Real Progress

MEN'S HEALTH IN 2026

MOVEMBER® INSTITUTE
OF MEN'S HEALTH
MOUSTACHES LOVE RESEARCH

“Rather than thinking of masculinity as a barrier or risk factor, health systems might more successfully engage men by seeking to support the positive aspects of masculinity.”

Chris Branson, Fellow, The King’s Fund

Introduction

Over the past two years, the national conversation about men and boys has changed significantly. Issues that were too often considered separately — men’s health, boys’ education, fatherhood, employment and the influence of online spaces — are increasingly being understood as connected parts of a much wider picture of how men and boys are living today.

In 2025, The Guardian asked whether it had been “the year of the boy”.[1] The question reflected how decisively the experiences of men and boys had moved from the fringes into mainstream public and political debate. Netflix’s Adolescence became a national talking point, with former Prime Minister Keir Starmer MP describing it as a “really hard watch”.[2] Gareth Southgate used his Dimbleby Lecture to warn of “callous, manipulative and toxic influencers,” while the role of fathers and father figures became increasingly prominent in conversations about family life, health and wellbeing.[3]

Against this backdrop, the publication of England’s first-ever Men’s Health Strategy in November 2025 marked a significant milestone. It brought years of campaigning, research and collaboration across the men’s health sector into a dedicated national approach.

The Strategy recognised that improving men’s health is not simply about encouraging men to seek help. It also requires services that understand and respond to men’s needs, a greater focus on prevention and earlier support, and action on the wider circumstances that shape men’s health — including where they live, their employment, financial security and previous experiences of the health system.

Momentum was also building beyond health policy. In July 2025, Football Beyond Borders and the Lost Boys Taskforce launched the Trusted Adult Guarantee, calling for investment in 10,000 trusted adults working in schools and sports settings, initially focused on boys growing up in poverty. In December 2025, the Government’s National Youth Strategy committed to giving half a million more young people access to a trusted adult outside their home by 2035, alongside £15 million over three years to strengthen the youth workforce and support more trusted adults.[4]

In November 2025, the Department for Digital, Culture, Media and Sport also announced more than £330,000 for two Rugby League Cares pilots in Wigan and Wakefield. This included Offload, supporting young men aged 16–24 who are not in education, employment or training, and Movember Ahead of the Game (MAOTG), delivering mental health literacy support to boys aged 11–18 alongside parents, carers and youth workers. Together, the programmes were funded to reach 1,300 boys and young men by March 2026.[5]

1. theguardian.com/society/2025/dec/29/from-adolescence-to-the-manosphere-has-2025-been-the-year-of-the-boy
2. theguardian.com/society/2025/dec/29/from-adolescence-to-the-manosphere-has-2025-been-the-year-of-the-boy
3. bbc.co.uk/news/articles/ceqjpzg0qwno
4. gov.uk/government/publications/youth-matters-your-national-youth-strategy/youth-matters-your-national-youth-strategy
5. gov.uk/government/news/rugby-league-legends-tackle-male-loneliness-with-government-backed-programme

"Though some may be tired of experts' I am pleased to see the government is not among them. Genuine expertise is at the heart of this initiative from DHSC, Movember and People's Health Trust. This kind of alliance between government, community and expert is essential if we are to meet the challenges facing so many men with regard to their mental health."

Alistair Campbell, Co-Host of The Rest is Politics

Nearly a year on, we have seen some progress. One of the clearest early examples is the Men's Health Community Fund, announced in March and opened for applications in June 2026. The £6.3 million partnership between the Department of Health and Social Care, People's Health Trust and Movember will support organisations working directly with men and boys to strengthen and scale their work, reach more people and maximise their impact.[6]

Further investment has also been made in prostate cancer research and treatment, with more than £20 million announced in June 2026. This includes action to improve access to the TRANSFORM trial for Black men, who face a disproportionately higher lifetime risk of prostate cancer.[7] Together, these investments show what can happen when political commitment is backed by funding and partnership.

GROWING POLITICAL MOMENTUM

The wider change has not been confined to the Men's Health Strategy or health policy alone. Across Parliament, government, research and civil society, there is now greater recognition of the interconnected challenges facing men and boys — and of the impact those challenges have on their partners, children, families and wider communities.

6. uk.movember.com/story/uk-gov-partnership-investment
7. gov.uk/government/news/major-expansion-of-research-and-treatment-for-prostate-cancer
8. menandboys.org.uk/boys-education-commission/announcement
9. endviolenceagainstwomen.org.uk/men-womens-organisations-launch-principles-for-work-with-men-and-boys-to-end-vawg/

GROWTH IN ACTION FOR MEN AND BOYS

2025
The conversation changes
Mainstream debate brings men and boys into sharper public focus.

Jul 2025
Trusted Adult Guarantee
A call for 10,000 trusted adults supporting boys in schools and sport.

Nov 2025
England's first Men's Health Strategy
A dedicated national framework puts prevention, services and wider determinants at the centre.

Nov 2025
£330k+ for Sports Pilot for young men
Two pilots support 1,300 boys and young men through mental health and employment focused programmes.

Dec 2025
National Youth Strategy
500,000 more young people to gain access to a trusted adult outside the home by 2035.

Jan–Feb 2026
Labour Group for Men and Boys launches
Followed by parliamentary debate on a dedicated Minister.

Apr–May 2026
The agenda broadens
New parliamentary legislation, the Boys' Education Commission and principles for working with men and boys extend the conversation beyond health.[8]
The Interpersonal Abuse and ViolenceAgainst Men and Boys (Strategy) Bill had its first reading in Parliament.

Mar 2026
£6.3m Men's Health Community Fund announced
Government, Movember and People's Health Trust join forces to invest in community-led action.

Jun 2026
Extra Time for Dads
Celebs, Dads and MPs come together to call for increased paternity leave with new polling showing support across the country.

Jun 2026
£20m+ for prostate cancer
New investment targets research, treatment and inequalities, including access to TRANSFORM trial for Black men.

Jun 2026
Beyond Equality and the End Violence Against Women Coalition
Launch the 'Principles for Work with Men and Boys to End Violence Against Women'.[9]

Jun 2026
Evidence and principle grow
The King's Fund research brings men's lived experiences into the evidence shaping future policy and services.

"A strategy is only as good as its implementation. In practice, ambitious visions can often disappear into the gap between national policy and local delivery."

Professor Paul Galdas, University of York;
Chair, DHSC Men's Health Academic Network

BUILDING THE EVIDENCE BASE

Our understanding of men's experiences has also continued to develop. In June, The King's Fund published 'Understanding Men's Health in England', drawing on focus groups and interviews with around 100 men from a range of ages, backgrounds and employment situations.[10]

The research showed that men's willingness to seek help is often shaped by their previous experiences of services, with a poor first contact capable of affecting their engagement for years. Employment and working conditions were also central to how many men understood their health, while younger and older men often used very different language to describe their mental health and the pressures they faced.

This growing evidence base should help shape how national commitments are implemented and how local services are designed. It reinforces the need to work with men, respond to the realities of their lives and move away from assumptions that men's health outcomes can be explained by individual behaviour alone.

10. york.ac.uk/media/healthsciences/images/research/prepare/reportsandtheircoverimages/Understanding-mens-health-in-England-June-2026.pdf

WHERE FURTHER ACTION IS NEEDED

Despite some progress, the underlying picture remains stark. Too many men are still dying too young, outcomes remain deeply unequal between communities, and more needs to be done across government on the men and boys agenda.

Online harms remain a particular gap, despite growing concern about the content boys and young men encounter and the influence it can have on their health, relationships and sense of identity little has been done to specifically protect young men online.

This update takes stock of the progress made, the challenges that remain and what national and local leaders must do next to turn growing political attention into lasting change for men, their families and communities.

"For us at Fawcett Society equal healthcare is fundamental to gender equality. Rigid gender norms are impacting the health of men and women and without looking at how we can improve and support the lives of both, we won't see healthier communities. Investment in both the men and women's strategies is essential to improve health equity."

Penny East, Chief Executive, The Fawcett Society

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Where England Stands

The scale of the challenge facing men's health in England has not gone away. Since Movember launched the Real Face of Men's Health report in 2024, boundary changes have redrawn the political map, but they haven't touched the underlying reality: where a man lives still shapes, often dramatically, how long he can expect to live.

Here we bring together the latest newly analysed data on premature mortality, avoidable causes of death, and suicide to show that the case for action is, if anything, more urgent than ever.

TOO MANY MEN ARE STILL DYING TOO YOUNG

In 2024, 36% of all male deaths in England were premature (75 years or younger) and the age-standardised rate was 405 premature deaths per 100,000. An analysis of mortality rates over time (**Figure 1,** on following page) shows a slight increase over the period 2015–2024; however, the trend was not statistically significant (p = 0.30). Much of that increase can be explained by the marked uptick in rates during the COVID pandemic. In fact, the 2024 value is very similar to that from pre-pandemic levels.

While the recent changes to the UK parliamentary map make it difficult to track precise constituency progress since the launch of our 2024 report, the disparities highlighted in that report remain plain to see.

Male All-Cause Premature Mortality Over Time

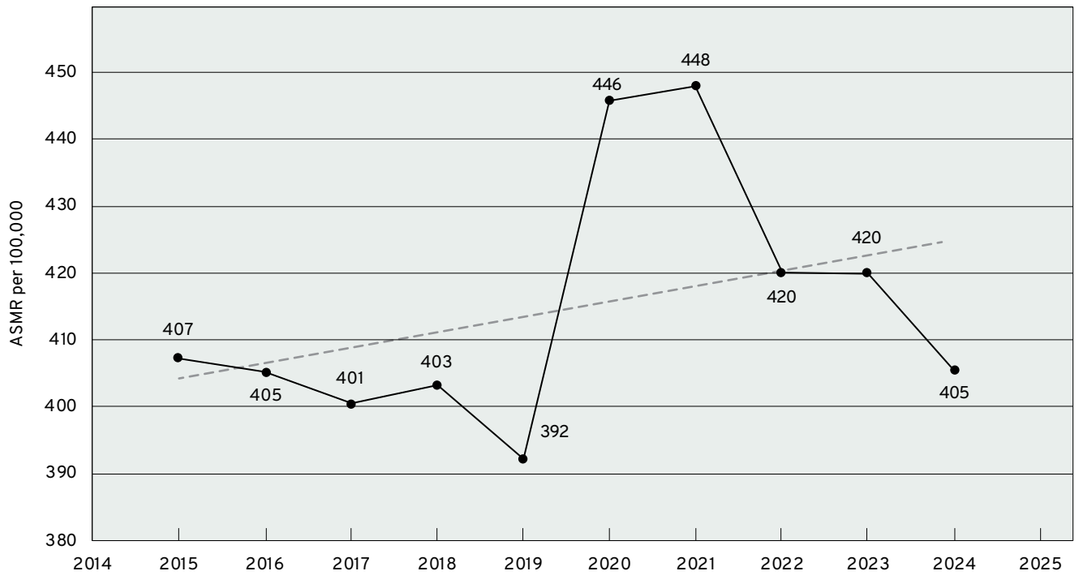
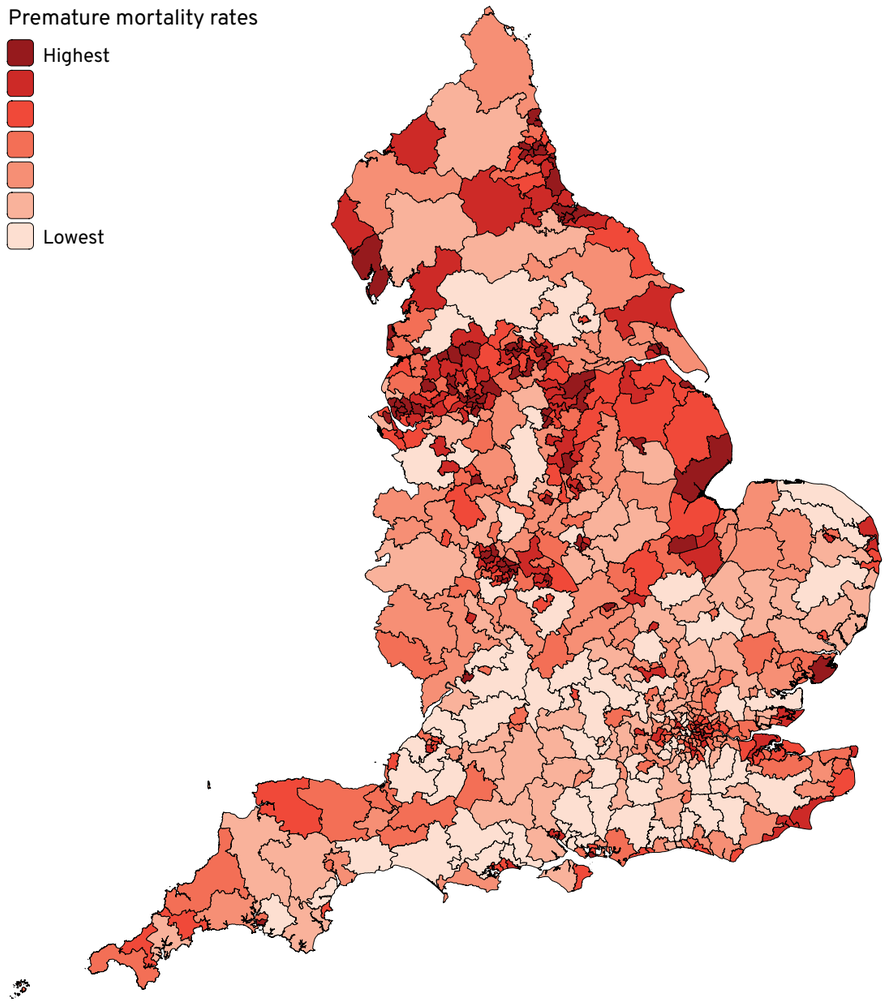


Figure 1: Male premature mortality rates (ASMR per 100,000) by English parliamentary constituency. 2023 mortality data mapped against 2024 constituency boundaries



- Many of the areas with the highest rates are concentrated in Northern England and/or major post-industrial urban areas.
- Men living Blackpool South are more than 3 times more likely to die prematurely than men living in North East Hampshire and around 1.7 times the national rate (420 per 100,00 in 2023).

On average, the top 10 highest premature mortality rate areas have rates around 1.6 times the national level whereas the 10 lowest rate areas are only around half the national level.

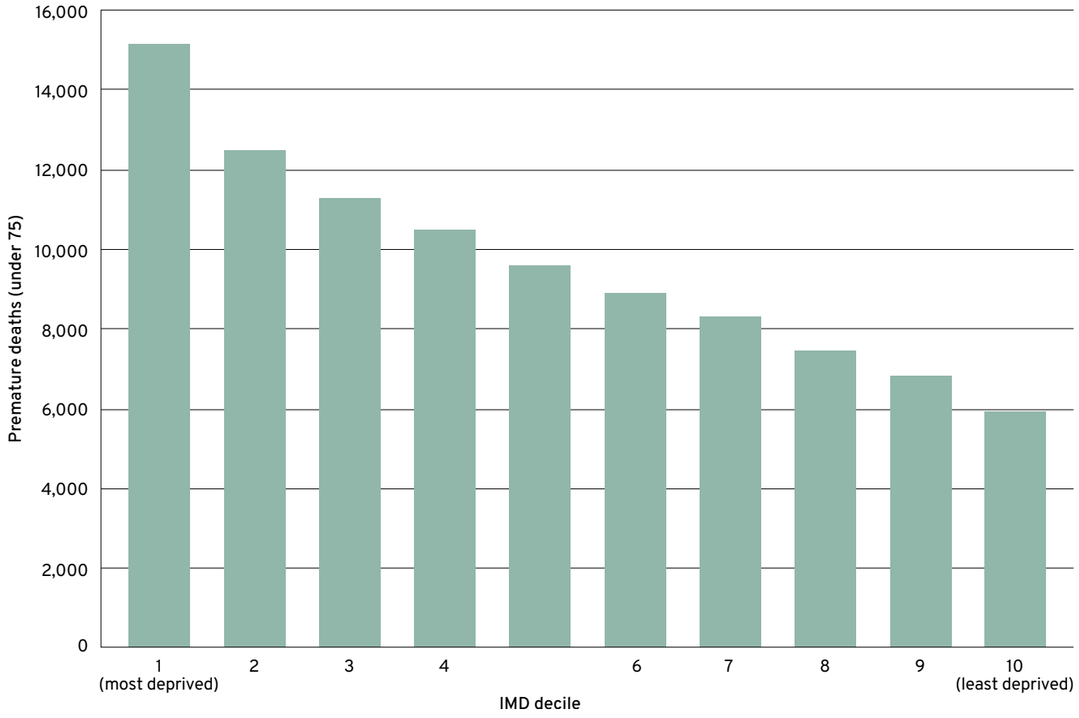
- On average, across all constituencies, men are 1.6 times more likely to die prematurely than women. In Bristol Central, this rate climbs to 2.41 times.

Table 1: Top 10 highest and lowest male premature mortality age-standardised rates (ASR) by parliamentary constituency

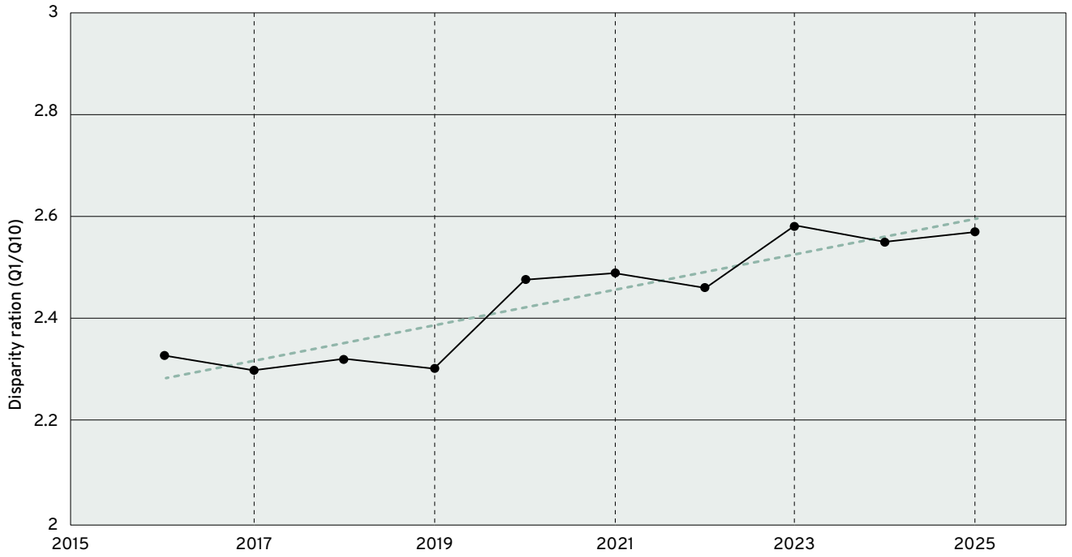
Constituency	Male ASR (per 100,000)
Highest 10	
Blackpool South	728.7
Middlesbrough and Thornaby East	685.7
Leeds South	670.4
Manchester Central	661.5
Liverpool Riverside	657.3
Birmingham Erdington	653.7
Jarrow and Gateshead East	631.1
Birmingham Ladywood	622.6
Manchester Rusholme	616.7
Great Grimsby and Cleethorpes	605.3
England Average	420.0
Lowest 10	
South Cambridgeshire	237.5
Sheffield Hallam	236.5
Sevenoaks	235.9
Cities of London and Westminster	230.0
Surrey Heath	230.0
Finchley and Golders Green	227.9
Chesham and Amersham	225.8
Sussex Weald	219.1
Wetherby and Easingwold	218.5
North East Hampshire	214.3

Source: Office for National Statistics (ONS) – Deaths; Average sourced from DHSC Fingertips | Public Profiles

Premature mortality by IMD Decile (Males, England, 2025)
Deaths before age 75



Premature Mortality by IMD Disparity Ratio (Males)
Ratio of deaths in most deprived (Q1) vs. Least Deprived (Q10) (<75 Years)



Men in Blackpool South are still three times more likely to die prematurely than men in North East Hampshire.

MEN ARE STILL DISPROPORTIONATELY AFFECTED BY AVOIDABLE CAUSES OF DEATH

When we launched the Real Face report in 2024, COVID-19 loomed large in the data, being the second leading cause of premature mortality of men in England and Wales in 2021.

Six years on from the outbreak of the pandemic, COVID deaths have thankfully reduced dramatically. The other leading causes of premature male death, however, remain stubbornly persistent.

All together, the top 10 leading causes counted for more than half of all premature deaths.

Men are more than twice as likely to die prematurely of heart disease than the second leading cause: lung cancer.

Cancer alone contributed to 32% of all premature deaths.

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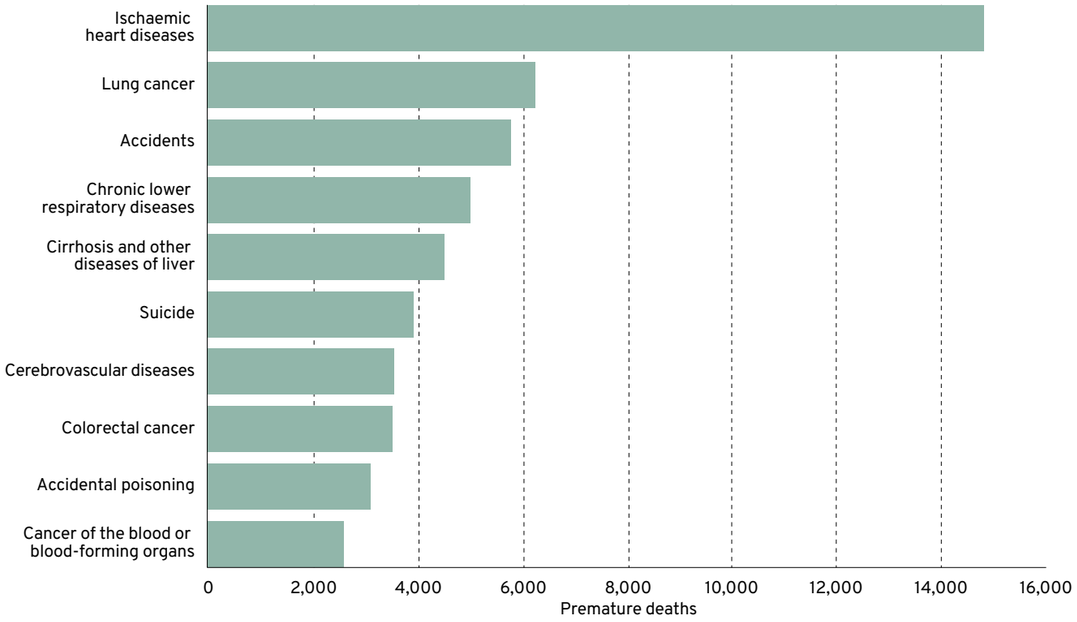
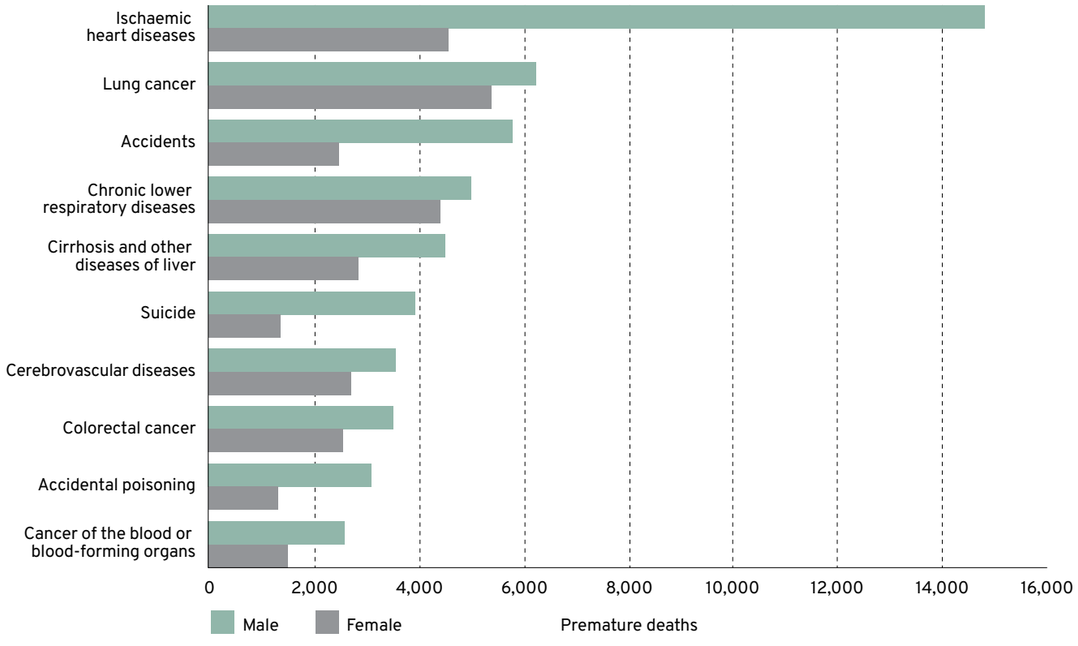
Leading Causes of Male Premature Mortality (2024)



(Note that the super-category "Cancer (malignant neoplasms)" was excluded from the rank list to enable fairer comparison amongst more granular causes.)

Leading Causes of Male Premature Mortality (2024); Comparison of death counts by sex



SUICIDE IN ENGLAND IS STILL MOVING IN THE WRONG DIRECTION

In 2024, there were 4,231 men who died by suicide. This equates to more than 11 men per day, or 1 death every 2 hours. Almost 3 in every 4 deaths by suicide are men — while this is a slightly lower rate than when also incorporating Wales, Scotland and Northern Ireland, it is still far too high.

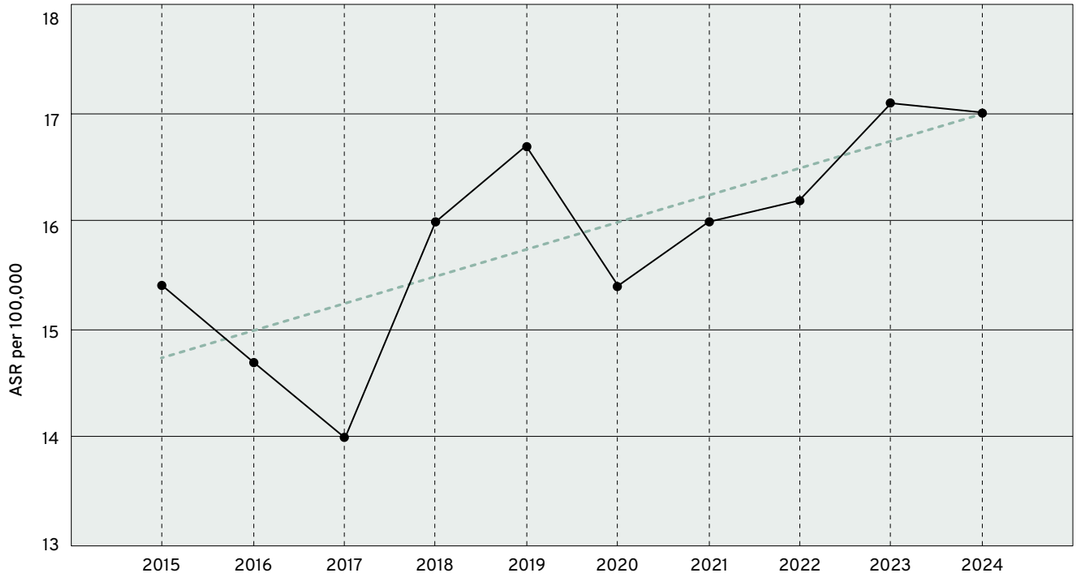
The rate of male suicide in England has shown, on average, small annual increases of about 1.2% over the last ten years — a cumulative change of almost 11%.

In general, regions in the north have rates 20–40% higher than the national average, while rates in London have rates that are approximately 25% lower.

Six years on from the height of the pandemic, the picture has shifted but the fundamentals haven't. Men in Blackpool South are still three times more likely to die prematurely than men in North East Hampshire. Heart disease and cancer still claim men's lives at a stubbornly high rate, and suicide is still, slowly but consistently, moving in the wrong direction.

These aren't isolated statistics — they're a pattern that tracks with geography, deprivation, and access to support. Movember are committed to supporting local areas build capacity to improve men's health based in the needs of the men they serve.

Figure 2: Age-standardised suicide rates in men, 2015-2024



Area of usual residence	Number of deaths	ASR (per 100,000)	ASR rate ratio*
North East	277	23.8	1.40
North West	687	21.1	1.24
Yorkshire and The Humber	511	21.1	1.24
East Midlands	404	18.9	1.11
South West	430	17.1	1.01
England	4231	17.0	1.0
West Midlands	415	15.9	0.94
South East	629	15.4	0.91
East of England	404	14.6	0.86
London	474	12.7	0.75

*Note: compared to national average of 17.0 per 100,000

“

Through the Hub of Hope, we have a unique window into what people are actively looking for when they need support. The data we have collected over the last year challenges some of the assumptions we continue to make about men and help-seeking and shows that the demand is there. The challenge now is to understand that demand much better and make sure the right support exists, in the right places, in a way that men actually want to engage with.

”

Jake Mills, CEO & Founder, Hub of Hope

Hub of Hope — Men’s Health Locally

New data from Hub of Hope, the UK’s largest mental health support directory with almost 1 million searches in the last year provides insight on the need for greater understanding of gender responsive services across England.

Of over 13,000 services listed on Hub of Hope 24% are for men and 24% are listed for women showing progress in organisations thinking about how to consider gender in service design.

Unsurprisingly however, 2025/2026 data shows that women of all ages are more proactive in seeking help (5:4*) while engagement with younger women (under 25) is double that of young men.

However, in areas with the highest levels of activity, people are more likely to search for men’s support than women’s support. This challenges the assumption that men are consistently less likely to engage and highlight where demand is present and there is opportunity to meet this demand.

When reviewing demand, what is clear is it does not always meet supply. Whilst most searches are focused on big cities (London, Manchester, Liverpool), in the South East, there are 410 services in total, with the highest number in Brighton and Hove, however, the highest number of searches in the region was recorded in Portsmouth where less than half of the services for men are provided compared to Brighton and Hove. Providing the opportunity for every region to consider their leadership in this area and what gender responsive services they are providing to meet the unique needs of the people they serve.

The Top 5 support needs with higher usage by men are:

+6.01%
Substance Misuse

+1.36%
Ethnicity and Diversity Support

0.85%
Armed Forces Support

0.59%
Gambling Addiction

0.37%
LGBTQ+ Support

* 14,434 vs 18,256 (based on the 14% visits where users selected ‘for women’ or ‘for men’)

Where the Public Stand

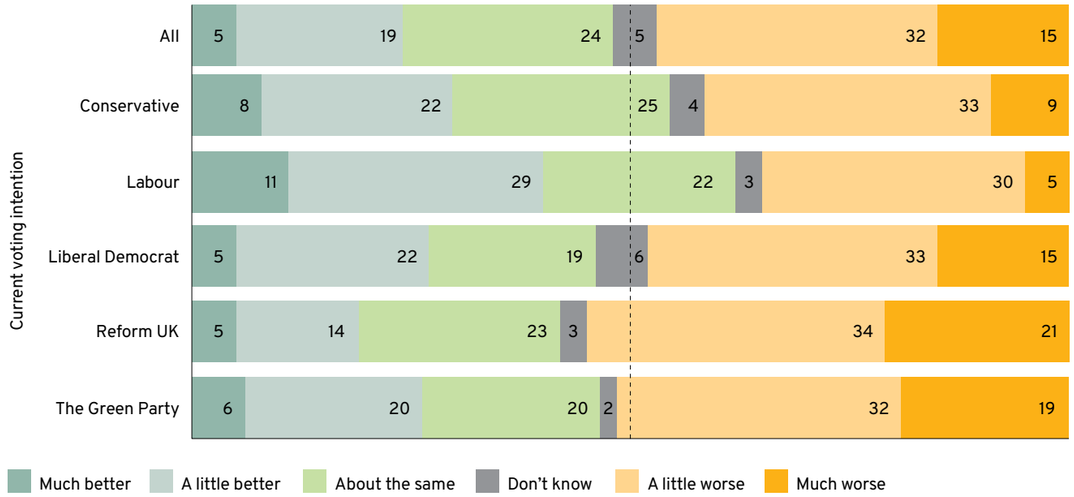
Drawing on new polling and qualitative research conducted by More in Common, our findings reveal widespread concern about male health and wellbeing, significant anxiety about the role of social media in shaping young men's identities and, most importantly, a clear appetite for government action.

OPTIMISM IN MEN & BOYS' WELLBEING IS IN DECLINE

47% of Britons believe the overall wellbeing of men has declined over the past decade. Less than a quarter believe it has improved. Data newly published here shows pessimism is strongest among non-Labour voters and older men. However, this issue is not divided across gender lines: more than 4 in 10 women think the wellbeing of men and boys has declined in the last ten years too.

Digging into the detail, this pessimism is not evenly distributed across all aspects of male life. The data points to one area of particular and persistent concern.

Compared to 10 Years Ago, Do You Think the Overall Wellbeing of Men and Boys in the UK Is...



MENTAL HEALTH STANDS OUT AS THE AREA WHERE MEN AND BOYS ARE STRUGGLING MOST

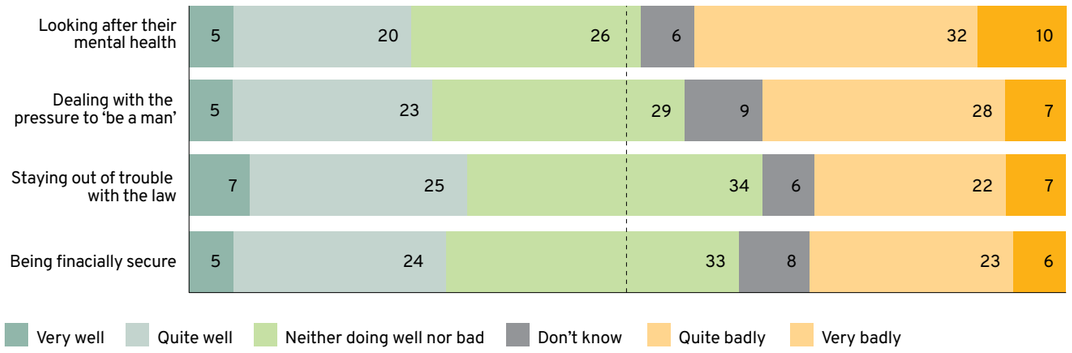
Only 1 in 4 Britons feel men and boys are looking after their mental health well, with over 40% saying they are doing badly. Similar trends exist in terms of dealing with pressures to "be a man", be financially secure, and stay out of trouble with the law.

The research also reveals something of the ecosystem shaping men and boys' sense of who they are — and where the greatest sources of influence, and harm, are perceived to lie.

"We're probably in a worse place than we were, just because it's more in the public eye. It probably was as bad 10 years ago, but it wasn't brought to everybody's attention. People are more open to sharing that they're struggling now than they would've been 10 years ago."

Nick, teacher and father of two, Birmingham

Overall, How Well Do You Think Men and Boys in the UK Today Are Doing in the Following Areas?



SOCIAL MEDIA AND INFLUENCERS

Britons see online influencers as more influential in developing men and boys' perceptions of masculinity than teachers, or religious or community leaders.

Online influencers are widely perceived as having a harmful impact on boys and young men, and a major force in shaping their sense of identity, masculinity and attitudes towards women.

In all three focus groups conducted by More in Common, participants consistently described content as extreme, materialistic, and poorly regulated, with a strong sense that it has a real impact on young people's behaviour and values.

Yet alongside anxiety about online influence sits something more constructive: when asked about the meaning of manhood, the public's response centres not on toughness or status, but on care.

How influential do you think the following figures are for men and boys when it comes to developing their understanding of what it means to be a man?

	Very or somewhat influential
Their friends	87%
Their father	86%
Their mother	83%
Social media/online influencers	74%
Teachers	62%
Religious or community leaders	38%

"Although [my son] is being brought up in what I consider a very liberal household, I can't protect him from some of the things that Andrew Tate, like Donald Trump, say, 'grab her by the pussy', brilliant. That's the sort of thing that he would hear."

Jo, administrator, Brighton Kempton

FATHERHOOD MATTERS TO BRITAIN

As revealed in our landmark ‘Extra Time with Dad’ report in June, almost half of Britons say being a ‘real man’ means being a good father.

92% said it’s important for fathers to spend time with children in their early months. When asked what it means to be a good dad, Britons also responded “being a good role model” and “having a positive relationship with the other parent”.

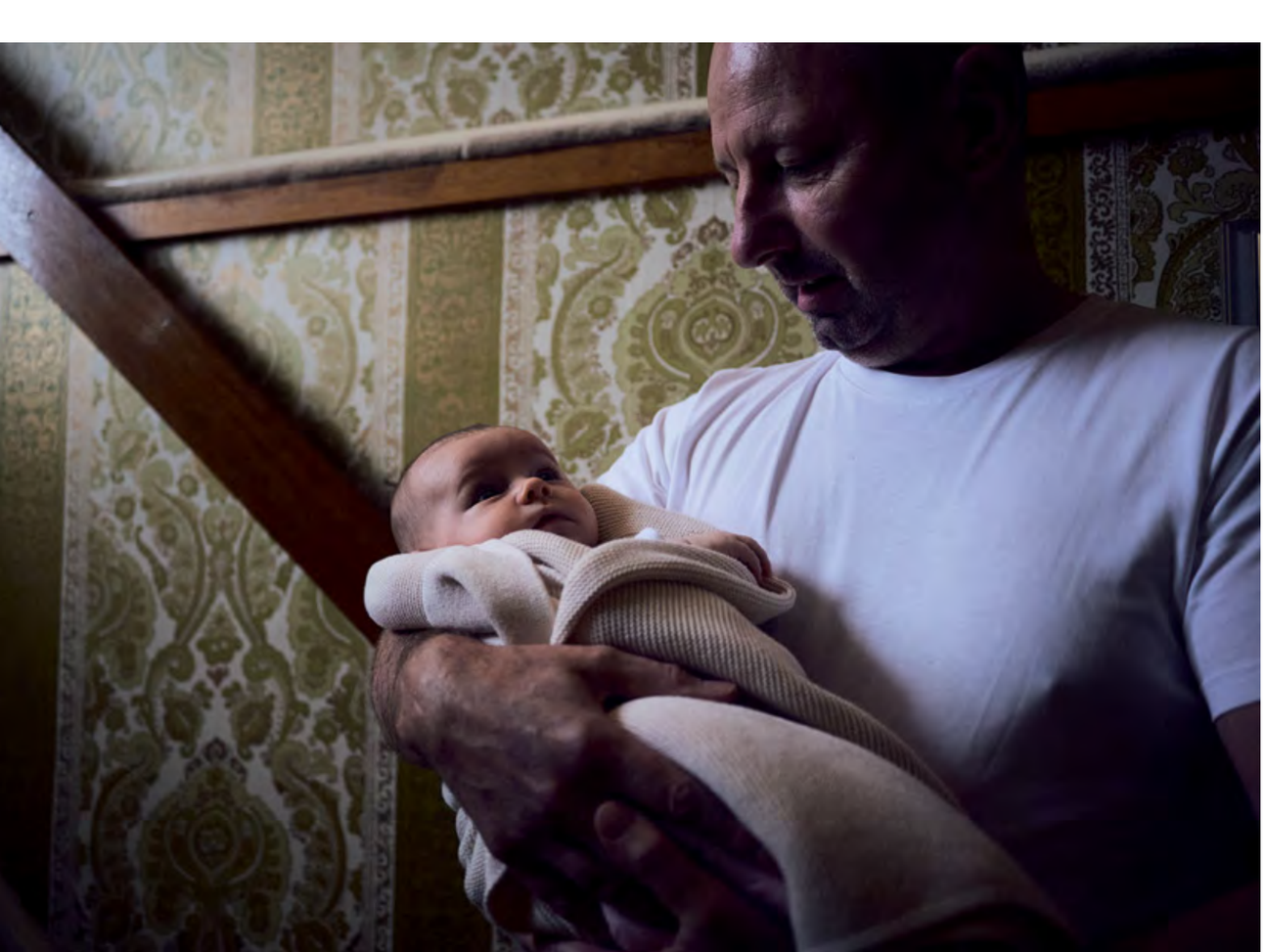
80% saw the responsibility of providing financially for the family as one that men and women can choose to share among themselves.

56% of Britons said politicians do not value the role of fathers, while more than a third say society as a whole does not. Reform voters are the most likely to hold this view.

More than 4 in 10 men said they would take extended paternity leave if it were available to them. They would do this to support their partner after birth, help them recover, to bond with their child and to be an active father.

And when shown information on the current pay for statutory paternity leave, 60% of Britons say we should increase the rate of pay. This support remains even when people are presented with arguments against increasing the rate

Taken together, these findings on fatherhood point to a public that is ready and willing to see policy keep pace with how men and boys actually live. That appetite for change extends well beyond attitudes to fatherhood.



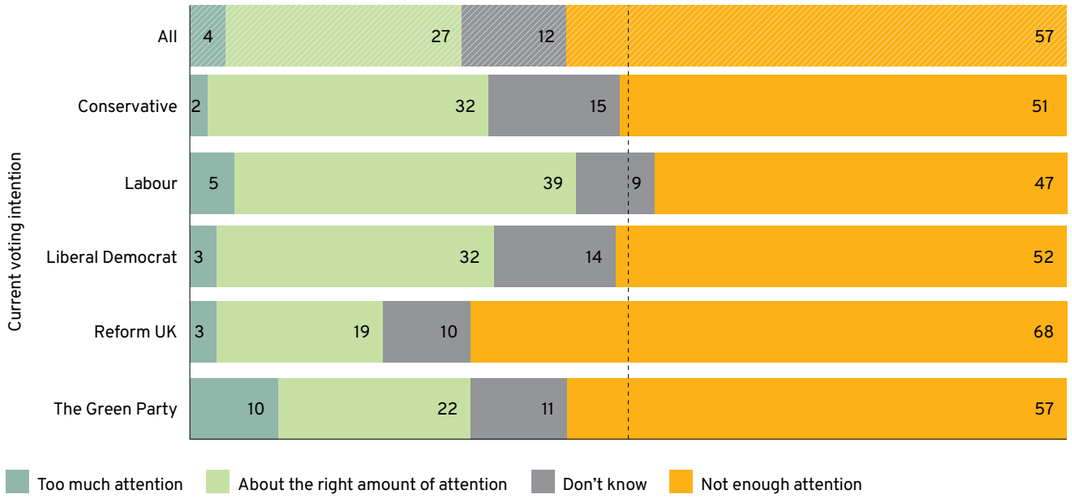
STRONG SUPPORT FOR MEANINGFUL CHANGE

54% of Britons (men and women) believe the government does not give enough attention to issues affecting men and boys. This concern crosses party lines.

75% support the government taking action on challenges facing boys and men in education, mental health, employment, and fatherhood.

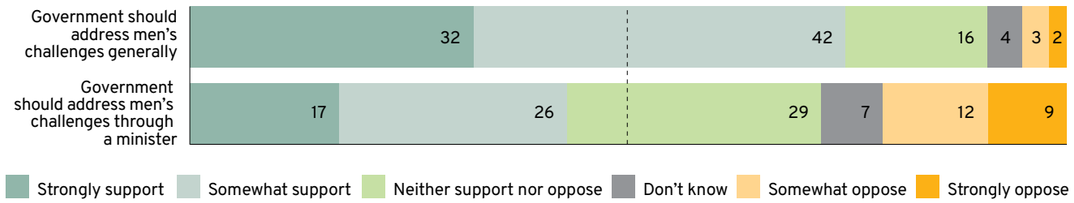
However, they are unconvinced on the idea of a minister for men and boys, suggesting a hunger among the public for more tangible policy change.

How Much Attention Do You Think the Government Currently Gives to Issues Affecting Men and Boys?



More in Common, March 2026

Britons Are Unconvinced on the Idea of a Minister for Men and Boys
Do you support or oppose this idea?



More in Common, March 2026

What's Next

The UK is entering a new political chapter. With a new Prime Minister and Cabinet now in place, there is an opportunity to build on the foundations laid over the past two years and accelerate action on men's health and the wider experiences of men and boys.

England's first Men's Health Strategy, the Men's Health Community Fund and growing political attention across health, education, fatherhood and online harms have all marked important progress. Taken together, these developments have created real momentum around men and boys. But momentum can be fragile. With a change in political leadership, there is a risk that commitments lose pace just as the opportunity for meaningful change is growing.

The stakes are clear. Too many men are still dying too young; outcomes remain deeply unequal between communities and significant gaps in policy and delivery remain. The public expects more action. The sector stands ready to help deliver it. Most importantly, men — and the partners, parents, children, friends and families affected by their health — need to see political will translated into meaningful change.

The new Government does not need to begin the conversation again. It has an opportunity to take the next step: protect the progress already made, strengthen the areas where action remains underdeveloped and ensure that national ambition leads to change in every community.

Over the next two years, we are calling for clear action at both national and local level.

NATIONAL ACTION:

1. Appoint the promised Men's Health Ambassador

In November 2025, the Government announced that it would appoint a Men's Health Ambassador. Almost a year later, that commitment has still not been fulfilled.

The new Government should now appoint an Ambassador without further delay, providing visible leadership for the implementation of the Men's Health Strategy and helping to maintain momentum across the wider men and boys agenda.

Men's health cannot be improved by the Department of Health and Social Care alone. Men's lives and health are shaped by education, employment, housing, family policy, digital spaces and the communities in which they live. Progress therefore depends on sustained coordination across government.

A Men's Health Ambassador would provide a clear point of leadership, bring departments and sectors together and ensure that improving outcomes for men remains a shared priority across government, rather than being siloed within a single department.

2. Deliver the planned National Men and Boys Summit

The former Prime Minister committed to holding a National Men and Boys Summit in 2026, led by the then Deputy Prime Minister.[11] The new Government should now carry this commitment forward and confirm when and how the Summit will be delivered.

The Summit should bring together national and local government, health leaders, researchers, employers, educators, charities, community organisations and men and boys themselves. It should build on the work already undertaken and agree clear priorities across health, education, employment, fatherhood and online life.

Crucially, the Summit should be judged not by attendance but by action, resulting in a clear cross government commitment, named ownership and a timetable for delivery.

11. questions-statements.parliament.uk/written-questions/detail/2026-06-03/6563

3. Reform paternity leave so fathers can be present from the start

Supporting fathers to be present from the start is not only good family policy; it is also an investment in men's health and wellbeing. Strengthening paternity leave would strengthen family relationships and enable more fathers to play an active role from the earliest stages of their child's life.

The Government should move to six weeks of statutory paternity leave at 90% pay, with two weeks taken immediately and the remaining four available to take at any point during the child's first year. Entitlement should also be extended to self-employed fathers and currently excluded groups, including kinship carers.

This should be the first step towards a phased expansion of paternity leave, supported by a clear timetable that gives families and employers certainty. Redundancy protections should also be extended to fathers taking paternity leave. These changes would better reflect the public's view that caring and providing are responsibilities families should be able to share, while giving more fathers a genuine opportunity to be present during a critical period for them, their partners and their children.

This ask forms part of a wider package of proposals developed jointly with women's and men's organisations in response to the Government's Parental Leave Review. Taken together, these recommendations on paternity and maternity leave are intended to create a system that advances gender equality, and ensures every mother, father and family has access to the right support.

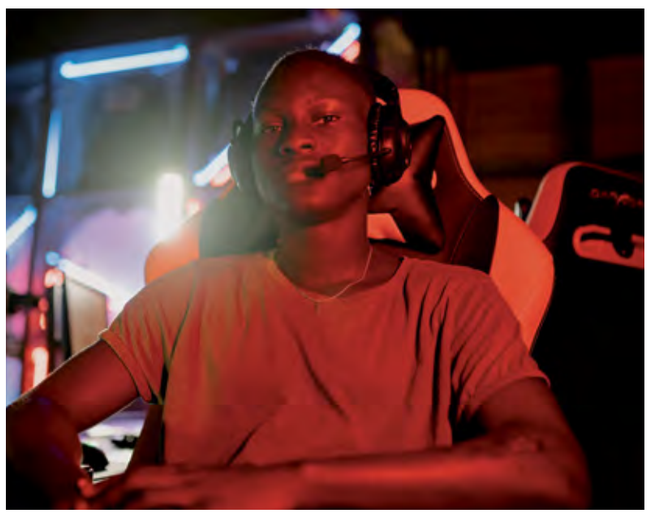
4. Build the evidence needed to tackle online harms affecting boys and men

Online spaces are playing an increasingly important role in shaping boys' and young men's ideas about masculinity, relationships, health and success. Yet the evidence and policy response to the specific harms affecting boys and men remains fragmented.

Government should become a knowledge partner in the current work being undertaken by Movember and the Institute for Strategic Dialogue's, through development of an evidentiary blueprint of online harms affecting boys and men. The work would identify and categorise the different forms of harm, their behavioural pathways and their real-world health and social impacts, providing a stronger foundation for future policy.

Given the breadth of the issue, this work must be cross-government, bringing together relevant Departments including: DCMS, DHSC, BIST, Ofcom and others, to build a shared understanding of gendered online harms across health, online safety, education and prevention.

The aim is not simply to identify harmful content. It is to give Government and regulators the evidence they need to target prevention more effectively, identify gaps in existing regulation and develop practical, evidence-led interventions that better protect boys and young men online.



5. Scale Movember Ahead of the Game (MAOTG) and Offload nationally

Government is already testing what a more preventative approach to boys' and young men's mental health can look like. In November 2025, DCMS invested more than £330,000 in pilots of MAOTG and Offload across Wigan and Wakefield, reaching boys and young men through trusted sporting and community settings.[12]

MAOTG is an established mental health literacy programme that has already reached 50,000 participants in the UK and more than 100,000 globally. It works not only with 11–18-year-olds, but with the parents, carers, trusted adults and coaches around them, helping young people build mental fitness, recognise the signs of poor mental health and seek support earlier. Offload complements this by working specifically with 16–24-year-olds who are not in education, employment or training and may be at greater risk of isolation.

The Government should now build on the current pilot and work with Movember to roll out a combined MAOTG and Offload offer across England and Wales. Working with delivery partners from professional sports clubs, trusts and foundations, Movember has modelled the cost of reaching 500,000 young people, parents and coaches over three years at around £10–12 million and is ready to make a significant investment alongside Government.

The ambition should be simple: reach more boys and young men earlier, in the places they already know and trust, and give them and the adults around them the skills to act before problems reach crisis point.

12.gov.uk/government/news/rugby-league-legends-tackle-male-loneliness-with-government-backed-programme

LOCAL ACTION:

1. Adopt A Men's Health Charter

Every local authority should adopt A Men's Health Charter and make a public commitment to improving the health and wellbeing of men and boys in its area.

National leadership is essential, but men experience health services and support locally. The challenges facing men will differ between communities, and local responses must be shaped around the needs of the men they serve rather than expecting men to fit around existing services. This means lasting improvements will depend on local leaders translating national ambition action that reflects the needs of their communities.

National leadership can set the direction, but lasting change will be delivered locally. The Charter gives councils a practical framework for embedding men's health into local leadership, planning and service delivery — ensuring that *where* a man lives no longer determines how well he lives.

This is a moment not to be missed. The foundations have been laid; now it is time to deliver the change that men, their families and communities have waited so long to see. With national leadership and local action working hand in hand, England can become a country where every man has the opportunity to live a longer, healthier and happier life.

The Charter provides a practical framework for councils to:

Appoint a senior political or executive lead for men's health.

Collect and use sex-disaggregated data to understand local outcomes and service use.

Ensure local grant funding supports men's health and wellbeing.

Tailor health outreach and health checks to reach men in familiar and trusted settings.

Develop a local men's health plan in partnership with NHS services, community organisations and men themselves.

Real Progress

MEN'S HEALTH IN 2026

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