

Briefing for decision

Options following the launch of the Real Face of Men's Health report

Date due to MO:	3 December 2025	Action required by:	N/A
Security level:	IN CONFIDENCE	Reference:	H2025074692
To:	Hon Simeon Brown, Minister of Health		
Copy to:	Hon Matt Doocey, Associate Minister of Health, Minister for Mental Health		
Consulted:	Health New Zealand: ☒		
Proactive release:	This title is proposed by the Ministry of Health for proactive release: ☐		

Contact for telephone discussion

Name	Position	Telephone
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Minister's office to complete:

- | | | |
|---|------------------------------------|--|
| ☐ Approved | ☐ Decline | ☐ Overtaken by events |
| ☐ Needs change | ☐ Seen | |
| ☐ See Minister's Notes | ☐ Withdrawn | |

Comment:

Briefing for decision

Options following the launch of the Real Face of Men's Health report

Security level: IN CONFIDENCE **Date:** 03 December 2025

To: Hon Simeon Brown, Minister of Health

Purpose

- 1 In response to Movember's [Real Face of Men's Health 2025 Aotearoa New Zealand Report](#) this paper provides an overview of work underway addressing health outcomes for men and seeks your direction on opportunities to further target men's health.

Summary

- 2 This briefing focuses on four key policy proposals included in a report on the state of Men's Health, published by Movember, a global charity who has regularly engaged with Government on aspects of men's health and wellbeing.
- 3 Movember has proposed the development of a men's health taskforce, prioritised health investment, a health system that works well for men, and advancements in research on health outcomes for men (see Appendix 1).
- 4 The health system is currently responding to key areas of focus raised by Movember including men's health disparities, research and evaluation, and workforce improvements. This briefing provides an overview of strategies and actions addressing men's health.
- 5 Movember is seeking the establishment of a Men's Health Taskforce that would lead the development of a men's health strategy.
- 6 Minister Doocey proposed that Movember could host a men's health summit when he met with the group recently. The Ministry agrees that this would be a productive approach, with participation from patients, the health sector and health agencies to identify priority work to improve men's health. This could contribute to emerging and existing work, such as developing the next Government Policy Statement on Health and efforts to improve access to services for men.

Recommendations

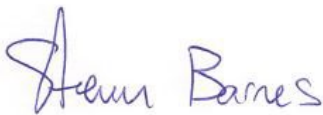
We recommend you:

- a) **Note** Movember's policy recommendations:
 1. Establish a Men's Health Taskforce to guide men's health policy, programmes, research and investment in Aotearoa New Zealand
 2. Prioritise investment in community-based programmes that work to keep men well and strengthen health literacy

3. Build a healthcare system and workforce that respond to the needs of men
 4. Advance research to better respond to how men engage with their health, and healthcare services.
- b) **Note** that health outcomes for men are known, prioritised, planned, delivered and monitored through the collection of data that is disaggregated by gender across health strategies, actions plans and work programmes.
- c) **Indicate** whether you wish to invite Movember to host a one-off summit or forum on men's health that brings together key stakeholders to agree priorities and forward actions.

Yes/No

- d) s 9(2)(f)(iv)



Steve Barnes
Associate Deputy Director-General,
Strategy and Policy
Date: 03/12/2025

Hon Simeon Brown
Minister of Health
Date:

Options following the launch of the Real Face of Men's Health report

Background

- 7 Movember is a global charity that raises awareness of men's health issues and funds projects to help men live longer and healthier lives. Since 2003, Movember has funded projects with a focus on addressing mental health and suicide prevention, prostate cancer, and testicular cancer. Movember aims to "challenge the status quo, shake up men's health research, and transform the way health services reach and support men".
- 8 The Real Face of Men's Health is an international report that highlights health trends and need based on international and global data. The New Zealand 'edition' also overlays some data on health disparities for men in New Zealand and makes policy recommendations specific to the health system and government functions in Aotearoa.
- 9 Movember has engaged with Government about men's health on several occasions. Most recently you spoke at the launch of their report The Real Face of Men's Health on 12 August [H2025070024 refers] and Minister Doocey last met with representatives on 4 November [H2025074832 refers].
- 10 We note that some other countries have recently released men's health strategies including the UK¹ (launched last month), Australia and Ireland. Movember are currently lobbying the Canadian government to develop a national men's health strategy and have published a similar report Face of Men's Health for Canada².
- 11 Minister Doocey is responsible for portfolios that sit alongside your Ministerial responsibilities. This briefing responds to yours and Minister Doocey's requests for further advice.
- 12 Following is an overview of the work underway within the health system addressing issues raised in the report and opportunities to progress work towards achieving Movember's policy proposals for New Zealand.

Key data and evidence on men's health outcomes

- 13 In May, you received advice that included detailed information on disparities in health outcomes between men and women, and between men of different ethnicities. Our health system insights indicate the following health disparities for men [H2025066220 refers]:
 - Lower life expectancies, dying 3-4 years earlier than women
 - Higher rates of suicide
 - Less likely to access health and mental health services for support.
 - Higher smoking rates

¹ [Government unveils England's first ever Men's Health Strategy - GOV.UK](#)

² [The Real Face of Men's Health Report 2025 - English Canada.pdf](#)

- Men are overrepresented in chronic disease diagnoses such as cardiovascular disease, asthma and diabetes
- Men are disproportionately affected by several cancer-types including bowel, melanoma, lung, blood and prostate
- Men are more likely to be at risk of gambling harm and have a co-existing mental health condition.

14 These disparities are even more pronounced for tāne Māori and Pacific men, those living in rural communities, disabled men and other underserved groups such as those in the rainbow community, refugees and migrants.

Summary of key activity in the health system to address men's health

15 While there is not currently a formal men's health strategy, priorities for advancing men's health are threaded through other strategies, such as the Mental Health and Wellbeing Strategy, the Rural Health Strategy, the Māori Health Strategy, the Pacific Health Strategy and the Health of Disabled People Strategy.

16 s 9(2)(f)(iv)

- 17 Expectations set in the GPS, health targets and current work underway across the health system in areas such as Optimal Cancer Care Pathways (OCCP), rural health workforce and service improvements, and system-level data improvements will continue to address key disparities. Monitoring and evaluation of these areas and others are key to tracking the system's responsiveness to men's health, and data is regularly collected that assesses differences in health outcomes and service access and use based on gender.
- 18 The health system is committed to improve data collection, reporting, and monitoring for providers to enable more detailed monitoring for men's health (through disaggregation by gender)³, included in the GPS.
- 19 Appendix One provides further examples of key areas of activity in the health system that address and respond to known health disparities for men and demonstrates where there is alignment with the Movember's policy proposals.

Considerations of Movember's proposals

Proposal 1: Establish a Men's Health Taskforce to guide men's health policy, programmes, research and investment in Aotearoa New Zealand

20 The Movember report proposes the establishment of a Men's Health Taskforce for the purpose of guiding men's health policy, programmes, research and investment in Aotearoa

³ [Government Policy Statement on Health 2024-2027 summary document](#)

New Zealand and supporting the development of a men's health strategy that mirrors the Women's Health Strategy.

A Men's Health Taskforce and Men's Health Strategy

- 21 Developing a new strategy may support clearer priorities and a coherent approach to addressing men's health issues. As shown in Appendix One, there is significant work underway across the health system that will lead to improvements in men's health, but there is currently not an organising framework that brings this work together with shared outcomes.
- 22 However, the potential benefits of this approach need to be considered against the extent and effectiveness of the current approach and the extra work required to develop, implement and monitor a strategy.
- 23 Creating a new Men's Health Strategy would likely require reprioritisation of work programmes for its creation and implementation. Health NZ would need to balance progressing priorities set through a new strategy with existing commitments and priorities, and there would likely be costs related to implementation. Legislative change may be required if a new Men's Health Strategy were to mirror the Women's Health Strategy, which is required under the Healthy Futures Act.
- 24 Given that the existing strategies and work underway is addressing the key health disparities experienced by men the work to develop of a new Men's Health Strategy outweighs the potential benefits.

Proposal 2: Prioritise investment in community-based programmes that work to keep men well and strengthen health literacy

- 25 The report suggests that funding partnerships between industry partners and community-based organisations, focused on men who face higher health risk will fast-track critical work.
- 26 Health literacy is an issue for many New Zealanders, and men may be particularly affected.
- 27 The commissioning of community services and their prioritisation is the responsibility of Health New Zealand and there are a range of community-based funding sources and programmes that aim to keep populations well. While these are generally not targeted exclusively at either men or women, they can contribute to improving men's health disparities. Examples include the Mental Health and Addiction Community Sector Innovation Fund that provided a grant to MATES in Construction⁴ and Gumboot Friday that works to remove barriers to mental health support for young people.
- 28 In some cases, the Ministry has a role in evaluating HNZ commissioned community services, many of which are working to serve people with high health risk, including men. (see Appendix 1).

⁴ 2024 funding for its community workplace-based programme to enhance the wellbeing of construction industry workers and build resilience within the industry. The extra funding will help it to expand its programme from the main centres and into smaller regions around New Zealand

Proposal 3: Build a healthcare system and workforce that responds to the needs of men

- 29 Movember makes the case for strengthening and building a health workforce that is responsive to the health needs of men
- 30 There are currently not specific initiatives to drive uptake of training solely focused on men. Training to support the delivery of care to population cohorts (including men) is part of the core training that health professionals receive.
- 31 Health professionals are expected to meet standards of care for the diversity of the New Zealand population. In some cases, this might include specific teaching or training on gendered elements of care delivery; whereas in other cases it may be integrated into general approaches to caring for a diverse population.
- 32 Specific decisions about what kinds of training are included in education pathways are the purview of the tertiary sector (for undergraduate) and professional bodies (for vocational training) so long as they meet expected regulatory standards.
- 33 Workforce initiatives underway will support improvements for men. For example, Health New Zealand's recently announced refreshed Mental Health and Addictions Workforce plan focuses on faster access to support, more frontline workers and a stronger crisis response.

Promoting and targeting health information and awareness to men

- 34 Health promotion is targeted on a particular programme or disease risk and promotes screening programmes such as the bowel screening campaign or immunisation, or disease risk such as syphilis.
- 35 The Government has recently invested \$19 million in initiatives to improve bowel screening participation rates among populations with low screening rates. This includes promotional and engagement campaigns, new online resources to support conversations about screening and making it easier to return test kits through community laboratories.
- 36 The Ministry of Health sponsors an online health promotion tool, [Kupe](#) for understanding and making decisions about prostate cancer and disease risk.
- 37 You will receive advice on 11 December from PHA on the feasibility of implementing prostate cancer screening pilots [H2025075256 refers].

Investment in prostate cancer data collection

38 s 9(2)(f)(iv)

- 39 The development of comprehensive and standardised data collection across all cancer types, including prostate cancer, is an important consideration for the health sector and work is underway to address this.
- 40 You received advice on a suite of opportunities to improve outcomes for prostate cancer from Te Aho o Te Kahu Cancer Control Agency on 4 September [H2025070351 refers].
- 41 Improving outcomes for patients and reducing variation in care would directly address health need for men while also addressing wider health targets.

Proposal 4: Advance research to better respond to how men engage with their health, and healthcare services

- 42 Movember proposes improvements to collecting, publishing and integrating disaggregated data and includes an invitation to partner with the Movember Institute to contribute to growing the available data on men's health.
- 43 There is currently work underway in the health system to improve data and to support evidence-based decision making and connected services.
- 44 For example, the Ministry are working with Stats NZ to regularly include New Zealand Health Survey data in the Integrated Data Infrastructure (IDI). This allows access to important indicators of access, barriers to access, risk and protective factors for men's health to researchers (including Non-Government Organisations) whilst ensuring data are used safely and ethically.
- 45 The Ministry of Health regularly produces information about the mental health of people in New Zealand. Additionally, the Ministry currently funds several research and evaluation projects which create a deeper understanding about health care retention for men and, more widely, contribute to a growing empirical base (see Appendix 1).
- 46 There may be opportunities to coordinate and fund future research through the soon to be established national research funding body, Research Funding New Zealand. As part of the research funding changes, you will agree the content of the Health and Society Pillar Investment Plan with the Minister of Science, Innovation and Technology (planned for November 2026), and as part of this, could consider how men's health research could be prioritised alongside research that addresses other health needs.

Movember could be invited to host a men's health summit

- 47 At his recent meeting with Movember, Minister Doocey suggested that the organisation could host a men's health summit that brought together leaders from across the sector and government to identify priorities and ways that these may be prioritised across stakeholders. This could consider focus areas across the life course and inform government priorities (such as the development of the next Government Policy Statement on Health) and sector priorities.
- 48 This would be a promising approach and would create shared focus areas across stakeholders and would reflect that progress towards improvements in men's health is a shared responsibility across the government and the sector.

Next Steps

- 49 A draft letter to Movember is attached to formally acknowledge their report and to propose that they host a men's health summit is attached. If you agree with this approach to progressing Movember's recommendations, you may wish to jointly sign this letter.

ENDS.

Appendix 1- Overview of strategies and actions addressing men's health

Strategy/Action-Plan/Initiative	Description	Further Details	Alignment with Movember policy proposals (pp 133-141)			
s 9(2)(f)(iv)			1	2	3	4
			✓	✓	✓	✓
Mental Health and Addiction Workforce Plan (2025 Refresh)	The plan has a focus on growing the Mental Health and Addictions workforce over the next 3 years	Areas of focus: Support workers, Nursing, Allied Health, Forensic, Addiction and Consumer and Peer support			✓	
Mental Health and Addiction Community Sector Innovation Fund	The Government has invested \$10 million over two years for the Mental Health Innovation Fund, a contestable fund supporting faster access to a greater range of community-led support.	- To date, matched funding has been provided to organisations including the Sir John Kirwan Foundation, Mental Health Foundation, Wellington City Mission, Just a Thought and Tend Health Ltd. - MATES in Construction has also received matched funding through this fund. This is of particular relevance to men, given that men make up around 84% of the construction industry (as of December 2022, Household Labour Force Survey 2023), and men in the industry have approximately 1.4 times the rate of suicide compared with men outside the industry (Jenkin and Atkinson 2021; data from 2007 to 2019).Additional funding will support MATES in Construction to expand its outreach to worksites nationwide, continuing to reduce stigma and promote help-seeking across the construction sector.		✓	✓	

Strategy/Action-Plan/Initiative	Description	Further Details	Alignment with November policy proposals (pp 133-141)			
			1	2	3	4
Suicide Prevention Action Plan	Males have approximately 2.5 times higher rates of suicide than females (Health New Zealand 2025; data from 2023/24). In June 2025, the Minister for Mental Health released the Suicide Prevention Action Plan 2025 – 2029. The action plan provides clear direction and a more joined-up approach to guide collective suicide prevention efforts over the next five years, with 21 health-led actions and 13 cross-agency actions.	Some of the areas of action within the plan to address suicide include: • actions to address the role of alcohol in suicide and self-harm • appropriate reporting standards, adequate supporting guidance, and guidelines for media outlets • restricting access to means of suicide • early intervention, particularly for young people and ensuring access to support when they need it (eg, through school settings) • timely coordination of activities that are appropriate and respectful after a suicide (postvention supports).		✓	✓	

Strategy/Action-Plan/Initiative	Description	Further Details	Alignment with November policy proposals (pp 133-141)			
			1	2	3	4
Youth mental health	We are progressing a range of initiatives to improve and support child and youth mental health, including for boys and young men.	\$6 million each year in Gumboot Friday to support thousands of young people aged between 5 to 25 years to access mental health support faster before they reach a crisis through the \$10 million Mental Health Innovation Fund, matched funding to youth-focussed organisations Youthline and the Rotorua Community Youth Centre Trust \$2 million each year for New Zealand's first Child and Youth Mental Health and Addiction Prevalence Study. The findings from this study will help target support for children and young people where it will have the greatest impact \$3.5 million each year across three districts with lower investment in specialist infant, child and youth mental health services to support additional capacity and navigation to remove barriers to access.	✓	✓	✓	✓
Meth-amphetamine response programme	The NZ Health Survey 2024/25 found that men were 2.8 times more likely to report using amphetamine-type stimulants in the past 12 months. The Ministry and Health New Zealand have established a methamphetamine response programme to reduce the demand for methamphetamine consumption.	\$6.9M over four years will be invested to ensure that regions that are particularly at risk have additional capacity and capability to deal with methamphetamine-related harm. The four areas to receive this investment are: Northland (Kaikohe to Kaitia); Hawke's Bay (Hastings to Wairoa); Gisborne and Tairāwhiti; and Rotorua. \$14M over four years will be made available to increase capacity among intensive treatment service providers across the country, with priority given to those areas particularly at risk. - A further \$5.9M over four years has been allocated from the Proceeds of Crime fund for a hard-hitting national campaign aimed at stopping people starting to use methamphetamine.		✓	✓	

Strategy/Action-Plan/Initiative	Description	Further Details	Alignment with Movember policy proposals (pp 133-141)			
			1	2	3	4
The Prevent and Minimise Gambling Harm Strategy	Public Health approach to focus on actions that reduce gambling related harm for individuals, families and communities.	Gambling Harm Research Programme will look at gender as one of the many factors where differences may lie and to provide evidence that targeted intervention might be needed. This is especially around online gaming and gambling while young men seem to show a higher engagement and risk-taking behaviour.				✓
s 9(2)(f)(iv)			✓	✓	✓	✓
Can Share-Cancer Data Collection	The CanShare programme supports clinical and patient decision making at point of care. Outcomes will include advanced analytics capability supporting up-to-date monitoring of cancer care throughout NZ; Enabling the collection of complete and accurate cancer data, joining currently disparate data siloes and providing means to share timely clinical cancer information as needed.	The development of comprehensive and standardised data collection across all cancer types is an important consideration for the cancer sector. Data must be collected in a consistent manner that ensures accessibility, interoperability, and usability. Addressing cancer data collection via individual tumour-specific data registries is not ideal. A unified approach would deliver more informative and integrated data that can significantly support clinical care, research, and policy. This approach aligns with the CanShare concept and would enable improved information at the point of patient contact and facilitate near real-time decision-making, enhancing the quality and responsiveness of cancer care. However, achieving this requires sustained investment in infrastructure and robust management systems, including quality assurance, governance and effective mechanisms for data dissemination. Connections have been established with Health New Zealand; a cloud database is being built and there is work underway on individual programmes comprising CanShare.			✓	

Strategy/Action-Plan/Initiative	Description	Further Details	Alignment with November policy proposals (pp 133-141)			
			1	2	3	4
Optimal Cancer Care pathways	Optimal Cancer Care Pathways (OCCP) describe contemporary best practice guidance and expectations for the delivery of optimal cancer care by tumour type. Each OCCP has been designed in partnership with the sector, patients and whānau.	- to reflect the best service capabilities available in New Zealand - to provide a national expectation of equitable, high-quality, timely, and evidence-based cancer prevention and care for all New Zealanders. There are currently 19 OCCPs, including bowel cancer, lung cancer and prostate cancer.			✓	
Rural Health Strategy	Five Priorities: -Treat rural communities as a priority group. -Focus on prevention and healthier futures. -Make services available closer to home. -Support access to distant services (e.g., travel assistance, telehealth). -Build a valued and flexible rural health workforce	Rural men often face barriers to accessing care, especially rural Māori. This strategy will contribute to supporting people in rural communities by a health system that meets their needs.	✓	✓	✓	✓

Strategy/Action-Plan/Initiative	Description	Further Details	Alignment with November policy proposals (pp 133-141)			
			1	2	3	4
HNZ rural health actions	Improvements and incentives for rural health workforce Mobile health services for screening, oral health, surgical and mental health support			✓	✓	
Primary Care Tactical Action Plan	24/7 Digital primary care access Workforce growth and retention Medicines access Extending prescribing Funding and contract reform Integration and Performance	Each of these actions will support improvements to men's health by ensuring that they have timely access to the care they need from primary care providers to keep themselves healthy and to strengthen the overall responsiveness and sustainability of the health system.	✓	✓	✓	
Primary Care Outcomes and Measurement Framework	Performance measures, s 9(2)(f)(iv) reinforcing expectations of primary care and support improvements to patients' outcomes.	This initiative will allow for greater insights into primary care across the focus areas of the Framework, including potential to identify men's primary care access improvements.	✓	✓	✓	✓

Strategy/Action-Plan/Initiative	Description	Further Details	Alignment with November policy proposals (pp 133-141)			
			1	2	3	4
s 9(2)(f)(iv)					✓	✓

Strategy/Action-Plan/Initiative	Description	Further Details	Alignment with November policy proposals (pp 133-141)			
			1	2	3	4
Pacific Health Strategy	5 key priority areas: population health: working with communities to build, maintain and enable strong foundations for Pacific health and well-being; disease prevention: health promotion and good health and wellbeing throughout the life course; understanding needs of Pacific peoples and communities: and enabling them to exercise authority over their health and wellbeing; Ensuring that timely, high-quality services are reaching Pacific peoples, wherever they live. Growing and supporting strong Pacific health leadership and workforce	Key research projects supporting Pacific Men's Health: - Improved health data and cancer risk analysis: Enables accurate tracking of cancer incidence and mortality, identifying preventable risk factors (e.g., smoking, diet) to inform targeted screening and prevention. - Integrated youth service models: Building evidence for culturally safe, holistic care addressing mental health, education, and social needs - critical for early intervention and long-term positive outcomes. 24/7 digital access to primary care: Reduces barriers for Pacific men in shift work or remote areas, ensuring timely consultations and early management of chronic conditions. - Mental Wellbeing System mapping: Captures lived experience to identify systemic gaps and cultural barriers, improving mental health support and reducing stigma. - Explainable AI for diabetes: Identifies novel risk factors and informs tailored interventions for Pacific men, addressing high diabetes prevalence. Cross-agency initiatives increasing visibility and reach of men's health promotion: - Neurodivergence work (head injuries, foetal alcohol syndrome, ADHD): data collection and treatment guideline development to increase access to care and awareness of cognitive and behavioural health challenges impacting wellbeing and employment. - Monitoring frameworks: Tracks progress and accountability for Pacific health priorities, including men's health indicators. - Communicable disease prevention: Focus on dengue, measles, whooping cough, cross-border health security, and pandemic preparedness to protect high-risk Pacific men. - RSE worker health education and websites: Provides accessible health information and preventive care for Pacific men in seasonal employment, reducing occupational health risks	✓	✓		✓

Strategy/Action-Plan/Initiative	Description	Further Details	Alignment with November policy proposals (pp133-141)			
			1	2	3	4
Health of Disabled People Strategy and Action Plan	Improving Health Outcomes for people with Intellectual Disabilities (ID)	Men with intellectual disability have higher health need and lower life expectancy, Māori and Pacific men with intellectual disabilities often faring worse. s 9(2)(f)(iv)			✓	
	Data/Identifying Disabled people in the health system	Identifying disabled people at the system level will enable the Ministry to understand system drivers of disabled population health and how outcomes may differ from non-disabled. This data will integrate with existing health data and can be disaggregated to explore disabled men's or Tangata Whaikaha Tāne Māori health needs. This level of insight will support the health system to maximise investment and drive meaningful change.				✓
Evaluation of programmes and initiatives	Current research and evaluation projects contributing to understanding about health care retention for men and contributing to an empirical base include:	- Improving the quality of Pacific peoples' health data; Proportion and number of cancer cases (+/- deaths) attributable to modifiable exposures in New Zealand; - Investigating capture-recapture as a tool for estimating prevalence and bias in administrative data: A proof-of-concept estimating prevalence of Gout; - Evaluation to build the evidence base of integrated youth service models; - Evaluating 24/7 digital access to primary care; - What is this thing called the Mental Wellbeing System? – Lived experience mapping of the system that produces mental wellbeing in Aotearoa New Zealand; - Āti Awa Toa Hauora Partnership Board Whānau Voice data storage and protection solutions; - Leveraging Explainable AI to Identify Novel Risk Factors and Inform Policy Interventions for Diabetes in New Zealand;	✓			✓

		• Characteristics of effective primary and community healthcare for tāngata whaikaha Māori and evidence- • Enabling informed policy to address inequities and the harm that sub-optimal use of medicines results in				
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PROACTIVELY RELEASED

