Study on the Role of Men in Gender Equality:

Background and Discussion Papers for Workshop 3:

Involving Men in Gender Equality

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1 Background paper

Men's Involvement in Gender Equality - Three Sides of a Coin

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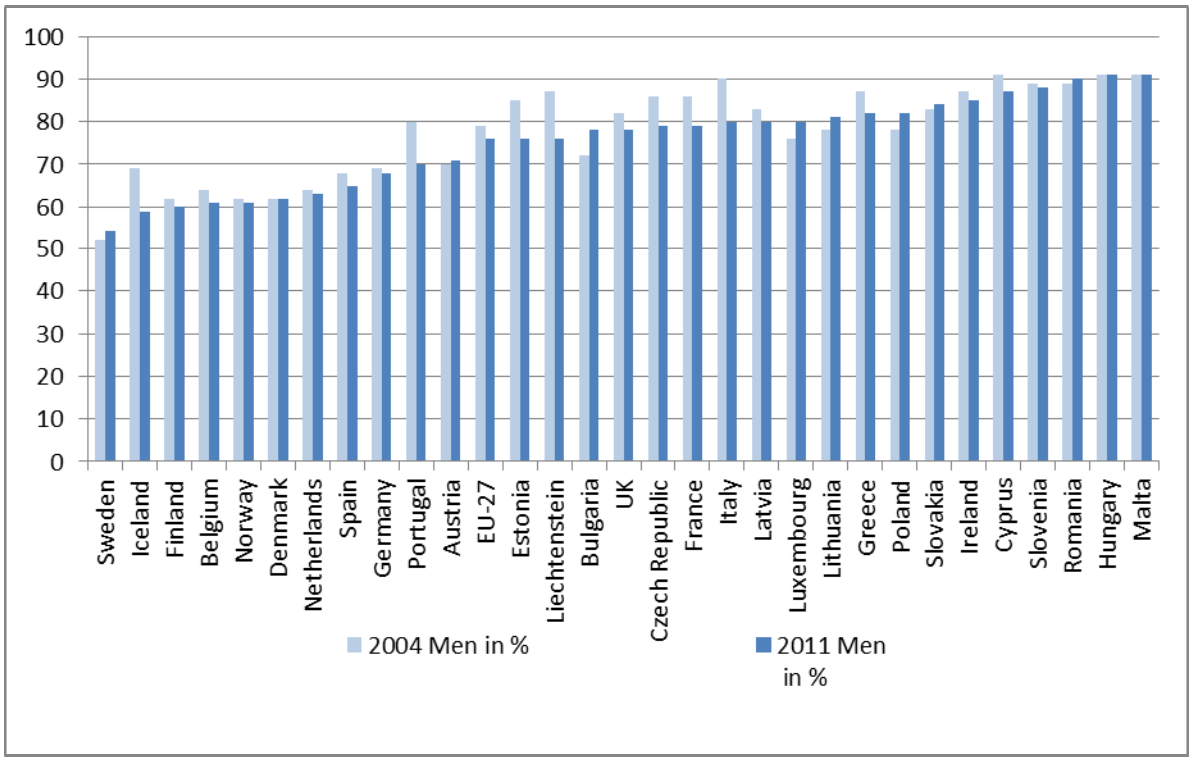
Introduction: Why should men bother about gender equality?

Do men lose power and privileges if they support gender equality processes in a proactive way? Do they lose the "patriarchal dividend" (Connell 2005), the societal advantage men gain "from the overall subordination of women" (p. 79), when gender systems change and more equal conditions emerge? Empirical research shows how gender equality in organizations is hindered by men (Höyng & Puchert, 1998) or how gender equality processes are contextualised in a way, in which "gender means women" (Holter, Riesenfeld & Scambor 2005). The possible loss of privileges may be one of the biggest barriers of men's involvement in equality processes and it may lead to high pressure toward conformity among men against men's engagement in gender equality issues (Meuser 2000).

Institutionalized privileges

On the level of data, privileges of men can be found in many areas throughout many countries. As an example for privileges, data on political participation are given below (figure 1, figure 2 below and table 4, table 5 annex). In all countries, men's proportions are higher than women's. Although slight changes can be noted in most of the countries, political participation is still far from being gender equal (with exceptions mainly in the Nordic region, but also France, Spain and Belgium).

Figure 1: **Male members of parliament (%) single/lower house and upper house, 2004 and 2011**



Source: European Commission, DG Justice, Database on women and decision-making; extracted on 9.Dec 2011

Figure 2: **Male members of representative assemblies of regional authorities that are endowed with self-government, 2004* and 2011**

Source: European Commission, DG Justice, Database on women and decision-making; extracted on 9.Dec 2011; some countries are missing, because concept not applicable for all countries; * Denmark and Romania: figures 2003; Latvia: figures 2007

Gender Mainstreaming, the current European main strategy towards gender equality, has been introduced and implemented to make a change regarding these gender disparities. Different to former equality politics with their focus on inequality on the labour market and

the promotion of women, Gender Mainstreaming explicitly included women and men, embracing all kinds of policy fields.

> "Gender mainstreaming is the integration of the gender perspective into every stage of policy processes – design, implementation, monitoring and evaluation – with a view to promoting equality between women and men. It means assessing how policies impact on the life and position of both women and men – and taking responsibility to re-address them if necessary. This is the way to make gender equality a concrete reality in the lives of women and men creating space for everyone within the organisations as well as in communities – to contribute to the process of articulating a shared vision of sustainable human development and translating it into reality." (European Commission, n.d.)

The role of men in *Gender Mainstreaming* has been discussed in different ways (Scambor & Scambor 2008). In the beginning of the process, especially stakeholders in women's institutions argued that resources should be exclusively used for women's promotion and were worried about men involved in gender equality processes. In different European countries, Gender Mainstreaming and gender equality in general were framed as a "women's issue" (Holter 2003, p. 145; Hearn 2001). Men were left out – however, with big differences between countries. E.g. concerning Sweden, Holmgren and Hearn (2009) outline the situation of men, feminism and gender equality as follows:

> "In Sweden the F-word is respectable to the extent that even a former male prime minister and the conservative male minister of finance can call themselves 'feminist'. The national and regional context is characterised by, amongst other things, state feminism and a qualified consensus on the value of gender equality as a political goal and general norm, which tend to generate a broadly positive place for men in and around feminism..." (p. 404).

The Nordic region has been regarded as the most advanced in terms of gender equality for a long time, but it was also argued that the changes are only partial. Concerning men, Holter (2003) points out: "Men need to be included on the map, both in terms of problems and barriers and in terms of possibilities and choices" (p. 145).

Nevertheless, some efforts have been made to integrate men in gender equality processes, research projects on men and gender have been funded by the EC, various initiatives have emerged, and bigger[1] as well as smaller[2] conferences on men and gender issues have taken place. An example: The Austrian Conference on Men 2011 focused on "Diversity of Masculinities". Different concepts of masculinities were discussed in the light of the current social discourse in the field of work on men and masculinity issues. The conference provided a setting for the presentation of research-based results, practical concepts and approaches in the work on men. It opened a perspective that elaborates the complex relations between women and men as well as between different masculinities, and aimed at analysing the interdependence with other social issues such as migration and social situation. The Austrian Conference on Men 2011 has shown a high interest in the topic of "Diversity of Masculinities", especially among female participants. An unexpected high number of people took part at the conference and a great diversity among participants

[1] E.g. the conference „Men and Gender Equality" in Helsinki 2006 (see Varanka, Närhinen & Siukola, 2006).

[2] E.g. the Austrian Conference on Men in October 2011.

(gender, age, migration) could be observed. Half of the participants were male, half female (scientists, stakeholders, etc.), interested in approaches and attitudes in the involvement of men in gender equality. http://maennertagung2011.mur.at

Arguments for men's interest in gender equality

The focus on men regarding *gender* equality always includes women at the same time. The term *gender* implies its relational characteristic, and "... patterns of masculinity are socially defined in contradistinction from some model (whether real or imaginary) of femininity" (Connell & Messerschmidt 2005, p. 848). New configurations of men's or women's identities, new practices and life styles have a specific effect on gender orders and hierarchies. The historical "interplay of femininities and masculinities" (Connell & Messerschmidt 2005, p. 848) has been strongly influenced by the change of women's participation in society in the last 50 years, which has been increasingly accepted and acknowledged. Now, the role of men is changing, and we should be aware of proactive processes as well as pitfalls, as gender relations are continuously "arenas of tension(s)" (Connell & Messerschmidt 2005; p. 848). Gender as relational practice contextualises the arguments for the involvement of men in gender equality processes.

Connell (1987) gave an early list of "reasons for change ... to detach heterosexual men from the defence of patriarchy" (p. xiii):

> "(1) Even the beneficiaries of an oppressive system can come to see its oppressiveness, especially the way it poisons areas of life they share. (2) Hetereosexual men are often committed in important ways to women – their wives and lovers, mothers and sisters, daughters and nieces, co-workers – and may desire better lives for them ... (3) Heterosexual men are not all the same or all united, and many do suffer some injury from the present system ... (4) Change in gender relations is happening anyway, and on a large scale. A good many heterosexual men recognize that they cannot cling to the past and want some new directions. (5) Heterosexual men are not excluded from the basic human capacity to share experiences, feelings and hopes. This ability is often blunted ... The question is what circumstances might call it out. Being a father often does; some political movements, notably the environmental and peace movements, semm so; sexual politics may do so too." (Connell, 1987, p. xiii)

Another classic list of positive reasons for men's engagement in gender change was given by Hearn (1987) in the same year:

> "... Hearn concluded (1987) with six 'material reasons for men to change against patriarchy': increased possibilities of love, emotional support and care for and from other men; benefits from increased contact and work with children; improved health; creation of conditions for transformation of capitalism; avoidance of other men's violence and fear of men, killing, being killed; and reduction of the likelihood of nuclear annihilation." (Holmgren & Hearn 2009, p. 415).

More recent formulations of possible interests of men in gender equality are based on various perspectives, e.g. on general views like social justice and democracy. Villa and

Lenz (2006) have pointed out that structural inequalities between men and women don't discriminate against women only, but are linked to a fundamental democratic deficit. "If gender relations are unequal in structural terms, then equality of all people in a social structure (e.g., a national state) is not realized. In principle this concerns all people" (Villa & Lenz, p. 268; authors' translation).

Costs of masculinity

In connection with the unequal distribution of production and reproduction work among men and women, Holter (2003) has introduced the idea of gender discrimination against men in connection with the division of labour.

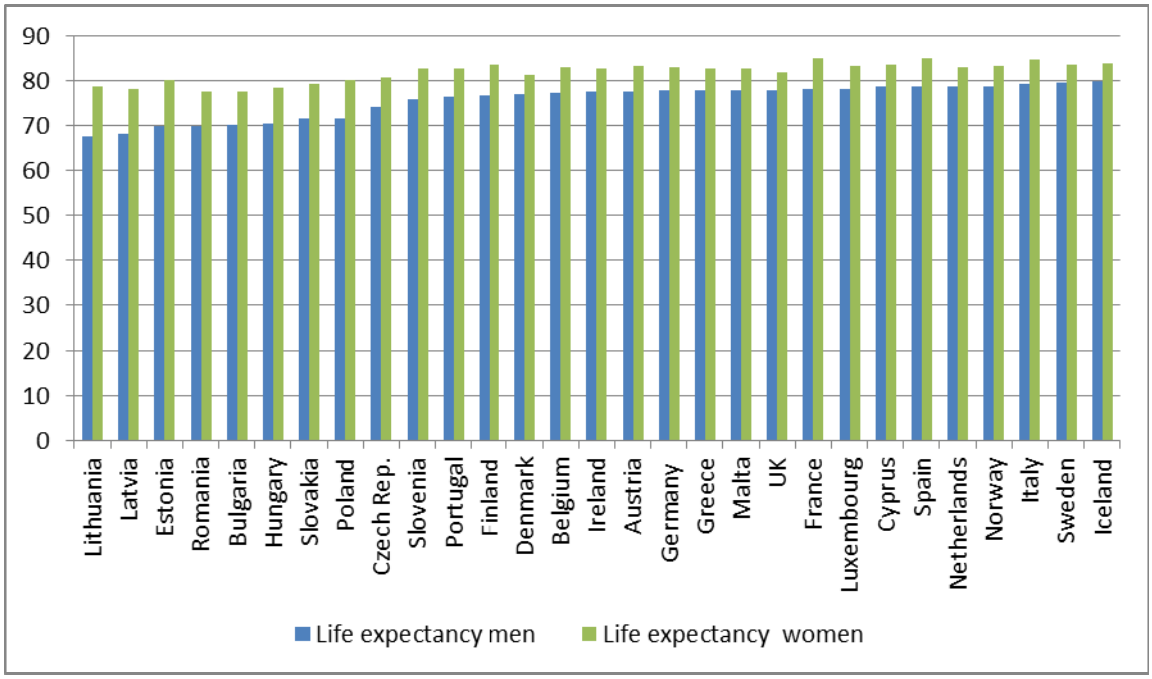
> "Contemporary social changes make discrimination against men as caregivers more visible than before, but there is also a more traditional form of discrimination, often discussed in terms of the male role and associated with a cultural theme where men and boys are seen as 'expendable'. Men, therefore, have an *interest in gender equality that goes beyond their relationships to women* even if it is deeply related to these relationships. Men can develop gender-equal views and behaviours that are based on their own experiences and interests." (Holter 2003, p. 182)

Böhnisch (2000, 2003, 2004) has proposed the concept of *externalization* as a central principle of male sociation. In general, societies create those gender identities which they need for their functioning. In the industrial-capitalist countries of the last two centuries, the male socialization process has fostered male identities that have been appropriate for industrial production and wars. According to Böhnisch, externalization results in suppressing devaluated inner states (fear, feeling of weakness), and results in an outside orientation toward acting and activity. These disciplining processes have connected men to society's aims and have prepared them for a total exposure to the production sphere. In this way, men have been sociated in a reduced, one-sided way, only in terms of production, whereas women are sociated in a two-fold way: production and reproduction. This reduced exposure of men to the production sphere limits the scope of development as a human being; it has brought along advantages in terms of economic power over women, but for the prize of the loss of integration into the reproduction sphere. Depending on country, men who transgress the gender order are still exceptions (Puchert, Gärtner & Höyng 2005). Furthermore, men's externalization contributes to a wide range of problems (e.g., health problems, risk taking, violence, etc.). It is an open question whether the patriarchal dividend (Connell 2005) can really compensate for this kind of reduction of quality of life.

As a referring example, data on life expectancy are given below. In all countries, life expectancy of men is lower than that of women (figure 3 below, table 6 annex), with some improvement in the last decade (figure 4 below). Premature deaths of men can be linked to a variety of reasons, among them the perception of oneself as the hard, expendable, outgoing type (Holter 2003) and less self-care, a higher level of risk-taking behaviour (e.g. concerning deathly traffic accidents) or relatively high rates of suicide. See the working paper by Alan White and Gary Raine on the report "The State of Men's Health in Europe" (European Commission 2011), in which the topic of men's life expectancy and health is explored further.

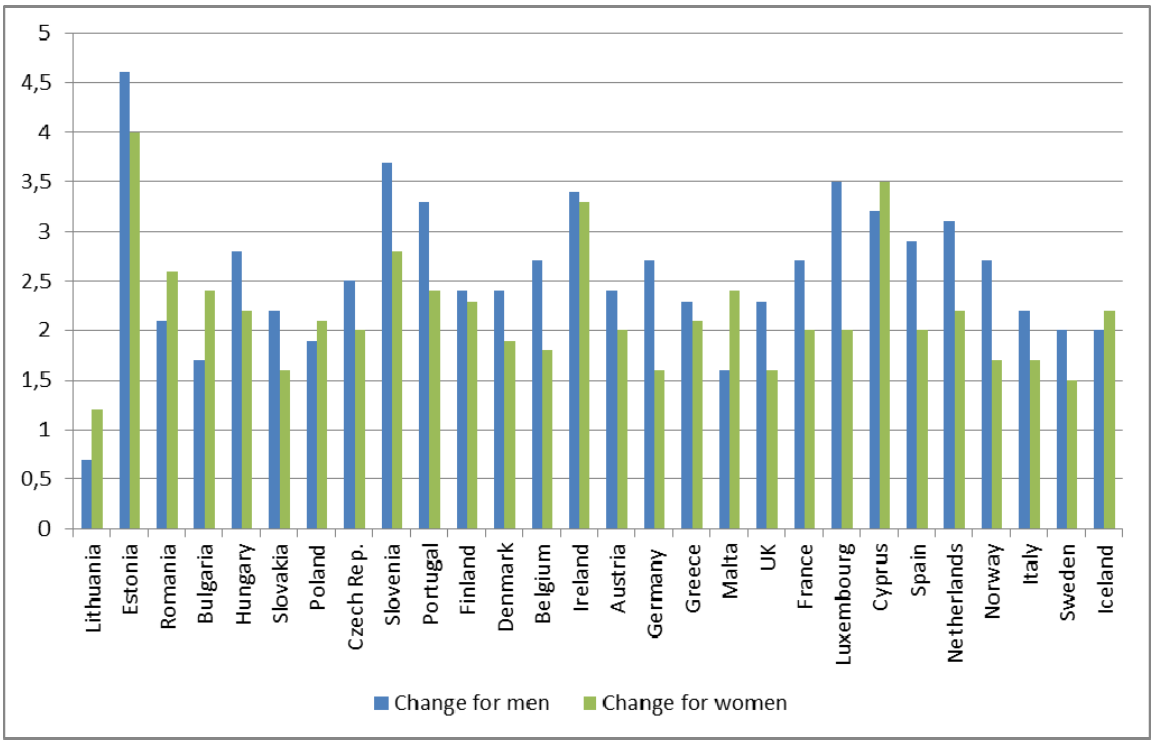
As this example shows, data that seem to show collective disadvantages of men compared to women need a broad interpretation because the phenomena on the data level are linked to the way in which the genders are organized in our societies. The bare data will not tell us what measures will be useful and meaningful to tackle the roots of the problems.

Figure 3: Life expectancy in absolute value at birth by gender, 2009*



Source: Eurostat (online data code: hlth_hlye); extracted on 1.Dec 2011; * figures UK and Italy: 2008; own calculations.

Figure 4: Change in life expectancy by gender between 2000 and 2009*



Source: Eurostat (online data code: hlth_hlye); extracted on 1.Dec 2011; * figures UK and Italy: 2008; own calculations.

Interpersonal violence (IPV) is another central area where the negative sides of male socialization become apparent. As the report *The State of Men's Health in Europe* (European Commission 2011) says (regarding non-fatal injuries; data from hospital emergency departments),

> "With the exception of sexual violence (for which 90% of victims are women), the vast majority of interpersonal violence victims are male and the perpetrators of violence are also predominantly male (72%) ... although clearly, not all men are violent." (p. 284)

Concerning male socialization, the report summarizes, "... that it is predominantly men who hold and use violence to sustain their dominance. A number of studies ... have linked traditional male gender roles and hegemonic masculinity with violence, and with a much greater propensity for men to be perpetrators and victims of violence" (European Commission 2011, p. 284). While men are more likely to become victims of mostly men's violence in public places, women are more at risk in their close social environments:

> "Data from individual Member States would suggest that the prevalence of domestic violence is somewhere between 5% and 20% of all current heterosexual relationships, with women being substantially more likely to be victims and men substantially more likely to be perpetrators..." (European Commission 2011, p. 289).

Hearn (2001) emphasizes the connection of violence and equality, and points to the responsibility of men to stand up against violence: "Another clear area of responsibility for men is to stop men's violence. Violence always means denying equality and voice to someone else; violence is profoundly unequal and undemocratic." (p. 17)

As far as data on interpersonal violence are concerned, "...a dearth of data in relation to the prevalence of IPV across the EU" (European Commission 2011, p. 289) has to be considered. In fact, the situation regarding data on violence in general makes a scattered impression. Due to differences in definition of violence, samples and methods, data from various prevalence studies cannot be compiled.

> "In order to compare levels of interpersonal violence between countries and social groups it is necessary to assess carefully how prevalence surveys were carried out in order to determine methodological similarities and differences. The results of this analysis indicate that, at present, it is not possible to directly compare the prevalence rates of specific forms of interpersonal violence between different European countries because the existing studies have many important methodological differences." (Martinez & Schröttle 2006b, no page number)

Definitions of violence in different studies can include physical, sexual, psychic violence; various instruments are used to measure the respective prevalence, either in a given period of time (e.g. in the last 3 years; in childhood, youth or adulthood) or referring to the respondent's whole lifetime. Studies and data may contain more or less information regarding the perpetrators of violence. Various populations have been the in focus of prevalence surveys, mostly women, children and youth as victims; some additional studies have gathered data on violence against men, homosexuals and bisexuals, people with disabili-

ties and immigrant, migrant and minority women (for an overview, see Martinez & Schröttle 2006a). As far as violence against men is concerned, Martinez et al. (2007) conclude, “Standards for research on violence against men have yet to be developed” (p.13).

Differences of Masculinities

Different concepts of masculinity and their impacts will be discussed in the light of the current social discourse and analysis in the field of education. Early school leavers have increased in the last 10 years in most of the European countries. This phenomenon affects men in general and it especially affects specific groups of men. The following part of the paper shows relevant data on the phenomenon and points to selected study results, which contextualise and help to understand the differences among men.

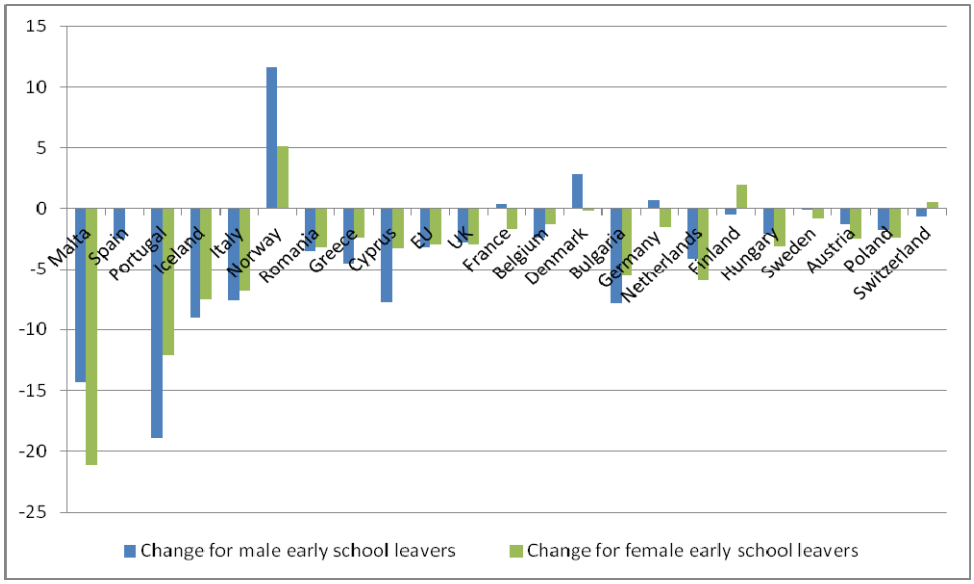
As table 1 shows, the rate of male early school leavers is higher than the rate of women in almost all the European countries (except of Germany and Austria in 2001; except of Switzerland in 2010). Southern European countries like Malta, Portugal or Spain show the highest rates of male early school leavers with comparable high gender gaps in Spain and Portugal. Low rates of male early school leavers are found in Switzerland, Austria and Central/Eastern European countries like Poland or the Czech Republic. While the rate of early school leavers decreased from 2001 until 2010 in most of the European countries, an increase of male early school leavers is found in Norway (strong increase), Demark, Germany and France (all slightly increased; see figure 5).

Table 1: **Early school leavers by gender (percentage of the population aged 18-24 with at most lower secondary education and not in further education or training), 2001 and 2010.**

GEO/TIME	2001			2010			2001-2010		
	Men	Women	Gender Gap	Men	Women	Gender Gap	Change in Gender Gap	Change for men	Change for women
EU	19,2	15,2	-4	16	12,2	-3,8	0,2	-3,2	-3
Belgium	16,2	11,3	-4,9	13,8	10	-3,8	1,1	-2,4	-1,3
Bulgaria	21	20	-1	13,2	14,5	1,3	2,3	-7,8	-5,5
Czech Rep.				4,9	4,8	-0,1			
Denmark	10,8	7,7	-3,1	13,6	7,5	-6,1	-3	2,8	-0,2
Germany	12	12,6	0,6	12,7	11	-1,7	-2,3	0,7	-1,6
Greece	21	13,2	-7,8	16,5	10,8	-5,7	2,1	-4,5	-2,4
Spain	36	23,1	-12,9	33,5	23,1	-10,4	2,5	-2,5	0
France	15	12	-3	15,4	10,3	-5,1	-2,1	0,4	-1,7
Italy	29,6	22,2	-7,4	22	15,4	-6,6	0,8	-7,6	-6,8
Cyprus	23,9	13,1	-10,8	16,2	9,8	-6,4	4,4	-7,7	-3,3
Hungary	13,6	12,6	-1	11,5	9,5	-2	-1	-2,1	-3,1
Malta	55,3	53,5	-1,8	41	32,4	-8,6	-6,8	-14,3	-21,1
Netherlands	16,3	13,8	-2,5	12,2	7,9	-4,3	-1,8	-4,1	-5,9
Austria	9,7	10,7	1	8,4	8,2	-0,2	-1,2	-1,3	-2,5
Poland	9	5,9	-3,1	7,2	3,5	-3,7	-0,6	-1,8	-2,4
Portugal	51,6	36,7	-14,9	32,7	24,6	-8,1	6,8	-18,9	-12,1
Romania	22,1	21,4	-0,7	18,6	18,2	-0,4	0,3	-3,5	-3,2
Finland	12,1	7,1	-5	11,6	9	-2,6	2,4	-0,5	1,9
Sweden	11	9,3	-1,7	10,9	8,5	-2,4	-0,7	-0,1	-0,8
UK	18,6	17	-1,6	15,8	14	-1,8	-0,2	-2,8	-3
Iceland	35	26,5	-8,5	26	19	-7	1,5	-9	-7,5
Norway	9,7	8,1	-1,6	21,4	13,2	-8,2	-6,6	11,7	5,1
Switzerland	6,7	6,5	-0,2	6,1	7	0,9	1,1	-0,6	0,5

Source: Eurostat, LFS (online data code: tsisc060); extracted on 19.Sep 2011; for Estonia, Lithuania, Luxembourg and Slovenia no reliable data are available; own calculations.

Figure 5: **Change for male and female early school leavers by gender between 2001 and 2010, percentage**



Source: Eurostat, LFS (online data code: tsisc060); extracted on 19.Sep 2011; some countries are missing where no data for 2001 are available.

To explain the higher rates of male early school leavers, we can make use of qualitative research. Phoenix and Frosh (2005) pointed out that important characteristics of masculinity as social practice are strongly influenced by socio-economic status. Qualitative interviews with boys in schools in London, both in the private ("independent") and state education sector, exposed different aspects of "doing boy" and "being a man" in both worlds. Boys in educational disadvantaged positions, who are predominantly part of the state education system in London, show different targets and future perspectives than boys in private schools. Physical power, attractiveness and coolness form important attributes of masculine orientation patterns of boys in state schools, while intelligence, success and career shape the appropriate patterns of boys in private schools. And these characteristics prepare and shape their future perspectives.

When conducting complex and extensive research on masculinities' representations among pupils from British schools, Ann Phoenix (2008) used the concept of *intersectionality*. One of the most important conclusions drawn from using the intersectional approach shows that boys have to use different types of behavioural strategies which make it possible for them to switch between different roles such as "good student" and "cool lad". During that process they have to construct their male identities by using and (re)defining social categories such as their race, class or sexual orientation. According to Phoenix, "… the intersection of racialisation and masculinities in British schools mean that boys have to manage their everyday school interactions in the context of complicated, multiple positioning that means that they expend a great deal of energy in competing with each other and avoiding being teased. Masculinity is thus a 'practical accomplishment' (Connell 1995) that is racialised and where power relations are evident and contradictory" (Phoenix 2008, p. 36).

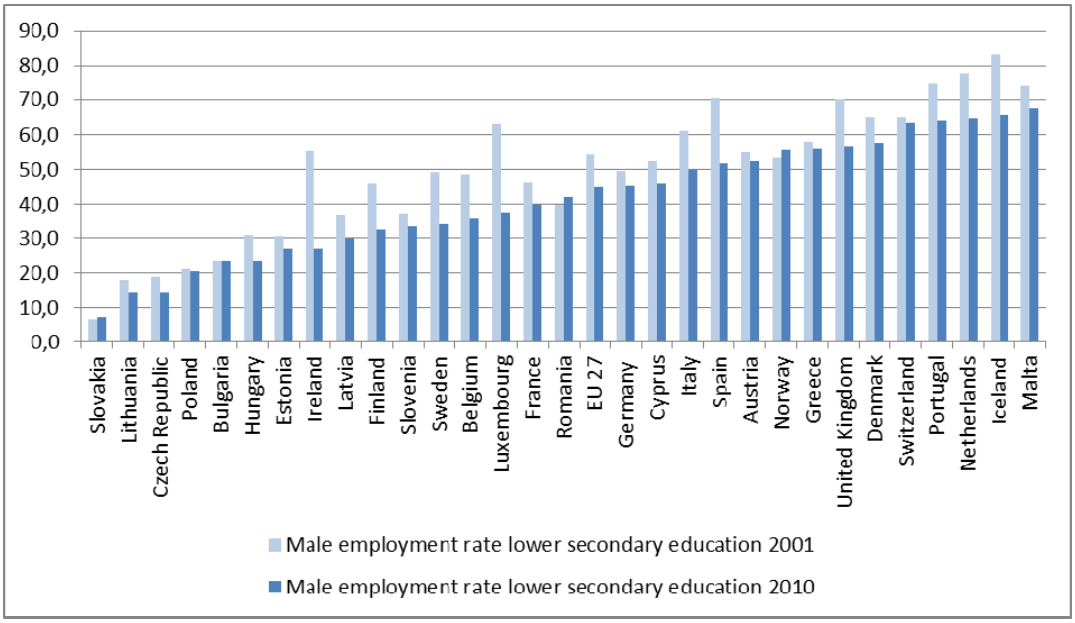
As Helfferich et al. (2009) have shown, devaluation of educational success may be seen as important collective strategy towards the construction of superior masculinity. Qualitative analysis with boys and young men (Germany) in educational disadvantaged positions shows (Helfferich et al., 2009), that they tend to be aware of their precarious situation in society. They mostly know, that a wide range of different occupations (e.g. such as white-collar-occupations) are not available and just not realistic for them. Helfferich et al. (2009) identified three main strategies, how boys tend to go on with that situation: Some try to improve their educational qualification, which is seen as a less favoured strategy. Some seem to be content with their marginalized future perspective on the labour market (blue collar worker, cab driver, and others). Some show a rather ironical and offensive strategy referring to their labour market position ("pimp", "dealer"). Especially young adolescent boys tend to devalue educational success ("careerist") collectively, while they are individually confronted with their own societal devalued labour market perspective at the same time. Helfferich et al. (2009) points to a collectively constructed form of superior masculinity as results of a common devaluation of educational success through men in educational disadvantaged positions.

Age seems to influence this process, as the value of education and work tends to increase especially for young men. The orientation on adult masculinities and, at the same time, the orientation on family roles (e.g. male-breadwinner) increases the value of work and education (Helfferich et al. 2009, p. 86).

As figure 6 and table 2 show, lower secondary education increasingly results in lower employment rates, compared to higher levels of education (from upper secondary to tertiary

education). As can be seen, the precarious labour market position of low educated men has become worse in the last ten years: In almost all European countries, the employment rate of men decreased due to structural changes on the labour market (decrease of blue collar work, increase of tertiary sector) and economic crisis. These changes are connected to the level of education: Lower educated men are far more affected than men with higher levels of education.

Figure 6: **Employment rates (in %) 15 to 39 years old men with at most lower secondary education, 2001 and 2010**



Source: Eurostat, LFS (online data code: lfsa_argaed); extracted on 9.Dec 2011; Netherlands and Switzerland: break in series.

Table 2: Employment rates (in %), 15 to 39 years old men by level of education attained, 2001 and 2010.

	At most lower secondary education			Upper secondary and post-secondary non-tertiary education			First and second stage of tertiary education		
GEO/TIME	2001	2010	Change	2001	2010	Change	2001	2010	Change
EU 27	54,4	44,9	-9,5	75,8	72,5	-3,3	88,8	85,9	-2,9
Belgium	48,5	35,4	-13,1	73,7	68,7	-5,0	89,6	86,1	-3,5
Bulgaria	23,3	23,3	0,0	60,9	68,6	7,7	86,1	90,4	4,3
Czech Repub.	18,7	14,3	-4,4	84,2	81,4	-2,8	93,0	88,1	-4,9
Denmark	64,9	57,6	-7,3	84,6	80,4	-4,2	90,7	89,3	-1,4
Germany	49,4	45,2	-4,2	81,9	78,5	-3,4	94,1	92,8	-1,3
Estonia	30,4	26,7	-3,7	75,8	67,6	-8,2	91,4	85,9	-5,5
Ireland	55,2	26,8	-28,4	81,8	61,3	-20,5	91,6	82,2	-9,4
Greece	57,8	55,9	-1,9	68,1	65,6	-2,5	85,6	83,1	-2,5
Spain	70,5	51,6	-18,9	62,0	59,6	-2,4	81,2	79,1	-2,1
France	46,1	39,7	-6,4	76,9	71,5	-5,4	83,1	83,4	0,3
Italy	61,1	49,7	-11,4	68,7	69,0	0,3	85,3	74,8	-10,5
Cyprus	52,3	45,8	-6,5	82,2	76,0	-6,2	95,3	86,6	-8,7
Latvia	36,5	29,7	-6,8	70,4	64,5	-5,9	91,9	85,1	-6,8
Lithuania	17,9	14,2	-3,7	66,9	53,2	-13,7	83,2	85,9	2,7
Luxembourg	63,0	37,4	-25,6	82,4	75,1	-7,3	90,6	91,9	1,3
Hungary	30,8	23,3	-7,5	75,3	69,8	-5,5	94,9	87,8	-7,1
Malta	73,8	67,5	-6,3	76,2	75,5	-0,7	89,4	90,1	0,7
Netherlands	77,8	64,6	-13,2	90,8	83,8	-7,0	95,7	91,4	-4,3
Austria	54,9	52,4	-2,5	86,4	84,0	-2,4	93,3	92,6	-0,7
Poland	21,0	20,4	-0,6	68,6	74,3	5,7	89,7	89,1	-0,6
Portugal	74,9	63,8	-11,1	63,9	64,7	0,8	93,7	82,1	-11,6
Romania	39,6	42,1	2,5	73,5	67,2	-6,3	89,9	84,3	-5,6
Slovenia	36,7	33,4	-3,3	77,9	74,7	-3,2	94,1	91,4	-2,7
Slovakia	6,6	7,2	0,6	69,5	72,6	3,1	89,7	81,6	-8,1
Finland	45,9	32,3	-13,6	80,0	74,7	-5,3	94,9	91,8	-3,1
Sweden	49,1	34,0	-15,1	82,8	78,5	-4,3	84,0	87,1	3,1
UK	70,1	56,6	-13,5	82,4	72,4	-10,0	92,7	88,9	-3,8
Iceland	83,4	65,6	-17,8	89,6	75,8	-13,8	94,9	90,1	-4,8
Norway	53,4	55,4	2,0	84,1	81,0	-3,1	88,2	90,8	2,6
Switzerland	64,9	63,3	-1,6	89,4	84,2	-5,2	96,6	92,9	-3,7

Source: Eurostat, LFS (online data code: lfsa_argaed); extracted on 9.Dec 2011; Netherlands and Switzerland: break in series; own calculations.

Are all the boys and young men losers in education?

As in depth analysis shows, boys with migration background are predominantly affected by troubles in school (learning trouble, repeating classes, and others) as well as low educational degrees (Table 3).

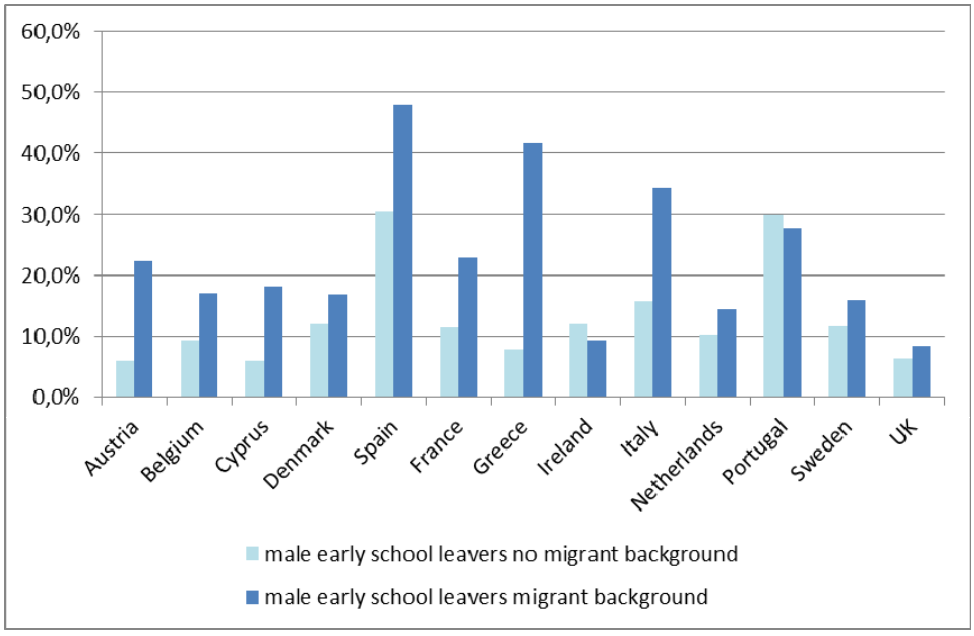
Table 3 shows people aged between 15 and 24 with at most ISCED level 0-2 and no further education during last 4 weeks. Southern European countries with high rates of male early school leavers (see table 1) show a high gap between early school leavers without and with migration background (except Portugal). Spain, Greece and Italy show the highest rates of male early school leavers with migration background, while northern European countries show comparable low rates. It is obvious that the gap between migrant and non-migrant early school leavers is higher for girls/young women than for boys/young men in most of the countries presented in table 3.

Table 3: **Early school leavers by gender (percentage of the population aged 15-24 with at most lower secondary education and not in further education or training) by country, migrant background and sex, 2009**

	Percentage of male early school leavers		Percentage of female early school leavers	
	no migrant background	migrant background	no migrant background	migrant background
Austria	6,0%	22,4%	5,6%	22,6%
Belgium	9,3%	17,1%	6,1%	15,4%
Cyprus	6,0%	18,2%	-	22,8%
Denmark	12,0%	16,8%	7,5%	-
Spain	30,3%	48,0%	18,8%	34,6%
France	11,5%	22,8%	7,9%	21,1%
Greece	7,9%	41,6%	4,6%	29,1%
Ireland	12,0%	9,3%	7,0%	9,3%
Italy	15,8%	34,3%	10,0%	31,6%
Netherlands	10,4%	14,4%	6,7%	10,5%
Portugal	29,9%	27,7%	19,1%	17,9%
Sweden	11,7%	15,9%	9,3%	9,8%
UK	6,4%	8,4%	4,8%	10,0%

Source: LFS yearly data 2009; Early school leaver = People aged 15-24 with at most ISCED level 0-2 and no further education during last 4 weeks; migrant background = country of birth and/or nationality differ/s from country of actual residence; table includes only countries with reliable data; own calculation

Figure 7: **Male early school leavers by migrant background by country (population aged 15-24 with at most lower secondary education and not in further education or training) 2009**



Source: LFS yearly data 2009; Early school leaver = People aged 15-24 with at most ISCED level 0-2 and no further education during last 4 weeks; migrant background = country of birth and/or nationality differ/s from country of actual residence; table includes only countries with reliable data; own calculation

What influences the educational career of boys and young men with migration background?

We should not forget the impact of school systems on disadvantaged positions of male adolescents with low socio-economical status and migration background. Stanat (2006) identified four different approaches explaining the impact of schools on marginalised positions: culturalised interpretations focusing on impacts of “migrant-culture in a counterproductive way; low economical resources may be assumed and lead to discrimination of adolescents; time limited residence reduced educational perspectives; structural inequality conditions have disadvantageous impact on learning success for adolescents with migration background (Stanat 2006, cit. in Herwartz-Emden 2008, p. 68).

Weber (2005) focused on the impact of teachers attitudes on educational careers of boys with migration background. She analysed interpretational patterns of teachers in Germany and identified deficit-oriented patterns of culturalisation in relation with migrant adolescents. Teachers predominantly often described boys with migration background with reference to patriarchal patterns, especially in relation with the construction of the "macho" identity and characteristics. These patterns were described as cultural patterns, in which the connection between migration background and patriarchy was drawn. These stereotypical attributions lead to disadvantages for boys: they either try to comply these culturalised expectations, which lead to devaluation, or they try to overcome these expectations through strong counter-adaptations. The stereotypical attributions are considered as one of the main reasons for class repetitions of boys with migration background (Söhn 2005).

In Switzerland, Juhasz and Mey (2003) analysed educational biographies from male adolescents with migration background and exposed, that structural discrimination is the main reason for polarisation within the migrant community (Juhasz & Mey 2003). Structural discrimination means limited access to economical, cultural and educational, as well as social resources. While some young male migrants, who are educationally successful, are perceived as well adapted within their social environment, those who fail in terms of education are rather perceived as deviant boys. For those, subtle strategies of exclusion become important, such us low support and acknowledgment trough teachers (Juhasz & Mey 2003). As this study shows, differences of (sub-)groups of male youngsters have to be recognised in order to identify disadvantaged positions in educational careers.

The quantitative data on early school leavers and the studies that help to interpret these data highlight important points:

- There are differences within the group of male youngsters and young men; talking of “the men” as a homogenous group is misleading. Not all subgroups of men are privileged, but there are important differences, regarding age, class or migration background. The intersectional approach has to be applied in order to expose these differences.
- Ideals of masculinity play an important role, their impact on male youngsters’ performances must not be underestimated and have to be understood in order to develop and apply appropriate measures.
- The attitudes and approaches to educational success seem to be very different among diverse groups of male youngsters. While boys in educational disadvantaged positions, who predominantly often form attributes of masculinity in connection with physical power and coolness, tend to devalue educational success, boys

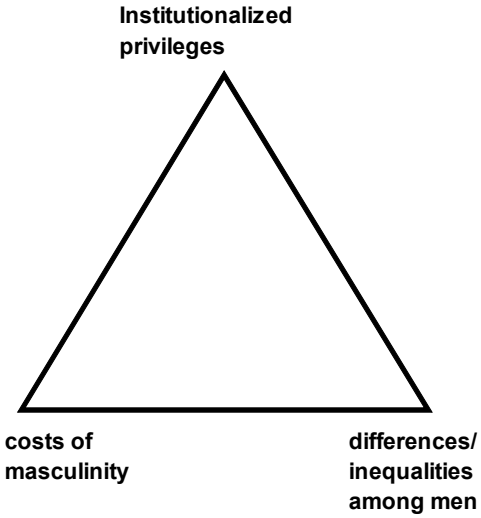
in educational advantaged positions form important attributes of masculinity in connection with educational success, such as intelligence or efficiency.

Privileges, costs and differences

What do these data mean in terms of political measures towards gender equality? Does it simply mean that the areas in which men are disadvantaged have to be addressed, in addition to the political measures for women in the domains where women face discrimination, and men are privileged? In our view, this would be a too simplistic approach. Men and women stand in relation to each other in all societies, still with structural advantages on the men's side, although developments and changes can be observed. To address gender related disparities in an adequate way, to include men in gender equality policies, and to find good ways of public communication regarding men and gender equality, an appropriate framing of facts, figures and experts' reports is needed. A model that can be used for this purpose is outlined below. Although it has been developed in the US, it has proved as useful in the European context as well (see e.g. Holmgren & Hearn 2009).

In order to classify and assess men's groups and initiatives in the US, Messner (2000) proposed a model, consisting of a triangle with the corner points "tackling men's privileges", "the negative sides / costs of masculinity" and "differences among men". Men's organisations, their positions and arguments can be located within this model, depending on their orientation, mission statements and activities. Progressive men's politics have to take all three aspects into account, in order to develop constructive arguments and to foster coalition building with other political forces.

Figure 8: **Triangle model: Terrain of the politics of masculinites (Messner 2000).**



Source: Messner (2000, p. 12)

As Holmgren and Hearn (2009) have used this model "...for locating men's diverse gender-conscious positionings in gender debates" (p. 404). In the same way, arguments and communication can be analysed on the background of Messner´s model. The three main points of his classification ("privileges", "costs" and "differences") can also serve as a

structure for bringing tables and figures in a coherent context. Men's organisations and initiatives put more or less emphasis on each of the three aspects, and Messner has located US groups in this model, according to their positions. The same can be done with European organisations respectively argumentation lines. Focussing on only on of the corners of the triangle would result in rather distorted and reduced messages, which can in fact be observed in mass media and the public discourse about men as the "losers" of modernization processes.

> Example from the Swiss country report (by Fuchs, 2011)[3]:
>
> *Currently three groups of men's NGOs may be distinguished:*
>
> *1. equality-oriented men's groups, mostly affiliated in the network www.maenner.ch;*
>
> *2. divorced fathers in organizations like Schweizerische Vereinigung für Gemeinsame Elternschaft (www.gecobi.ch)*
>
> *3. masculinist groups like the IG Antifeminismus (www.antifeminismus.ch)*
>
> *The IG Antifeminismus with its misogynic rhetoric and fishy, doubtful actions is discredited even in great parts of the conservative camp; the president was expelled from the Swiss People's Party. Divorced fathers – often with despairing personal histories – and maenner.ch gained more voice in political and media discourse. Organizations in these last two groups are reported to have 5000 individual members ... It is an open question, to what extent "men's interests" articulated in the media are genuinely coming out of debates in a grassroots movement and to what extent they are the result of media logics (which prefer the loud, the exotic, and the extreme).*

A "balanced" argumentation, on the other hand, would be located in the middle of the triangle: In this case an organisation or argumentation line would take all the aspects into consideration: The inequalities between the genders on a structural level is made clear; at the same time, the costs and disadvantages for men that result from the respective gender order are named, on individual or collective level (e.g. concerning health); finally, certain groups of men may face specific disadvantages or discrimination (e.g. gays or migrants; or class- and education-effects concerning health). Consequently, communication becomes more complex, because so many pros and cons, arguments and aspects come in; however, links, connections and alliances to other political actors (or discourses) are enabled. The differences between men become clear by specifying subgroups according to other social categories (sexual orientation, ethnic or cultural background, class, etc.). In this view, there may be interests of not all, but of many men to change the existing gender regimes and the dominating masculinity concepts. Alliances of these subgroups of men with other political forces that are interested in changes are meaningful, but the idea of a general men's movement has been discussed controversially, as such a movement

> "... is shot through with danger, contradiction, and paradox. White-identified people who want to oppose racism do not form a 'white peoples' movement. Heterosexually identified people who want to oppose heterosexism and homophobia do not

[3] Part of the study „Role of Men in Gender Equality" are country reports for each EU and EFTA member state, in which designated national experts describe the respective countries' situation along a common questionnaire about gender equality and men's involvement in each country.

> form a ‘straight peoples’ movement’. However, to end racism and heterosexism, white people and heterosexuals will have to stand up, speak out, and act ... Similarly, Connell asserts, profeminist men do need to educate, counsel, and work with other men to bring about an end to institutionalized sexism.” (Messner 2000, p. 101f.)

On the other hand, Kimmel (cit. Messner 2000) has argued that there is a positive impact and a political statement if there are organisations of men “... who do support feminism as men, who support gays and lesbians as straight people, who support people of color as white people...” (p. 102).

The fathers’ rights movements in various countries are interesting examples of how difficult it is to find appropriate positions in order to improve the lives of all people involved in divorce cases: children, women and men. In the country reports of this project, experts from 31 countries described their national situation of men concerning divorce and child custody. It becomes apparent that in many countries, child custody is a terrain of conflict, political struggle and public debate. In various countries, the situation seems quite polarized, and fathers’ initiatives have emerged that oscillate between arguments of children’s rights, gender equality and anti-feminism. Political actors are called to solve problems by legal regulations that are often strongly related to personal conflict and escalation. Some of the fathers’ rights groups generalize personally difficult situations, and argue that feminism has gone too far, resulting in structural disadvantages for men in general.

> Example from Czech country report (Šmídová, 2011):
>
> *...masculinity issues and gender equality with particular attention to men is a very scarce topic in the Czech context. The prevalent unreflected and invisible masculine norm hinders a more welcoming approach towards initiatives supporting gender equality; so far it is perceived as actions supporting or even privileging women in a historical situation when it is no more needed (“they can vote, they can work, so what else”) and in fact endangering traditional men’s privileges perceived and interpreted generally as just, normal and historically proven as functional.*
>
> *No particular in-depth (research, public or political) attention is directed neither towards men’s health nor risky factors in men’s lifestyles. The issue of men’s ill health is taken, together with the custody after divorce and boy’s underachievement in the schooling system, by men’s rights groups as a proof of discrimination against men in the Czech society.*

In Messner’s terms, such arguments emphasize costs/disadvantages for men in an isolated way. In this kind of public discourse, various actual problems are combined to prove that men are discriminated in general and that women are over-privileged. The arguments are “unbalanced”, as neither men’s privileges on a structural level (such as gender-stereotypical labour market segregation, gender pay gaps, unequal distribution of paid and unpaid work) nor differences among men are taken into consideration (but men in general are seen as victims of discrimination in the society).

In fact, the topics and problems that appear in the example of the Czech public discourse (as elsewhere) must be framed by adequate theoretical positions of how the genders are organized in a society, before adequate measures can be developed. These positions must enter the public discourses, as well. We have outlined such a position above, by

referring to a distorted male socialization that brings along a range of problems, with the well-known structural privileges as a "payoff" for many men, although not for all. However, such positions are more difficult to communicate than the current simpler ones; with reference to men's groups, Messner (2000) states:

> "The closer a group's worldview is to the center of the triad, the more complex – even contradictory – its internal debates about the social structure of power, inequality, and oppression are likely to be. As a result, these groups have a far more difficult task developing coherent and focused strategies for action." (p. 100)

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Annex:

Table 4: Political participation: Female and male members of parliament (%) single/lower house and upper house, 2004 and 2011

	2004		2011		Change 2004 - 2011
	Women (%)	Men (%)	Women (%)	Men (%)	Men (%)
EU-27	21	79	24	76	-3
Belgium	36	64	39	61	-3
Bulgaria	28	72	22	78	6
Czech Republic	14	86	21	79	-7
Denmark	38	62	38	62	0
Germany	31	69	32	68	-1
Estonia	15	85	24	76	-9
Ireland	13	87	15	85	-2
Greece	13	87	18	82	-5
Spain	32	68	35	65	-3
France	14	86	21	79	-7
Italy	10	90	20	80	-10
Cyprus	9	91	13	87	-4
Latvia	17	83	20	80	-3
Lithuania	22	78	19	81	3
Luxembourg	24	76	20	80	4
Hungary	9	91	9	91	0
Malta	9	91	9	91	0
Netherlands	36	64	37	63	-1
Austria	30	70	29	71	1
Poland	22	78	18	82	4
Portugal	20	80	30	70	-10
Romania	11	89	10	90	1
Slovenia	11	89	12	88	-1
Slovakia	17	83	16	84	1
Finland	38	62	40	60	-2
Sweden	48	52	46	54	2
United Kingdom	18	82	22	78	-4
Liechtenstein	13	87	24	76	-11
Iceland	31	69	41	59	-10
Norway	38	62	39	61	-1

Source: European Commission, DG Justice, Database on women and decision-making; extracted on 9.Dec 2011

Table 5: Female and male members of representative assemblies of regional authorities that are endowed with self-government, 2004* and 2011

	Members (regional assembly) 2004*		Members (regional assembly) 2011		Change 2004*-2011
	Women (%)	Men (%)	Women (%)	Men (%)	Men
Belgium	31	69	40	60	-9
Czech Republic	14	86	18	82	-4
Denmark*	30	70	34	66	-4
Germany	31	69	32	68	-1
Greece	18	82	17	83	1
Spain	37	63	43	57	-6
France	48	52	48	52	0
Italy	10	90	12	88	-2
Latvia*	34	66	21	79	13
Hungary	13	87	11	89	2
Netherlands	30	70	34	66	-4
Austria	30	70	30	70	0
Poland	15	85	24	76	-9
Portugal	15	85	22	78	-7
Romania*	6	94	15	85	-9
Slovakia	14	86	15	85	-1
Finland	44	56	42	58	2
Sweden	48	52	47	53	1
UK	21	79	31	69	-10
Norway	42	58	45	55	-3

Source: European Commission, DG Justice, Database on women and decision-making; extracted on 9.Dec 2011; some countries are missing, because concept not applicable for all countries; * Denmark and Romania: figures 2003; Latvia: figures 2007

Table 6: Life expectancy in absolute value at birth by gender, 2000 and 2009

	2000			2009*			2000-2009		
	Men	Women	Gender gap	Men	Women	Gender gap	Change gender gap	Change men	Change women
Belgium	74,6	81	6,4	77,3	82,8	5,5	-0,9	2,7	1,8
Bulgaria	68,4	75	6,6	70,1	77,4	7,3	0,7	1,7	2,4
Czech Rep.	71,7	78,5	6,8	74,2	80,5	6,3	-0,5	2,5	2,0
Denmark	74,5	79,2	4,7	76,9	81,1	4,2	-0,5	2,4	1,9
Germany	75,1	81,2	6,1	77,8	82,8	5,0	-1,1	2,7	1,6
Estonia	65,2	76,2	11,0	69,8	80,2	10,4	-0,6	4,6	4,0
Ireland	74	79,2	5,2	77,4	82,5	5,1	-0,1	3,4	3,3
Greece	75,5	80,6	5,1	77,8	82,7	4,9	-0,2	2,3	2,1
Spain	75,8	82,9	7,1	78,7	84,9	6,2	-0,9	2,9	2,0
France	75,3	83	7,7	78,0	85,0	7,0	-0,7	2,7	2,0
Italy*	76,9	82,8	5,9	79,1	84,5	5,4	-0,5	2,2	1,7
Cyprus	75,4	80,1	4,7	78,6	83,6	5,0	0,3	3,2	3,5
Latvia				68,1	78,0	9,9			
Lithuania	66,8	77,5	10,7	67,5	78,7	11,2	0,5	0,7	1,2
Luxemb.	74,6	81,3	6,7	78,1	83,3	5,2	-1,5	3,5	2,0
Hungary	67,5	76,2	8,7	70,3	78,4	8,1	-0,6	2,8	2,2
Malta	76,2	80,3	4,1	77,8	82,7	4,9	0,8	1,6	2,4
Netherl.	75,6	80,7	5,1	78,7	82,9	4,2	-0,9	3,1	2,2
Austria	75,2	81,2	6,0	77,6	83,2	5,6	-0,4	2,4	2,0
Poland	69,6	78	8,4	71,5	80,1	8,6	0,2	1,9	2,1
Portugal	73,2	80,2	7,0	76,5	82,6	6,1	-0,9	3,3	2,4
Romania	67,7	74,8	7,1	69,8	77,4	7,6	0,5	2,1	2,6
Slovenia	72,2	79,9	7,7	75,9	82,7	6,8	-0,9	3,7	2,8
Slovakia	69,2	77,5	8,3	71,4	79,1	7,7	-0,6	2,2	1,6
Finland	74,2	81,2	7,0	76,6	83,5	6,9	-0,1	2,4	2,3
Sweden	77,4	82	4,6	79,4	83,5	4,1	-0,5	2,0	1,5
UK*	75,5	80,3	4,8	77,8	81,9	4,1	-0,7	2,3	1,6
Iceland	77,8	81,6	3,8	79,8	83,8	4,0	0,2	2,0	2,2
Norway	76	81,5	5,5	78,7	83,2	4,5	-1,0	2,7	1,7

Source: Eurostat (online data code: hlth_hlye); extracted on 1.Dec 2011; * figures UK and Italy: 2008; own calculations.

2 Discussion Paper

Gender Equality and Health

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What we have now come to understand as 'men's health' has developed considerably over the past 15 years. It is fair to say that much has been learned from the growth of women's health, but there are a few significant differences that need to be recognised. Feminist emancipation had health at its core, with control over the female body and the ability to make choices a cornerstone of activity around women's health (O'Sullivan, 1987). This same level of political drive for change in men's health has not been seen at the public or indeed academic level and certainly not at the level of the 'man on the street'. Men's high rate of premature death appeared to have been taken for granted, there was little media interest in the health of men, no main stream magazines that were aimed at the lay man had men's health included and there was limited health education in schools (sex education formed a not very well managed hub of this work). Men's mental health problems were more likely to see them incarcerated in prison than receiving medical attention.

Professionals had an equally narrow vision of men's health, with urology claiming ownership due to the sex-specific organs. There was no mention of men, or their health, in health professional's curricula and text books and clinical work with men was seen as unproblematic, in contra-distinction to the way that men caring for women came under scrutiny.

In that climate it was hard to recognise men's health as an area of gender inequality. There was a feeling that nearly all health research was done on men by men and that the patriarchal health service seemed to marginalise women in favour of men. However, the emphasis was on the bio-medical problems of the male body leaving the bigger picture of men and their health problems invisible and men's experiences of health and ill-health unexplored.

Gender and health predominately referred to women's health, with inequalities as a key focus of activity. The main debates centred onto men being seen as the problem, with power and stereotypes predominating 'all men are…'. The early work on men was undertaken by feminists (Verbrugge, 1985, Friedman and Sarah, 1982), with the recognition that we needed to 'problematize' men to understand them (Caplan, 1988). Early theorising on masculinity was primarily focused onto many aspects of men's lives but ironically health was not seen as an area of interest and remained unexplored. In the mid 1990's this began to change, a number of academics started to explore the relationship between men's experiences of health and their usage of services from a gendered perspective, with no really discernable reason. In the UK there had been the inclusion of a section on men's health in the Chief Medical Officers Report of 1992, which was the first such policy statement in that country, but this did not create much publicity and remained mostly unnoticed. Nevertheless there was a rapid growth in the scrutiny of the factors which influence men's health and their health behaviour:

- Men and their health (Courtenay, 2000, Mahalik et al., 2007)
- Gendered epidemiology (White and Richardson, 2011, White and Cash, 2003, White and Holmes, 2006)
- Help seeking (Robertson, 2007, Wenger, 2011)
- Men and their lifestyles (de Visser et al., 2009, Gough and Conner, 2006)
- Men and their emotional health (Conrad and White, 2009, Grant and Potenza, 2007)
- Men as fathers (Madsen, 2007)

Greater attention is now also placed on the inter-relational nature of masculinity with age, ethnicity, socio-economic factors, disability, and with other men and women.

In 2006 the Finnish Government, as part of their Presidency, held a conference on men and gender equality (Varanka et al., 2006). As part of that programme a working group focused onto 'Gender Mainstreaming in Health Policies and Practices'. Within this session the marked differences in the health of men and women were outlined and, importantly, the case was put that gender inequalities existed both in the health of men and in the configuration of health policy and practice. Since that meeting two important events have happened: the 'Men and Health' conference as part of the Portuguese Presidency in 2007 was the first time men's health as an entity had been officially recognised within a Presidency; and the subsequent commissioning of the State of Men's Health in Europe Report by DG Sanco, which was launched in the summer of 2011.

These two events gave the opportunity for the scope of men's health to be explored and for the extent of the problems men are experiencing to be given an official hearing. Striking patterns emerge when linkages are made between men and their work, their socio-economic and family circumstances, ethnicity, age, culture and the impact these have on their overall health and wellbeing.

There is a high level of preventable premature morbidity and mortality in men, with marked differences seen between and within countries. If this were just an issue of being biologically male then these large differences would not be seen, so we have to move into the social world to find explanations. Much of the problems men face are as a result of detrimental social determinants of health and their lifestyles. Privilege and its advantages in terms of diet, good housing, safe and secure working arrangements coupled with the availability of quality health services create an environment conducive to good health and wellbeing. When compared to women and to men from more affluent backgrounds, men who live in poorer material and social conditions are likely to eat less healthily, take less exercise, be more overweight /obese, consume more alcohol, and to be more likely to smoke, engage in substance misuse, and have more risky sexual behaviour (EC, 2011a) Masculine socialisation can contribute to increased risk taking and there are many social pressures on men to perform in certain ways (Courtenay, 2000). However, that these effects are seen to vary so much at both country and also at more local levels is relevant when identifying the underlying reasons, with this being as much about being a male within particular socio-economic contexts as about being male per se. This is compounded when coupled with the lack of male focused provision, for instance: family doctors only available during working hours when many men work full time and have no flexibility to start later or finish earlier; weight loss services predominantly set up for women; counselling services not reaching out to men in need; and little targeted provision for young men's health education needs.

'The State of Men's Health in Europe Report'

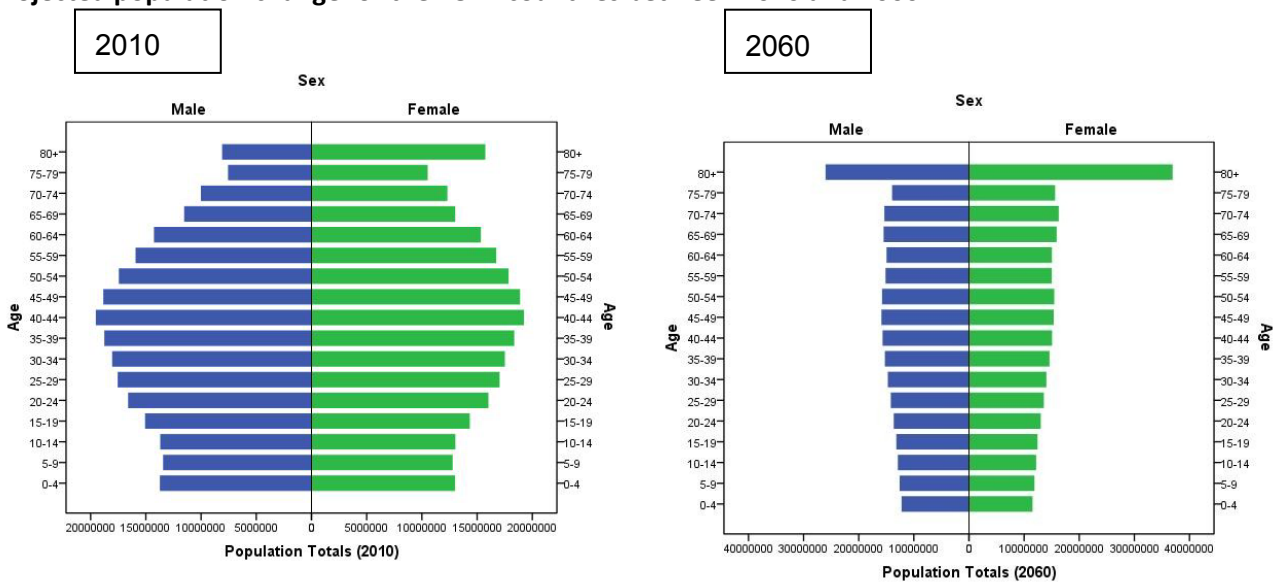
In August of this year the European Commission launched a land-mark report on the health of men across the 27 member states of the European Union, the 4 countries of the European Free Trade Association (Iceland, Liechtenstein, Norway and Switzerland) and

the 3 candidate countries (Croatia, Turkey, Former Yugoslav Republic of Macedonia) (EC, 2011a, EC, 2011b). The report covers an analysis of the male population; lifestyles & preventable risk factors; accessing health services; health status; cardiovascular disease; cancer; accidents, Injuries & violence; mental health; problems of the male reproductive system; communicable diseases; dental & oral health; and other conditions affecting men. For the first time, we have a complete picture of the breadth of issues affecting men's health in one report (White et al., 2011a).

Findings

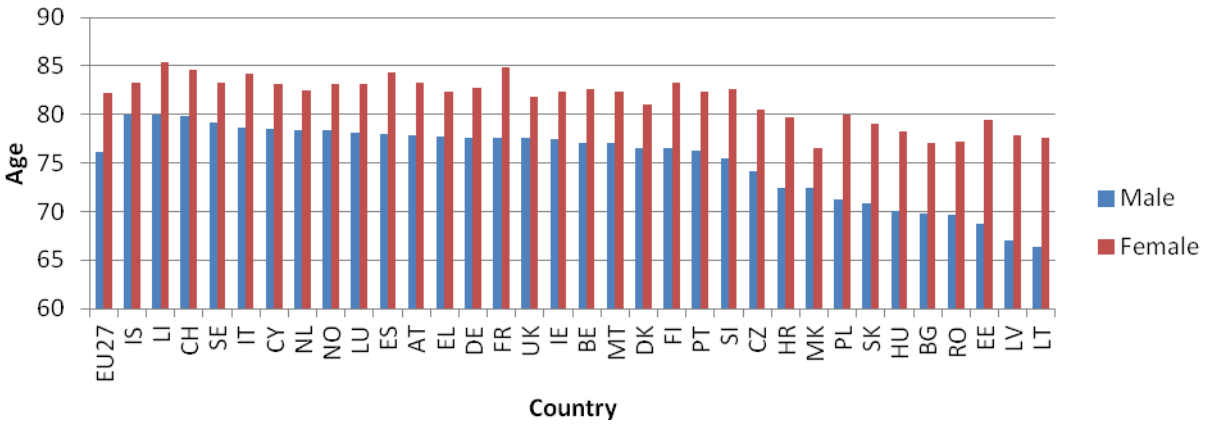
The male population is seen to be changing and this will bring new challenges to the health and social care sector. It is predicted that between 2010 and 2060 there will be a reduction of 24million men in the age range 15-64 (working) age and an increase of 32million men over the age of 65 years across the EU27.

Projected population change for the EU27 countries between 2010 and 2060



The headline finding from the report is that there is a persistent trend of higher rates of premature mortality not just in men as compared to women, but also when comparing men from other socio-economic and cultural backgrounds. Life expectancy for the EU27 stands at 76.07 for men and 82.21 for women, ranging from 80yrs in Iceland and Lichtenstein to 66.3yrs in Lithuania (a gap of 13.7 years). A clear gap exists between the Eastern European Countries as compared to Western Europe, but big differences are also seen within each member state, so no country can be complacent.

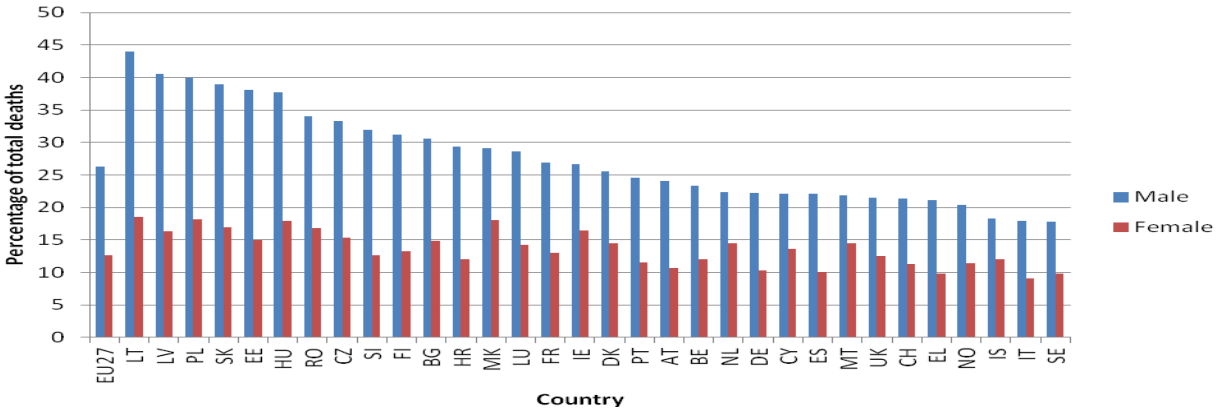
Life expectancy at birth, by sex and country, latest year[1]



[1] 2008 except EU27, BE, FR, IT, UK (2007)

In 2007, there were over 630,000 male deaths between the ages of 15 and 64 years of age as compared to 300,000 female deaths. Across EU27, deaths in this 15-64 age group account for 26% of total male deaths compared to 13% of female deaths. However, these proportions vary considerably between countries: ranging from nearly 44% of total male deaths occurring in this age group in Lithuania to 18% in Sweden.

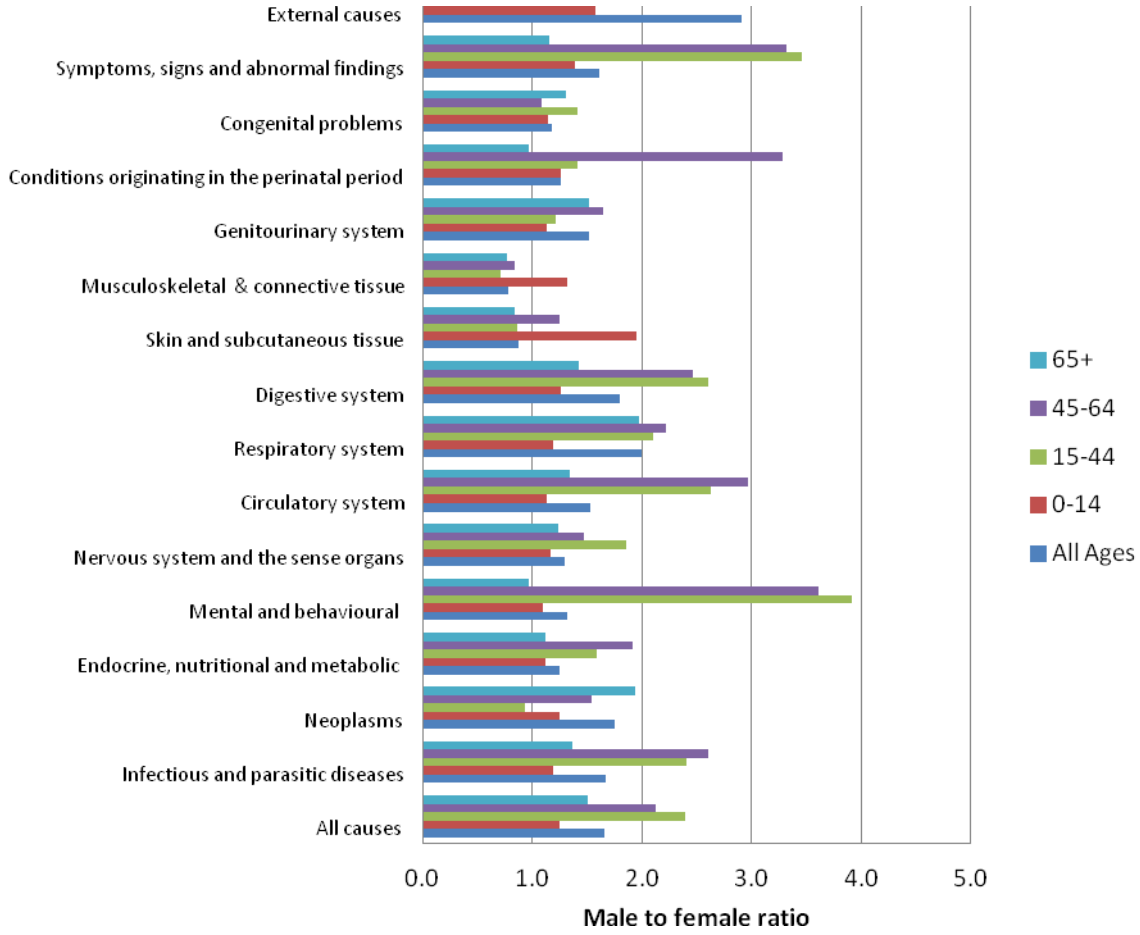
Deaths in 15-64 age range as a percentage of total deaths, by sex and country, latest year. [1]



[1] 2008 except EU27, BG, CH, FR, IT, MT, PL, RO, SE (2007). DK, LU, PT (2006). BE (2004).

When the causes of these deaths were analysed, they extend across the majority of conditions that should be seen to affect men and women equally. Men's increased susceptibility to cardiovascular disease and deaths as a result of accidents in their earlier years is quite well known, but their vulnerability to the wide range of conditions is less well recognised.

Sex rate ratio, main classification groups[1], by age, EU27, 2007



[1]Excluding Pregnancy, childbirth and the puerperium (O00-O99) as this only relates to female mortality.

This first State of Men's Health in Europe Report is an important milestone and sets the baseline data future generations of men will be mapped against. The information provided should help the European Commission, National Governments and local strategy development to take a more informed look at how their current policy meets the needs of men and to think seriously as to how they tackle men's health in the future.

Practice developments

There are now emerging many different models for tackling men's health.

At the population level we continue to see huge savings in men's lives when effective road traffic legislation is in place and is enforced. This is noticeable in the new members to the EU27 where deaths as a result of accidents is decreasing. This is aided by more rigorous health and safety measures in the workplace and also through smoking bans. Policy initiatives that are also starting to recognise the role of men in sexual health are also having beneficial effects. Few countries have a national Chlamydia screening programme that involves men, perhaps on the premise that men will not wish to engage in screening for a condition that may not cause them any difficulties. In the UK following a successful research project into how to engage men there is now 30% or higher take up of screening by men. Similar successes are seen when men are more actively engaged in teenage pregnancy initiatives, and through the provision of adequate parental leave we are now seeing fewer men feeling estranged from their families, less divorce, less sickness and healthier lives.

Ireland is a good example of where a member state has developed their thinking around the benefits of a fit and healthy male population into a full blown Men's Health policy (Richardson and Carroll, 2009). Other countries are relying on Equality legislation on the basis that health policy, strategy and practice should meet the needs of both men and women. This requires a careful consideration of how services should differ and if audited could be shown to be responsive to men and women's particular requirements (White et al., 2011b). Some countries have developed these ideas to a high level, others have been less vigorous.

Around Europe positive examples of where male focused services are emerging, one of the earliest examples was in Vienna in 1999 where a Men's Health Day was seen to be a huge success (Schmeiser-Rieder et al., 1999). Some are in clinic settings such as the Male counselling services in Graz, Austria (Scambor, 2009) and the work on post natal depression in men (Madsen, 2007).

Examples are now emerging where community services have been developed with a male focus in mind. One example is the case of the Bradford Health of Men initiative, which was a 5 year funded programme of activity around men's health and saw the development of drop in centres for young men, work with schools, health initiatives in the workplace – including health checks and weight loss groups for men and sexual health outreach work (see Conrad & White, 2007). The Preston men's health project took a different approach and worked with existing services to develop initiatives for disadvantaged groups, such as homeless men (Kierans et al., 2007). In Scotland a large project was undertaken by the Scottish Assembly who invested £4m to develop male services, mostly as a result of the success of the Camelon Centre, which offered health assessments to local men and offered services to those who attended the centre (Leishman and Dalziel, 2003, Leishman, 2007). This form of engagement with men is now being seen in other European Countries, with Denmark having a range of outreach services specifically focused onto men's health.

Further work is being seen either on individual health concerns or where, for instance, workplaces with predominately male workforce have been targeted. There is also recognition that across the lifespan different approaches are required that can reach out to boys, young men, adults and older men. Engaging boys early in their lives with effective health messaging can help to enable them have better management of their physical and emotional health. Skilling boys to be better able to engage with the health service may also improve their early help seeking behaviour. Examples of work with boys includes more effective sex and relationship sessions, helping boys to deal with bullying and in the design of information that is more appealing to boys.

For young men, the situation is different as they may or may not be at work, and those groups who tend to be classified as 'hard to reach' require initiatives that buy into their interests or culture. We are currently evaluating the Premier League Health initiative which is using the power of football to get men engaged with their physical health. Our current baseline figures show that 67% of our sample had 3 or more cardiovascular risk factors, but that 69% of them reported that they had no health problems (Pringle et al., 2011). Other opportunities have been used to reach men through football, these include ones aimed at men's mental health, including 'Imagine your goals' run with the English Premier league and MIND, the mental health charity, and 'It's a goal' which is a longer running mental health service using football setting to attract young men (Pringle and Sayers, 2004).

Web based services are also now being developed to reach out to boys and young men, these sometimes have used more graphic language to get messages across (www.theredknob.co.uk), others used brands that young men would find more appealing. The most successful of these in the UK is the Campaign Against Living Miserably (CALM) whose posters and websites use messaging and imagery that can get serious messages across (Powell, 2009) see for instance their website www.thecalmzone.net/.

The workplace is another key setting for men's health. With the majority of the men who are most at risk being in vulnerable employment, where they will be most likely working full time with little access to flexible working arrangements, taking time out for health prevention visits or even when ill may be too problematic. There have been successes recorded where a more proactive approach has been taken, examples include teaching Self Care skills in the workplace (White et al., 2009), running weight loss sessions for men at work (Deacon, 2007, Harrison, 2007). A large scale example of health improvement for men includes the Royal Mail in the UK, who invested £46m in health and wellbeing services for their predominately male workforce and made an estimated £227m in savings by reducing absenteeism from 7% to 5%, and in improved moral and productivity within the workforce (Marsden and Moriconi, 2008).

Reaching out to men in their own communities is also very effective. There is a significant change in the demographics of the population across Europe, with a marked increase already seen in older men and this trend is set to continue. This large older male population is a relatively new phenomena and there is little provision focused onto their needs. Studies are now showing that a large proportion of older men are living alone and isolated, with poor social capital to call on in times of difficulty (Williamson, 2009). The suicide data from the State of Men's Health in Europe Report highlights that across Europe, older men have a 5 times higher rate of suicide than women. One initiative that originated in Australia and has now started to be adopted in Ireland and the UK, is the use of community Sheds. These come in a variety of different forms, but most commonly are buildings with equipment, tools and seating, with the underlying principle of enabling men to engage in physical work in a male setting. What is emerging as a positive aspect of this work is that younger men are also getting involved, increasing the opportunity for older men to mentor young men and to pass on skills and wisdom to many who have no male role model.

Conclusion

With each new development our understanding of the challenges men face with their health have become clearer to the point where we can identify clear evidence that inequalities exist. The challenge is being able to articulate just what is the gender equality problem, when we turn to men's health and what can be done about it? Is it an equality problem that certain aspects have not been addressed as gender equality issues, such as working conditions, socialization towards self-exploitation, risk behaviour, inequalities between men of different class, ethnic background … , but that result in men's health problems? Or is it a gender blindness generally when it comes to men and their health.

Is it a gender equality issue that more men are overweight than women, but nearly all weight loss services are focused onto women? Does the lack of services that are meeting men's mental health needs reflect a gender bias in the way the services have been configured and run?

Should we be aiming at gender-equality and prevention or health policy or similar...?

Or a statement regarding how working towards improved men's health can contribute to improving gender equality?

These are questions that need to be addressed within the workshop, but one thing is clear improvements in the physical and mental health of men are necessary to ensure the economic and social wellbeing of the entire European Community!

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