



SNAPSHOTS OF MEN'S & BOYS' HEALTH IN EASTERN EUROPE & CENTRAL ASIA

presented by

GLOBAL ACTION ON MEN'S HEALTH and YOUACT

SPEAKER'S BIO

PETER BAKER (Global Action on Men's Health - UK)

Peter Baker is Director of Global Action on Men's Health - www.gamh.org. GAMH is an NGO that is developing a new global network of men's health organisations and others who share the aim of creating 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. For 12 years, until 2012, Peter was Chief Executive of the Men's Health Forum, the UK's leading men's health NGO. From 2012-16, Peter worked with the European Men's Health Forum, particularly on a long-term project to improve men's use of primary care services across Europe. As well as his work for GAMH, Peter is an independent consultant on men's health and he supports organisations in all sectors that want to begin or develop their work on men's health. He is currently Campaign Director of HPV Action, a UK coalition of about 50 patient and professional organisations that are working together to achieve an HPV vaccination programme that covers boys as well as girls. In 2014/15, he completed a review of Ireland's National Men's Health Policy for the Irish government and, more recently, was co-author of a review of the Oak Foundation's funding programme on engaging men and boys in ending the sexual abuse and violence against children. Peter lives in Brighton, UK with his partner and three children.

ABSTRACT

Men's health is far poorer than it needs to be. In the WHO European Region, which covers 53 countries, average male life expectancy at birth is, at 73.2 years, seven years shorter than female life expectancy. Men's health problems are not caused primarily by biology but by a combination of risk-taking behaviours (including smoking, drinking alcohol and a poor diet), road traffic accidents, workplace injuries, poor health literacy and reluctance to seek help from health services. The nature of masculinity is heavily implicated. Just as importantly, health policymakers and service providers have, in most countries, overlooked men's health. This is because men have not campaigned for change, there is a marked lack of sympathy for men and men's vulnerabilities, and women's health has been seen as the priority in part because it is seen, rightly, as a means of empowerment. There are, however, good reasons for addressing men's health: good health is a universal human right, men should be treated equally by health services and better health for men would reduce costs for health services and society generally and would improve women's and children's health too. Action to improve men's health would help countries achieve the Sustainable Development Goals. There are now signs that men's health is being addressed at the policy level: WHO-Europe is currently developing a men's health strategy and several countries around the world have published national men's health policies. There is also increasingly robust evidence about how to engage men effectively in health improvement programmes.