

# Birmingham Men's Health Needs

## Key Findings and Recommendations



### KEY THEMES



Deprivation as a central driver.



Gendered vulnerabilities & social norms.



Premature mortality & health inequalities.



Intervention through lifestyle & preventable risk factors.



Mental health, suicide & psychosocial pressures.



Substance misuse as a gendered risk.



Men dominate inclusion health groups.



Interconnected risk factors.



Need for targeted, male-focused approaches.

### LIFE EXPECTANCY



**BIRMINGHAM MEN**  
**30%**  
MORE LIKELY

To die prematurely than men across England.



**3.5x**  
MORE LIKELY

To die prematurely in Ladywood than men living in Beckenham.

Male baby born in Birmingham can expect to live



**AVERAGE**  
**4.6**  
FEWER YEARS

than a female baby.

### SMOKING



**BIRMINGHAM MEN**  
**44%**  
MORE LIKELY

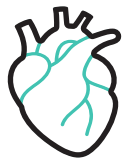
To be smokers than women.



**88.3%**  
2019 TOTAL DEATHS

Amongst the homeless and rough sleeping population nationally were male.

### CARDIOVASCULAR DISEASE



**ESTIMATED UP TO**  
**80%**

Of cardiovascular disease potentially preventable.

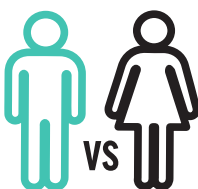
**9 MODIFIABLE RISK FACTORS**

Account for **90%** of cases of coronary artery disease.



**23 MEN**

Die prematurely from cardiovascular disease for every **10** women in Birmingham.



**MEN 46%**  
MORE LIKELY

High blood pressure contribute to their death than women.



**MEN 12%**  
MORE LIKELY

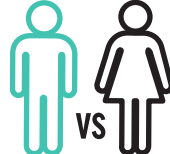
Than women to be diagnosed with diabetes.

### CANCER



**MEN 42%**  
MORE LIKELY

To die from cancer than women.



**14 MEN EXPECTED TO DIE**

For every **10** women who die of cancer in a year.



**1 IN 4 BLACK MEN LIFETIME RISK**

Of developing prostate cancer

**1 IN 8 WHITE MEN LIFETIME RISK**



### MENTAL HEALTH



**MSR** **STEADILY INCREASING AT A SIMILAR RATE**

Male Suicide Rate (MSR) both nationally and locally, between 2019-2022.



In Birmingham between 2019-2021.

**MSR 14.1**  
PER 100,000



**HIGHER MALE INTENTIONAL SELF-HARM EMERGENCY HOSPITAL ADMISSIONS**

In Birmingham than the England rate at **130.7 per 100,000**.



**79.1%**  
MALE SUICIDES

In Birmingham & Solihull, an audited sample of suicides between 2016-21, were amongst men.

### SUBSTANCE MISUSE



**HIGHER BURDEN ALCOHOL-RELATED MORBIDITY & MORALITY FOR MEN**

Potential Years of Life Lost (PYLL) in England  
Men **1,246 per 100,000**  
Women **533 per 100,000** (2023).



**21.4**  
PER 100,000

Alcohol-specific mortality rate for Birmingham (2023).



**BIRMINGHAM MEN**  
**3.65**  
TIMES

More likely than women to use illicit opiates and/or crack cocaine - above the England rate.



**MEN**  
**3.76**  
TIMES HIGHER

More likely than women to be alcohol-dependent (2019-20 Data).

### Action Plan

#### MEET MEN WHERE THEY ARE

Physically, culturally, emotionally.

#### TAILOR INTERVENTIONS

One-size-fits-all approaches simply do not work.

#### IMPROVE ACCESS

Outside working hours, in community settings, through flexible models.  
Engage them through outreach & co-design of services.

#### PRIORITISE PREVENTION

Especially blood pressure checks, smoking cessation, cancer awareness & early mental health support.

#### USE TRUSTED MESSENGERS

Sports clubs, peer groups, community leaders.

#### LOCALISE & DIVERSIFY

Male-focused health campaigns.

#### STRENGTHEN

Trauma informed practice & training for mental health practitioners.

#### EXPAND

Integrated community support and outreach to homeless populations.

#### INCREASE REPRESENTATION & DATA QUALITY

Especially for minoritised men, LGBT men, and those in inclusion health groups.

NOTE: This infographic is a summary of the full report 'Men's Health Needs in Birmingham'.

The full report and recommendations can be accessed here:

[https://www.birmingham.gov.uk/downloads/file/31085/birmingham\\_mens\\_health\\_inequalities\\_report](https://www.birmingham.gov.uk/downloads/file/31085/birmingham_mens_health_inequalities_report)