



Australian **Men's** Health Forum

The peak national forum promoting a social approach to male health and wellbeing

INFORMATION KIT

Who cares
WHAT A MAN
NEEDS?
We do.

Men's health, boys' health

- physical ▸ psychological ▸ emotional
- intellectual ▸ social ▸ education
- spirituality ▸ sexuality ▸ relationships

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Introduction

The Australian Men's Health Forum (AMHF) is the national peak forum for a social determinants approach to the health of men and boys. We are an alliance of organisations, service providers, plus individual men and women, actively engaged and interested in addressing the physical, psychological, emotional, intellectual, educational, social, spiritual, sexual and relationship needs of men and boys in Australia.

This doesn't mean we should ignore the biological and genetic factors influencing men's health, nor the behavioural factors. But these two areas have received so much attention that we need to balance this out by bringing to the country's attention all those social factors which influence men's and boys' health. We mean the situations where boys grow up and are educated, where men work, what happens to them in relationships, their lives after retirement, the health experience of Aboriginal and Torres Strait Islander men and more. The World Health Organisation calls this perspective the Social Determinants of Health (SDoH) and has a Commission dedicated to promoting consideration of the SDoH (www.who.int/social_determinants/thecommission/en/). The AMHF is committed to promoting the health of males by an increased understanding and application of the SDoH.



The AMHF is pleased that the Federal Government supports these ideas, both through the National Male Health Policy and support for first ever male health longitudinal study. The Government is already doing some work utilising a SDoH approach, but can do more to channel funds into these preventive approaches.

AMHF is growing across the country: we wish to support individuals and groups who share our passion for, in the words of the National Male Health Policy, building on the strengths of Australian Males.

AMHF is managed by a Board elected by its membership. AMHF membership consists of both organisations and individuals from throughout Australia. To see details of the elected members of the Board click this link: www.amhf.org.au/board



Mission

Our mission as the Peak National Forum is to expand the use of social determinants to improve male health and wellbeing.

Objectives

The key objectives are:

Inter-agency co-operation

1 Work collaboratively, and encourage collaborative approaches across the broad range of services, research and policy development organizations, stakeholders and government bodies to improve the health and wellbeing outcomes for men and boys.

Community interaction and representation

2 Promote the development of social environments which build the health and social wellbeing of men and boys.

3 Develop and promote processes to actively encourage the participation of community members in shaping policy and practice.

Awareness and education

4 Respond and contribute to the ongoing social discourse about men and boys in the media, academia, government and non-government sectors.



Policy and advocacy

5 Work with all levels of governments to develop effective responses to the needs of men and boys and promote best practice within government funded services.

6 Actively advocate with and on behalf of men and boys to government and non-government sectors to adopt policies, practices and legislation that are beneficial for the health and social wellbeing of men and boys, especially those with the greatest need or disadvantage in our communities.

7 Contribute to and promote an increased public and professional awareness about health and social wellbeing issues for men and boys.

8 Identify the social determinants that are detrimental to the health of men and boys and promote those determinants that foster wellness, including the positive role of fatherhood, the importance of work, supportive relationships and social connectedness.



The AMHF Core Values are:

INCLUSIVENESS

AMHF seeks a diverse membership of organisations and individuals that are committed to and work to address the health and social wellbeing needs of all men and boys and other issues that impact on them.

GENDER EQUITY

AMHF promotes respect for and equality between men and women.

DIVERSITY

AMHF exists for all men and boys in Australia regardless of their sexual preference, ethnicity, age, socio-economic status, beliefs or political affiliation.

POSITIVE APPROACH

AMHF affirms a strengths-based view of men and boys - one that acknowledges their unique contribution to all forms of social and human endeavour and recognises the importance of key relationships in their lives.

NON-ALIGNMENT

AMHF is not aligned with any ideological position, political party or religious group and is willing to respectfully engage with those who espouse differing views.

INTELLECTUAL INTEGRITY

AMHF is rigorous in its approach to issues affecting men and boys and adopts an evidence-based approach in its considerations of specific concerns.

RESPECTFUL PARTNERSHIP

AMHF embraces respectful collaboration with other organisations, service providers, volunteer groups and individuals, in order to address the needs of men and boys.

ACCOUNTABILITY

AMHF is open and transparent in its governance and all aspects of its operations.



The Social Determinants of Health

Our mission as the peak national forum is to expand the use of social determinants to improve male health and wellbeing.

The Social Determinants of Health (SDoH) are a concept that is endorsed by The World Health Organisation. The WHO hosts the Commission for the Social Determinants of Health, and promotes action on the SDoH to all governments around the world. Information about the WHO work in SDoH can be found here: www.who.int/social_determinants/en A summary document that explains the SDoH in clear language is The Solid Facts: www.euro.who.int/_data/assets/pdf_file/0005/98438/e81384.pdf

// The social determinants of health are the conditions in which people are born, grow, live, work and age, including the health system. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries. //

The World Health Organisation

// The Commission's main finding is straightforward. The social conditions in which people are born, live, and work are the single most important determinant of good health or ill health, of a long and productive life, or a short and miserable one.This ends the debate decisively. Health care is an important determinant of health. Lifestyles are important determinants of health. ...But, let me emphasize, it is factors in the social environment that determine access to health services and influence lifestyle choices in the first place. //

Dr Margaret Chan, Director General, World Health Organisation.

The National Male Health Policy, released 6th May, 2010, had a strong emphasis on the social determinants of male health.

AMHF is a member of the Social Determinants of Health Alliance www.socialdeterminants.org.au

Male Health and Wellbeing Facts

Men and women have different experiences of health and wellbeing, particularly when it comes to the social determinants. Male health outcomes resulting from the current social and environmental structures include the following:

SUICIDE:

Three out of four deaths due to suicide are by males, demonstrating a lack of male appropriate supports and services, or that the services that are there, are not connecting with men sufficiently. Karaminia¹ et al (2007) found that men were four times more likely to suicide within two weeks of being released from prison than at any time in the following six months, and this trend was not evident with women post prison release. The reference concludes that 'For men, risk factors may include social isolation and an inability to express negative emotion.' The risk of suicide is four times higher for men in relationship breakdown than in other marriage statuses².



Additionally, a quarter of all deaths of young men between 15 and 24 in Australia are attributed to suicide³. There is also a particularly high level of suicide in men in the 25-45, and 80+ cohorts.⁴



WORKPLACE AND ROAD TRAFFIC INJURY:

Men are over represented in deaths from workplace injury, in dangerous workplaces and occupations, and in road traffic injuries. Between 2003 and 2007, men died in road traffic incidents at four times the rate of women, with peaks at 19-25 years of age, and in the 80+ cohort⁵.

VIOLENCE:

One in two men over the age of 15 have experienced violence at some point in their lives. According to ABS statistics men are responsible for most of the violence against women and other men. There are very few funded programs that proactively engage men, or that work towards rehabilitation of men in the justice system, to assist them to become healthy contributing members of society.

CANCER:

Men are 84% more likely to die of preventable cancers common to men and women⁶. Men die of prostate cancer at higher rates than women die of breast cancer.

EDUCATION:

Boys are lagging behind girls in most educational outcomes, and progress to tertiary institutions in lower numbers. Only about 20 percent of primary school teachers are male. Many children grow up with no positive male mentors or role models in their lives.

FAMILY LAW:

Many men and children are unfairly alienated from one another through the family law system.

FATHERHOOD:

Child health and parenting services often fail to include fathers. In Australia, fathers lead approximately 15% of single parent households. Improving the male and father-friendly practices of services is vital to engaging these men and their children, and ensuring that services, which may have traditionally focused on mothers, are also adjusting their practice to support single fathers. A Canadian study found children of strongly involved fathers experienced improved cognitive functioning and resilience, more supportive social networks, and reduced depression, stress and substance abuse. Fathers also gained many positive benefits such as improved self-confidence, reduced distress and substance abuse, and lower hospital admissions.⁷



HOMELESSNESS:

ABS statistics show that about, about 56% of the homeless population are men⁸. Three times as many men as women are accommodated in boarding houses (76:24%), and men are much more likely to be in improvised dwellings, tents or sleeping rough (64% compared with 36%).⁹

OTHER FACTORS:

The Australian Institute of Health and Welfare webpage¹⁰ on male health lifestyle factors, states that:

- Approximately 38% of males living in the most socio-economically disadvantaged communities use illicit drugs
- Excessive alcohol consumption occurs in approximately 10% of the male population over 14 years old
- Nearly 50% of men aged 16-85 have experienced a mental health problem during their life
- Only one in six Australian males used Medicare services in 2008-9, including 25% of men aged 25 – 34 and over 85
- In 2001-2, nearly one in two men between 16 and 59 experienced problems with their sexual function

- Only 42% of men over 18 gained sufficient exercise
- Two in three men are overweight or obese.
- In 2011, only 75% of boys completed year 12 compared to 84% of girls, and 30% of men compared to 41% of women completed a bachelor degree¹¹

The Australian Institute of Health and Welfare regularly updates information on the status of the health of Australia's males.

Visit: www.aihw.gov.au/male-health



Many of these statistics relate to the physical and mental health status of Australian males. Looking at the social determinants means thinking about the systems and structures in the wider society, including the health system, that can be addressed to prevent some of that illness.

AMHF Activities

MEN'S HEALTH WEEK

In partnership with the Men's Health Information Resource Centre at the University of Western Sydney, AMHF promotes International Men's Health Week throughout Australia. This is conducted in June each year. Further details are available at www.menshealthweek.org.au



THE NATIONAL MEN'S HEALTH GATHERING

AMHF co-ordinates the National Men's Health Gathering held every two years. The Gathering consists of three national conferences:

- National Men's Health Conference
- National Aboriginal and Torres Strait Islander Male Health Convention
- National Men and Vulnerable Families Forum (previously the National Men and Family Relationships Forum)

Further details are available at www.workingwithmen.org.au

OUR PARTNERSHIPS

The strength of AMHF has been in the partnerships it has formed and maintained. As an organisation with modest resources and one part-time paid administrator working one day per week, it survives on the commitment and volunteer efforts of its members, in particular those who are or have been members of its Board.

The Men's Health Information and Resource Centre (MHIRC) at the University of Western Sydney has been a foundation member. MHIRC is the registered office of AMHF, and has always been represented on the Board.

The website Men's Health Australia is a partnership between AMHF, MHIRC and Men's Health South Australia www.menshealthaustralia.net

AMHF maintains a close relationship, including quarterly teleconferences, with the men's health and well-being organisations in the various states and territories, several of which have, or have had representatives on the Board. These include Men's Advisory Network (WA), Men's Health Forum (NSW), Male Health Victoria, Men's Services Network (Tasmania), Men's Wellbeing (QLD) and Men's Health South Australia, plus AMHF has a close relationship with the Men's Health Strategy Unit of the Northern Territory Department of Health.

NEWSLETTERS AND INFORMATION DISSEMINATION

AMHF also publishes a newsletter several times a year, through which we highlight recent issues and articles, research and forums that align are current and relevant. Our website provides links to other key organizations and relevant information outlets.

Links to partner organisations

Australian Capital Territory

www.amhf.org.au/ACT

New South Wales

www.menshealthforumnsw.org.au

Northern Territory

www.amhf.org.au/NT

Queensland

www.menswellbeing.org

South Australia

www.menshealthsa.com.au

Tasmania

www.amhf.org.au/Tasmania

Victoria

www.malehealthvic.org.au

Western Australia

www.man.org.au

Men's Health Australia

www.menshealthaustralia.net

AMHF Membership

AMHF has both organisational and individual members. For details, including an application form, go to www.amhf.org.au/membership

References

- 1 Life Communications Literature review www.livingisforeveryone.com.au/LIFE-News-issue-7.html
- 2 Wyder et al. 2009, Separation as a suicide risk factor, Journal of Affective Disorders, Vol. 116
- 3 www.abs.gov.au/ausstats/abs@.nsf/Products/7BC79569347A65D5CA2579C6001B6475?opendocument
- 4 Health status report on suicide and self inflicted injury related mortality for the Australia for persons aged 15-85+ years . Epidemiology Unit, Department of Health and Human Services, Tasmania. February 2011.
- 5 Health status report on transport related accidents related mortality for the Australia for persons aged 15-85+ years . Epidemiology Unit, Department of Health and Human Services, Tasmania. February 2011.
- 6 www.shitmatesdontsay.com/the-facts
- 7 Ball et al. 2007, Fathers Involvement as a Determinant of Child Health.
- 8 AIHW, Counting the homeless 2006: Tasmania, www.aihw.gov.au/publication-detail/?id=6442468263
- 9 Counting the Homeless [www.shelertas.org.au/about/pdf/2009 Entries/Aus_Gov_Counting the Homeless.pdf](http://www.shelertas.org.au/about/pdf/2009%20Entries/Aus_Gov_Counting_the_Homeless.pdf)
- 10 www.aihw.gov.au/male-health
- 11 ABS Gender indicators 2012. [www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/4125.0~Jul%202012~Media%20Release~Men%20fare%20worse%20than%20women%20in%20education,%20health%20and%20crime%20\(Media%20Release\)~6152](http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/4125.0~Jul%202012~Media%20Release~Men%20fare%20worse%20than%20women%20in%20education,%20health%20and%20crime%20(Media%20Release)~6152)



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