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Every day is International Men's Day – *right?*

By [Robin Hadley](#)

It all happens in November when it comes to men. First, the whole month is '[Movember](#).' Second, every 19th November is [International Men's Day](#) (IMD). Finally, on the 23rd November this year is the [Men and Boys Coalition](#) National [Conference](#). They all have a common theme – they all are concerned about men and particularly men's health and well-being. The focus of this blog is on IMD. IMD originated in 1992 in Trinidad and Tobago and has since moved on to the world stage. The United Kingdom (UK) holds more IMD events than the rest of the world. In their [House of Commons Library Briefing Paper](#) the [Men and Boys Coalition](#) (MBC) describe IMD in the UK as consisting of three positive themes:

1. Making a positive difference to the wellbeing and lives of men and boys.
2. Raising awareness and/or funds for charities supporting men and boys' wellbeing.
3. Promoting a positive conversation about men, manhood and masculinity.

As Ally Fogg established in his piece '[International Men's Day: the seeds of a new movement](#),' IMD is often the subject of condemnation, hostility and mockery. Many individuals, government and council organisations, and employers ignore or rail against it. For example, Caitlin Moran in her Guardian piece, '[Caitlin Moran: what's gone wrong for men – and the thing that can fix them](#),' wrote, '..there is no semi-organised, progressive movement that habitually raises, and then campaigns in support of, solutions for male problems...'. In response, Ally Fogg ([@AllyFogg](#)) tweeted (or X'd), 'I chair a charity [@MBCoalition](#) which strives to do EXACTLY what she describes. We've been around since 2016 but had predecessors much further back...none of us are hugely high profile. The truth is we are all held together by a wing & a prayer because funders systematically deprioritise our sector, one recently told us our sector doesn't need support infrastructure because our sector doesn't exist... When we approach media outlets or send press releases, we are ignored because apparently no one is interested in these issues. It's an especially acute problem on the liberal-left, see the absolute refusal of any Labour MPs to participate in debates about men's health & wellbeing...Please imagine how much more constructive it would have been if [@caitlinmoran](#) had used this to say the campaigns and charities working

on these issues are desperately over-stretched and painfully underfunded and urgently need our support...rather than entirely ignoring and denying our existence. Maybe next time, eh?’

Critics often draw a false equivalence between IMD and International Women’s Day by construing that, ‘After all, every day is ‘Men’s Day.’ Except it isn’t, is it? Let’s do some facts and figures ([statistics from MBC website](#)):

- Males have a higher mortality across the lifecourse from conception until death.
- Men die at earlier age than women.
- Men are more likely than women to [die prematurely](#) and nearly one in five male deaths are under 65.
- 75% of all suicides are male: on average more than 13 men a day take their own lives.
- Black men are [17 times](#) more likely than white men to be diagnosed with a serious mental health illness.
- 86% of [rough sleepers](#) in England are male.
- 84% of the [“hidden homeless”](#) are male.
- In England between 2001-2009, men were 90% of those who [died while homeless](#).
- From 2013 to 2017, the number of UK homeless people [who died each year](#) more than doubled, 90% of which were men.
- In England and Wales, 95% of prisoners are male.
- Men are nearly [twice as likely](#) as women to be a victim of violent crime and among children, boys are more likely than girls to be victims of violence.
- Over two thirds of [murder victims](#) are male.
- Men make up 73% of [robbery](#) victims.
- Men have a 37% higher risk of [dying from cancer](#) overall.
- Men are 56% more likely to develop non-gender specific cancers than women and 67% more likely to die from them.
- On average [11,714 men die](#) of prostate cancer every year (2014-2016) – one man dying every 45 minutes. For full statistics see [Prostate Cancer UK](#).
- 1 in 4 black men will get [prostate cancer](#) at some point in their lives.
- Men are less likely than women to acknowledge illness or to [seek help](#) when sick.

- Men aged 20-40 are half as likely to go to their GP as women of the same age.
- Men are [more likely](#) than women to drink alcohol and drink at hazardous levels.

The data on father's fertility history isn't recorded at the registration of a birth in the UK (and in most of the world). Consequently, childless men do not exist as a 'category' and the data on the effect of male childlessness on issues related to health, mortality and well-being is extremely difficult to locate. However, my research shows that childlessness impacts on men:

- Recently, I did a 'quick and dirty' analysis of the data in The National Confidential Inquiry into Suicide and Safety in Mental Health (Appleby, et al., 2021). The section 'Suicide by middle aged men' seems to indicate that over 60% (38% were parents) of the cases were childless at the time of their suicide.
- Older childless men have smaller social networks and poorer behaviours in terms of health, diet, self-care, and well-being than those married with children. Fathers have higher incomes than childless men, regardless of their partner history. Childless men have higher mortality risks than fathers (Dykstra and Keizer, 2009, Keizer, et al., 2009).
- Unmarried and childless men face greater risks of poor midlife physical function (functional decline) in than married men with children. There were no differences in outcomes among women (Guralnik, et al., 2009).
- A Norwegian study found childless men in late middle age had higher mortality than fathers (Grundy and Kravdal, 2010).
- An Australian study found that men, five years after a diagnosis of infertility, who did not become fathers suffered poorer mental health compared to men who become fathers (Fisher, et al., 2010).
- A Swedish study showed that lone childless men and lone non-custodial fathers, had an increased risk of death through suicide, addiction, injury, external violence, poisoning, lung, and ischemic heart disease. The authors argued that the that higher mortality rate was connected to emotional instability and willingness to take risks, while parenting moderated risk-taking behaviour (Weitof, et al., 2004).
- A Swiss population study indicated that generally, men had over twice the rate of unassisted suicide and a similar level of assisted suicide compared to women:

accounting for underlying health problems (for example, cancer) the rate for unassisted suicide for men was nearly five times the rate for women (Steck, et al., 2018).

- A British study found circumstantially childless men reported having experienced depression with 80% stating that childlessness was an element in their mental health issues (Hadley and Hanley, 2011). Similarly, childless men reported being more depressed and lonelier than equivalent women (Hadley, 2019, Hadley, 2020).
- A study of North American coworkers revealed divorced, widowed, and never-married childless men reported higher rates of loneliness compared with women in similar circumstances (Zhang and Hayward, 2001).
- Divorced, and widowed childless men demonstrated higher rates of depression than divorced and widowed women (Zhang and Hayward, 2001).
- A tri-country study found connections between poor health behaviour and elderly childless people, with formerly married childless men having poorer physical health, smoking, depression and sleeping difficulties than partnered men (Kendig, et al., 2007).
- Dutch data demonstrated that single non-parent men aged 45–59 were poorer socio-economically and psychologically compared to men in relationships (Dykstra and Keizer, 2009).
- Contemporary studies identify a decline in sperm efficacy from the age of 35 onwards. Environmental and occupational contaminants have a detrimental effect on sperm quality and egg development. Working class men are more likely to work in hazardous jobs (Hadley, 2021, Tomova and Carroll, 2019).
- There is an untested and unprovable assumption that men are disengaged from and uninterested in, matters of human reproduction. This attitude has become structurally embedded in policy, the media and academia (Inhorn, et al., 2009, Inhorn, et al., 2009).
- Prof Cynthia Daniels argues that ideal masculine norms have systematically reduced, and hidden men's reproductive vulnerability, reinforces gender stereotypes and distorts the role of men in reproduction. Men are socially conditioned to believing that showing vulnerability is a weakness. This leads to both a profound neglect of

male reproductive health and a distorted view of men's relationship to family, fatherhood, relationships, and reproduction (Daniels, 2002, Daniels, 2006).

- Men view health as central to quality of life (Hadley, 2021: p196; p.203).

William Collins (2019) argues that there is an 'empathy gap' when it comes to men and boys. There is good evidence of institutional ambivalence regarding men: in 2008 the NHS introduced a routine vaccination programme against human papillomavirus (HPV) for girls aged 12–13. HPV causes serious diseases in both sexes. However, only after campaigns by health professionals and special interest groups was a vaccination programme for boys aged 12–13 started in September 2019 (Hadley, 2021: p. 241). Similarly, patients who do not conform to traditional masculine gender norms have been viewed as lesser by staff in health and care settings (Hadley, 2021: p. 274). The exclusion of father's fertility history at the registration of a birth means that in the UK (and most other countries) it is impossible for government agencies to have accurate and up to date statistical evidence of the level of childless men in the population. This has serious implications for future provision of services and is particularly critical for health and social care policy and practise (Hadley, 2018, Hadley, 2019, Hadley, 2021, Hadley, 2021, Hadley, 2023).

Is there a need for IMD? Yes. Is it a threat? Back to Ally Fogg and his 2012 [Guardian piece](#), 'There may be feminists who find it threatening. I believe that is misplaced...I believe a unified men's sector can not only peacefully co-exist with the women's movement, but actually complement it. Feminists want an end to male violence and criminality? So do I. Feminists want equality in the home and the workplace? So do I. The old refrain "patriarchy hurts men too" is undoubtedly true but it is not a solution. It implies that all we need to do is achieve full social justice for women and male-specific problems will simply wither away. That's not only a bit daft in theory, it is patently not working in practise. Men's issues must be considered alongside women's issues, not least because our lives and welfare are intertwined. Perhaps the single most encouraging statement I heard at the conference was Mark Brooks of domestic violence charity the [Mankind Initiative](#) stressing that they only ever argue for male victims to be helped in addition to, never instead of, services offered to women. To steal from Petra to pay Paul is not only morally abhorrent, but (deservedly) an unwinnable argument.'

On November 19th, [IMD](#) sets out to celebrate ‘the positive value of men’ and ‘highlight positive role models’ and ‘raise awareness of men’s wellbeing.’ Their theme for 2023 is ‘ZERO MALE SUICIDE’.

Links to podcasts with professionals talking about IMD:

- [The Locked-up Living Podcast](#): Interviews MBC chair Ally Fogg: ‘How do we think about men, and women the relationships between them and their social context?’ Click [here](#) to hear the episode.
- [The Sociology Show](#): [Dr Ashley Morgan](#) talks about IMD, the purpose of the movement, the key issues behind it and why it is an important issue for everyone in society. Click [here](#) to hear the episode.

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