

THE MALE

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**Self-care and
why it matters**



HEALTHY MALE
ANDROLOGY AUSTRALIA

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Waiting rooms provide valuable opportunities to engage men and boys, and their families, in thinking about their health and promoting healthy behaviours. We should make more of that opportunity.



Welcome

Self-care for men is more than using moisturiser for the first time, however, it's also easier than you think. In this edition we break down the stigma and help you understand what it really means and what you can do.

Self-care covers what you can control and do for yourself when it comes to your wellbeing. It can be lots of little things that add up to have a big impact. It's as simple as having a salad sandwich more often than the meat pie. It's ensuring you get eight hours of sleep each night. It's making time to talk to a mate to get your head straight or practising a bit of mindfulness (which isn't as hard as it sounds).

These are some of the topics we have a look at in this issue, from the basics of eating better to making and maintaining connection at every stage of life. We also look at movement as medicine and how it can be used to help prevent and manage chronic disease. The benefits of physical activity aren't a great secret, but like many self-care habits we tend to make it harder than it needs to be.

Exercise can be as simple as walking the dog for half an hour when you get home from work. The thing about many of these self-care habits is that they can tick a few boxes at once. Walking will help get your heart rate up and improve your physical health, and it might help you get work out of your head and get a bit of mindfulness in as well.

"I know, I know" is often our response when it comes to prioritising our health but knowing isn't enough, doing is the bit that matters. Figure out where you can build in these habits, map out a little plan in your head and make sure you stick to it. Don't try to change your whole life in one hit. That's why we've included a template from Black Dog Institute that you can fill in to help plan your self-care activities and move from idea to action.

We've also covered how health professionals can encourage lifestyle change in patients and what the science says about making these habits stick. The big thing to remember at the end of the day is to give yourself a little bit of time to achieve these goals and ultimately, you'll feel better for it.

We've got to understand that everyone's life is full of change, sometimes it's really hard and sometimes it's really easy but you need to have these self-care habits to fall back on to give you consistency and keep you well. They're the bits that can help the most when life gets hard.



Simon von Saldern
Healthy Male CEO

A photograph of a man with a grey beard and mustache, wearing a light blue button-down shirt and dark blue jeans. He is lying back on a dark blue couch, wearing large white headphones. His arms are raised behind his head, and he has a relaxed, content expression. The background is a softly lit indoor space, possibly a living room, with a wooden door visible.

Shaking the stigma and making men's self-care second nature

Men can feel an expectation to be the stoic supporter of their family or to take on a tough-it-out attitude towards life's stressors. The pursuit of these goals often pushes personal wellbeing down the to-do list. That might not feel harmful, but ultimately, you won't be performing up to par in any aspect of life.

That's where the concept of self-care stems from. In some cases, the idea is considered (and marketed as) a feminine activity or has been reduced to its most superficial elements like skincare. But self-care not only makes you more effective, it builds resilience and offers a buffer from the bumps in the road when you inevitably reach them. It turns a house of cards into a structure that can withstand life events like a relationship break down, a job loss or the death of a loved one.

What self-care involves has never been more important for men to understand and put into action.

What is self-care?

Self-care varies from person to person, but it's deliberate and self-initiated for maintaining physical, emotional, spiritual, professional, social, financial and psychological wellbeing. It can be anything from daily habits that top up your cup, to healthier responses to stressful situations.

"Some of the things that self-care involves, it's not necessarily fun stuff — eating well, getting some regular physical activity in," Psychologist Narelle Dickinson says. "But if we can focus on the big picture and what basic self-care is going to allow us to do with the rest of our life, then maybe there's a little bit more motivation."

However, self-care can also include the stuff that does make you feel good — whether that's keeping your grooming in check or enjoying a round of golf. It's about seeing time for yourself as a necessity, not a luxury.

"When life gets really busy and the focus is on earning an income or doing the jobs that have to be done, prioritising yourself can get put on the back burner," Dickinson says. "It's about changing the mindset towards those actions to make it a non-negotiable in a way."

How you can practise self-care

Examine your current habits. What do you do to take care of yourself? What are your coping strategies when things get rough? What do you value and enjoy doing regularly?

Rather than attempting to overhaul all your habits at once, start with one or two small activities and build up gradually. Think about self-care in advance and actively plan these strategies rather than expecting them to just happen.

This template created by Black Dog Institute can help you add self-care that ticks all the wellbeing boxes, into your day-to-day.

Daily self-care	Current practises	Practises to try
<p>Physical e.g. eat regular and healthy meals, good sleep habits, regular exercise, medical check-ups</p>		
<p>Emotional e.g. engage in positive activities, acknowledge my own accomplishments, express emotions in a healthy way</p>		
<p>Spiritual e.g. read inspirational literature, self-reflect, spend time in nature, meditate, explore spiritual connections</p>		
<p>Professional e.g. pursue meaningful work, maintain work-life balance, positive relationships with co-workers, time management skills</p>		
<p>Social e.g. healthy relationships, make time for family/friends, schedule dates with partner/spouse, ask for support from family and friends</p>		
<p>Financial e.g. understand how finances impact your quality of life, create a budget or financial plan, pay off debt</p>		
<p>Psychological e.g. take time for yourself, disconnect from electronic devices, learn new skills, access psychotherapy, life coaching, or counselling support</p>		
Emergency self-care strategies	Helpful	Unhelpful
<p>Relaxation and staying calm Which activities help you to relax? e.g. deep breathing, taking a walk Which activities make you more agitated or frustrated? e.g. yelling, swearing, or drinking</p>		
<p>Self-talk Helpful self-talk may include, "I am safe/I can do this." Harmful self-talk may include, "I can't handle this/I knew this would happen/I deserve this."</p>		
<p>Social support Which family members and friends can you reach out to for help or support? Which people should you avoid during times of stress? Be honest about who helps and who zaps your energy.</p>		

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MORE INFORMATION

For more information on self-care planning and helpful templates visit blackdoginstitute.org.au



Putting poor sleep to bed

If your snooze button gets a heavy workout, you can't concentrate without a regular dose of caffeine, or you're yawning your way through the day — it might be time to assess your sleep habits.

The Sleep Foundation recommends adults get seven to nine hours of good quality sleep per night¹, but nearly half of Australians aren't achieving that. Widespread sleep deprivation is influenced by several factors, some of which we can manage — such as technology use and poor sleep habits — and some of which are unavoidable — such as shift work and parenthood.

For men there can also be a cultural barrier to prioritising sleep, with some seeing less time between the sheets as a badge of honour.

“Overriding our biological need for sleep seems to be a symbol of strength,” Sleep Health Foundation Chair Prof Shantha Rajaratnam says. “On the flip side, let's recognise the fact that our bodies need sleep and use it for strength, rather than the other way around.”

Why is sleep so important?

We spend nearly a third of our lives asleep and despite millions of years of human evolution, that requirement hasn't changed.

“It must serve an important physiological function and we're just beginning to understand that,” Prof Rajaratnam says.

It's believed quality sleep helps us reboot our various systems and supports our immune system, metabolism, memory and learning. Like closing all the unnecessary tabs and backing up our hard drive. Scientists aren't completely certain why we need sleep so badly but what is clear are the outcomes if we don't get enough of it.

“We know that loss of sleep impacts virtually every physiological system in the body and gives rise to an increased risk of accidents and injuries due to impairments in our neurocognitive function,” Prof Rajaratnam says. “But also, over the long-term, it increases the risk of a variety of health conditions — mental health conditions and physical health conditions.”

Short-term impacts of sleep deprivation include fatigue, reduced concentration, poor memory, worse decision-making skills, slower reaction times and mood changes. The long-term effects on your wellbeing include an increased risk of type 2 diabetes, obesity, some cancers, heart disease and mood disorders².

That's enough to make the nonstop yawning a little more alarming.

Understanding your sleep

You might not think your body is up to much while you're out cold, but your brain is very active while you sleep.

During sleep we cycle through four different stages — one forms rapid eye movement (REM) sleep and three form non-REM (NREM) sleep. You'll start with non-REM stage 1, which is the lightest stage of sleep lasting roughly five minutes. Next is non-REM stage 2, when you transition into a deeper sleep, dropping your heart rate and body temperature. This stage lasts around 25 minutes in your first sleep cycle

but lengthens with each one, eventually making up about 50% of your shuteye. Non-REM stage 3 follows, which is the deepest stage of sleep and the most important for your body's restoration process. Finally, you'll move onto REM sleep which is when you might experience dreaming, accompanied by rapid eye movements and irregular breathing.

Each cycle through these four stages takes roughly 90 minutes but this changes as your sleep progresses. Sleep cycles can also vary from person to person and be affected by factors such as age and alcohol consumption. On average, we complete the cycle four to six times throughout the night. These stages might only be brought to your attention when you get woken up from a period of deep sleep and experience extreme grogginess and disorientation that can last for up to 30 minutes. This is called sleep inertia.

Bad habits or a sleep disorder?

There are a number of disorders that can impact our sleep in different ways, some of the more common being insomnia, narcolepsy, restless legs syndrome, snoring and sleep apnoea. Snoring and sleep apnoea are common issues for men.

Sleep apnoea is when you stop breathing throughout the night, usually due to partial or complete blockage of your airways. You (or your partner) might notice that you toss, turn, and snore, or feel exhausted and unrefreshed the next day. Sleep apnoea might affect your mood, productivity, and leave you prone to accidents. Sleep apnoea also increases your risk of health problems and chronic diseases such as coronary heart disease, stroke, type 2 diabetes, high blood pressure, depression, cognitive impairment³ and erectile dysfunction⁴. If you've noticed any of these symptoms, chat to your doctor to get it sorted.

What's sleep hygiene?

No, it's not a night-time scrub down, it's the range of practises and habits that can help you have better sleep. Understanding the sleep-wake circadian rhythm can help you create the right conditions to sleep easier and stay asleep throughout the night. Circadian rhythms are the physical, mental, and behavioural processes your body runs following a 24-hour cycle.

Light exposure during the day prompts our body to send signals that keep us alert and as night falls, our body begins producing hormones that promote sleep.

Sleep hygiene habits to support your sleep-wake cycle

Follow a consistent sleep schedule, waking up and going to bed each night around the same time.

Get some natural light in the morning, whether that's opening your blinds or going for a walk.

Exercise daily, but not too close to bedtime.

Keep naps short and earlier in the day.

Avoid caffeine later in the day.

Limit light before bed, dimming lights and avoiding screens.

Ensure your room is the right temperature.

Keep your sleeping environment as dark as possible, an eye mask can help.

If noise is an issue, use earplugs.

Reduce alcohol consumption and smoking.

If you're struggling to fall asleep don't stay put stressing over it. Get out of bed and try a relaxing activity for half an hour or so, like reading, stretching or meditating. If these tactics aren't helping to improve your sleep, speak to your doctor and get some professional support.

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Movement as medicine:

Are you getting your prescription filled?

All it takes is a surprise set of stairs to remind you that you might be a little out of shape. Maybe exercise fell off the to-do list with dwindling downtime or you struggled to regain a routine after injury. Maybe you're overwhelmed by the options out there or you're managing a chronic health condition and don't know where to start safely.

Well, here's the must-know on movement to make the most of the important health benefits it offers.

Exercise as medicine

The benefits of regular movement make for a lengthy list. It can have an immediate effect on your mood, energy, and sleep, helping you feel happier and healthier. The long-term payoffs include weight management, better mental health, stronger bones, muscles, and joints, and a reduced risk of heart attack, type 2 diabetes,

and some cancers. Research consistently shows exercise can help prevent or treat disease and chronic health conditions, leading to growing awareness about using exercise as medicine¹.

Robert Newton, Professor of Exercise Medicine at Edith Cowan University, is a driving force behind this movement.

"Being physically active is absolutely essential for maintaining health — mental and physical," Prof Newton says. "The deaths from COVID-19 are staggering, but they pale in significance compared to the deaths due to a sedentary lifestyle, the main killers being cardiovascular disease, a lot of cancers and type 2 diabetes. I mean, the main driver is the fact that as a population, we don't do the minimum required exercise to keep our bodies alive and one of the misconceptions is that exercise is

optional. It's not, it's a medicine and it's absolutely essential to take that medicine every day."

This is particularly the case in preventing and treating some cancers.

"We've known for a decade or more that people who are physically active are less likely to die of their cancer," Prof Newton says. "Men that did a certain amount of vigorous physical activity each week had a 61% lower risk of dying of their prostate cancer²."

Researchers are learning more about enormous changes exercise has on our internal chemistry and how that affects our health outcomes.

"What we're seeing is that when we exercise our muscles produce medicine — substances that are called cytokines — and they actually

suppress tumour cell growth,” Prof Newton says. “We see that exercise also activates the immune system and, in particular, what are called natural killer cells. When we exercise, these natural killer cells circulate into the actual cancer, they attack the cancer cells and it’s through those mechanisms, we’re starting to understand how exercise actually slows cancer progression.”

That’s a big deal, but the message isn’t sinking in.

“At the moment roughly two thirds of the Australian population do not perform sufficient physical activity to maintain human health,” Prof Newton says. “The first message we’re trying to get out there is, don’t be sedentary, try to reduce your sitting time, and increase your exercise and physical activity in general.”

Start small

Any movement is better than none so start by being active each day in a small way, before working up to the recommended activity goals. This could be cycling instead of driving, breaking up time behind the desk or wheel with short walks, or giving your garden some attention on the weekend. Avoid long periods of sitting by standing and stretching regularly.

Know the recommendations

Over a week, adults aged 18 to 64 should aim to get 150 to 300 minutes (2½ to five hours) of moderate intensity physical activity or 75 to 150 minutes (1¼ to 2½ hours) of vigorous intensity physical activity, or an equivalent combination of both moderate and vigorous activities³. Try to get in muscle strengthening activities on at least two days of the week.

And understand what they really mean

Vigorous movement for one person might be a walk in the park for someone else, but you can use the “talk test” to measure the intensity of your own efforts. If you can talk without puffing while you’re moving, you’re exercising at a low intensity. If you can talk comfortably (but not sing) then you’re exercising at a moderate intensity. If you can’t manage to say more than a couple of words without pausing for breath, then you’re exercising at a vigorous intensity. Muscle strengthening activities can include resistance training using weights, resistance bands or body weight, carrying heavy loads or doing heavy yard work.

Get expert assistance

There are plenty of professionals who can help with expert information and ongoing motivation. If you’re otherwise healthy and want to

improve fitness or performance, you might see an accredited personal trainer or gym instructor. If you have health issues or injuries, you’re best to see an allied health professional such as an exercise physiologist. They specialise in guiding effective exercise interventions for people with chronic medical conditions, injuries, or disabilities.

Australia is one of the few countries in the world where exercise medicine is subsidised by our healthcare system. Your GP can prepare a chronic disease management plan, which includes up to five consultations with an exercise physiologist⁴.

“With men that have existing chronic disease, cardiovascular disease, or if they have a musculoskeletal issue like an osteoarthritic knee, there’s a misconception that they can’t exercise, that it’s dangerous or it’s going to damage them and that’s typically not true,” Prof Newton says. “If they remained sedentary all of their issues would only get worse.”

It’s a good idea to see your doctor before starting your physical activity program if you’re over 45, you’re at a higher risk of heart disease, or physical activity causes pain in your chest, severe dizziness or leaves you very breathless. They’ll work with you and an exercise physiologist to tailor movement habits that will help you for the long haul.

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The basics of better eating

Count yourself in the camp that's nailing nutrition? You might need to rethink that — the majority of Australians aren't meeting the recommended nutrition requirements¹. Making healthy food choices isn't always an easy task when less than ideal options are readily available, affordable and easily over-consumed. Mix in fad diets and food trends and you've got a recipe for conflicting, and often incorrect, information around what we should be eating for better wellbeing.

"The nutrition space has never been more confusing," Accredited Practising Dietitian Joel Feren says. "The spread of disinformation thanks to celebrities, social media influencers and other 'gurus' is widespread."

So, we're here to remind you about the basics of healthy eating and how to make it work for you.

What do you need?

Food is more than what fuels us each day. It can have a noticeable effect on how we feel physically and mentally, with a long-term impact on our health. Eating poorly is one of the biggest contributors to an early death² and can increase your risk of developing cardiovascular disease, type 2 diabetes, some cancers and depression.

Nutrition is simply the process of obtaining the necessary food required for optimal health and

growth. Your nutrition needs change over your lifetime and depend on factors like how physically active you are and whether you're managing a health condition.

The bottom line is that you should eat a wide variety of foods from the five food groups (fruits, vegetables, wholegrains, legumes, dairy foods, and lean meats), drink plenty of water, and limit foods containing saturated fat, added salt, added sugars and alcohol.

More than meat

"Men tend to have tunnel vision when it comes to nutrition and they predominantly think about protein," Feren says. "It's not surprising because protein is regarded as the nutrition king of the jungle, yet blokes tend to drop the ball when it comes to meeting their wholegrain and veggie needs."

In fact, nine out of 10 Australians don't eat the recommended five to six serves of vegetables each day.

"Including an extra piece of fruit over the day and an extra helping of veggies at dinner will go some way to improve the health of Aussie blokes," Feren says.

Eating the advised amount of veg doesn't mean you need to swap red meat for "rabbit food".

"We need to construct a better-balanced plate," Feren says. "Serving brown rice or potatoes, plus a

number of non-starchy vegetables alongside a piece of steak or chicken will achieve that."

Adding to your plate, rather than restricting, is easier to keep up in the long term. You'll also find you're automatically eating less of the not-so-good foods when you fill up on fruit and veg.

Portions are a priority

Speaking of plates, are you keeping a keen eye on how much food you're putting on yours? Portion control means choosing a healthy amount of food to meet your nutrition needs without over or under-consumption. Understanding the recommended serving sizes of each food group can help you portion out your food groups appropriately when plating up a meal.

Instead of eating on autopilot, mindful eating can help you stay present while consuming food and pay better attention to your satiety cues. Mindful eating strategies include plating up all meals (instead of eating snacks straight out of the box or bag), taking small bites, chewing slowly, focusing on the taste and texture of your food, and putting away screens to cut down on distraction. Focusing on what you're eating, and enjoying it, will help you cut down on overeating.

What about [insert fad diet]?

You've likely heard a friend, colleague, or celebrity wax lyrical about the benefits of a certain diet, product, or meal plan. Whether it's the ketogenic diet, intermittent fasting, or Atkins — fad diets are often short-sighted and misguided approaches towards whatever goals you may have (which are often weight loss). Restrictive diets can help you lose weight but what's lost in the initial stages is often gained back down the track.

Recommended number of serves from each of the five food groups:



“Weight should only be seen as one marker of success,” Feren says. “Low calorie diets that still encourage the consumption of wholegrains, starchy vegetables and fruit will not only result in weight loss, but likely also lower cholesterol and blood sugar levels.”

Some eating methods can also put you at risk of nutrient deficiencies.

“Carbs are the primary fuel source for our brains, muscles and vital organs, and carb-rich foods provide a range of other nutrients including B vitamins, potassium, iron, magnesium, plant-based phytonutrients and fibre,” Feren says. “Fibre helps to increase our feelings of fullness, it can reduce

transit time in our digestive system and help to add bulk to our meals. This means fibre can play a pivotal role in helping to manage our waistlines. So, yes, you can still eat carbs and lose weight.”

Research also shows that people with a higher intake of cereal fibres (those wholegrains that ketogenic diet supporters shun) have a reduced risk of premature death from heart disease, colon cancer, respiratory disease and diabetes.

Establishing habits

Quick fixes and punishing diets won’t cut the mustard for long. Your goal is to get habits like consistent mealtimes and swapping out soft

drinks to a point where they’re as instinctive as brushing your teeth and tying your shoelaces. Forming habits requires consistency and this can be made easier by attaching an action to a trigger, like you would put your seatbelt on when you get in the car. This could include adding a serve of vegetables to every meal, eating a piece of fruit with breakfast or filling up your water bottle with every trip to the bathroom (in the kitchen sink, please).

To eat better for the long haul, “Don’t bite off more than you can chew,” Feren advises. “Remember that slow and steady wins the race. The prize is better health and that’s a goal worth chasing.”

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So, what exactly is meditation?

Meditation can be defined as a set of techniques that use focus to increase awareness, concentration and calmness, with both immediate and long-term outcomes.

There are many different types of meditation techniques, but they share a few common elements.

- Try to find a quiet location with minimal distractions
- Choose a comfortable posture, whether it's sitting, lying down or walking
- Focus your attention — this could be on the sensation of your breath, a set of words or sounds
- Maintain an open attitude — when you notice your thoughts drifting, take notice and bring yourself back to the present without judging or punishing yourself

Research hasn't arrived at a consensus about how much meditation is "enough" but most people believe it works best when done regularly.

"Figure out a time when meditating works best for you, and if you're struggling to set up regular practise, try introducing short meditations into your routine with a habit you already have in place," says Michael Hines, the Lead Psychologist at Smiling Mind — an Australian, non-profit web and app-based meditation program. "This could be before you eat breakfast, just after you brush your teeth or the first thing you do when you wake up."

In the face of so many misconceptions around meditation and mindfulness, it's almost easier to describe what they are not.

"A misconception is that mindfulness is a laborious task, but it doesn't have to be," Hines says. "The formal mindfulness practise of meditation can be practised anywhere, at any

A man's guide to mindfulness

We spend nearly half our time thinking about something other than what we're doing in the present. This mindless autopilot can become a problem if we spend more time dwelling on painful memories, stressed about future hypotheticals or spiralling in constant self-criticism.

Enter, mindfulness. There isn't one universal definition for mindfulness, but it's generally understood to be the simple act of paying attention and being present in whatever you're doing. Mindfulness is an innate state, which can be encouraged by certain practises such as meditation.

time, for as little as one minute. Mindfulness can also be brought into our everyday moments in a more informal way. It's all about the quality of attention we bring to where we are and what we are doing."

Jason Partington, meditation instructor and co-founder of Meditation for Men, finds that many of his clients expect to "sit in incense, hold hands and sing Kumbaya."

"There's a belief that it's this feminine, religious activity," Partington says. "They're confronted by that and they don't see themselves doing that, but when they experience it, they realise meditation is actually quite an amazing and accessible thing to do."

Partington first turned to the practise two decades ago during a particularly rough patch for his mental health.

"I was probably your typical Aussie, footy-playing stereotype at the time," he says. "I was really just living a life based on social expectations and what the media says 'this is what a guy should look and act like, and this is what success and happiness looks like' and a lot of that is not healthy."

As a result, he felt pretty lost by 28 years old.

"Not knowing who I was and what I wanted, and escaping into alcohol," he says. "I ended up depressed and not feeling very good about myself."

A friend put him onto meditation through a five-week course, which Partington says, "Changed the world

for me, it was like a 180-degree transformation." This led to an ongoing exploration of meditation, its methods and masters, before starting up a business to help other men understand and implement its benefits.

The benefits behind the buzzwords

The 2020 State of Mind survey showed that awareness and appreciation of mindfulness is increasing in Australia, with 63.5% of respondents having heard of mindfulness and 57.1% having tried it.

"Whilst mindfulness is a construct that stems from Buddhist meditation traditions, it has received a great deal of attention over recent decades in Western medicine, psychology, and neuroscience," says Hines.

The main focus has been on how the habit can support our psychological wellbeing.

"Men are no doubt aware of the importance of caring for their physical health, but less so with regularly assessing the state of their mental health — something which is just as important," Hines says. "While not all of us will experience a mental illness in our lifetime, we all have mental health, and therefore need to be proactively checking in on how mentally healthy we're feeling."

Mindfulness and meditation are effective at improving anxiety, pain, and depression, especially major, recurrent depression. There are significant improvements in

psychological wellbeing in those dealing with long term physical conditions.

"The practise of mindfulness and other meditation strategies is about being able to get better at letting go of unhelpful thoughts or being able to find more space for uncomfortable emotions instead of feeling like we need to distract ourselves or push them away or like we can't cope with it," Psychologist Narelle Dickinson says.

This self-regulation can bring our mental processes under greater control, helping with not just calmness but concentration too. Whether that's in your nine to five or on the sporting field — athletes like the Australian cricket team, Richmond AFL team, and LeBron James are fans of the practise.

"It's become, for many, a secular practise to support wellbeing, performance, and connection to self and others," Hines says.

However, there's still plenty we don't know about mindfulness and meditation and in some areas the science doesn't match up to the hype. A critical evaluation of the research shows that there are problems with how mindfulness is defined as well as methodological issues in mindfulness research.

And keep in mind that mindfulness isn't magic. When managing mental health, mindfulness and meditation should always be used to accompany other strategies, not replace them.

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Finding connection at every age and stage of life

Despite the importance of quality relationships for our health and survival, many Australian men are struggling to make and maintain them. Here, blokes who have been through periods of isolation at different stages of life share how they came out the other side with better connection, and what they're doing to help other men do the same.

I can definitely vouch for the importance of those kinds of social connections and a safe, nonjudgmental space to open up about personal issues.



Chris

Graphic Designer & Founder of Men's Business, 33

I had a pretty difficult upbringing. I grew up without a father figure and that led me down some dark paths when I was younger without having a role model to guide me and point me in the right direction. I fell in with the wrong crowd, got kicked out of home really young, I almost ended up becoming a drug dealer and a drug addict myself. I never had safe connections with other men, and I never really felt comfortable enough to open up.

As I got a little bit older, in my mid-twenties, I became interested in hip hop and joined a spoken-word community out in Bankstown, Sydney and they ran regular monthly poetry clubs. I used spoken word

as a way to deal with the grief and traumatic experiences that I'd gone through. Honestly, if it weren't for that community, I wouldn't be able to properly express and process the emotions that I had gone through. It was cathartic. I can definitely vouch for the importance of those kinds of social connections and a safe, nonjudgmental space to open up about personal issues.

I was very fortunate that I had some good mates I've met along that journey. That's honestly another big catalyst, having other guys see potential in me and they were also interested in the same things. I met other like-minded men who were very open and expressive and were

able to speak on more sensitive topics. I had a mentor for a while, he's a personal trainer and owned a CrossFit gym, but he was also an academic, studied poetry and was very into social activism. He used to run workshops and programs for younger men, especially teens. That's what exposed me to more ideas and workshops and the benefits of it. Eventually my partner and some mutual friends encouraged me, and co-founder Daryl, to start a men's group called Men's Business. We facilitate and support other men to be open about their personal lives, explore what it means to be a man these days, and help to develop outcomes and actions to make sure that change happens.



Tom **CEO of Dads Group, 38**

Growing up in an Indigenous community in Australia, community is a core tenet of our values. It's really just a way of describing lots of different social connections to form something that's beyond yourself. We fostered those connections and had meaningful engagement because our parents taught us how to do that well.

When my wife and I started a family, we went to the antenatal classes. It seemed to be a good space for mums but there didn't seem to be much for dads. The hospital system doesn't acknowledge you formally in any way, shape or form and it leaves you feeling confused, like "ah where do I fit in all of this?". Just before having the baby, I hung out with two

mates and their babies, and I just felt so comfortable. I could listen to them and ask them questions. I felt like these guys have gone through what I'm about to go through and that was comforting for me. I just thought, every man, every new father needs to have this experience. I know every father can feel isolated, lonely, scared, and freaked out in some way, as the baby approaches, whether they admit it or not. That's how Dads Group started. I just kind of grabbed a bunch of dudes from around the place, relatives or friends, and said, "Hey, let's go and have a coffee together with the babies, and let's do a dad's group."

Now Dads Group is in almost every state and territory in Australia, and embedded in hospitals across Queensland. We've received major grants, we've probably done a little over 3000 events, we've established hundreds of Dads Groups, online and face-to-face, and studied how they work and how they don't work. Last week one of my friends and colleagues, he said with tears in his eyes, "This program has saved people's lives." Some of these are guys who are on the edge, it is tough and they are struggling, and they have no-one, and no connection. That's a really dark place.

Then there's countless stories which you hear, guys that have met at Dads Group, and developed family friendships, and moved on to supporting that local community where they are. Getting dads to connect with their babies from when they're skin-to-skin in the hospital, all the way through to bottle feeding at a Dads Group, and then in schools, that's the journey that we're fostering and changing that culture. The impact of this, we'll be seeing in 25 years.

Last week one of my friends and colleagues, he said with tears in his eyes, "This program has saved people's lives."



When I got down there, I realised, “Oh you idiot, you’ve wasted your time, you could have been here two years earlier.”

Tony

Retired teacher & Shedder, 79

I was always very close to my family. I was the youngest of five, I’m the last remaining one. One girl who was the oldest, I adored her, and four boys. I didn’t marry until two years ago, but we’ve been in a relationship for 34 years. The fact that I was a schoolteacher and that I was very close to my brother and his kids and my sister and her kids, I never really felt as if I’d missed out on anything by not having children of my own. I’m a talker, if I’ve ever had problems, I’d seek out people to talk to about it. My sister and my brother’s wife have been great supporters in that regard.

I’ve always been aware that women are so much better at creating social networks, my wife is a prime example

of that; she still catches up with the mums from her kids’ kinder groups. I retired when I was 55 but continued emergency teaching and finished last year. My wife was sort of aware of the fact my teaching interests were lessening so about two years before I went down and checked The Shed out, she’d been saying, “You need to go, you need to get out.” When I got down there, I realised, “Oh you idiot, you’ve wasted your time, you could have been here two years earlier.” The guys were really friendly and welcoming. When someone asked if I was going to come back next week I said, “Bloody hell, I am!”

The activity I’ve involved myself with is bike riding. I’ve made a few

friends I ride with on a Friday. After probably 15 years of not riding a bike, it got me back riding a bike. I’ve always been someone who loves exercising and if it hadn’t been for The Shed I wouldn’t have met men who are riding a bike at my age. I’ve always enjoyed singing; I come from a musical family so I also go down there on a Monday morning, they have a guitar group and I’m the nominal vocalist.

I’m fairly typical of guys that are down there. Quite a few of the fellas, including myself, have got health issues. I keep in touch with one in particular to see how he’s going and let him know I care. It’s given me a changed perspective that’s for sure.

Mental health at work

The benefits of paid employment go beyond money in the bank. Work can have a significant impact on our psychological wellbeing by fostering self-esteem, inclusion, routine, purpose and identity. However, it can also be a source of psychological distress. Mental health is a critical concern in many male dominated industries, featuring established risk factors like isolated work, excessive or irregular workloads, poor physical conditions, lack of control, and cultural norms that make men’s mental health difficult to discuss.



It is critical that workers are protected on the job and that their employment doesn't continue to impact wellbeing out of work hours. In most cases the responsibility is on the employer to ensure their team has a physically and mentally safe working environment. However, you can still advocate for yourself in the workplace, be aware of the health concerns strongly associated with your industry and do your best to manage the factors affecting wellbeing where possible.

Construction

The physical hazards of working in construction are significant, but easy to see — high scaffolding, power tools, dangerous materials and heavy vehicle traffic, to name just a few. While there has been a significant reduction in the numbers and rates of injuries and fatalities in the construction industry, it bears a tragic mantle when it comes to mental health and suicide. The construction industry is one of the highest occupational risk groups for suicide, with one death by suicide every second day. Some of the multi-faceted factors underpinning these stats include the physically and mentally demanding nature of the work, project-by-project employment and job insecurity, high workload and unrealistic deadlines. Darren Black, CEO of OzHelp Foundation — a not-for-profit provider of workplace wellbeing programs, specialising in mental health and suicide prevention — says culture is also a critical concern.

“For a long time, construction and the building site culture has been a very macho, male, testosterone-fuelled environment where the attitude is really, ‘get on with it, toughen up and if you can't cut it, then you're not going to last here,’” Black says. “The problems start early with 17, 18, 19-year-old apprentices getting exposed to this stuff.”

These young construction workers are particularly at risk of psychological distress, which has been linked to job stress, bullying¹ and the use of 'avoidance' coping strategies². Young construction workers are more than twice as likely to take their own lives as other young Australian men².

"We've just got this very stoic culture in Australia, regrettably, where talking about your feelings and if you're not doing okay is still highly stigmatised and we need to continue to do what we can to normalise the conversation," Black says. "Another factor is that a lot of blokes in particular are really reluctant to talk about it as they also fear that if they raise that, 'I'm not doing okay psychologically,' they'll lose their job, they won't get their contract renewed or they'll miss out on a promotion."

Entrenched cultures can be hard to shift, but workplaces need to make a start by providing independent, external resources outside of the chain of command to ensure privacy and confidentiality when dealing with mental health concerns. If you're still reluctant to reach out to internal resources within the business, chat to your GP to organise a Mental Health Treatment Plan which will entitle you to Medicare rebates for up to 20 individual psychological appointments per calendar year.

Transport

The transportation industry — which includes moving freight by road, driving buses and taxis — makes up 2% of the Australian workforce. Yet the latest data show that it accounts for 4% of workers' compensation claims for injuries and diseases involving one or more weeks off work, and 17% of work-related fatalities³.

Long-haul truck driving is a particularly high-risk role, described as one of the unhealthiest and deadliest jobs in the country⁴ thanks to long, irregular working hours, social isolation, significant time spent sedentary, lack of job control and high job demand. It's also the number one employer of Australian males⁵. The work can have both an immediate and long-term impact on mortality — long-haul truck drivers have multiple risk factors (such as smoking, obesity, hypertension, poor diet, lack of exercise, stress and sleep apnoea) that can lead to a catalogue of conditions (such as cardiovascular disease, metabolic disorders and type 2 diabetes), which are associated with increased crash risk and higher mortality risk overall. The toll on mental health is significant — the Driving Health study found that 50% of drivers reported some level of psychological distress and one in five under 35 reported nearly double the psychological distress compared to the national average⁶. Working conditions constrain their capacity for good health as well as access to timely and consistent health services. Owner operators and self-employed drivers don't have the resources of larger companies to support wellbeing.

"The problem for them is when they're not driving, they're not earning an income, and so any time spent in stopping to go to see their GP, to focus more on their own health and wellbeing, is time out of the truck and time where they're not on the job earning money," Black says.

The Health in Gear initiative offers guidance and resources tailored to the industry, helping truck drivers to give their health a tune up while keeping the wheels turning.

"It's the sort of things that we often overlook or disregard, but it's what you eat, diet and nutrition, it's sleep patterns and ensuring you get enough sleep, it's exercise and ensuring that you're moving enough and the importance of social connections and networks," Black says.

FIFO

While there are risks associated with certain industries, employment practices or work arrangements within those industries can also have disproportionate effects on health and wellbeing. FIFO (fly in/fly out) and DIDO (drive in/drive out) work is one of them, which sees staff "fly in" to work at remote locations away from where they usually live and "fly out" home. Industries that use FIFO/DIDO work include mining, construction and remote service delivery. These roles come with attractive financial benefits, but concerns about their impact on the mental health of workers prompted a 2015 Western Australia Parliamentary Inquiry. A study published in 2018 found 33% of FIFO workers had high or very high psychological distress, double the general population⁷.

“Now in the present study in the context of COVID-19 that number is 41%,” says Dr Jess Gilbert from the Centre for Transformative Work Design at Curtin University. The nature of FIFO work puts the predominantly male workforce at a higher risk of social isolation and relationship strain. The pandemic and subsequent border restrictions have meant extended time on site has taken a greater emotional toll on both workers and their families.

“Restrictions need to be strict enough that workers are safe and workplaces are secure, but not so strict that it harms workers’ mental health through them feeling isolated and controlled,” Dr Gilbert says.

“While there are things that can be done at the individual level, such as self-care with good sleep, nutrition and exercise, it is just as important for organisations to provide good work design for FIFO workers that protects them from mental health risks, and enables them to keep socially connected with the important people in their lives.”

Leadership goes a long way

Showing leadership when it comes to workers’ wellbeing is critical, not only from a health perspective but the hip pocket — work-related injury and disease cost the Australian economy \$61.8 billion in 2012-13⁸. Building mental health programs into your annual health and safety plans, rather than relying on one-off events, is critical for increasing normalisation and peer support across the workforce. If you’re in a position to influence decisions around workplace wellbeing or be an example to your team, your impact could be powerful.

“What we find is when you get key managers or supervisors to step up and say, ‘We’re putting this

program in place for you and we’re participating, I’m participating’ and they step forward and roll up their sleeves and undertake the health check, they actually attend the training sessions, they may even talk about their own experience,” Black says. “When those sorts of stories start to come out, it starts to normalise the conversation and then the rest of the workforce are far more likely to engage in the whole process.”

Consistency is essential for effective engagement of male-dominated workforces.

“Initially, if we show up to do a training session or a tune-up, in all likelihood, probably a low level of response and engagement, but if you show up a second time and a third time, and make it regular, you break down the barriers, you build confidence and trust,” Black says. “The workforce starts to actually believe that the company, the management, are not just treating this as a tick-a-box exercise, but they’re actually invested in it and they’re committed to it then workers are much more likely to get involved and participate in it themselves.”

MORE INFORMATION

➔ To promote men’s health in your workplace, order our *Spanner in the Works?* health promotion toolkit from our online store. Visit healthymale.org.au/order-resources

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Information for health professionals

Clinical summary guides

Healthy Male offers a series of 13 clinical summary guides on the management of male reproductive and sexual health, to assist health professionals in the care of their male patients.

The newest addition to our clinical summary guides, on Transgender Healthcare, was developed in consultation with leading representatives from the LGBTQIA+ communities, including Aboriginal and Torres Strait Islander people, and clinicians with a wealth of experience providing healthcare to transgender patients. The guide addresses communication, inclusion, various aspects of gender affirmation, health monitoring and

disease screening, to help health-care professionals provide optimal care for their transgender patients.

Our existing clinical summary guides have recently been updated, to ensure that the information they provide reflects current best clinical practice. We've also expanded the content of some of the guides to make them even more useful.

You can order hardcopies of the full set of our clinical summary guides, or download individual PDF versions, at our website.

➤ healthymale.org.au/clinical-summary-guides

Professional education opportunities

Our health professional education resources have been updated and expanded as well. In addition to RACGP and ACRRM endorsed online courses in Aboriginal Men's Health, and Fertility and Preconception Health, we have added courses on PSA Testing in General Practice (endorsed by RACGP and ACRRM), and Diabetes and Reproductive Health (endorsement from ACN, APNA and ADEA is pending).

➤ Register on our online learning platform today at learn.healthymale.org.au

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Understanding self-care as health professionals

Fostering reliance on our health system for the maintenance of everyone's wellbeing is a fool's errand. Our health systems simply could not cope if people did nothing to look after themselves.

Empowerment of people to take responsibility and action for their health is critical for their own wellbeing and that of our society. This principle forms the basis of the concept of 'self-management', which is frequently used in the context of disease¹. There are multiple benefits to individuals and society from chronic disease self-management², but the term itself (often appended to diseases; e.g. diabetes self-management, self-management of cardiovascular disease), exposes a disease-focused approach to healthcare that is outdated³.

What is self-care?

The concept of 'self-care' is more focused on wellbeing than illness. The World Health Organisation defines self-care as, "The ability of individuals, families and communities to promote health, prevent disease, maintain health, and to cope with illness and disability with or without the support of a health-care provider." Self-care practises nurture awareness, balance, flexibility, physical health, social support, and spirituality⁴.

Among health professionals, self-care has received particular attention for its ability to help avoid burnout in mental health practitioners⁴. In this context, the focus is the prevention or minimisation of specific adverse outcomes, but the goals of self-care may be less definite.

Self-care includes the activities people undertake that help them to feel good. Reading books with their children, a quiet dinner with their partner, getting a massage and meditation are examples of activities that can be good for health and wellbeing but are not necessarily part of managing chronic illness or disease, or avoidance of specific health problems. The same self-care behaviour practiced by different people may

be motivated by different goals. For example, participation in sport might be motivated by someone's value of the social contact it provides, rather than the benefits of physical activity.

By understanding what your patients do for self-care, and why they do it, you may be better able to tailor their healthcare needs and advise others. It's possible that some of your patients' self-care practises are things that you haven't thought about⁵.

The impact of self-care

Self-care has become popularised as part of the global wellness market, which is worth \$4.5 trillion US (5.3% of global economic activity) with annual growth over 10%⁶. More than \$1 billion of this is on personal care, beauty and anti-aging products. However, half of this market is spending on things that likely interact with contemporary healthcare — physical activity, diet and nutrition, weight loss, preventive and personalised medicine, and traditional and complementary medicine.

It's at the intersection of self-care and healthcare where individuals' self-care behaviour can impact on the treatment provided by healthcare professionals. For example, interactions between

nutritional supplements or over-the-counter medicines with prescribed medications can impact on treatment efficacy. An awareness, by health professionals, of what patients do to look after themselves is needed to inform appropriate care⁷.

Talking to patients about self-care

There's not a lot of evidence to guide health professionals when it comes to discussing self-care with patients. A survey of 1006 adults and 304 primary-care physicians⁸, conducted in the United States in 2019, found:

- Most doctors and patients agree that conversations about self-care are important, but these discussions were not as common as either group would like
- Critical aspects of self-care, including life goals, social and emotional needs, the use of complementary medicine, and spiritual or religious needs, were discussed by 12% or fewer of the patients and their doctors
- Two-thirds of patients want their doctors to provide more self-care resources, have greater involvement in all aspects of their health management, and incorporate complementary therapies.

The future of self-care?

The potential benefits to individuals and our healthcare system of patients' self-care activities are laid out in *Self-Care for Health: A National Policy Blueprint*⁹. The blueprint, launched by Federal Health Minister Greg Hunt in October 2020, includes nine priority policy proposals that aim to align self-care and healthcare:

- Improving health literacy for all
- Building self-care into health care practice
- Enabling consumers to be active partners in health care
- Assuring quality and accessibility of digital health information
- Measuring and evaluating self-care
- Funding models to support self-care services
- Invest in preventive health and self-care
- Establish a national approach
- Support health through all public policies.

The growing awareness and practise of self-care offers the promise to healthcare professionals of more informed, engaged and active patients. For the patients, it offers the prospect of relying less on the healthcare system.

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How to encourage lifestyle change



“By managing their health habits, people can live longer and healthier and retard the process of aging. Self-management is good medicine. If the huge health benefits of these few habits were put into a pill, it would be declared a scientific milestone in the field of medicine.”¹

Despite regular claims of the imminent development of medications to prevent aging or mimic the effects of a healthy diet and exercise², these hopes don't pan out³. The best way to get the health benefits of lifestyle habits like having a healthy diet and engaging in regular exercise is, simply, to practise them!

Theory

When it comes to encouraging healthy habits, it's difficult to know what to tell people. In the context of disease self-management, the World Health Organisation states, “Simply giving information to patients is unlikely to change behaviour; health care providers must understand the psychological principles ... and comprehend that motivating patients requires more than informing them...”⁴. The same is true for helping patients make lifestyle changes to improve their health.

There are at least 83 different theories relating to the psychology of behaviour change⁵, many of which share three general characteristics: ‘the desire for change to achieve a goal’; ‘a belief that a change in behaviour will achieve the goal’; and ‘a belief in one's own ability to make the necessary change’.

“Yet, despite widespread awareness that improved health behaviours would be broadly beneficial, it remains exceptionally difficult for people to initiate and maintain behaviour change, and it seems clear that we need to develop new and more effective ways to design behavioural interventions to increase their short-term efficacy and their longer-term benefits.”⁶

Experimentation

The Science of Behaviour Change (SBC) initiative of the United States National Institutes of Health, which began in 2009, applied social and

behavioural science principles and an experimental medicine approach to identify factors involved in health behaviour that can be targeted to elicit change. The approach involves four steps⁷:

- 1** Identification of an intervention target
- 2** Developing ways to measure the target
- 3** Experimenting to find interventions to engage the target
- 4** Measuring the intervention's engagement with the target and its effect on behaviour.

The initiative identified ‘self-regulation’, ‘stress resilience and stress reactivity’, and ‘interpersonal and social processes’ as viable, evidence-based targets for health behaviour change⁶. The next stages of the SBC initiative, to work out how to measure and manipulate these targets, are underway.

Practice

Evidence to guide patients through behavioural changes to improve their health will be a welcome advance, but it will likely still be some time coming. Until then, how do we advise patients? What works to drive changes in behaviour?

The Diabetes Prevention Program was among the first evidence-based behaviour change programs, and is effective for reducing body mass index (BMI), achieving a weight loss target, reducing waist circumference and lowering the fasting plasma glucose level in a primary care setting⁸.

Meta-analysis shows that, in general, behavioural change interventions for diet and exercise are moderately effective in achieving behaviour change, with this benefit arising from targeting of goal-setting behaviour and self-monitoring behaviour⁹. A person-centred, supportive counselling approach that encourages autonomy appears effective for maintaining changed behaviours. The mode by which these interventions are delivered does not seem to matter⁹.

The RAINBOW trial combined the Group Lifestyle Balance (GLB) program for obesity and the Program to Encourage Active, Rewarding Lives (PEARLS) for depression, to treat comorbid obesity and depression. It showed small reductions in BMI and depression scores over

12 months¹⁰, and improved quality of life, sleep and functional status at six but not 12 months¹¹.

The studies above did not report outcomes according to sex or gender. This is a disappointing characteristic of the majority of research studies in this area, which makes it difficult to know how the results might apply to practice.

Guiding behavioural change in men

The results of behaviour change interventions to increase physical activity in men were recently the subject of a meta-analysis of 24 independent studies¹². A small effect of behavioural change interventions was observed, equating to an extra 97 minutes of total weekly physical activity. Characteristics of interventions associated with greater effect sizes were:

- Interventions with one or more weekly contacts, compared to fewer than one contact per week
- Gender-tailored programs, compared to those not tailored
- Programs of 12 weeks or less,

compared to those lasting 13 weeks or longer

- Interventions based on behaviour change theory, compared to those that were not
- Interventions that used four or more behaviour change techniques, compared to those that used three or fewer.

“Interventions that (i) are based on a theoretical framework, (ii) are tailored to men’s values and interests, (iii) include regular group contact and (iv) employ multiple behaviour change strategies appear most effective”¹².

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What's in the way?

A survey to improve men's health

At Healthy Male, we recognise that provision of information alone is not enough to encourage and support Australian men and boys to take care of themselves and seek help when they need it. That's why we embarked on 'What's in the way? A survey to improve men's health'.

What's in the way? is a survey of 1281 Australian males aged over 18 years, from all states and territories, across urban and rural areas, conducted in mid-April this year. We worked to get the best available sample of Australian men, so that the information we collected reflects as best as possible the diversity of Australian men.

Some of the things we measured in the survey include:

- The health conditions that Australian men are most concerned about
- Australian men's behaviours and attitudes when it comes to seeking help for physical health issues
- The practical and psychological barriers that prevent Australian men from seeking help
- The health literacy of Australian men
- The health information sources that Australian men prefer
- Australian men's attitudes and behaviours about seeking help for their mental health

- Australian men's satisfaction with the available information about the health issues that most concern them.

The strength of *What's in the way?* lies in its use of survey questions and scales obtained from Australian and international research groups, that provide valid and reproducible measures of men's behaviours and beliefs. This will allow us to draw conclusions from our survey about the assumptions and attitudes that drive men to seek healthcare, or prevent them from doing so, that we can act upon to improve men's health and wellbeing.

Our first look at the survey responses provides some interesting observations:

- When Australian men experience the initial signs of illness, they are more likely to seek help online, from a family member or friend, or just keep an eye on it themselves than they are to see a health professional, even though their preferred health information source is a doctor
- The greatest psychosocial barrier to seeking help for Australian

men is their minimisation of the problem or resignation

- Just over two-thirds of Australian men have a sufficient level of health literacy
- More Australian men are likely to seek support for mental health from their intimate partners than anywhere else
- 'Stress' is the health issue judged by Australian men as the most important. Lack of exercise, depression, being overweight and anxiety are other major causes of health concern
- Most Australian men are satisfied with the information available about common health issues that most concern them.

We have only just begun to scratch the surface of *What's in the way?*. There is undoubtedly a wealth of information to come from breaking down the results by demographic variables, but the real knowledge gains will come from examining the relationships between men's beliefs and behaviours when it comes to accessing information and support for their health and wellbeing needs.

What's in the way? is on the way to helping Healthy Male provide the same evidence base to the provision of health information as it does to the information itself. It will help us to create not only what is needed in terms of information to improve Australian men's health, but also when, where and how best to distribute it.

Where survey respondents live

Base (n) 1,281%

Perth 9.1%
Rest of WA 1.7%

Darwin 0.6%
Rest of NT 0.1%

Brisbane 10.7%
Rest of QLD 9.6%

Adelaide 7.9%
Rest of SA 1.6%

Sydney 17.6%
Rest of NSW 11%

ACT 2.8%

Melbourne 18.3%
Rest of VIC 6.2%

Hobart 1.3%
Rest of TAS 1.6%

Research review: Men's health promotion in waiting room spaces

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The health of Australians is better overall than many comparative countries but Australian men have, on average, a shorter life expectancy than women and die in greater numbers from almost every non-sex-specific health problem.¹ Strategies such as displaying male-specific health literature in GP waiting rooms could encourage male participation in health and risk prevention discussions.²

A recent Australian observational research study focused on men's health and gendered health promotion in General Practice, community health centres, and hospital waiting rooms.

The aim of this research was to examine the displayed health literature to ascertain the degree to which male-specific health literature was featured.

This prospective observational study audited all printed health promotional materials in all health facility waiting rooms within a single Local Government Area. A total of 24 sites were surveyed. The displayed health promotional materials were then catalogued as being male-specific, female-specific, or gender neutral.

Literature that had a gendered focus was overwhelmingly female focussed, outnumbering male-specific information by about 5:1. Male-specific health promotional content across all sites and across all printed media made up only 3% of materials, compared to female-specific material, at 15%, and gender neutral resources at 82%. Given that males make up approximately half the Australian population and account for over half (53%) of the total burden of disease³, the prevalence of male-specific health promotion material would appear inadequate.

The often-perpetuated narrative that men are not interested in their health due to hegemonic stereotypes of masculinity and stoicism are questionable.⁴ The global expansion of Men's Sheds, which originated in Australia, has shown that men have the desire to engage in health activities when a gendered focus is exercised.⁵

The generalisation of health promotion was another key finding in this study, with the vast majority of all displayed health literature targeted neither towards males or females (nor, by omission, transgender persons). When health promotion ignores gender

as a determinant of health, it overlooks the differences between men and women, and how these differences affect health outcomes.⁷

The men's health promotional material that was on display related almost exclusively to cancer and mental health. Other leading causes of men's total burden of disease, such as coronary heart disease, chronic obstructive pulmonary disease, musculoskeletal pain, dementia, stroke, and type 2 diabetes were not promoted in a male-specific context. The absence of male-specific information within these audited waiting room spaces would appear to be a lost opportunity, particularly in chronic disease health promotion.

The demographics of consumers accessing health information in facilities may need to be factored in when and where health promotion is considered.

It was the authors' view that responsibility lies with health staff to ensure that health promotion for boys and men is prioritised and disseminated within these waiting spaces. In addition, practice managers and clinicians ought to recognise the value of waiting room spaces as an arm of their overall health promotion strategy.

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