National Policy Agenda

Men’s Health Caucus
In official relations with the American Public Health Association

2011 - 2012
CONTENTS

i Foreword

1 Why Create a Policy Agenda?
   1 Current Status of Male Health in the U.S.
   3 National Men’s Health Efforts

5 What Will This Agenda Accomplish?
   5 Vision
   6 Principles

8 What Are the Agenda’s Priorities?
   8 Goal 1: Policy Development
   10 Goal 2: Research
   10 Goal 3: Education & Outreach
   11 Goal 4: Professional Training
   12 Goal 5: Access to Health Services

12 Call to Action

Images courtesy of Men’s Health Network
### Leadership Roster

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scott Williams</td>
<td>Chair</td>
</tr>
<tr>
<td>Salvatore J. Giorgianni, PharmD, BSc</td>
<td>Chair-Elect</td>
</tr>
<tr>
<td>Ana Fadich, MPH, CHES</td>
<td>Program Planner</td>
</tr>
<tr>
<td>Suzy Holt Goodwin, MS, CHES, TTS</td>
<td>Secretary</td>
</tr>
<tr>
<td>Theresa Morrow</td>
<td>Communication/Membership Coordinator</td>
</tr>
<tr>
<td>Stephen Petty, MA</td>
<td>Treasurer</td>
</tr>
<tr>
<td>Adam Dougherty, MPH</td>
<td>Policy Coordinator</td>
</tr>
</tbody>
</table>

### Policy Committee

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jermane Bond, PhD</td>
<td></td>
</tr>
<tr>
<td>Michael Rovito, PhD</td>
<td></td>
</tr>
<tr>
<td>James E. Leone, PhD</td>
<td></td>
</tr>
<tr>
<td>O. Danny Lee, PhD, RN, CNS-BC, CNE</td>
<td></td>
</tr>
<tr>
<td>Apryl Brown, MD, MPH</td>
<td></td>
</tr>
<tr>
<td>Noah Barclay-Derman, MPH</td>
<td></td>
</tr>
<tr>
<td>Christina Cianflone, JD</td>
<td></td>
</tr>
<tr>
<td>Alan Richmond, MSW</td>
<td></td>
</tr>
<tr>
<td>Justin Tindall, MPH (Candidate)</td>
<td></td>
</tr>
</tbody>
</table>

Special thanks to Justin Tindall – **for his tireless efforts, passion, and perseverance to make this agenda a reality.**
A Message from the Chair

In January 2010, the American Public Health Association's (APHA) Executive Board approved the creation of the Men’s Health Caucus (MHC). Shortly after being chartered, the MHC hosted its first business meeting at the 138th APHA Annual Meeting Exposition held in Denver, Colorado in November 2010. This event was a triumph for men’s health advocates throughout the United States. In less than a year, the Caucus had grown to include 60 members from multidisciplinary fields and organizations, and it continues to grow while leading efforts to improve the health of our nation’s men, boys, and their families. This is an exciting time for men’s health in our country.

The mission of the MHC is to bring together academic, healthcare providers, federal, state and local health departments, and private and non-profit organizations with a common interest in improving the health and well-being of men, boys, and their families. The MHC coordinates a diverse approach and group to better tackle public health issues within our communities. Additionally, one purpose of the Caucus is to increase awareness of APHA members about Caucus goals and key issues regarding the public health concerns specifically affecting men, boys, and their families in the United States and associated jurisdictions and countries.

After recently celebrating the one-year anniversary of the Caucus, I am proud to announce the development of the Men’s Health Caucus National Policy Agenda 2011-2012. This document highlights the key vision, principles, goals and priorities of the MHC, and stands as the policy standard for improving the health and well-being of men and boys in our country. The Caucus is excited to collaborate with organizations such as Men’s Health Network, Women Against Prostate Cancer, and others to see that the agenda becomes the foundation for future policies and practice in men’s health in the United States.

As the MHC and supporting organizations go forward in this endeavor, I encourage all individuals involved in public health, medicine, health policy, advocacy, and education to support this agenda by assuring that its objectives are met and that America’s men, boys, and their families attain a healthier future.

Scott Williams
MHC Chair
MHC National Policy Agenda 2011-2012

WHY CREATE A POLICY AGENDA?

Background: Current Status of Male Health in the U.S.

The status of male health in the United States provides cause for concern about the health of the country and the social context of our society. Males in the United States are born frailer, live sicker, and die younger than their female counterparts. This is true across all racial, ethnic, and socioeconomic groups. When it comes to health and general wellbeing, men are indeed the weaker sex.

- **There are 105 males born for every 100 females, but by age 34 there are more women than men**, according to figures from the U.S. Census Bureau (2008).

- **According to the National Center for Health Statistics (2009), men are leading in 9 out of the top 10 causes of death** (heart disease, cancer, COPD, suicide, etc.).

- **The American Cancer Society (2011) reports that 1 in 2 men will be diagnosed with cancer during their lifetime, while for women the ratio is 1 in 3.**

- **The Centers for Disease Control and Prevention (2010) reported that the life expectancy gap between men and women had increased from 1 year in 1920 to approximately 5 years in 2007.**

- **Reports from the National Center for Health Statistics (2001) show that women are 100 percent more likely than men to visit a doctor for prevention.**

While this health crisis is of particular concern to men, it is also a concern for women regarding their fathers, husbands, sons, and brothers. According to the United States Census Bureau (2000), the ratio of men to women in the early retirement years (age
group 65-69) reduces to 85 men per 100 women. This suggests that among other factors, the declining health of men increases the risk of women entering retirement age as widows. According to the Administration on Aging (2001), more than half of elderly widows now living in poverty were not poor before the death of their husbands. This suggests that among other factors, the declining health of men increases the risk of women entering retirement age as widows. According to the Administration on Aging (2001), more than half of elderly widows now living in poverty were not poor before the death of their husbands. The health of men and boys is a concern to governments, public health departments, community health centers, health professionals, employers and other key stakeholders who absorb the enormous costs of disability, absenteeism from work, and premature death.

Studies haveshownthatregularmedical exams, preventive screenings, regular exercise, and healthy eating habits can save lives. Appropriate use of tests, such as prostate exams (PSA and DRE), blood pressure, blood sugar, lipid panel, and colorectal screenings, in conjunction with clinical exams and/or self-testing, results in the early detection of many health problems while increasing survival rates.

Educating men and boys, their families, and health care providers about the importance of male health issues will improve the health of America’s men and the nation’s overall economic well-being. A national education and awareness effort will require social and cultural shifts in the way we approach health in our country. Healthy lifestyles among men and boys need to be supported, and unhealthy behaviors need to be discouraged.

Implementing a national policy agenda is an effective means of encouraging a shift in attitudes among men and boys. Effective implementation of the policy agenda requires the support of family, community, policy makers, the health care infrastructure, and public health professionals, all of whom have a vested interest in improving the health and wellbeing of men and boys.
National Men’s Health Efforts

Despite a lack of centralized direction, several federal agencies have initiated programs or awareness activities to promote the health and well being of men and boys. Most of those efforts are concentrated at the Offices of Women’s Health and the Office of Minority Health. Those are complemented by the efforts of various nonprofit organizations.

National achievements in male health, both in policy and practice, include the following:

- In 1994, the men’s health community applauded the passage of National Men’s Health Week (the week ending on Father’s Day), a nationwide opportunity to heighten the awareness of preventable health problems and encourage early detection and treatment of disease among men and boys. This effort has expanded to include all of June as Men’s Health Month. Men’s Health Network, an international nonprofit based in Washington, DC, provides resources for those public and private entities that promote the health of men and boys during this period.

- Prostate Cancer Awareness Month is celebrated in September of each year with passage of a resolution through Congress and the signing of a proclamation by the President. Local celebratory activities include a vast prostate cancer screening effort and awareness activities.

- In 1997, the Joint Appropriations Conference Committee established the Department of Defense (DOD) Prostate Cancer Research Program (PCRP). The PCRP has built a multidisciplinary portfolio of innovative basic, translational, and clinical research.

- In 2007, the Congressional Men’s Health Caucus was established. Its primary purpose is to promote programs and policies that address the unique and challenging health and wellness needs of men and boys and raise awareness of male health issues.

- The establishment of State Commissions on Men’s Health and related men’s government-based health programs at the state and county level over the past
decade have contributed to the goal of improving the health of men and boys through community outreach activities and public-private partnerships. The first Commission on Men’s Health was established in Georgia in 1999 through efforts initiated by Men’s Health Network.

- The establishment of an Office of Indian Men’s Health within the Indian Health Service was authorized by Congress with passage of the Affordable Care Act (2010).

Affordable Care Act

With the passing of the Affordable Care Act (ACA) into law in March 2010, the importance of preventive health screenings for both men and women was impressed upon the health care system, and the nation. With the adoption of the Mikulski Amendment in 2009, and the release of the 2011 Institutes of Medicine report, Clinical Preventive Services for Women: Closing the Gaps, the Department of Health and Human Services (HHS) has assured that female-specific preventive services and screening are included as health plan requirements.

Unfortunately, HHS has yet to develop a male-specific preventive health services package to mirror those provided for females.

Lack of a National Focus Hinders Progress

Despite health care advances in this country, and the increasing longevity across all racial and ethnic populations, males continue to lag significantly behind their female counterparts. Arguably, this is because there have been no centralized national effort to coordinate the fragmented men’s health awareness, prevention, and research efforts on the regional, state, and local level, outside the efforts of Washington, DC-based Men’s Health Network.
This lack of coordinated effort points to the need for direction. The following strategic framework—the Men’s Health Caucus National Policy Agenda 2011-2012— is a platform on which a more comprehensive government effort can begin to take shape, one that will better the health of America’s men and boys and their families.

**WHAT WILL THIS AGENDA ACCOMPLISH?**

Our vision is to improve the health and well-being of men and boys and their families through innovative policymaking, a challenging effort that seeks to eliminate the disparities that have set back the health of men and boys in this country.

The mission of the Men’s Health Caucus (MHC) is to provide guidance for academic, federal, state, and local health departments, private and non-profit organizations that have a common interest in improving the health and well-being of men and boys and their families. The MHC coordinates a diverse, multidisciplinary, and proactive approach to better tackle public health issues within communities. The MHC advocates for the healthy lifestyles and health care needs of men, boys, and their families, including, but not limited to, disease prevention, health screenings, advocacy, treatment, and public health.

The MHC provides a forum for the analysis, interpretation, recommendations, and dissemination of current research and policy that affect male health. The MHC Policy Committee created this policy agenda with the following vision in mind:

**The Vision**

...is to improve the health & well-being of men and boys & their families in the United States through innovative policymaking, a challenging effort that seeks to eliminate the disparities that have set back the health of men and boys in this country.

*This official policy agenda on men’s health will:*

- **STAND** as a reflection of the MHC and APHA’s advocacy standards, interests, and objectives;

- **PROVIDE** a theoretical structure that will guide stronger and more effective men’s health advocacy in the United States;
Principles

Some obstacles to improving the health and wellbeing of men and boys have included: socialization that teaches boys that “big boys don’t cry” while encouraging risk-taking behaviors, failure to target men and boys with gender, age, and culturally appropriate health messages, men placing work and family obligations before their own health needs, advertising that encourages risky and unhealthy behavior among males, and the lack of leadership and direction from government.

To mitigate these obstacles, it is imperative to highlight fundamental principles to guide men’s health policy. The following principles support the implementation of this policy agenda and often represent key elements and/or standards to public health practice. Every principle should be reflected in the implementation of the agenda’s goal and objectives.
The MHC recognizes that…

1) The quality and longevity of life for men and boys in the United States is disproportionately affected by a lack of policymaking, social factors, a paucity of health services directed to men, and individual behavior choices. Efforts to promote health equity in our country must begin to take a balanced approach that considers health in terms of gender.

2) Addressing men’s health is a multidisciplinary effort that will require support from and collaboration among professionals from all governmental, educational, health, business, policy, and advocacy arenas.

3) Understanding, practicing, and institutionalizing ethnic, racial, and culturally sensitive guidelines for interacting and reaching out to men and boys is paramount in alleviating gender-specific health disparities throughout our country.

4) Governmental agencies, policy makers, public health institutions must be held accountable for the efforts they make to eliminate the health disparities that afflict men and boys in our country.
WHAT ARE THE AGENDA’S PRIORITIES?

Coordinated consultation between MHC Policy Committee members and members from the MHC leadership roster formed the basis of this agenda’s goals and objectives. Together these parts represent the focus and practical application of the agenda’s vision and principles.

The key focus areas of the National Policy Agenda are:

- **Policy Development**
- **Research**
- **Education & Outreach**
- **Professional Training**
- **Access to Health Services**

The MHC Policy Committee has identified 5 goals that reflect each of these key focus areas. They have also identified 3 key objectives for each goal that will help the Caucus improve these areas in 2011-2012. The goals and objectives are the following:

**Goal #1:** *Strengthen national and state public policies that aim to improve the health of men, boys, and their families.*

- **Create an Office on Men’s Health within the Department of Health and Human Services (HHS) that can mirror the 20-year successes of the Office of Women’s Health established in 1991.**
- **Facilitate the creation of the first U.S. National Men’s Health Policy that:**
  - i. Parallels the goals, themes, and objectives from Healthy People 2010 and 2020 and other influential policy documents;
  - ii. Brings recognition of men’s health to the public policy debate, particularly the need for unique and evidence-based policies that establish guidelines for what constitutes valid and appropriate approaches to the holistic health of men and boys;
iii. Acts as a platform for men’s health advocates to identify, characterize, and address evolving and demonstrable disparities in the longevity and health status of American men and boys;

iv. Encourages the collaboration of federal and state health agencies to develop, publish and disseminate information regarding health and wellness for men and boys in a manner that is gender and age appropriate;

v. Helps to create a political and cultural atmosphere that encourages constructive dialogue to address the health needs of men and boys that does not diminish the understanding and/or need to address health disparities for women and girls;

vi. Highlights prevention as a key to decreasing men’s health disparities in our country;

vii. Encourages gender-balanced federal programs that advance male health, especially those that are nationally funded and supported, reduce waste, and promote cost-sharing within established agencies;

viii. Encourages the inclusion of gender equity verbiage in all governmental health policies; and

ix. Incorporates a marketing strategy to promote men’s health issues year-round, not just in June (Men’s Health Month).

➢ Establish a Department of Health and Human Services “Coordinating Committee on Men’s Health”, which shall be chaired by the Assistant Secretary for Health (HHS) and will comprise of senior level representatives from various agencies and offices across the federal government as well as a non-governmental organization (Men’s Health Network).
Goal #2: Advance men’s health-specific research initiatives that disseminate gender, age, and socioculturally appropriate information through suitable mediums.

- Increase federal funding for prostate and male-specific cancer research through annual appropriations for the National Institutes of Health, the National Cancer Institute, the Congressional Directed Medical Research Program, and the Centers for Disease Control and Prevention.

- Develop funded research projects that document areas of health and longevity disparities for men and boys, particularly the impact of men’s health on family health and the federal budget.

- Encourage relevant federal departments to direct more time, resources, and funding toward research on androgen deficiency, improved contraceptive options for men, and other men’s reproductive health issues (outside of prostate cancer research).

Goal #3: Develop greater health education outreach targeting men and their families.

- Secure funding opportunities that would develop a male health marketing campaign designed to encourage men’s health initiatives, including preventive health.

- Extend the scope of health education and support for men and boys beyond reproductive health matters, particularly at the level of public health departments.

- Establish a National Men’s Health Information Center in collaboration with Men’s Health Network to—
  i. Facilitate the exchange of information regarding matters relating to health information, health promotion, preventive health services, research advances, and education in the appropriate use of health care;
ii. Facilitate access to such information;

iii. Assist in the analysis of issues and problems relating to the matters described in this paragraph; and

iv. Provide technical assistance with respect to the exchange of information (including facilitating the development of materials for such technical assistance).

Goal #4: **Ensure the development of a better-trained and more gender-competent U.S. public health workforce in the field of men’s health.**

- Secure funded demonstration projects to serve as models for public and private sector entities and practitioners to utilize in addressing educational and motivational deficiencies, as well as social, cultural, and societal barriers, that adversely impact health and longevity disparities in men and boys.

- Establish a better understanding of core skill sets and baseline and ongoing educational needs for educators, public health providers, and practitioners to ensure that health and wellness services provided to men and boys are appropriate, are evidence-based, address total health needs of men and boys, and are scientifically and medically rigorous.

- Develop a national preconception health and reproductive life planning model of care for men and boys and their families, as recommended by professional associations and patient advocate organizations.
Goal #5: Promote strategies that ensure greater delivery and access of health services to men, boys, and their families.

- Work with private sector stakeholders, particularly health systems and employers, to implement programs and clinical services for men, boys, and their families that are gender and age appropriate and that address targeted male health issues.
- Ensure that as health care restructuring efforts at the federal, state and private sectors evolve, access and reimbursement for critical preventive care services for men, boys, and their families are given prominence to address evolving disparities in male health status and longevity.
- Establish evidence-based practices in the delivery of preventive health care for males, an effort that should be sustained by using inclusive wording in all bills proposed and passed by Congress that aim to improve male health in the U.S.

Call to Action

We stress the importance of safe and healthy communities for the well-being of our nation’s men and boys. Policy should reflect this ideal. To ensure that our country reaches its health potential, it is imperative that organizations and individuals alike advocate for the success of this agenda’s goals and priorities, and we encourage all to promote the vision and principles outlined herein.
For more information

Men’s Health Caucus (MHC)
236 Massachusetts Ave. NE Suite 301
Washington, D.C. 20002
202-543-6461 Ext. 101
info@menshealthcaucus.net

www.menshealthcaucus.net