



**Registered Charity No.
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Equal Rights for Men and Women

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NEWS BRIEFING

May 2024

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MESSAGE FROM PHILIPP TANZER – GENDERPARITY UK

The Domestic Abuse Commissioner has created a platform for victims/ survivors of domestic abuse called VOICES. It is crucial that AS MANY male victims participate in this platform to make it as hard as possible for the DA Commissioner to ignore us.

About VOICES (from their website)

Set up by the Domestic Abuse Commissioner (DAC), VOICES at the DAC is a virtual platform for victims and survivors of domestic abuse to stay connected to relevant policy, research, and practice development.

VOICES at the DAC aims to give victims and survivors opportunities to share their experience so they can influence change.

VOICES at the DAC will circulate a newsletter with opportunities to share your voice with domestic abuse organisations, universities, and local and national government. It will also include updates on the Commissioner's work and relevant news from across domestic abuse policy, practice and research.

Please share this via email and on all social media to reach as many male victims as possible.

I would strongly recommend that those who were/are victims of PARENTAL ALIENATION and FALSE ALLEGATIONS (in a domestic setting) join VOICES too.

Link to the website:

<https://domesticabusecommissioner.uk/voicesatthedac/>

I would also like to urge you to sign the petition for a Minister for Men and Boys and to encourage others to sign it too.

<https://petition.parliament.uk/petitions/647586>

A MANIFESTO FOR MEN AND BOYS

<https://www.menandboyscoalition.org.uk/newsevents/a-manifesto-for-men-and-boys/>

A Manifesto for Men and Boys | Men & Boys Coalition
(menandboyscoalition.org.uk)

Supporting the Health and Wellbeing of Men and Boys

General Election Policy Proposals 2024

The Men and Boys Coalition is a charity with a membership of over 100 other charities, organisations, professionals and academics supporting the health and wellbeing of men and boys in our country. Our vision is a society that values the wellbeing of men and boys.

We are asking all political parties to commit to implementing a range of measures that will improve public services, public policy and make a positive difference to the lives of men and boys. Doing so will also improve the lives of women and girls who all care, support and share society with men and boys.

We call on politicians from all parties to join us in creating a more inclusive, equality-based and fair society. To do so requires a compassionate focus on the wellbeing of men and boys, as well as and alongside the essential attention devoted to issues affecting women and girls.

1. Treat the educational underachievement of boys as a national education priority

Over the past 30 years, boys overall have been behind girls at every stage of education from Key Stage 2 to university but governments and the educational establishment in the UK have been indifferent at best. Over 4,500 boys are excluded from school every year and over 400,000 young men are currently categorised as 'Not in Education Employment or Training' – a waste of their talents and the talent this country needs.

We believe any new Government must address boys' educational underachievement and related outcomes as a key educational priority. This should include schools formally acknowledging boys with absent fathers / lacking a positive male influence as a particularly high risk, disadvantaged group and providing the necessary early interventions to prevent underachievement, together with addressing the disproportionate shortage of male staff in schools.

2. To introduce a Men's Health Strategy similar to those in Ireland and Australia, as advocated by the World Health Organisation Europe.

Men's health in the UK is in crisis. One British man in five dies before the age of 65 and 40% of men die before the age of 75. Three-quarters of premature deaths from heart disease are

male, three-quarters of suicides are male and men are 43% more likely to die from cancer.

We believe a fresh approach is needed in the UK that must centre on the creation of a National Men's Health Strategy. This approach has been taken with successful results in several other countries including Ireland and Australia and is recommended by WHO (Europe). Such a strategy would complement and strengthen the current Women's Health Strategy, introduced in 2022. In addition, Integrated Care Boards must have a specific strategy/plan to improve men's health within their communities.

3. To introduce a specific Male Suicide Prevention Action Plan and to create and implement easy to access, male-friendly mental health services, with improved signposting.

Thirteen men every day continue to die by suicide with 5,000 men taking their own lives (three in every four suicides) every year. As part of any national suicide prevention strategy, we believe there has to be a specific plan to tackle male suicide which is broader than the focus on middle-aged men – as class, place, occupation and other age groups remain an area of concern and health inequality/disparity. Integrated Care Boards need to have clear transparent targets to reduce male (and female) suicide with published plans they can be held accountable to.

4. Better support for those at risk or suffering from prostate and testicular cancer.

Every day 33 men in the UK die from prostate cancer and it is the only major cancer where there is no national screening programme. We call for a National Screening Programme for prostate cancer across the UK, alongside far better promotion of the availability of testing. The programme must also address ethnic and regional differences.

Men with prostate cancer need better diagnosis, better treatment and better support. This includes ensuring every man with prostate cancer – or at risk of it – has access to the same high-quality diagnosis, treatment and care, no matter where in the UK they live. There must be no longer a postcode lottery.

5. To introduce a parallel strategy to the Tackling Violence Against Women and Girls (VAWG) entitled Ending Intimate Violence Against Men and Boys.

Since 2010, male victims of a wide range of crimes including rape and sexual abuse, domestic violence, sexual exploitation, stalking, so-called honour-based abuse and forced marriage have been included within the National Strategy to Tackle Violence Against Women and Girls. This categorisation was imposed upon male survivors without consultation or consent, is considered grossly offensive and harmful by the vast majority of survivors and their representative charities, leads to inadequate and inappropriate policies for men and boys, and is widely perceived to operate as a barrier to male victims in accessing support and recovery services they need. We call on the next government to remove male victims from the VAWG strategy and address prevention and support efforts through a parallel and complementary strategy to prevent Intimate Violence Against Men and Boys.

6. To review and reform the legal definition of rape to include male victims who are raped by women.

In British law, the treatment of male victims of rape is different depending on the gender of the perpetrator with a harsher law being applied to male perpetrators than female perpetrators. We call for equality in law by reform of section 1 of the Sexual Offences Act 2003, to include cases where women force men to engage in non-consensual intercourse. (These cases are currently criminalised under section 4 of the Sexual Offences Act 2003, a less serious offence).

7. To promote the importance of active fatherhood in a child's life.

We call on government to ensure fathers are involved as much as possible in the life of their children. This begins at birth, with maternity services reviewing and improving their support for fathers. Legal changes mandating fathers to be named on birth certificates should be brought into force (with appropriate exemptions). The voice and inclusion of fathers should be recognised as important and vital in all professional practice with respect to children.

Change parental leave and pay to give employed fathers/second parents a minimum of two weeks' paternity leave, plus four weeks' non-transferable parental leave, paid at 90%, to be taken in the baby's first year. A Paternity Allowance with similar benefits for other fathers/second parents should be introduced. Compulsory mediation, when safe, should be seen as the starting point in agreeing custody arrangements for separating parents.

8. Reform prison education.

Wembley Stadium can be filled by the number of men currently in prison, with too many men continuing to offend once their sentence is finished and so returning. HM Inspectorate of Prisons' report on prison education in 2022 showed significant failures on prison education. The recommendations within the report must be implemented.

9. Appoint a Minister for Men's Health and Wellbeing.

To ensure there is focus across government on delivering and co-ordinating policy, action and accountability on men's health, and wellbeing, there needs to be a minister with this specific remit and responsibility.

10. To change the remit of the Government Equalities Office to include men and boys (currently the remit only covers women and girls).

The current remit of the Government Equalities Office does not include gender-specific issues affecting men and boys. This is not in keeping with an inclusive, fair and equality-based government or society – and continues a public policy deficit in tackling wellbeing issues affecting men and boys.

Statistics on the wellbeing of men and boys can be found at: <https://ukmensday.org.uk/key-facts/>

LABOUR'S STRATEGY IS RIGHT UP OUR STREETING!

<https://www.menshealthforum.org.uk/news-type/blog>
11/03/24.

In a recent interview with the Daily Telegraph, **Wes Streeting, the shadow health secretary**, expressed his frustration at the lack of attention given to male health issues. He emphasized that prioritizing men's health does not mean

neglecting women's health; rather, it's about understanding that both are interconnected. Streeter highlighted disparities in healthcare, such as the long wait times for women's diagnoses and the overlooking of common male health issues like mental health crises and preventable cancers.

Streeter and the Labour Party are looking at successful men's health strategies implemented in other countries like Australia and Ireland. They're also considering recommendations from organizations like the House of Commons Health and Social Care Committee and the Forum, which has long advocated for a men's health strategy. By addressing both men's and women's health comprehensively, Streeter believes it could not only improve public health but also reduce political polarization by adopting a 'gender-informed' approach to healthcare.

The Daily Telegraph article

<https://www.telegraph.co.uk/politics/2024/03/09/labour-considers-mens-health-strategy-masculinity-crisis/>

Labour is considering a men's health strategy in response to concerns over a "crisis in masculinity." This follows recognition of issues like high rates of suicide among men aged 45 to 64 and preventable deaths from prostate and testicular cancer. Inspired by a visit to Australia and discussions with the Movember movement, Labour's shadow minister pledges to address mental health and improve cancer diagnosis. Initiatives like Men's Sheds, which promote social activities, are being explored. The government acknowledges men's reluctance to seek healthcare and plans to tailor services accordingly. Calls for a men's health strategy have been ongoing, with advocacy from organizations like the Men's Health Forum.

**HEALTH & SOCIAL CARE SELECT COMMITTEE MEETING
TUESDAY 23RD JANUARY 2024
BLOG BY ANDY BUTTERLY**

House of Commons Health and Social Care Committee session held on Tuesday 23 January 2024 Meeting started at 10.00am,

interrogated Witness(es): Mark Brooks OBE, Policy Adviser: Men's Health, Inclusion and Domestic Abuse; Chiara De Biase, Director of Support and Influencing, Prostate Cancer UK; Amy O'Connor, Global Lead, Policy and Advocacy, Movember; Martin Tod, Chief Executive, Men's Health Forum.

For full video, see below:

[Parliamentlive.tv - Health and Social Care Committee](https://parliamentlive.tv/Health-and-Social-Care-Committee)

The Chair, Steve Brine MP (Cons), explained:

This is the second public evidence session in their Men's Health Enquiry. The broader enquiry is focussing on men's health, wellbeing, and suicide issues among men. Looking at health inequalities, boy's and men's health across their life course & men's sexual health.

This session focusses on the reasons for the lower and falling life expectancy and talk about many health issues and conditions that are particular to men including prostate cancer, testicular cancer and male sexual health.

Today's witnesses:

- Mark Brooks OBE, Policy Adviser: Men's Health, Inclusion and Domestic Abuse
- Chiara De Biase, Director of Support and Influencing, Prostate Cancer UK
- Amy O'Connor, Global Lead, Policy and Advocacy, Movember
- Martin Tod, Chief Executive, Men's Health Forum

Steve Brine stated

Average life expectancy for women is 82.9 and for men is 79

ONS data shows women outlive men by 3.9 years

NOMIS shows men have a higher rate of premature death at every age from 0 to 75

Seems likely that poor health outcomes in men are the result of lifestyle factors, drinking, smoking, obesity, diet & exercise

The first witness, Martin Tod (Men's Health Forum) explained:

Whilst men do have the worst outcomes with respect to lifestyle factors (drinking, smoking, weight, etc.), it is not just these factors that are behind health inequalities.

Other important factors include:

- Biology
- Environmental (the jobs men do)
- System:
 - o Not as much data
 - o Poor relationship with the healthcare system: working age men use primary care less than women until the day they retire, from then there is no difference
- Psychological
 - o E.g., vaccination – concern was about women, but “problem” was with younger men
 - o Attitudes to masculinity

Steve Brine asked Amy O’Conner (Movember) considering that there are many other factors, to what extent are poor lifestyle outcomes directly responsible for the poor health outcomes.

Amy O’Connor explained:

The poor lifestyle behaviours are maladaptive coping mechanisms, and Movember work hard not to place blame of men’s health at the feet of individual men only.

Movember’s approach is to look at:

1. Norms underlying these behaviours
2. Lower health literacy
3. How men are interacting with healthcare systems
 - a. Uni of Manchester – 9% of middle aged men who took their own lives were engaged with the Healthcare system (91% were not)
4. The impact of poor men’s health on others – burden on women. Poor health literacy – “traditional masculine norms” being passed onto sons

Mark Brooks reflected to the group:

The issue around lifestyle is an outcome issue & we should be looking at:

- What is causing those lifestyles?

- How to prevent them?
- How to deal with them when they appear

We need a whole system change in terms of men's health:

- Lack of political delivery and accountability
- Tackle social determinants, such as poverty, employment practice
- Accessibility for men
- Suitability – does it work for men
- Training of health professionals – to be professionally curious and for men's health to be embedded in the education of GPs & health & social care workers when they start training

A whole system change will help deal with the prevention of men going down poor lifestyle routes & also improve the support for men who do go down those routes.

A number of organisations working with men's health have stated that a Men's health strategy & a men's health ambassador will help drive system change which would support the lifestyle issues that men face.

Chiara De Biase – Director of Support & Influencing Prostate Cancer UK on the importance of high profile men speaking up about health challenges:

It's very important, not just about prostate cancer, but about any men's health issues.

Prostate cancer sits in the middle of the Venn diagram of what's already been covered, that men are left behind by a system that reinforces health inequalities.

1 in 8 men will get prostate cancer but there are so many barriers between a man and a prostate cancer diagnosis.

Public conversations allow us to talk about other issues such as male incontinence.

60% of men wouldn't bring up prostate cancer concerns for fear of a rectal examination – but the first step is a blood test, few GPs would perform a rectal exam.

Prostate Cancer UK risk checker: 30 second tool for men to check their risk of getting prostate cancer.

Black men have double the risk of prostate cancer.

Black men & men with a family history must be proactively offered a PSA test.

It needs to be understood that in its most treatable stage is almost entirely asymptomatic. This is counter cultural to how NHS England raise awareness around early cancer diagnosis. Men at risk need to advocate for themselves PSA blood test. We know that men are being refused a blood test by GPs. There are so many profound inequalities and barriers to men getting an early curable diagnosis.

Summary of MP's Questions and Answers

The Q&A with MPs highlighted a series of issues, including:

Access to services

- Healthcare (especially primary care) built around 9-5
- Men are more likely to work full time
- Women working full time also struggle with access
- Blue collar men are most at risk and their jobs are less forgiving
 - Loss of pay
 - May not get next contract
- Health policies are written by white collar people
 - Not thinking about industrial/construction sites, shift work, HGV drivers, 0 hour contracts

Lifelong contact with Health Services

- Women use service more at a young age, e.g., for reproductive health
- Women get called in more often for screenings
- Women with children are using health services more – also bringing their children in
- Men have less need to interact with health services in early life
- Taken by a parent when they are boys
- Many young men not even registered with a GP

Issues when men do get access

- Professional bias, e.g., lower referral rates for weight loss services

- Medical staff often don't know how to engage with men
- Men's health literacy
- Unaware of services
 - Don't know how services work
 - Lack of targeted campaigns (fewer resources spent reaching out)
 - Health myths, e.g., prostate cancer only kills older men
 - Men who don't know they are at higher risk, e.g., for prostate cancer
 - Black men
 - Family history

Men's attitudinal issues

- "I'll work my way through this"
- Stigma of vulnerability
- Societal expectation for men to man up and get on with it

Gendered risks

- Men eat away from home more
- Men and women drink differently
- Men and women smoke differently
- Just not being looked at

The proposed solutions to address these issues could be grouped into the following areas:

Gender responsive healthcare

- Gender specific health checks
 - Erectile dysfunction & links to heart disease
 - Abdominal aortic aneurysm checks have been highly successful
 - How do we implement this to a larger scale?
- Proactively invite men with known risk factors for screenings
- Create condition that men feel comfortable using the health system and that it is there for them
- Need to make sure that local and national websites are really conducive to speaking to men online

Bring health services to where men are

- Man vans on industrial / construction sites
- Make employers more aware
- Using sports settings
 - Bring in coaches and dads too
- Use football clubs to bring fans into changing rooms – bring up health literacy
- Sport – a good example of where men can & do take a lead in the family's health & encourage good behaviours (for boys and girls)
- Need to keep pushing to keep men engaged in sport
- Working with Barbers
 - Giving the information to engage with black men

Targeted health literacy campaigns

- Very successful (just few of them)
- Health literacy in schools
- Outreach for GPs built into schools

Train healthcare professionals

- Pre-qualification and continuing professional development
- Professional curiosity
- Gender specific lens
- Understanding of norms & how men are showing up, language they are using and the space that they are in
- Trained how engage with men and keep them there
 - Men in mind training highly successful
- Awareness of new diagnostic pathways for prostate cancer – 67% less harm
 - Guidelines have not kept up
- Training individuals is not sufficient, we need to create a system to support those individuals to help them to help men with their health more effectively

Requires system change

- If primary care hasn't seen someone for a long time, then they need to reach out
- Not enough men in the system
 - 69% of GPs in training are women

- 11% of Nurses are men
- Change the guidelines to allow GPs to proactively offer black men a PSA test

Men's health strategy

- We have to mainstream men's health
- Problem is hiding in plain site
- Everybody knows
- No one is doing anything about it
- Why we need a strategy
- Need to overcome fatalism
 - A strategy
 - A Minister
 - A clinical lead in the NHS
- Men's health strategy will support a women's health strategy too
- More research is needed
 - We just don't know – the knowledge and the evidence aren't there to give to the medical practitioners
 - Used to be a centre for men's health at Leeds Beckett University – there isn't now
 - A need to say we don't know all the answers
- A Men's Health Ambassador would be a useful start but not enough for the scale of change required

In my opinion, the MPs appeared very engaged and committed to improving men's health.

I hold some concerns about Paul Blomfield's parting statement (before he left early for another meeting) "this is as much as about class as it is about gender".

As Mark Brooks eloquently describes later in the meeting, there has been and still is considerable political resistance to acknowledging inequalities experienced by men and boys (in health and in all other areas too).

An argument frequently used is that such inequalities are better described by class, race, region, other demographics, despite all the evidence to the contrary.

There may be a risk of reading too much into this comment, but I think it wise to keep in our awareness an expectation for this type of argument to be used to block a men's health strategy.

That said, I believe such a presentation to a Select Committee was a tremendous step forward in addressing health inequalities and it was extremely gratifying to see such positive engagement by the MPs present.

EVERY DOG

BY EDWARD CRABTREE, BRITISH MEMBER LIVING & WORKING IN KAZAKHSTAN

A trawl through some of the Men's Day initiatives through history and around the world, both East and West.

Even should they fail to observe it, most people in Western Europe and North America will know something of Women's Day.

Now it is 115 years-old and the first one was organized by the Socialist Party of America and following on from that, was taken up in Europe. However, it took the newly formed Soviet Union to acknowledge it at state level and to enshrine the day in the calendar. They chose March 8th as on that day, in 1917 women (most of their men off fighting the war) took to the streets to protest their living conditions. To this day Women's day constitutes a national holiday in Russia and other post-Soviet nations (Ukraine cancelled it after 2014). The day has devolved into a kind of Valentine's day-cum-Mother's Day (neither of these existing in that part of the world) On March 8th women, for being women, can enjoy being cascaded with tulips and boxes of chocolates and, if married, may well be treated to breakfast in bed.

In the West the same day is not a holiday but did gain some profile when it received recognition from the United Nations in 1977. It's presence here, if often overlooked, takes the form of earnest calls for civic awareness on the part of women's advocacy groups. (Meanwhile the women of Russia are eating chocolate in bed).

The same for men?

The foregoing raises the inevitable question: what about men? Indeed, there do exist dates in the calendar set aside to honour the male contribution to the community. In the post-Soviet countries these are a bit ambiguous – as we shall see. In the West, they are new and not so widely recognized, being the fruits of maverick campaigning over the last thirty odd years.

Seeds of an idea.

Professor Thomas Oaster of the University of Missouri, Kansas gets credit for proposing an International Men's Day in 1992. He did so after authoring a pamphlet entitled: `International Men's Day. R.S.V.P Experience, Education and Culture for Men and Women.` He invited organisations in other continents to help him get the thing off the ground. The first of such days occurred on February 7th in Kansas.

The country that showed the greatest commitment to that day – albeit not on a state level – was the sun-kissed Republic of Malta. They raised their glasses to men on 7th February from 1994 onwards.

The real kickstart, however, came from the Caribbean in 1999. There, in Trinidad and Tobago (an area already known for its festivals) a history professor called Jerome Teelucksingh worked to popularize the event and chose a new date for it – his father's birthday.

Now 19th of November has become the standard Men's day throughout the Western world. It has even gained leverage from being recognized by key figures in UNESCO and, on account of raising men's health matters, been given the green light by the World Health Organisation.

'A statesman adds his voice'.

People have proselyted on behalf of parallel ventures elsewhere too. In 2000 the 32-year-old Austrian journalist George Kindel – who had just co-authored (with Siegfried Meryn) `Men's Health and the Hormone Revolution' – decided to launch a `World Men's Day`. In so doing he managed to interest the former leader of the U.S.S.R Mikhail Gorbachev in the venture. Kindel's dream was to have a day in which men of outstanding achievements would be honoured. Gorbachev became the president and on the first Saturday of November presented the World Men's Day prize to the chosen. This practice, which elicited some backing from the local United Nations leadership,

continued in Vienna up until 2010, when it became a gender-neutral event.

These post-Nineties events in the calendar for men are complementary to Western Women's Day in so far as they have civic awareness as their rationale. One can find here much talk of finding constructive role models for men and of men's health, mental health in particular. However, unlike Women's Day official acceptance by the United Nations (as a body) has yet to be forthcoming.

Eastern Europe's partial men's days.

Gorbachev's concern for the World Men's Day scheme stemmed, in part, because of his inside knowledge of a putative men's day in his own country - and its shortcomings.

From 1920 onwards the Soviet Union observed 23rd February as the Red Army and Navy day. By 2002 this day got a make-over and was renamed Defender of the Fatherland Day and, at the same time, turned into a national holiday. However, since Russia and its erstwhile satellites have male only military service, this begs a question. (Indeed, the question was posed by the American journalist John P. Harris in a tongue in cheek(?) editorial from 1968 called 'Unequal Communism'. Why do they have a Women's Day - but not one for men? -he asked). Indeed, in today's Russia 23rd February functions as a de facto Men's day. On this day a man might expect to wake up to find himself the possessor of a new pair of socks, a shirt, or belt or some shaving cream. Some of this may take a military theme - a khaki pattern say - but this is by no means obligatory. I myself, as a foreigner who worked in Russia but had no intention of ever joining their army, was gifted with a handy hip-flask by a female colleague one year on this day.

The situation has led to a number of jokes about this occasion, such as this:

Man 1 `Why did you ditch your girlfriend? `

Man2: `She's so stupid! She knew I had holes in all my socks and had run out of shaving gel, so what do you think she got me? A new i-pad! `

In Kazakhstan, a post-Soviet country in Central Asia, Defender's Day as a public holiday has been moved forward to 7th May. This is in remembrance of the date when Kazakhstan formed its own military following their gaining of independence in 1992.

So, much of Eastern Europe and Central Asia can already be said to have a Men's Day of a kind although it is one predicated on men fulfilling their traditional role of protector and warrior. (In fact, the Kazakhs now have a great opportunity to make 23rd February – which they still recognize by force of habit -a full on Men's day and leave the 7th May for all the defence of the realm and military parade stuff!)

In an ideal world.

Having experienced 23rd February in Russia I am all in favour of its sentimentalism and the chance it offers for women to acknowledge the male family and friends they have. In my wish list though, it would be demilitarized and would extend to all men regardless of whether they are, or ever intend to be, soldiers or not. (I know that this is a tall order in the current geopolitical climate, but I am thinking long term here!)

Also, I feel that the East need not adopt November 19th as Men's Day – as such an event should emerge in an organic way from national traditions – and they already have a day fit for the purpose.

Likewise, as much as I respect the 19th November initiative I would like to see, alongside its educational aspirations, some of the fun and frolics of the Eastern brethren in it.

It would be even better if this day could be a national holiday alongside women's Day too.

MINISTER FOR MEN ARTICLE FROM JANUARY 2024 – AN UPDATE

BY EDWARD CRABTREE, BRITISH MEMBER LIVING & WORKING IN KAZAKHSTAN

MPs held a debate on the educational attainment of boys on Tuesday 5 March in Westminster Hall. The debate was led by British politicians set their sights on the gender attainment gap.

Early in March of this year, Westminster Hall staged a significant event. This constituted a non-partisan political debate about the causes of boys in the United Kingdom doing worse than their female peers nowadays and possible ways to alleviate this.

On 5th March the central Committee room next to Westminster Hall discussed: `This house considered the educational attainment of boys` with Ian Paisley as the Chair. (The full

transcript can be found at: UK Parliament: Hansard Volume 746 –

<https://hansard.parliament.uk/commons/2024-03-05/debates/9B330447-DF65-42F8-9B2D-388D12684AAD/EducationalAttainmentOfBoys>

Nick Fletcher (Don Valley, Conservative) begged to move the motion. In a sincere but restrained speech the 52-year-old father of two began by stressing that this was not `a battle of the sexes` nor a `competition`. However, for thirty years now the `gender attainment gap` between boys and girls at school has been a conspicuous feature of education. It exists without `biological or intrinsic reason` and `cannot go on any longer`. Meanwhile `trade unions and social mobility organisations` have turned a blind eye this phenomenon even though the figures attesting to it can be seen in `plain sight`.

In fact, 30% of primary school teachers had zero male teachers and boys underachievement tends to be normalised by an attitude of `boys will be boys`. He rounded up his call for `inclusion and equality` by a suggestion that OFSTED include this gender attainment gap in their assessment of school's progress.

A personalized response to this then came from Jim Shannon of the Democratic Unionist Party of Northern Ireland. Confessing that he himself had been something of a school failure in his youth, he felt it important to urge young men not to feel like outcasts should they not do so well in academic terms early in their lives.

He added that in his own country, it was young Protestant males from working -class backgrounds who fared the worst in their educational attainments.

Steve Double (Austell and Newquay, Conservative) wanted to say that too much emphasis was being laid by society on academic performance. He gave himself as an example of someone who had done well in life in spite of not doing so well in exams in his school years.

The buzzword of `toxic masculinity`, he said, had contributed to the damage of male self-image that was at the root of the phenomenon. He reminded the listeners that male suicide is the biggest killer of men below the age of forty.

Resources would be needed to aid the most underachieving section of British society which, in his view, consists of young white working-class men in coastal towns.

Sir David Evennet (Bexleyheath and Crayford, Conservative) contributed in his capacity as a former teacher and lecturer. He bewailed the fact that not enough was being done by his own government to reverse the falling behind of boys in their studies. He underscored the crucial nature of `inspirational teachers` and added that we need to invest in boys, particularly in areas which could improve their reading and writing skills.

`We must not, at any time, let boys decry education` he summarized.

Also sharing this belief in the importance of reading skills was **Peter Gibson** (Darlington, Conservative) who cited initiatives by certain libraries to try and promote this skill. He went on to invoke statistics highlighting the different exam pass percentages among different ethnic groups. He expressed concern over the fact that Gypsy, Romany and Traveller communities came out at the lowest end of the scale.

Alexander Stafford (Rother Valley, Conservative) reminded the house of the fact that there is one suicide in the U.K every 90 minutes and most of them male.

He felt that part of the answer to this problem lies in recruiting more male educators, raising the `shocking` statistic that only 3% of nursery teachers are men.

He also speculated that having more single sex schools might help matter – and at the very least we should have a `conversation` about this – adding that he himself had been a beneficiary of a male only schooling.

Then came the turn of **Catherine McKinnel** (Newcastle-Upon-Tyne, Labour) who added the much-needed perspective from the Opposition.

Agreeing with the consensus concerning the danger of the gender attainment gap, she quoted statistics from the Department of Education which showed just at what a young age the gender gap in education kicks in. A finding from 2022/2023 revealed that that in the reception year just under two thirds of boys as opposed to three quarters of girls demonstrated adequate literacy skills.

She also mentioned mental health issues as being bound up with this problem. Boys, she claimed, would be likely not to feel that they can reach out for the help that is available for them.

(There followed some to-ing- and fro-ing about her party policy on Education and Health. This, however, is beyond the scope of this article.)

David Johnston came next. He was speaking in his capacity as the Parliamentary Secretary of State for Education. It was his remit to defend the government's policy and record on British schools, which he attempted to do. This too, however, lies outside of the scope of this article.

Nick Fletcher's final summation is best encapsulated by a verbatim quotation from a key part of it:

`It is said that the first sign of madness is doing the same thing over and over again and expecting a different outcome. We cannot be in a position like that with our boys. If we let boys down at 11 years old, we will have a problem in the future`.

So...a Minister for Men?

This gender attainment gap taken with other signs of male inequality such as that most of the prison population are men as are most of the rough sleepers as well as most who suffer violence has led many to argue that the time is right for there to be a Minister for Men in the U.K parliament

The existing Minister for Women and Equality, headed by **Kemi Badenoch**, was instituted in 1997 by the Blair administration.

Lord Northbourne in 2004 popularised the notion that a male equivalent of this is needed back in 2004 with a Parliamentary debate around the topic. Now trustees and members of Parity are also calling for the vacuum to be filled by a Minister for Men.

If you concur then sign the UK Government and Parliament Petition and add to the 5,134 signatures! - Trustees and Parity members had recently signed the petition "Appoint a Minister for Men and Boys": (see the petition and Gender Parity Appeal - the first article in this News Briefing.

If you wish to Watch the debate:

DAILY MAIL ARTICLE 16 MARCH 2024 BY STEWART CARR AND KEVIN DONALD

In shocking nanny cam photos she fought to hide, wife's vile 20-year abuse campaign against husband

A husband's harrowing ordeal of abuse by his wife, Sheree Spencer, has been revealed through footage from a nanny cam. Spencer, 45, was sentenced to four years in prison for her extreme control and coercion over her husband, Richard. Lasting two decades, the abuse included beatings, verbal assaults, and humiliating acts. The footage, part of a documentary, aims to raise awareness of male victims of domestic violence. Despite legal challenges, the documentary is set to be released. Spencer, a former HM Prison and Probation Service employee, subjected her husband to physical and emotional trauma. Despite being physically stronger, Mr. Spencer did not retaliate, enduring immense pain and mental scars. Since Spencer's imprisonment, he has joined a campaign supporting male victims of domestic abuse and found happiness with a new partner.

Mr Spencer has joined a campaign called ManKind Initiative, which supports male victims of domestic abuse.

He has also found love again and told media he is happily settled with his new partner.

My Wife, My Abuser: The Secret Footage was aired on Channel 5 on Monday 18 March at 10pm.

PARITY MEMBERSHIP

PARITY is one of few charities in the UK whose sole constitutional remit is to try to protect the equal rights of both men and women in our society. Our work is important despite ever more equality legislation which often creates unfairly new losers as well as winners.

PARITY is run entirely by volunteers and is wholly dependent on subscriptions and donations to fund its work. **Our subscription rate remains at minimum of £10 per annum. (Concessionary rates for younger members in Education and those in hardship).**

We hope therefore that you will join us or continue to support us, either by sending a cheque or completing a Standing Order Form. Please use the loose form enclosed and complete accordingly. Alternatively, you may pay online via DONATE button on our website with your Reference Number: your surname/ post code/ initials (if more than one member at the address).

If you are a tax-payer, please do consider also signing the Gift Aid form. **Please therefore send in your renewal subscriptions for 2024 now.** Please disregard this reminder if you have already renewed your membership for 2024 or pay by Standing Order.

In order to ease record keeping, it is hoped that members will agree to renew their subscriptions in future **at the beginning of each calendar year** rather than on their anniversary of joining.

FUNDING PARITY - GIFT AID

PARITY's work and effectiveness depends largely on the funds we have available. We are grateful to our current members and all those who have made donations in the past.

Boost your donation by 25p of Gift Aid for every £1 you donate

Such income can be increased by applying to HMRC for Gift Aid, a method of giving tax relief for donations.

A donor must have paid tax at least equal to the amount being reclaimed by the charity. The donor is then entitled to tax relief on the amount of the donation plus the amount reclaimed by the charity (the gross amount).

In order to operate the Gift Aid scheme, charities are required to keep records, which can be audited by HMRC to show that their tax reclaims are accurate. In other words, they must keep records that enable them to show an audit trail linking each

donation to an identifiable donor who has given a valid Gift Aid declaration, and that all the other conditions for the tax relief are satisfied. If a charity does not keep adequate records it may be required to pay back to HMRC tax reclaimed

Before a charity can reclaim tax on a donation by an individual, it must have received a Gift Aid declaration from the donor containing certain information and confirming that the donation is to be treated as a Gift Aid donation. Without this declaration, a donation from an individual will not qualify under the scheme. Donors are able to give the charity a declaration in advance of their donation, at the time of their donation, or **up to four years after their donation**. It can cover a single donation or any number of donations. A declaration can be in writing (e.g. by post, by fax or electronically through the Internet) or orally (e.g. over the phone or face to face).

In order to keep PARITY's records up to date we would be grateful if Members could send a communication (by email or post) that includes the information and statement as shown on the last page. Such information will be kept securely in accordance with PARITY's privacy policy.

PARITY LEGACIES?

PARITY's work and effectiveness depends largely on the funds we have available. In this respect, we are grateful to all those who have made donations in the past. Funds for our work could also be helped, of course, with legacies. Perhaps members who are able to would like to consider remembering us also in this way when writing or amending their will.

Thank You

GIFT AID DECLARATION

I want to Gift Aid any donations I make in the future or have made in the past 4 years to: **PARITY**

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

My Details

Name (CAPS)

Address.....
.....

TownPostcode

Tel No.....E-mail

EMAIL treasury@parity-uk.org

Please notify PARITY if you want to cancel this declaration or change your name or home address or no longer pay sufficient tax on your income and/or capital gains.

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

Policy solutions for boys and men

Too many boys and men are struggling—at school, at work, and in their families and communities.

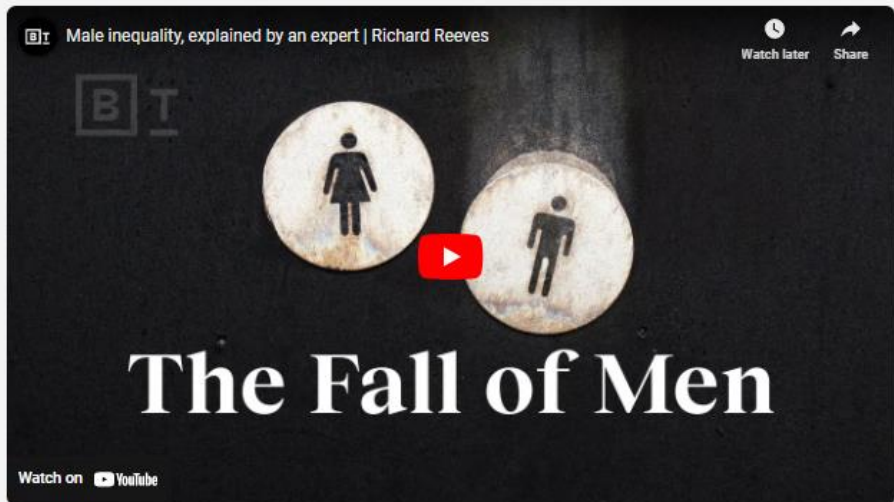
At the American Institute for Boys & Men, we believe many of these challenges are structural and demand evidence-based policy solutions. Our aim is to inform policy and public dialogue with nonpartisan research so that boys and men from all backgrounds can lead healthy, happy, and meaningful lives.

MISSION & VISION

The only national research organization dedicated to issues affecting boys and men.

The American Institute for Boys and Men conducts non-partisan research on issues that affect the wellbeing of boys and men across the United States and designs programs and policies to help them thrive.

OVERVIEW OF THE CHALLENGES + OPPORTUNITIES FACING BOYS AND MEN



[HTTPS://YOUTU.BE/DBG1WGG320K](https://youtu.be/DBG1Wgg320k)

To Save Democracy, Help Men

Jan 5, 2024 | by Rachel Kleinfeld

[HTTPS://AIBM.ORG/COMMENTARY/TO-SAVE-DEMOCRACY-HELP-MEN/](https://aibm.org/commentary/to-save-democracy-help-men/)

— Boys and men are increasingly lonely, and at higher risk of suicide and “deaths of despair”

Fifteen percent of young men today say they don't have a close friend—a five-fold increase since 1990. This loneliness, combined with a range of societal changes and pressures, has resulted in a mental health crisis for American boys and men. Today, men are four times more likely than women to die by suicide but ten percentage points less likely than women to access mental health care.

[LEARN MORE](#)

4x

In the U.S., men are four times more likely to die by suicide than women.

71%

Share of U.S. opioid overdose deaths that occur among men.



— By multiple measures, boys have fallen far behind in education

Over the last several decades, girls have overtaken boys by nearly every metric in educational outcomes. Today, boys are less prepared to start school and, at nearly every point in their K-12 school career, have lower GPAs than girls. Boys are also less likely to take advanced-placement courses and less likely to graduate high school. Women make up the majority of students on America's college campuses.

Girls are thriving—and that's good news—but the data couldn't be more clear. Something's not working for boys.

[LEARN MORE](#)

14%

The percentage point gap in school readiness between boys and girls at age 5.



15%

The percentage point gap between boys and girls receiving bachelor's degrees.

ONE OF THE RESEARCH AREAS - EDUCATION & SKILLS
[HTTPS://AIBM.ORG/WHY-WE-EXIST/RESEARCH-AREAS/EDUCATION-SKILLS/](https://aibm.org/why-we-exist/research-areas/education-skills/)

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14

The percentage point gap in school readiness between boys and girls at age 5.

3x

Boys are three times as likely as girls to be expelled

2/3

of those in the top decile of high school GPA are girls, whereas 2/3 in the bottom decile are boys.

23%

The share of U.S. public school teachers who are male, down from 33% in 1980.



15

The percentage point gap between boys and girls receiving bachelor's degrees.