**Op-Ed: Improving Men’s Health in Our Community**

In the United States, men have high rates of major diseases, such as heart disease, cancer, and stroke, all too often due to commercial tobacco use and additional barriers to good health. Many of those diseases are preventable or, when diagnosed early, can be successfully treated if everyone has awareness and access to existing prevention and diagnostic tools. Here at <insert name of organization or state>, we believe there are many ways that we can improve health and reduce preventable deaths among men in our community.

As background, in our state of <insert state name>, <xx> men died from heart disease and <xx> men died from cancer in 2021, the most recent year for which data are available.1,2 Tobacco use is responsible for many of these deaths; in fact, cigarette smoking causes an estimated 33% of cancer deaths in men.3

Tobacco-related diseases especially affect men, in part due to high levels of tobacco use. 24.1% of men in the United States report using tobacco.4 In our state, <xx>% of men smoke cigarettes.5 Barriers to men’s health also contribute to the disproportionate effect of tobacco-related diseases on men in America. For example, men are less likely than women to utilize regular healthcare, and harmful stereotypes about masculinity may keep men from seeking care.

Men with low socioeconomic status characteristics (SES), such as having a low income or being uninsured, experience the brunt of the harmful effects of tobacco use. Men with low SES characteristics often live in areas with increased availability of tobacco, decreased access to healthcare, and increased exposure to environmental hazards, such as secondhand smoke, radon, and pollution. Additionally, it is no secret that tobacco companies target certain neighborhoods with advertisements, especially those with low SES characteristics.

**How Can We Help Men in Our Community?**

Fortunately, we have tools to support the men in our communities in quitting tobacco, accessing cancer screenings and treatments, and improving their health.

One of the best ways to reduce tobacco-related diseases is to help men quit tobacco as early as possible—or to never start in the first place. Research shows that quitting early—before the age of 45 years—can reduce men’s excess risk of death by 90% or more.6 There are many tobacco cessation [resources and toolkits](https://www.cdc.gov/tobacco/quit_smoking/index.htm) available through CDC that can be adapted for local use.

We can also remove barriers to men’s health by promoting regular cancer screenings. For instance, low-dose computed tomography scans can help find lung cancer early, when treatment is most effective, and may reduce lung cancer deaths by 20%.7 However, in <insert state name>, only <xx>% of those at high risk for lung cancer have been screened.8 Promoting early detection of lung cancer can make a positive difference in treatment options and outcomes.

Improving men’s overall health can reduce the effects of tobacco-related diseases, including tobacco-related cancers and chronic obstructive pulmonary disease. For example:

* Using local programs to connect men with routine primary care and insurance coverage can improve diagnosis and treatment of chronic diseases,
* Promoting access to free and low-cost cancer screening and survivorship resources can improve early detection, provide more treatment options for any cancers that are found, and positively affect cancer outcomes, and
* Instituting policies that address social determinants of health, such as food insecurity, can improve health for men with low SES characteristics.

Additionally, policies can also be powerful protectors of health. For example, policies that require smokefree spaces, especially in worksites and multiunit housing, can protect all men from exposure to secondhand smoke. Additionally, policies promoting access to state tobacco quitlines that provide evidence-based, free, and confidential tobacco cessation services year-round, including on holidays and weekends, can encourage those who smoke to quit or cut back on tobacco use. Here in <insert state or locale name>, we have implemented <insert program> to <insert program’s goals>. <Insert a sentence about relevant findings from the program>.

To improve tobacco-related disease outcomes among men, we suggest:

* [insert example]
* [insert example]

To reduce barriers to men’s health, we suggest:

* [insert example]
* [insert example]

In <insert state>, we are committed to reducing the effects of tobacco-related diseases on men, especially those with low SES characteristics. Together, we can improve men’s health by raising awareness of cancer prevention, screening, and treatment options and by minimizing the effects of commercial tobacco on men’s health.

Resources (Local):

* [list free local resources]
* [list free local resources]

Resources (National):

* American Cancer Society National Lung Cancer Roundtable’s [National Lung Cancer Screening Day](https://nlcrt.org/lung-cancer-screening-day/)
* American Lung Association’s [State of Tobacco Control](https://www.lung.org/research/sotc)
* Centers for Disease Control and Prevention’s (CDC) [Tips From Former Smokers Campaign](https://www.cdc.gov/tobacco/campaign/tips/index.html)
* CDC and Million Hearts Initiative’s [Live to the Beat Campaign](https://www.livetothebeat.org/about)
* COPD Foundation’s [Resources](https://www.copdfoundation.org/)
* National Cancer Institute’s free [Cancer Support Services](https://supportorgs.cancer.gov/home.aspx?js=1)
* Pancreatic Cancer Action Network’s [Resources](https://pancan.org/about-us/)
* SelfMade Health Network’s (SMHN) fact sheet, [From the Lungs to the Heart: How Tobacco-related Diseases and Cancers Affect Men’s Health](https://selfmadehealth.org/download-view/from-the-lungs-to-the-heart-how-tobacco-related-diseases-and-cancers-affect-mens-health/)
* SMHN’s [Healthier Nation Fact Sheet: Blue Collar Industries and Worksites](https://selfmadehealth.org/download-view/healthier-nation-fact-sheet-blue-collar-worksites/)
* SMHN’s [Quit Tobacco Toolkit: Men’s Health](https://selfmadehealth.org/download-view/selfmade-health-network-quit-tobacco-toolkit-mens-health/)
* SMHN’s Regional Resource Lead Organization (RRLO): [Kentucky RRLO Best and Promising Practices Resource Guide: Lung Cancer Prevention and Survivorship is Good Business](https://www.kycancerc.org/worksite-resource-kits/)
* ZERO Prostate Cancer’s [Resources](https://zerocancer.org/)

References

1. KFF State Health Facts: Total Heart Disease Deaths by Sex. KFF. Updated April 5, 2023. <https://www.kff.org/other/state-indicator/heart-disease-death-rate-by-sex/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>
2. KFF State Health Facts: Total Cancer Deaths by Sex. KFF. Updated April 5, 2023. <https://www.kff.org/other/state-indicator/cancer-death-rate-by-sex/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>
3. Islami F, Sauer AG, Miller KD, Siegel RL, Fedewa SA, Jacobs EJ, McCullough ML, Patel AV, Ma J, Soerjomataram I, Flanders WD, Brawley OW, Gapstur SM, Jemal A. Proportion and number of cancer cases and deaths attributable to potentially modifiable risk factors in the United States. Ca Cancer J Clinical. 2018; 68(1):31-54. <https://doi.org/10.3322/caac.21440>
4. Cornelius ME, Loretan CG, Jamal A, Lynn BCD, Mayer M, Alcantara IC, Neff L. Tobacco Product Use Among Adults—United States 2021. MMWR. 2023; 72(18):475-483. doi: <http://dx.doi.org/10.15585/mmwr.mm7218a1>
5. America’s Health Rankings Analysis of CDC, Behavioral Risk Factor Surveillance System, United Health Foundation: Smoking in United States. America’s Health Rankings. Accessed 2023. <https://www.americashealthrankings.org/explore/measures/Smoking?population=Smoking_Male_C>
6. Association Between Smoking, Smoking Cessation, and Mortality by Race, Ethnicity, and Sex Among US Adults. JAMA Netw Open. 2022; 5(10):e2231480. doi: <http://dx.doi.org/10.1001/jamanetworkopen.2022.31480>
7. Lung Cancer Key Findings. American Lung Association. Updated November 17, 2022. Accessed September 15, 2023. <https://www.lung.org/research/state-of-lung-cancer/key-findings>
8. State Data. American Lung Association. Updated November 17, 2022. Accessed 2023. <https://www.lung.org/research/state-of-lung-cancer/states>