

Understanding & Engaging Men to Reduce Early Mortality through the MAN Model of Health Promotion

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At

National Men's Health Conference

Arlington Washington DC USA

May 2004

ABSTRACT

Despite the efforts of the health care industry to raise men's awareness and participation in attending to their own health needs, men continue to be very poor consumers of health care services.¹

The MAN model is a model of disease prevention and health promotion that seeks to improve and create pathways for men and adolescents to better access the Health Care System.¹

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The MAN Model was developed to specifically address this problem of reaching men and getting them to discuss their health concerns in a culturally relevant way. Apart from social and sporting venues, the workplace also represents another significant culturally relevant site for men's health discussions.

Men's health in the workplace is subject to the same social, economic, cultural and environmental factors as health in the community.²

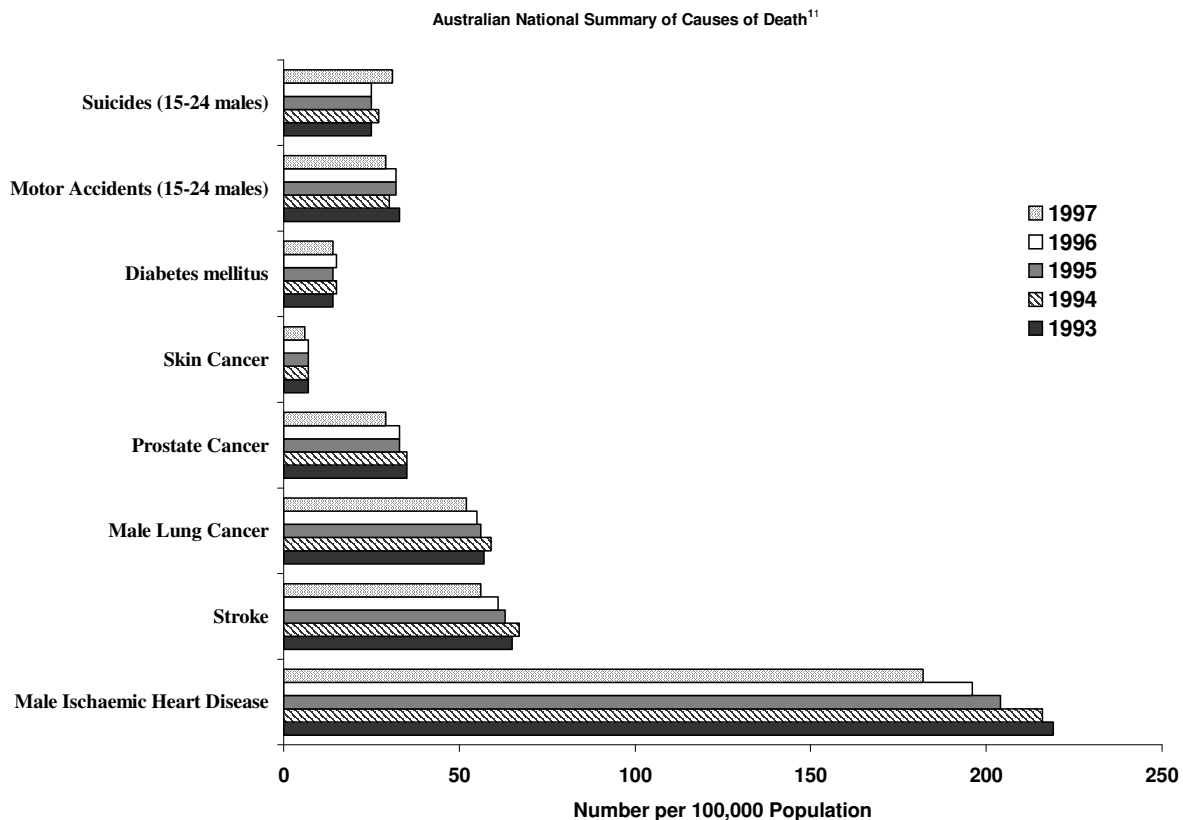
The MAN Model has developed a pathway for the education and empowerment of males to deal with their health needs preventively rather than reactively both in the community and the workplace.

The MAN model program is a model of disease prevention and health promotion that seeks to improve and create pathways for men and adolescents to better access the Health Care System.

Despite the efforts of the health care industry to raise men’s awareness and participation in attending to their own health needs, men continue to be very poor consumers of health care services. Also, men are still at a higher risk of dying and becoming disabled at an early age than their age matched female counterparts. Many public health programs have been available for many years, yet it appears that men will continue to undertake “risky behaviour” despite many efforts to dissuade them.

It has been well documented that men are more likely to have adverse lifestyle patterns; poor health service utilization particularly preventative health services and shows a poor uptake of health promotion messages.³ If men at present do not come to the health services, and then men’s health programs may need to journey to where men are gathered, be it the workplace, the football or the pub¹³. Indeed the MAN Model was developed to specifically address the problem of reaching men and getting them to discuss their health concerns in a culturally relevant way. The success of this approach is evidenced in the number of men attending the ‘Just For Men’ Men’s Health Nights, their response rates for filling out questionnaires and their subsequent involvement in follow up health sessions within their communities. Apart from social and sporting venues, the workplace represents another significant culturally relevant site for men’s health discussions.¹

Men need to learn about themselves, which includes those risk factors that can impact on their mortality and morbidity status. Men then need to learn how to address these issues through the health system and engage with Health Practitioners.

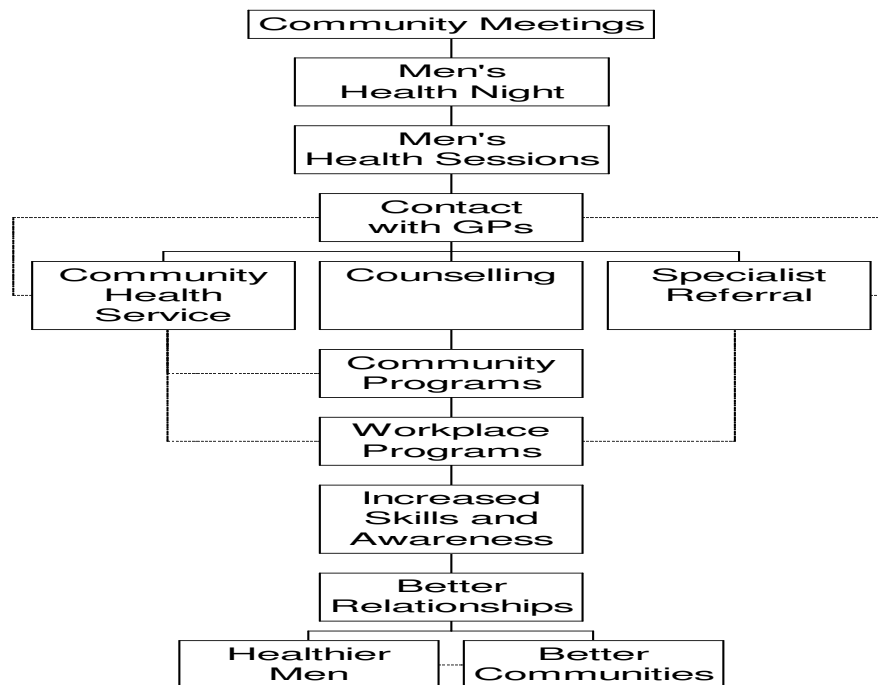


At present men's health is still at the stage of identifying how we best approach men, inspire their interest in preventative health care, attract their attention to public health programs and generally raise their awareness of the health services and health professionals available for their use. Men also need education about fundamental issues regarding diet, exercise, stress management and family traits as risk factors in the onset and progression of disease. Men need to understand that once symptoms arise it is often too late and that health services are not just available to treat acute health problems. Finally our society must begin to address the male psyche and reverse this notion that strong men suffer in silence.

If we are going to assist the cause of Men's Health, it is imperative that we consider 'a broader range of factors, socioeconomic and locational as well as genetic, hereditary and environmental; which might influence states of health, health risk and access to preventative, as well as curative or palliative, health services'.⁴ **This contention was supported in the Draft National Men's Health Policy which recognized a social view of health incorporating social, economic, cultural and political factors which lie outside the health system and make a major contribution to patterns of health and illness among population groups, including men.**⁵

How do we best reach men in the community?

The MAN model has developed a pathway for the education and empowerment of men to deal with their health needs preventively rather than reactively.



There is willingness by men to learn about their health when they are given the opportunity. Regardless of the venue, time, speakers; whether the men are farmers, professionals, young, old, indigenous or unemployed; if the men live in the suburbs or out the ‘back of Bourke’; the approach of the MAN Model is culturally relevant to men and they come to listen, talk and learn. Men’s health is important to men in the community and the workplace; we just need to give them a safe place to talk and to encourage them to take responsibility for their health. Women have not been excluded in this process and it is well recognized that women want their men to live longer and happier lives. Women who have been involved in the MAN Model have embraced the opportunity it has provided their men and families

Since the MAN Model was first introduced 8 years ago to help address the issues of men’s health. Over 25,500 men have participated in Man Model Men’s Health Nights throughout Victoria, southern New South Wales, South Australia, Queensland, Western Australia, the Northern Territory and Canada in 2001. This has also led to an upsurge in other programs addressing the needs of men’s health. Men have attended in extraordinary numbers to these information sessions indicating that they *are* interested in their own health *and* that they want the opportunity to discuss their concerns in culturally relevant ways. This is based on an understanding of the factors that are important to men and adolescents, in the way they relate and make decisions, and has two main components that work together.¹

The Man Model Program ... How does it work?

Firstly, it raises the awareness of men and adolescents about their health status, and then designs a program that addresses the issues that they have identified as being most important

Secondly, it equips health care providers, primarily General Practitioners (GP) and Community Health Nurses (CHN) to better respond to the needs of men and adolescents in the delivery of their services.

It accomplishes this by:

- Identifying health issues important to men and raising awareness about the consequences of specific issues that have a high morbidity or result in high mortality (usually, but not exclusively in the context of Men’s Health Nights).
- Developing health programs in partnership with local health providers and the local community to address identified issues.
- Equipping local health providers, especially GP’s to:
 - Have a better understanding of men and adolescents and how they can relate to them better.
 - Develop a physical environment in their Practice that is welcoming, and to provide opportunities in male environments (such as the workplace) that help to meet men’s needs.
 - Developing Professional Development Programs for Health Practitioners.

- Provide an evaluation framework that identifies;
 - Epidemiological data within local communities;
 - Client awareness of health issues and their own health status (pre-test questionnaires and health screenings);
 - Areas where programs may be improved;
 - Where further programs may be developed;
 - The success of each program is in raising awareness and meeting consumer needs and its impact on the provision of health services in local communities over time (post-test questionnaire and health provider participation rates) with an evaluation process that highlights results including sustainable participation.

- Programs that have utilised this model in their design include:
 - **Men's Health Education programs**... information sessions
 - **Workplace** Health Program (both men and women)
 - **Professional Development programs**...for Doctors & Health Workers
 - **Parenting course for men** - MAN.... Being a Father
 - **Diabetes management across Mallee Track** – major early intervention community diabetes program
 - **Heart of the Grampians**, Cardiovascular Disease program (targeting the general community, families and workplaces).
 - **Walk Australia** – exercise program that encourages walking
 - **Kidsafe on the Farm** program in primary schools (school children and their parents);
 - **ASK** - Lifeskills Program for Adolescents (targeting boys and girls in Secondary Schools);

How does CAMH initiate the MAN Model in the community?

CAMH initially provides Man model information packages to communities through:

- Community organizations
- Divisions of General Practice (Doctors)

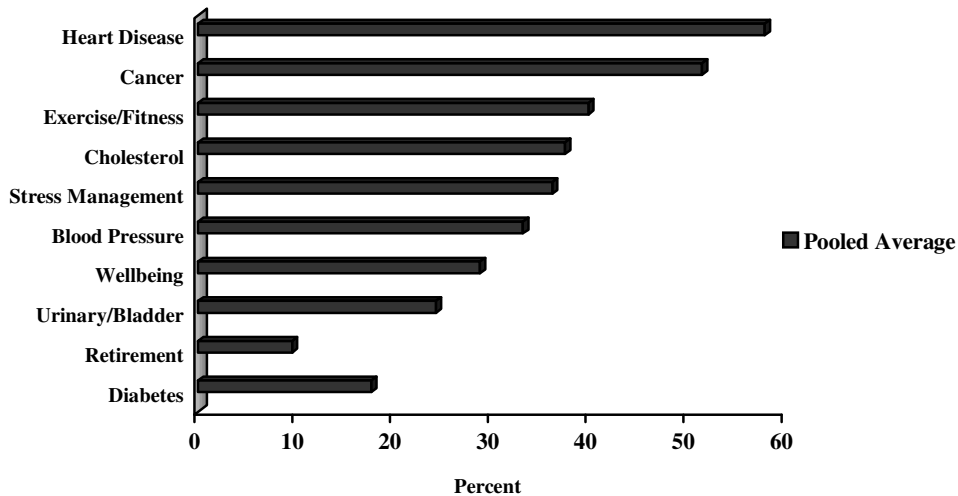
- Community Health Services
- Nursing Services
- Local/State Government Health Departments
- Workplaces
- Service Organizations like Rotary/Lions

The effectiveness of the program is maximised when communities are required to raise or provide funds themselves so that the agreed program may be effectively implemented.

The MAN Model intervention system enables local communities to have local ownership and addresses their health issues based on their needs as expressed through the “needs analysis” process. This results in an ownership and sustainability into the long term, Best Practice approach.

Examples of Community responses:

**Top 10 Australian Men's Health Concerns
Pooled Average - Men's Health Nights
5,500 men across 3 States¹**



The program process develops Capacity Building and Sustainability through:

- Wider acceptance
- Recognition by women of the importance of men's health
- Support and acceptance by women in the community
- Long-term involvement
- Increased community awareness
- Increased community participation and utilisation rates of health services The MAN Model program sets a community agenda.
- Conduct an extensive questionnaire based around their GP and community health infrastructure and how it does or does not meet the needs of men in the community
- Facilitate a collaborative approach of health services to meet the needs of men based on the response from the assessment questionnaire.
- Development of ongoing programs with the support of local Service Clubs and organisations, community health services schools, and general community.

Successful programs conducted by rural communities encourage other neighbouring rural communities to also take the initiative in addressing the health issues faced by their men with less risk of failure in implementing an already proven program.

The MAN model provides a unique system of intervention programs for communities and professional training and personal development for health workers. The implementation of this system provides resources that have a long-term impact on the way a variety of other health programs may be developed.

John Anderson in addressing the National Rural Health Forum 1997 stated 'we can't have healthy agricultural industries, a healthy economy, and healthy communities if we haven't got healthy people'⁶. Indeed this is true for all of Australia. Considering that most men spend at least one third of their waking lives at work, the workplace represents a significant site for health issues.^{8,12} Further, 'people's social and economic circumstances affect health throughout life, so health policy must be linked to the social and economic determinants of health'⁷ which includes both the community and the workplace. Some of the determinants of health listed by Syme⁷ were:

- The effects of early development last a lifetime. Ensuring that people have a good start in life involves supporting mothers and young children.
- Social exclusion creates misery and costs lives. Eg. Unemployment is an important form of social exclusion.
- Stress in the workplace increases the risk of disease. The demand-control model indicates that low control is an important dimension in determining stress.
- Job security increases health, well-being and job satisfaction.

- Friendship, good social relations and strong supportive networks improve health at home, at work and in the community also regard Workplaces as a community of people, within the wider community, and provide our services based on the community model.

The Workplace

Indeed for men, the workplace is an excellent venue for discussing their health needs. Often the principal sources of stress, injury and risky behaviour are linked to workplace environments and this impact on the men in the rest of their lives. Men spend most of their adult lives at work providing for their family. In today's society with high unemployment rates, harsh economy and job insecurity, men feel that they are constantly under threat of failing in their most important role, that as provider for their family.

Men's health in the workplace is subject to the same social, economic, cultural and environmental factors as health in the community.² An extra dimension however, is the organisational structure of the workplace within which the men must operate. Early workplace programs did not take advantage of the complex social and cultural structure that exists within each workplace, nor did they adequately address the factors in the workplace that can have a negative impact on workers' health. Hence many of the earlier workplace health programs have had limited success in improving the health status of workers or changing their attitudes and behaviour regarding risk taking and healthy lifestyle practices.

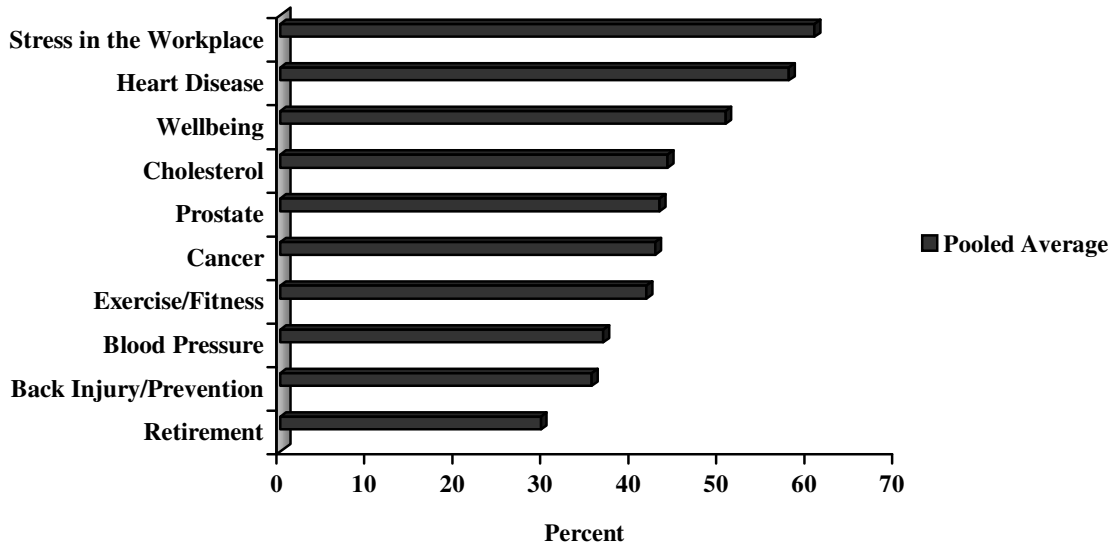
If workers feel valued by their employers by having a 'physical environment that makes being active an easy, attractive and rewarding choice'⁹ then workplace health programs can have a profound impact on reducing the health differential for men. Not only should the workplace be addressing occupational health and safety issues, but the overall wellbeing of employees as well. Moreover, if employees are encouraged to identify workplace health issues and be involved in the development of subsequent programs the sense of ownership; value and control will assist in their motivation to succeed. 'Analyses of the process of intersectional collaboration consistently indicate that conditions for success include the organisations involved identifying common interests, having a defined reason to collaborate, a mutual recognition of the value of collaboration, and having resources and capacity to contribute to the common tasks'.¹⁰ This is true for communities and workplaces. Traditionally men 'see healthiness as keeping or being in control, and having a 'power over' relationship to their bodies'³ so empowering them in the identification and development of health programs is a simple step towards a successful outcome.

The MAN Model Workplace Programs take into account the complexities and the environment of the individual workplace so as to achieve a result not only for the participants but also for the employer and for the families of workers especially relevant in remote rural areas.

CAMH has conducted Programs in areas as diverse as: a Coal Mine in Central Queensland; a Police Station in rural Victoria; Teachers in Secondary Schools and; Health Workers in a Hospital setting. All these workplaces have their own specific needs to address in order to provide a service that offers the workforce and the management health and workplace safety outcomes that are sustainable.

The workplace also has different health issues and needs to address and this is clearly identified in the evaluation process

**Top 10 Workplace Men's Health Issues
Based on 3 Workplaces in 2 States¹**



Future Men's Health Programs

It must be noted that Men's Health Programs not only needs the participation and acceptance of men in the community and the workplace, but that of politicians, policy makers, health professionals and all members of the community. Part of the reason for the resistance to Men's Health Programs can be identified as men in senior positions denying the need for men to have separate policy or the identification of men as a target group in health policy. 'Representation is a key issue for men's health but it is not a matter of too few men in positions where decisions are made. Rather, it is that the men in these positions must represent the interests of men more effectively and at least identify the need for men's health policy, based on the evidence of men's health issues from the community'.⁹

This is especially so in the workforce where employers, managers, unions and employees should recognize the value of workplace health and safety. It is also important to recognize the importance of family and partner within this framework. It must also be remembered that women are also suffering the "illnesses" of the workplace and the future of women's health in the workplace is just as important.

Men and Health Practitioners

While men have not identified poor experiences with GPs as a deterrent to attending to their health needs, they have made it clear that only GPs, Medical Specialists and Hospitals are seen as important. Health facilities such as Community Health Centres and health professionals like men as addressing the health view Community Health Nurses needs of women, children and families, not men. The health care sector needs to identify the most appropriate ways to attract men to use them. This is by far the most cost-effective method, by using existing infrastructure in the community⁷ for a marketing strategy to promote Community Health Centres as another pathway to men for their health care. Particularly in rural and remote areas of Australia, where there are fewer medical practitioners and in some cases the only local health professional is a rural nurse.¹

Medical and allied health courses responsible for educating and training Australia's health professionals 'need to increase awareness of the risks associated with male stereotypical behaviour, GPs must take a leading role in identifying the barriers, both social and economic, to behavioural change and assist with health promotion campaigns to improve the health status of men³. There are very few courses in Australia that specifically address men's issues in their curriculum, although this is changing. In order to have a truly holistic approach to Men's Health; we must engage all stakeholders in the community in a truly intersectional way. This would however, be much easier to achieve if government could endorse our activities and indeed, provide a policy environment that makes being active in Men's Health an attractive and rewarding choice, with the opportunity to realize our goals of improving the status of men's health in Australia. Then we may begin to truly address some of the inequities in health in our community by creating pathways into the health system for the male population.¹

Current figures indicate that only 40% of GP clients are men. The problem for men, and men's health maintenance, is that it is often men over 50 years, men who have an injury or are recovering from a life threatening illness who, in the main, attend a GP.

The work of CAMH has highlighted how men need to be offered the opportunity of learning how to engage a GP. At that point, we need to make sure that men, who are not necessarily "at risk" or require urgent medical attention, find their appointment worthwhile. GPs sometimes find it difficult to engage men who are not at risk or presenting signs of disease, but simply wanting to discuss their health and wellbeing in light of the risks of being a male.

The Man Model Professional Development Program for Health Professionals was developed to help bridge the gap between men and health professionals by developing better strategies of Engagement with men and adolescents not only in the practice or health service but within those environments where men can be found such as their workplace, club, pub, community and in school with adolescents.

So the objective of the MAN Model Program includes;

- Delivery of an intervention system that ensures the relevance and effectiveness of programs to those people and sub-groups being targeted within each rural community;
- Assessment of the social and health concerns of a community as a context in which given health issues may be effectively addressed;
- Identify and facilitate partnerships between health practitioners and the community they serve;

- Training local health practitioners in skills that enable them to be more responsive to the health issues a local rural community identifies as priorities;
- Teaching men in the community how to utilise the existing health service infrastructure more effectively;
- Developing local resources that can be utilised by rural communities across Australia; and
- Evaluating the impact the delivery an effective intervention system has on the health status of rural communities across Australia in the long term.
- Provide an a Point of Care Early Intervention Risk Assessment program that provides men with the ability to identify their risk to heart disease and diabetes.

Conclusion

The MAN Model Health Promotion Program is a sustainable program process that develops capacity building. It provides a long-term opportunity for the reduction of the health risk factors for men and adolescents through the intervention of Health Practitioners. This is achieved through developing a greater awareness and understanding of the issues of men and adolescents based on the identified needs of the community or workplace and working collaboratively with the community and health practitioners to achieve a better longer term result.

The MAN Model develops this opportunity through collaboration, awareness raising, education, community participation and a Pathway to Health Services.

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ACKNOWLEDGEMENTS

Extracts from Men's Health Report 2000,
Co-authors Dr Michelle Gibson and Mr Bernard Denner

We acknowledge our collaborative partners, who have been involved in the development of these programs, the men, communities, Health Workers and General Practitioners who have adopted our programs to meet the health needs of their communities.

Special mention to Dr Michelle Gibson, CRARH, LaTrobe University, Bendigo for her dedication and hard work in co-producing the Men's Health Report 2000. The CAMH team, especially the work of Joanne Neill, and the support of Hepburn Health Service, Daylesford, Victoria.

Currently the work is being continued in rural Australia with partner the Mallee Track Health & Community Service Ouyen Victoria. Since 1994 Men's Health Information programs developed through CAMH resources and encouragement have attracted over 25,000 men with community involvement.