwhile database of activity in the area of men's health on the island of Ireland. Other organisations such as 'AMEN' and 'Parental Equality' provide support for male victims of domestic violence and separated / divorced fathers respectively.

These initiatives amount to a considerable momentum that has built up in the area of men's health in Ireland in recent years, and have served to strengthen existing networks within men's health across the statutory, community and voluntary sectors.

## **Methodologies used for policy development**

This section will present a brief overview of the methodologies used for the development of a national men's health policy in the Republic of Ireland. Men's health policy can be defined as:

*'A formal statement that defines men's health as a priority area, identifies targeted action and provides a specific plan or framework for action. It describes the procedures of institutions in the statutory, community, voluntary and private sectors to promote men's health, and defines the accountabilities of the involved partners'* (adapted from Bull et al 2004<sup>[26]</sup>).

A number of criteria have been identified for the successful development of policy<sup>[26]</sup>. These include:

- ❑ Consultation - with key stakeholders during the development phase.
- ❑ Adoption of a comprehensive approach using *multiple avenues of intervention* that target different sub-populations of men.
- ❑ Working at different levels (local, regional and national, as well as individual, whole community and environmental level).
- ❑ Development of a policy / action plan that straddles multiple agencies that forge alliances and partnerships between the statutory, community / voluntary and private sectors.
- ❑ Integration of men's health policy within other policy areas e.g. education and environment.
- ❑ Stable base of support and sustainable resources to implement the policy and action plan.
- ❑ Development of an identity for the policy / action plan, by means of a logo(s) / slogan(s), and/or key spokespersons and an advocacy / communication plan.
- ❑ A clear statement of the timeframe of the policy commitment and implementation of the action plan.
- ❑ Specific plans and resources for evaluation of the policy and action plan implementation (undertaking evidence-based approaches supported by an appropriate budget). Evaluation outcomes should be set in the context of realistic expectation.
- ❑ Development and/or maintenance of appropriate surveillance or health monitoring systems.

In accordance with these principles of best practice for the development of effective policy, a comprehensive approach, with a strong focus on research and an extensive consultation process, was adopted for the development of the national men's health policy as outlined in Table 1.

**Table 1: Key steps in the development of the national men's health policy**

1. Research	⇒	January 2002 - December 2004 Men's Health Report: "Getting Inside Men's Health"
2. National Conference	⇒	December 2004 1 <sup>st</sup> National Conference on Men's Health
3. Expert Steering Committee	⇒	November 2004 Appointment of National Steering Committee
4. Nationwide Consultation	⇒	February - December 2005 ⇒ National Men's Health Days ⇒ Hosted 7 Focus Groups ⇒ Targeted and Public Call for Submissions
5. Review of Evidence	⇒	February 2005 - December 2006
6. Bilateral Meetings	⇒	January - August 2007 Meetings with Key Stakeholders and other Government Departments

Following publication of specifically commissioned men's health research<sup>[4]</sup> at the first National Conference on Men's Health, an in-depth three-phase consultation process commenced under the direction of an expert Men's Health Steering Group ...

Phase 1 comprised six men's health days that were held in strategic locations all over Ireland, and which consulted with all key stakeholders in the statutory, community and voluntary sectors. Phase 2 comprised the hosting of a series of focus groups with sub-populations of men whose voices were not represented at the men's health days. Phase 3 consisted of invited (n=94) and a public call for submissions through the National Press. An extensive review of both the national and international literature on men's health was then conducted to establish the efficacy of translating the issues raised through the consultation process into policy recommendations and actions. Finally, a draft policy and action plan were then circulated for final approval to all relevant government departments, with follow-up meetings being held with each department.

The following are the key principles and the theoretical framework that underpin the men's health policy. The policy:

- ❑ is firmly positioned within existing government policy (inter-sectoral / inter-departmental);
- ❑ places a firm focus on the gendered nature of key men's health issues (e.g. alcohol, obesity, mental health);
- ❑ adopts a broad determinants perspective;
- ❑ targets interventions at both an individual and a population level;
- ❑ incorporates a community development approach;
- ❑ focuses on prevention as well as cure;
- ❑ adopts a strengths perspective;
- ❑ seeks to support men to become more active agents and advocates for their own health.

## **Maximising existing opportunities in relation to men's health policy**

In anticipation of the publication of the men's health policy, it is imperative to seek out all available opportunities for collaboration and co-operation, to ensure that the targets set out in the policy are achieved. The following are some of the key factors that should be considered in this respect:

- ❑ Building alliances and support for men's health policy in the future - It is imperative to identify the scope and potential of the national men's health policy to dovetail with existing policy and to make a positive contribution to society as a whole. This also highlights important opportunities in terms of developing a strategic approach to policy implementation, by identifying alliances, partnerships and likely avenues to garner support for the policy.
- ❑ Forging strong coalitions, alliances and partnerships at both national and local level - Whilst the introduction of any new policy initiative generates new opportunities for work and has specific resource implications, existing policy measures also provide potential for collaboration and may offer potential sources of funding and resources. Those tasked with implementing the policy are not starting with a blank canvas, but rather have the opportunity to work with a wealth

of potential existing partners (environment, education, employment etc.) in developing men's health initiatives, and with whom to inculcate men's health within existing systems and structures.

- Defining men's health as a productivity issue - One of the clearest strategies that can be used to invoke support for the policy is to work in a strategic way in promoting a healthy male workforce as a more productive workforce. One of the key promotional and marketing challenges for men's health policy in the future will be to reverse the paradigm that help-seeking is synonymous with weakness in men and, rather, to portray good health maintenance and prompt help-seeking as being part and parcel of being a man - achieving optimum vitality, vigor and productivity, and enabling men not just to be productive in their work, but productive also in the many other roles that they play.
- Applying a cost-benefit analysis to achieve a more 'upstream' focus on men's health - There can be no disputing the fact that the Exchequer in Ireland foots a considerable bill for men's (ill-)health each year. What is largely taken for granted, however, is that such payments are heavily weighted towards costly, state-of-the-art interventions to address frequently neglected health conditions that, in many cases, could either have been prevented or treated more effectively and efficiently at an earlier stage. By focusing most of its energies 'downstream', there has been a tendency within health policy, generally, to overlook the enormous potential of interventions with a more preventative 'upstream' focus. Whilst it is possible to estimate the cost to the Exchequer, of the health burden that Irish men impose, it may be more judicious to focus on how such costs could be reduced by more 'upstream' preventative strategies and early interventions that, in particular, encourage men who become unwell to present earlier to health services.
- Men willingly engage with health when the approach is right - There is a growing body evidence that when services are provided in a convenient, accessible and respectful way, that men will engage with their health, and that once they have a sense of identity and safety as participants in health care, they are more likely to willingly engage in the future. One of the key challenges of policy is to make explicit, evidence of best practice in engaging with men.
- Targeting men's health can have positive spin-offs for the lives of women and children - In the context of a gender relations approach to health, improving the health of men can have both direct and indirect benefits for women and children. In the case of single-income, lower socio-economic group families, absenteeism from work due to a father's ill-health is likely to have significant material repercussions for the family as a whole. In the case of sexual or mental health, interventions that are successful with men are also likely to have positive spin-offs for men's families.

## Conclusion

The forthcoming publication of a national men's health policy in the Republic of Ireland is a significant and important step in being the first national policy to provide a clear blueprint, and an unequivocal evidence base, for tackling men's health. Undoubtedly, there will be much national and international interest in the progress of the policy in the years to come.

Many challenges lie ahead in the implementation of this policy. Not least of these, is the difficult economic climate in which the policy will be published. There is also the challenge of embracing the diversity within the category of 'men', and the breadth and diversity of health issues that pertain to different sub-populations of men.

Perhaps the greatest challenge in the years ahead, is the need to strengthen the evidence base on men's health in Ireland - to identify what works best in different contexts. As Wilkins <sup>[27,p13]</sup> points out, identifying the problems with men's health is not the ultimate challenge, nor is advocating for change at a political or policy level, rather it is:

*"Identifying what works with men and translating that into workable strategies capable of widespread application [that is] much more of a challenge".*

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