



The Association of Directors of Public Health Consultation Response

Men's Health Strategy for England: Call for evidence

Objectives and Scope

This [call for evidence](#) will inform the development of a Men's Health Strategy for England. It seeks the views of the public, as well as health and social care professionals, academics, employers and stakeholder organisations. The Government is particularly interested in the lived experience of all those directly affected by men's health issues.

The Government knows that men face unique challenges throughout their lives. Men are disproportionately affected by a number of health conditions, including cancer, cardiovascular disease and type 2 diabetes. Life expectancy data also shows that men live on average four years fewer than women (79.1 versus 83.0 years in England, respectively).

Rather than a formal consultation on specific proposals, this call for evidence is a request for ideas and evidence that the Government can build upon and discuss further with key interests.

The call for evidence includes questions on:

- topics that the Men's Health Strategy should cover
- health literacy, education and training
- health behaviours
- health conditions affecting men
- health and work
- men's engagement with healthcare services
- men's experience of healthcare services

The call for evidence is only available to individuals aged 16 and over living in England and organisations that operate or provide services in England.

About ADPH

[ADPH](#) is the representative body for Directors of Public Health (DsPH), and is a collaborative organisation, working in partnership with others to strengthen the voice for public health, with a heritage which dates back over 160 years. ADPH works closely with a range of Government departments, including [UKHSA](#) and [OHID](#) as well as the four CMOs, [NHS](#), devolved administrations, local authorities (LAs), and national organisations across all sectors to minimise the use of resources as well as maximise our voice.

ADPH aims to improve and protect the health of the population by:

- Representing the views of DsPH on public health policy.
- Advising on public health policy and legislation at a local, regional, national and international level.
- Providing a support network for DsPH to share ideas and good practice.
- Identifying and providing professional development opportunities for DsPH.

ADPH response to questions

Men's Health topics

There are many topics that relate to men's health, either directly or indirectly. Which of the below topics, if any, do you think it is most important for the Men's Health Strategy to consider? (Optional)

Please select up to five topics that you think are most important. You can also provide your own suggestion by selecting 'other'.

- access to services
- alcohol
- atrial fibrillation (a type of heart rhythm problem)
- autism and neurodiversity (such as attention deficit hyperactivity disorder and dyslexia)
- cancers typically affecting men (prostate, testicular and penile cancer)
- conditions that affect your joints, bones and muscles (such as arthritis)
- dementia
- diabetes
- diet
- disability
- experience of healthcare
- fatherhood
- gambling
- governance and accountability
- health literacy
- health screening services
- healthy relationships
- heart disease and stroke
- high blood pressure
- high cholesterol
- inequalities
- injuries and risk taking
- loneliness
- masculinity
- mental health (including stress and anxiety)
- neurological conditions (such as epilepsy or Parkinson's disease)
- physical activity or inactivity
- research and data
- sexual health

- **smoking**
- substance misuse
- suicide prevention
- training and education for healthcare professionals
- weight
- other cancers (such as bowel and lung cancer)
- other (please specify)

Understanding and identifying areas where we can improve support for healthier behaviours

Please upload your contribution of data, research and other reports relevant to this topic of men's health: Understanding and identifying areas where we can improve support for healthier behaviours.

We are particularly interested in:

- Your insight into the factors driving behaviours posing a risk to health among men and boys.
- your suggestions as to how to improve health-positive behaviours among men and boys.
- any gaps in research and evidence.

Please draw upon sex-related health inequalities in your response where possible.

Do not include any personal information in your response.

Upload Word document file [maximum 10 pages].

ADPH response:

While understanding and supporting healthier behaviours is important, it is not within the interests of public health – nor that of the wider population – for the Men's Health Strategy to focus solely on individual-level behaviour change interventions. This approach risks neglecting the complex structural and commercial determinants that shape health behaviours and outcomes. Social and economic disadvantage, particularly among men in lower-income groups, limits access to healthy food, quality housing, and active travel options as well as increases their risk of alcohol and smoking-related harms. Industries promoting unhealthy commodities (eg tobacco, alcohol, high fat, sugar, and salt (HFSS) foods, gambling) target men through gendered marketing and exploit regulatory gaps. While there is a strong evidence base for this, it is important to note that more evidence is needed in other areas, such as how ethnicity, sexuality, and neurodiversity intersect with men's health and interventions.

ADPH does not advocate for approaches that individualise responsibility for health without acknowledging the broader systemic context. Instead, we support well-funded, system-level public health interventions that both support individuals and actively change the environments in which health decisions are made. This includes implementing regulatory levers such as minimum unit pricing for alcohol, marketing restrictions on HFSS foods, and mandatory health warnings on gambling and tobacco products.

Public health funding must be increased to restore effective, community-rooted services that provide

proactive support, especially in underserved areas. Health equity should be embedded into all policies to address the underlying social determinants of health through housing, education, employment and justice reform.

Overall, ADPH urges that the Men's Health Strategy moves beyond a narrow focus on behaviour change. Improving men's health must be rooted in structural action and a recognition of the wider determinants of health, aligning with Marmot principles.ⁱ For the Strategy to be transformative, it must challenge the power and influence of unhealthy commodity industries, address systemic inequality, and rebuild public health infrastructure to create environments where healthy behaviours are the easiest choice.

Improving outcomes for health conditions that typically, disproportionately or differently affect men

Please upload your contribution of data, research and other reports relevant to this topic of men's health: improving outcomes for health conditions that typically, disproportionately or differently affect men. We are particularly interested in:

- **your suggestions for improving health outcomes for men and boys, such as on mental health and suicide prevention, cancer and cardiovascular disease**
- **your views as to what extent services in these areas are currently meeting the needs of men**
- **your suggestions as to how services for health conditions that affect men can be improved to better meet their needs**
- **any gaps in data or evidence on these areas**

Please draw upon sex-related health inequalities in your response where possible. Do not include any personal information in your response.

Upload Word document file [maximum ten pages].

ADPH response:

To answer this, we have chosen to focus on the five topic areas outlined above.

Alcohol

Alcohol consumption remains a significant public health issue in the UK, with levels consistently exceeding the average across OECD countries.

- In 2022, 55% of men and 42% of women reported drinking alcohol at least once a week. Alarming, 32% of men and 15% of women consumed alcohol at levels classified as increasing or higher risk for alcohol-related harm.ⁱⁱ
- In 2023, there were 10,473 deaths from alcohol-specific causes in the UK. The rate of alcohol-specific deaths among males was approximately twice that of females.ⁱⁱⁱ
- Alcohol is associated with irreversible health consequences, contributing to over 200 different diseases and injuries, including mouth, throat, stomach, liver and breast cancers, high blood pressure, cirrhosis of the liver, and depression.^{iv}

- Beyond its individual health impact, alcohol misuse places a heavy burden on society. The economic cost of alcohol-related harm in England is estimated at £27.44 billion annually, encompassing healthcare, lost productivity, crime and social care.^v
- The impact of alcohol on men's health is perpetuated by cultural norms, with binge drinking reinforced in male-dominated spaces such as pubs, and stigma deterring men from seeking support for alcohol-use.

Given the scale and severity of alcohol-related harm, urgent and comprehensive action is required through multi-level prevention and long-term investment. The Government should therefore implement a multi-faceted strategy aimed at reducing alcohol harm. Key policy measures should include:

- Minimum unit pricing to curb excessive consumption.
- Mandatory health labelling on alcoholic beverages with health warnings.
- Marketing restrictions on alcohol by classifying it as an 'unhealthy product' under high fat, salt and sugar marketing restrictions.
- Increased investment in public health to support preventative and specialist services.

Diet and healthy weight

In 2024, the cost of healthier food options remained a significant barrier to healthy eating, with more nutritious items costing over twice as much per 1,000 kcal (£8.80) than less healthy alternatives (£4.30).^{vi} Unhealthy weight is, therefore, strongly associated with deprivation^{vii}, with poor diets being driven by low income, food insecurity, and reduced access to healthy options.

Between 2022 and 2023, 64% of adults in England aged 18 years and over were estimated to be overweight or living with obesity. For men, this figure was even higher, at 69.2%.^{viii} Overweight and obesity are major contributors to public health issues, linked to 13 different types of cancer, making them the second leading cause of cancer in the UK after smoking.^{ix} Obesity is estimated to cost the NHS £6.5 billion per year.^x

Preventative action is essential to promote healthy weight, tackle health inequalities, and reduce pressure on the health system. A whole system approach is required – one that fosters environments which support healthy eating and encourage positive attitudes towards food. This should include:

- Restricting marketing of HFSS products.
- Improving national food standards.
- Implementing health-focused licensing and planning policies.
- There is also a need for investment into research and data to better evaluate interventions and adapt services focused on healthy weights and diet.

Gambling

In 2021, 50% of adults in the UK had participated in a gambling activity in the previous 12 months. Men are more likely to participate in gambling activity, with 4.4% of men compared to 1.1% of women identified as engaging in at-risk or problem gambling.^{xi}

Gambling can lead to significant harms – financial, psychological and social. Everyone has a right to be protected from unnecessary and preventable risk, including exposure to aggressive marketing practices by the gambling industry both online and offline.

Despite the perception of gambling as a leisure activity, the true risks are poorly communicated, and many individuals, along with their families, experience serious harm as a result. A Men's Health Strategy must take evidence-based action to reduce gambling harm, building upon national developments in reducing gambling harms, such as the gambling levy. To support this, the Government must establish a strong position away from industry influence to ensure a consistent, non-industry-led approach to prevention.

Mental health

Poor mental health is widespread, with one in five adults experiencing a common mental health disorder such as generalised anxiety disorder or depression.^{xii} The economic cost in England is estimated at £110bn annually, primarily due to sickness absence, staff turnover, and unemployment.^{xiii}

The situation is particularly concerning for men. In 2023, the male suicide rate in England and Wales rose to 17.4 deaths per 100,000, up from 16.4 in 2022. This is the highest rate for males since 1999^{xiv}, highlighting a critical need for urgent action.

There are also a number of comorbidities linked to poor mental health that impact men's health. For example, gambling addiction is highly correlated with suicide and the risk of suicide disproportionately affects those under 30, particularly men.^{xv} As well as this, a significant proportion of people living with mental health problems have substance use disorders.

The Men's Health Strategy must prioritise poor mental health prevention, early intervention, and wellbeing. This includes tackling the social determinants of mental health (such as poverty, housing and employment) and taking a joined-up approach with key areas where comorbidities may occur. Sustained and increased investment in public mental health services is essential, with dedicated funding for community-based initiatives. This should include support for active travel, and equitable access to green spaces and affordable physical activity. As well as this, it should include personalised primary care and upstream approaches such as social-prescribing, and male-targeted campaigns.

Smoking

In the UK in 2023, men were more likely to smoke with around 13.7% of the male population being current smokers.^{xvi} Smoking remains the leading cause of preventable and premature death in the UK. Over the past 50 years, it has killed nearly eight million people, with an estimated two million more expected to die in the next 20 years unless smoking rates fall dramatically.^{xvii}

In 2019 alone, 74,600 people in England died because of smoking.^{xviii} Importantly, the harm extends beyond smokers themselves; second-hand smoke continues to kill a significant number of non-smokers every year.^{xix} It is therefore vital that the Strategy aims to reduce the harm of tobacco, integrating tailored cessation services that address co-occurring issues, ensure equitable access, and target high-

risk groups. On a wider level, the Strategy must address early addiction pathways, especially as vaping among children becomes more prevalent^{xx}, as well as enable the stronger enforcement of age restrictions and tighter regulation of vape sales to protect young people.

We welcome the introduction of the Tobacco and Vapes Bill. By preventing future generations from becoming addicted, it lays the foundation for a smokefree, healthier UK. The Men's Health Strategy must align with this ambition, ensuring that men are effectively supported in the national movement to end smoking and tobacco harm. In order to gain a valid picture of legislative impact however, there is a need to improve intelligence on gender-specific data, both for quit attempts and success rates, as well as dual use of smoking and vapes.

ⁱ Marmot M, Allen J, Goldblatt P, Boyce T, McNeish D, Grady M, Geddes I, et al. Fair Society, Healthy Lives: The Marmot Review: Strategic Review of Health Inequalities in England Post-2010. UCL Institute of Health Equity. 2010. Available from: <https://www.instituteofhealthequity.org/resources-reports/fair-society-healthy-lives-the-marmot-review> [Accessed July 2025]

ⁱⁱ NHS Digital. Health Survey for England, 2022 Part 1: Adult drinking. 2024. <https://digital.nhs.uk/data-and-information/publications/statistical/health-survey-for-england/2022-part-1/adult-drinking>. [Accessed June 2025]

ⁱⁱⁱ Office for National Statistics. Alcohol-specific deaths in the UK: registered in 2023. 2025. <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/causesofdeath/bulletins/alcoholrelateddeathsintheunitedkingdom/registeredin2023> [Accessed June 2025].

^{iv} World Health Organisation, Alcohol Factsheet. 2022. <https://www.who.int/news-room/fact-sheets/detail/alcohol> [Accessed June 2025]

^v Institute of Alcohol Studies. The Costs of Alcohol to Society. 2023. <https://www.ias.org.uk/wp-content/uploads/2023/03/The-costs-of-alcohol-to-society.pdf> [Accessed June 2025]

^{vi} The Food Foundation. The Broken Plate. 2025. https://foodfoundation.org.uk/sites/default/files/2025-04/TFF_The%20Broken%20Plate%202025.pdf [Accessed June 2025]

^{vii} Obesity Profile: short statistical commentary May 2024 - GOV.UK

^{viii} Office for Health Improvement and Disparities. Obesity Profile: short statistical commentary May 2024. 2024. <https://www.gov.uk/government/statistics/update-to-the-obesity-profile-on-fingertips/obesity-profile-short-statistical-commentary-may-2024> [Accessed June 2025]

^{ix} Cancer Research UK. Overweight and obesity and cancer. 2019. <https://www.cancerresearchuk.org/health-professional/cancer-statistics/risk/overweight-and-obesity#heading-Zero> [Accessed June 2025]

^x Department of Health and Social Care. Government plans to tackle obesity in England. 2023. <https://healthmedia.blog.gov.uk/2023/06/07/government-plans-to-tackle-obesity-in-england/> [Accessed June 2025]

^{xi} NHS Digital. Health Survey for England, 2021 part 2. 2023. [https://digital.nhs.uk/data-and-information/publications/statistical/health-survey-for-england/2021-part-2/gambling#:~:text=In%202021%2C%2050%20of%20adults%20had%20participated,other%20lotteries\)%20in%20the%20last%2012%20months](https://digital.nhs.uk/data-and-information/publications/statistical/health-survey-for-england/2021-part-2/gambling#:~:text=In%202021%2C%2050%20of%20adults%20had%20participated,other%20lotteries)%20in%20the%20last%2012%20months) [Accessed June 2025]

^{xii} NHS Digital. Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England, 2023/4. 2025. <https://digital.nhs.uk/data-and-information/publications/statistical/adult-psychiatric-morbidity-survey/survey-of-mental-health-and-wellbeing-england-2023-24/common-mental-health-conditions> [Accessed July 2025]

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- ^{xiii} Centre for Mental Health. The Economic and Social Costs of Mental Ill Health. 2024. <https://www.centreformentalhealth.org.uk/publications/the-economic-and-social-costs-of-mental-ill-health/> [Accessed June 2025]
- ^{xiv} Office for National Statistics. Suicides in England and Wales: 2023 registrations. 2024. <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/suicidesinthekingdom/2023#main-points> [Accessed June 2025]
- ^{xv} Gambling with Lives. Written evidence submitted to the UK Parliament Culture, Media, and Sports Committee. 2023. <https://committees.parliament.uk/writtenevidence/118437/pdf/> [Accessed July 2025]
- ^{xvi} Office for National Statistics. Adult smoking habits in the UK: 2023. 2024. <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandlifeexpectancies/bulletins/adultsmokinghabitsintheuk/2023> [Accessed June 2025]
- ^{xvii} Action on Smoking and Health, ASH at 50: Nearly 8 million lives in the UK lost due to tobacco since 1971. 2021. <https://ash.org.uk/media-centre/news/press-releases/a-new-analysis-to-mark-the-50th-anniversary-of-ash-finds-that-smoking-killed-nearly-8-million-people-in-the-uk-over-the-last-50-years-with-an-estimated-2-million-more-expected-to-die-in-the-next-20-years-without-radical-ch> [Accessed June 2025]
- ^{xviii} NHS Digital. Statistics on Public Health, England 2023. 2024. <https://digital.nhs.uk/data-and-information/publications/statistical/statistics-on-public-health/2023/part-2-mortality> [Accessed June 2025].
- ^{xix} World Health Organisation. Tobacco control to improve child health and development: thematic brief. 2021. <https://www.who.int/publications/i/item/9789240022218> [Accessed June 2025]
- ^{xx} NHS Digital. Smoking, Drinking, and Drug Use among Young People in England, 2023. 2024. <https://digital.nhs.uk/data-and-information/publications/statistical/smoking-drinking-and-drug-use-among-young-people-in-england/2023> [Accessed June 2025]